TrueScripts™ Amazing Care

Commonly Asked Questions

Who is covered under my prescription benefits?
This benefit plan covers you, your eligible spouse, and eligible children through age 26. Permanently disabled children may be eligible for some benefits after the age of 26, if they meet the requirements for continued coverage.

What does my prescription benefit plan cover? What is not covered?
Your plan covers charges for eligible drugs prescribed by a physician and dispensed by a pharmacist. Please view the Summary Plan Description for covered expenses and limitations.

Do I need my Benefit ID card to get a prescription filled?
Yes, we suggest carrying your insurance ID card at all times. Please note that you and each participating member of your family will be receiving new ID cards with the TrueScripts information on the back. It is extremely important that you use this new ID card for all prescription and medical services, after going live with TrueScripts. If you do not have your card with you and need to fill a prescription, your pharmacy may contact us at **(844) 257-1955** for all the information they will need to process your prescription. To request additional ID cards, please contact your health agency.

How do I file a prescription claim if I didn't use my ID card at the pharmacy?
You will need to submit a Prescription Drug Reimbursement form on our website at truescripts.com/members. Please be sure to keep all of your pharmacy receipts for reimbursement.

What do I do if the pharmacy tells me a prescription has been rejected or is not covered?
There are many reasons a prescription may be rejected—such as a problem with eligibility, step therapy requirement, or trying to get a non-covered drug. Ask the pharmacy why the prescription was rejected and contact our Member Care Advocated for assistance.

How do I know if a medication is considered a specialty drug?
A Specialty Drug is a drug that targets and treats specific complex conditions or illnesses such as cancer, rheumatoid arthritis, hepatitis C, and HIV/AIDS. Specialty drugs require patient-specific dosing, careful clinical management, and are typically higher-cost than normal drugs. If you feel your new prescription may be for a specialty drug, please contact our Member Care Advocates for assistance.

What is Step Therapy and how do I know if it affects me?
The Step Therapy Program encourages members to use medications that are recognized as safe and effective, but are lower-cost. To receive coverage under this program, you may need to first try a proven, cost-effective medication before progressing to a more costly treatment. Please see the Step Therapy Program Drug List for a full list of affected brand drugs. If you have any questions, please contact our Member Care Advocate team.

Why are there quantity limits on certain medications?
Medications for conditions such as migraines have manufacturer suggested quantity limits due to the therapeutic effect of the medication on your body. Please contact our Member Care Advocates for more details on how quantity limits may impact you.