



HEALTH CARE NEWS

A Monthly Publication From The New York State Attorney General's Health Care Bureau

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SYRACUSE HEALTH CARE ISSUES

Lack of prescription drug coverage, access to out-of-network specialists, and refusals by health plans to pay for ambulance bills are the top three health-care problems faced by Syracuse area residents, according to an analysis of complaints made to AG Eliot Spitzer's Health Care Bureau Helpline.

"Lack of prescription drug coverage for seniors on Medicare is the top consumer concern, not only in Syracuse but nationwide," said Spitzer. "Congress can help solve the problem by adding an affordable prescription drug benefit to Medicare." In the interim, Spitzer said that his office would continue its ongoing initiatives to make prescription drugs more affordable for New Yorkers. Last year, Spitzer filed a \$100 million lawsuit against two drug manufacturers, Aventis and Andrx, charging that they deliberately kept the cheaper generic version of a popular heart drug, Cardizem CD, off the market. An available generic would have saved heart patients about \$400 annually.

The AG also proposed legislative changes to address the health care concerns raised by Syracusans, such as:

- Further expansion of Elderly Pharmaceutical Insurance Coverage (EPIC), the state's prescription drug coverage program for seniors, to include people with disabilities who are under age 65.
- Sponsor legislation this year to allow consumers to appeal their health plan's denial of out-of-network care to an independent outside party.

Spitzer also noted that a new state law requires insurers to pay for ambulance service if the patient has symptoms that an ordinary person without medical training would consider a serious health risk. ■



HEALTHCARE HELPLINE AT 1-800-771-7755 OPTION 3

Mr H., a diabetic patient recovering from heart surgery, had been unable to fill his prescriptions for five days at his local pharmacy when he called the Attorney General's Health Care Helpline. Mr. H needed to have 7 different cardiac drugs, but his health plan had refused coverage for the drugs, claiming that he had not met his deductible. Unable to pay out-of-pocket, Mr. H told the AG's Helpline mediator that he had managed to get a few pills from his doctor but there was no chance of replenishing his supply. The AG's Helpline mediator intervened and quickly discovered that Mr. H had met his deductible and that his claim was being rejected due to a "computer glitch" (see story below). The Helpline mediator contacted the health insurer—Oxford Health Plan—and Mr. H's prescriptions were filled.

OXFORD MEMBERS SUFFER Rx COMPUTER GLITCH

This month, many Oxford Health Plan members ran into a brickwall when they tried to get their prescriptions filled at local pharmacies. Despite having prescription drug coverage, members were told to pay the full cost of medications out of pocket and mail in receipts for reimbursement. Unable to afford their prescriptions, many aggravated members, some on life-sustaining medications, called the AG's Health Care Bureau for help.

When Bureau Chief Joe Baker contacted Oxford Health Plan, he was told that a "computer glitch" had corrupted deductible information for some 60,000 Oxford members. As a result, affected members who had met their annual deductible amount were erroneously told that they had not done so and were asked to pay for their prescriptions, then file paperwork to get reimbursed.

Oxford officials assured Mr. Baker that they had re-programmed the computer to note that all affected members had met their deductibles so that they would only have to pay their copayment to get prescriptions. Oxford anticipates permanently fixing the computer program and mailing refund checks to anyone who overpaid a deductible within the next 45-60 days. Further, any copayment amounts paid will be credited appropriately against the member's deductible.

"Oxford moved quickly to make sure its members could get access to prescription drugs despite this computer glitch," said Baker. "We are talking with Oxford every couple of weeks about their progress on a permanent fix and getting refunds to those who were erroneously charged an additional deductible." ■



DID YOU KNOW?

EPIC is a New York State-sponsored prescription plan for seniors who need help paying for their prescriptions. New York State residents who are 65 or older, and have an annual income of \$35,000 or less if single, or \$50,000 or less if married, are eligible to join EPIC. However, seniors who are covered by Medicaid or have other prescription drug coverage that pays for more than 60% of costs are not eligible. Remember, EPIC is a cost sharing program. Seniors with moderate incomes pay a quarterly fee. Seniors with higher incomes must meet an annual deductible. Those who pay a fee or meet their deductible make a copayment at the pharmacy when purchasing prescriptions.

For more information or an application, call toll-free at 1-800-332-3742 or go to www.health.ny.state.us.

Attorney General Eliot Spitzer's Health Care Bureau protects—and advocates for—the rights of all health care consumers statewide. The Bureau operates a Health Care Helpline that assists thousands of New Yorkers with individual problems; investigates and takes law-enforcement actions to address systemic problems in the operation of the health care system; and proposes legislation to enhance health care quality and availability in New York State. **To share your views contact the Editor at Rashmi.Vasisht@oag.state.ny.us**