

# Re: Sharing RX medication to save \$

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*Source:* <http://sci.tech-archive.net/Archive/sci.med.cardiology/2005-04/msg00928.html>

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- *From:* <Hawki63@xxxxxxxxxxxxxx>
  - *Date:* Tue, 26 Apr 2005 17:38:52 GMT
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"elgoog" <bjdefend-newsgroups@xxxxxxxxxx> wrote in message  
[news:1114533970.043885.84290@xx](mailto:news:1114533970.043885.84290@xx)

>  
> <Hawk...@xxxxxxxxxxxxxx> wrote:  
>> ">>  
>> >  
>> >  
>> >> > When the  
>> >> > pharmacy receives a script, they verify the prescription with  
> the  
>> >> > prescribing doc,  
>>  
>>  
>> no...properly written scripts are NEVER verified in any manner...to  
> do so  
>> would entail a LOT of unnecessary work...  
>  
> Depends on the state and the drug.

hmmm...would be interested in data here...I know our pharmacy has a sign saying all controlled scripts will be verified...however I have watched them fill my scripts on a WEEKEND...so know they never called to verify..must have an honest face!! not to mention the type of meds I get

but verifying ALL scripts?? yikes that would be cumbersome!!

>> scheduled meds...sometimes...but routine meds,,never  
>>  
>> but as to the "crooked doctor" example...this is a valid statement...  
>>  
>> a prescriber will write on the script AND document in the chart  
> EXACTLY what  
>> the patient is taking..ie...1 tab twice a day or 60/month.....scripts  
> and  
>> charts have to match..in case of audits..another provider filling  
>> in...etc...not many prescribers are willing to risk being "caught" in  
>

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>> insurance fraud...  
>>  
>> which is what it is...EVEN if the stated number and dosage on the  
> script is  
>> within the range...  
>>  
>> I once asked hubby's doc to write for TWICE the dose of an expensive  
>> med,,,then I would split the pills..he would get two months for one  
> co  
>> pay....  
>>  
>> doc's answer " I always promised my wife I would not go to jail...for  
>  
>> insurance fraud" ...  
>>  
>> this is NOT to say that some providers will not do this...but it is  
>> insurance fraud in a "small" context  
>  
> I believe any fraud is significant and should be prosecuted; but, I  
> understand your sentiment.  
>  
> I cannot imagine a provider cooperating in this type of mini-fraud to  
> save copay any more easily than I can imagine chickens eating coconuts.

you are correct....obviously my doc agrees ....ANY fraud is fraud....

oh well...now the old guy is on Medicare..so no drug coverage anyway!!!

>> >> I'm sure mine doesn't. It just gets keyed into their computer.  
> They  
>> >> get it wrong often enough.  
>> >  
>> > It gets keyed into their computer and processed by the payer. The  
>> > pharmacist is supposed to validate the original prescription with  
> the  
>> > doctor's office (it may be done electronically). Refills don't need  
> to  
>> > be checked unless there is a change in dosage.  
>> >  
>> >>  
>> >> > they enter the patient's insurance information, the  
>> >> > Rx, dose and prescribing provider's ID: the payer's claim  
> payment  
>> >> > system would immediately detect the error, and the pharmacist  
> would  
>> >> not  
>> >> > fill the Rx.  
>> >>  
>> >> > Either you have a crooked doctor, or a crooked pharmacist.

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>> >>  
>> >> You jump to an erroneous and dangerous conclusion. I did not say  
> I  
>> > do  
>> >> this. I don't share my meds.  
>> >  
>> > Neither. The familiar "you" was not intended to refer to you  
>> > personally. I apologize for my lack of clarity.  
>> >  
>> >> > Why would  
>> >> > they risk their licenses, their practices, their livelihoods and  
>> >> > families for someone to save a \$2 to \$20 copay?  
>> >>  
>> >> For some people, a second \$20 co-pay is the difference between  
>> > getting  
>> >> the prescription filled or going without.  
>> >  
>> > Possibly correct. The copay system is designed to introduce an  
> element  
>> > of patient responsibility without introducing undue financial  
> burden. A  
>> > person who is not in need of cash assistance might have a \$20  
> copay,  
>> > another person who is on cash assistance might have only a \$2  
> copay.  
>> >  
>> >  
>> >> > I admit, you could be right. I just don't get it.  
>> >  
>> > You're probably right. It probably does happen. Especially when one  
> of  
>> > the patients is conning the doctor for purposes of drug abuse – in  
>> > which case, I don't have much sympathy.  
>> >  
>> > I appreciate your response in this matter. You have helped me to  
> see  
>> > that it may in fact be happening. People do stupid things  
> sometimes.  
>> >  
>

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• *Follow-Ups:*

◆ *Re: Sharing RX medication to save \$*

◇ *From: elgoog*

• *References:*

Re: Sharing RX medication to save \$

- ◆ **Sharing RX medication to save \$**
  - ◇ From: danieljcostello
- ◆ **Re: Sharing RX medication to save \$**
  - ◇ From: elgoog
- ◆ **Re: Sharing RX medication to save \$**
  - ◇ From: tonywesley
- ◆ **Re: Sharing RX medication to save \$**
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