

**ST. JOHN NEUMANN, ST. VINCENT DE PAUL CONFERENCE PRESCRIPTION
ASSISTANCE PROGRAM CASE FORM**

INSTRUCTIONS

Referring Conference or Organization

If the requesting Conference has not previously used the St. John Neumann SVdP Prescription Assistance Program, please email the current St. John Neumann Conference President for program status.

Referring conference must complete upper part of the form completely (Blocks 1 through 21). The information needs to be printed or written legibly in black or blue ink so it will transmit clearly. Please read these instructions and comply with the information requests. The absence of information will cause delays in authorizing payment. The current payment limit is \$250, but during some periods this limit may be higher. If the request costs more than the prevailing limit, either one or more prescriptions may be cut or the number of doses reduced. Schedule I & II Controlled Substances and birth control medications are not supported.

- Block 1 The entry should be the person who is to be called about the prescription.
- Block 2 Please **do not forget client zip code.**
- Block 3 Date of home visit or collection of prescription information
- Block 4 Spouse, if any, of person in Block 1 or other person in house who may know about the prescription
- Block 5 Telephone number for client in case of questions
- Block 6 Number of people residing at address in Block 2 and estimated household income
- Block 7 If any previous prescription assistance is known, provide details. We only help every 6 months.
- Block 8 Provide any medical or other information about the client that might be useful in assessing
- Block 9 Name and home telephone or cell number of the caseworker who can be contacted by the SVdP conference paying for the prescription, if questions or problems arise. **Please do not put conference telephone number.**
- Block 10 Provide email address to inform caseworker when the prescription request has been processed. Client is not notified in most cases, it is up to caseworker or referring conference.
- Block 11 Name of conference or referring organization
- Block 12 Name of patient for whom the prescription is written e.g. it may be a child of the person in Block 1 and have a different last name; the **birth date is important** to help identify the client at the pharmacy
- Block 13 Provide any details that may reduce the cost of the prescription and might be useful when contacting the pharmacy
- Block 14 Clinic and or Doctor who wrote the prescription and a contact telephone number
- Block 15** **The pharmacy where the prescription is to be picked up. The location and telephone number are necessary and store # saves us time process the request. Walgreens will take the SVdP credit card over the phone. Other pharmacies (Randalls, CVS, Sam's Club & Walmart) sometimes accept card over telephone, HEB never does. If you are not using Walgreens, CHECK FIRST to see if we can charge over the telephone. We cannot quickly get payments to pharmacies unless they take a credit card by telephone. Also tell the client that the prescription must be at the pharmacy before we can arrange for payment and it must be eligible for a refill if already at the pharmacy.**
- Block 16-21 Write drug name as clearly as possible with dosage and cost, if available. The pharmacy will not reveal prescription information for patients. We must know them in advance.



When the upper part of the form is completed please do **one** of the following:

- 1) Send by fax to St. John Neumann Parish 512 328 3226. The parish office is open 8:30 am to 4:30 pm Monday through Friday. Forms sent during the weekend will not be processed until the first workday of the week. Often the SJN caseworker may not be able to act on the form for up to 24 hours. If the drugs are needed immediately, please follow up the fax with a telephone call to the parish office, Tel. 328 3220.
- 2) Complete form as an MS Word document **or** scan a completed hand written form as a PDF document and transmit the request as an email attachment to jcuddeback@gmail.com with a copy to jmaginn@sjaustin.org. Please put the words Prescription Request in subject line.

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Actions by

St. John Neumann Conference

The SJN prescription case worker who is on call will be notified by the SJN office that a fax has arrived and can either pick it up at the church office or have the receptionist forward it by email. The SJN prescription case worker shall review the form to ensure information is complete then contact the pharmacy to determine the price of the medications. Call the pharmacy to check if the prescription is ready for refill. There will be times when the prescription has not yet been brought in, there are no more refills, or there are other problems. In these instances the SJN prescription caseworker needs to caseworkers and inform them of the situation.

Block 16-21 Obtain the price of each medication and include in appropriate box (total cost of all the scripts is acceptable). Ensure that none of the scripts is for a Schedule II regulated drug (certain opiates, barbiturates and ADHD medications) or birth control. Lower dose hydrocodone type medications can be paid for if they are not considered Schedule II by the pharmacy and if there are no more than 30 tabs. The pharmacist can tell you if the medication is a Schedule I or II controlled substance and you can also check at <http://www.drugs.com>.

Check with the SJN Conference Treasurer, if in doubt about current funds available or if the prescription goes above the current guidelines. The current guideline is \$250 but often there are additional funds available so if the medication costs more than \$250 the referring conference may submit the request and see if can be covered.

Transfer of funds to the pharmacy can be done in two ways depending on the urgency:

- 1) The referring conference may be contacted and asked to pay directly to the pharmacy and the SJN Treasurer will mail a reimbursement check to the referring conference. This is done when there is urgency and/or the pharmacy will not take a credit card over the telephone.
- 2) The SVDP credit card can be used to call in the payment to the pharmacy. The SJN prescription caseworker will have the card details and can contact the pharmacy. If there is a problem in taking the credit card over the telephone first talk to the pharmacist on duty and see if you can resolve it. If that does not work and it is a Walgreens store, call the district office 512 459 2295 Ext 222 during work hours and explain the situation to the administrative assistant. The administrative assistant will call the store and authorize them to accept the card over the telephone. If you have no success with other stores, call the caseworker and explain that the client will have to transfer the prescription to Walgreens for this one time if they want us to pay. They can transfer it back after they pick it up

After all transactions are complete the SJN prescription caseworker should notify either the client or the referring conference caseworker that the script is ready for pickup. The SJN prescription caseworker should provide the following details of the case to the Treasurer by email this can be done monthly or more frequently as desired by the Treasurer:

Date credit card information was given to pharmacy

The specific pharmacy (provide the store number)

The amount of the bill

Client name, address and telephone

List of drugs

Referring conference and caseworker