

# Benefits

## ***Appealing denied drug benefit claims February 1, 2006 onward***

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Since 2001 the provincial Collective Agreement requires coverage for all prescribed medication. (“Eighty percent (80%) direct payment provision for all physician or dentist prescribed medication – Article 21.01 (ii)). There have been a number of disputes and denials of coverage.

The majority of prescribed medications will continue to be covered under existing benefit plans. However, nurses who have a prescription claim denied after February 1, 2006 can file an appeal with their Employer within 30 days. If it is still denied, you can take all your documentation to your UNA representative for provincial appeal. The provincial UNA/Employer “Joint Appeal Panel” will make a ruling. If that fails to reach agreement, it goes to an umpire, mediator Jay Spark.

The criteria for determining coverage have been refined by the Joint Committee as:

*“A substance, prescribed by a physician or dentist, and dispensed by a pharmacist, which is required to be consumed (orally, by injection, absorbed or inhaled) to correct or treat a medical condition based on a diagnosis made by a physician or dentist.”*

*This process applies to the Provincial Collective Agreement only.*

*February 2006*

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**SPOTLIGHT on your UNA contract**



**Questions?**

**Contact your United Nurses of Alberta Representative:**