

City College of San Francisco

SEIU Prescription Drug Co-Payment Reimbursement Form

Please read the Rules & Guidelines printed on the back before completing this form
(Attach original receipts/documents to the back)

Employee's Information					
CCSF ID	Last Name	First Name	Phone Number	Campus Mailbox	
Home Address			City	State	Zip

Eligible: SEIU Classified Employees working 20 or more hours per week and enrolled with CCSF's provided SF Health Service System health plan. Prescription Drug Co-Pay Reimbursement is effective July 1, 2024 – June 30, 2025.

All receipts must be submitted to CCSF Benefits Unit no later than June 30, 2025.

Health Plan with District:

Kaiser
 Blue Shield Trio/Access
 HealthNet HMO
 Blue Shield PPO/UHC PPO

Claims are for:

*Spouse: _____

*Domestic Partner: _____

*Children: _____

*To receive reimbursement, Spouse/Domestic Partner/Child must be covered on your health plan with CCSF, see eligibility on back.

Date Filled	Prescription (RX) No.	Co-payment
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
Total		\$

I certify to the employer that the expenses have not been reimbursed and that I will not seek reimbursement under any other plan or arrangement covering that expense.

Signature _____ **Date** _____

CCSF Benefits Unit Use Only

Pending:

- Need original prescription receipt printed with insurance information
- Employee/Dependent's name not on receipt
- Missing your signature
- Other:

Denied:

- Not a co-payment
- Unpaid Leave of Absence
- Not eligible
- Unrepresented (non-union)
- Other:

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Rules & Guidelines For Drug Co-Pay Reimbursement Process

Eligibility Matrix
(Subject to change, please review Union & CCSF contract)

Eligibility: SEIU Classified Employees working 20 or more hours per week and enrolled with CCSF's provided Health Service System health plan.

Eligible employees may not receive reimbursement exceeding coverage per CCSF and bargaining unit contract agreement.

CLASSIFICATION	ELIGIBLE
FT Classified	Yes
FT/PT Classified School Term Only (STO) (Working 20+ hours/week)	Yes
PT Classified (Working 20+ hours/week)	Yes

Co-payments:

Eligible employees may receive prescription drug co-pay reimbursements. Eligible Employees may/may not receive the full co-pay amount. Co-pay is defined as the sharing of cost between the insurance plan and the insurance customer.

1. Your spouse/domestic partner and/or dependent children must be enrolled on the employee's benefits coverage plan during the effective dates of the reimbursement program, to be eligible for the prescription drug co-pay reimbursements.
2. Prescription drug co-pay reimbursements do not affect your payroll taxes, deductions, or your W2 totals.

Receipts/Documentation:

Eligible employee may receive prescription drug co-pay reimbursement as long as:

1. You submit the original receipts or summary RX report from the provider (no photocopies and no modifications);
2. You submit insurance provider approved prescription drug co-pay purchase;
3. Your original receipts/documents MUST include the employee/dependent's name and health provider's name (no photocopies and no modifications):
 - a. Kaiser
 - i. Prescription drug must be purchased through a Kaiser pharmacy.
 - b. HealthNet or Blue Shield
 - i. Receipts must show provider's name (CHealthNet or Blue Shield)
4. You submit the Prescription Drug Co-Pay Reimbursement Form with your original prescription receipts/documents

Processing:

Submit original receipts/documents to CCSF Human Resources: Benefits Unit.

1. If approved and receiving a payroll check, reimbursements will be paid to you on your paycheck. Payments will show on your paystub listed as "drgreimb";
2. If approved and not receiving a CCSF payroll check, you will receive a manual check;
3. If request is missing information and/or denied, Human Resources: Benefits Unit will notify you.

Return to:
CCSF-HR: Benefits Unit
50 Frida Kahlo Way, Bungalow 702
San Francisco, CA 94112

Prescription Drug Co-pay Reimbursement Program is effective 7/1/2024– 6/30/2025.

All receipts/documents must be submitted to CCSF Benefits Unit no later than June 30, 2025.