

# AmeriHealth Care Card Frequently Asked Questions (FAQs)

## What is the AmeriHealth Care Card and how do I use it?



Members with specific AmeriHealth PPO plans will be issued a single AmeriHealth Care Card, which will contain two separate wallets: one for their quarterly **Over-the-Counter (OTC) benefit** allowance, the other for their annual **Dental, Vision, Hearing (DVH) Flex benefit** allowance.

**The DVH and OTC allowance only apply to the plans below:**

Separate Wallets	AmeriHealth Medicare Core PPO	AmeriHealth Medicare Enhanced PPO	AmeriHealth Medicare Secure PPO
Annual DVH Flex Allowance	\$300	\$300	\$300
Quarterly OTC Allowance	\$50	\$100	\$30

The **OTC benefit allowance** is a **quarterly** allowance to purchase approved OTC health and wellness products at participating retailers.

The **DVH Flex benefit allowance** is an **annual** allowance that can be used:

- Cost-sharing for covered dental, vision, and hearing services through your plan benefits.
- Any services or supplies provided by any provider who is a licensed dental, vision, or

hearing professional. Providers must accept Visa and two forms of payment if your remaining allowance does not cover the full amount of the service.

- Any combination of dental, vision, or hearing services or supplies.

Services include, but are not limited to:

**Dental services** – Exams, X-rays, tooth extractions, root canals, bridges, crowns, and periodontal work.

**Vision services** – Exams, contact lenses, eyeglasses, and prescription sunglasses.

**Hearing services** – Exams, hearing aids, and hearing aid repairs.

## How do I check my AmeriHealth Care Card allowances?

To check your balance, visit [mybenefitscenter.com](https://mybenefitscenter.com), download the OTC Network® App, or call the number on the back of your AmeriHealth Care Card.

## When are the funds on my AmeriHealth Care Card updated?

**OTC benefit** – Your OTC allowance is reloaded quarterly (every three months). You can use your OTC allowance on the first day of each quarter. Please note: Your quarterly allowance may appear on [mybenefitscenter.com](https://mybenefitscenter.com) or on the OTC Network® App prior to the first day of the new quarter.

- **Quarter 1:** January 1 – March 31
- **Quarter 2:** April 1 – June 30
- **Quarter 3:** July 1 – September 30
- **Quarter 4:** October 1 – December 31

**DVH Flex benefit** – Your DVH allowance will be loaded annually each plan year.

## How do I register through the Convey website?

Visit [conveybenefits.com/ah](https://conveybenefits.com/ah) to create an account. Make sure to have your 19-digit AmeriHealth Care Card number available. Then enter your member and personal information (it must match the information listed on your AmeriHealth Care Card), set up your account with a username and password, and establish a security question.

For help creating an account, call **1-855-262-0012** (TTY/TDD: **711**).

## Will my unused balance roll over into the next benefit period?

**OTC benefit** – No. Be sure to spend your OTC allowance each quarter as any unused balance will not roll over to the next quarter.

**DVH Flex benefit** – No. Be sure to spend your annual DVH allowance each plan year as any unused balance will not roll over to the next year.

## Where can I shop for eligible OTC items?

- **In-store:** Verify participating retailers at [mybenefitscenter.com](https://mybenefitscenter.com), use the OTC Network<sup>®</sup> App, or call our Member Help Team.
- **Online:** Shop through the Convey catalog at [conveybenefits.com/ah](https://conveybenefits.com/ah).
- **By phone:** Call **1-855-262-0012** (TTY/TDD: **711**) to place your order with a Convey OTC specialist, Monday through Friday, 8 a.m. to 11 p.m.

## May I return OTC items I purchased with my AmeriHealth Care Card?

Every participating retailer has their own return policy. Be sure to check the return policy at the store(s) where you shop before purchasing products. For the allowance to be added back to your AmeriHealth Care Card, returns must be made within the same quarter as the one in which the items were purchased. If the quarter has lapsed, items may be exchanged for other approved OTC items. Purchases made through Convey may not be returned.

## What happens if I exceed my benefit allowance when shopping?

**OTC benefit** – If you exceed your benefit amount for an order, alternative payment will be required for the remaining balance due. Be sure to check your available balance amount by logging into [mybenefitscenter.com](https://mybenefitscenter.com), using the OTC Network<sup>®</sup> App, or calling the number on the back of your AmeriHealth Care Card.

**DVH Flex benefit** – If you exceed your benefit amount, alternative payment will be required for the remaining balance due. Be sure to ask your provider if they accept split payment methods prior to receiving services. Be sure to check your available balance amount by logging into [mybenefitscenter.com](https://mybenefitscenter.com), using the OTC Network<sup>®</sup> App, or calling the number on the back of your AmeriHealth Care Card.

## What should I do if I lose my AmeriHealth Care Card?

If you lose your AmeriHealth Care Card or it is stolen, call our Member Help Team at the number on the back of your member ID card. Your card will be cancelled. You will receive a new card within 14 business days. Your replacement card will have a new card number. If you find your previous card **after** receiving a replacement, please dispose of it.

## Why do I need to speak with my physician before I can order certain OTC items?

Dual-purpose items are medicines and products that can be used for either a medical condition or general health and well-being. To purchase these items, your physician must recommend them for a specific diagnosed condition. Please speak to your physician before ordering these items. These items include, but are not limited to, vitamins and minerals, home monitoring and testing, and weight loss items.

## Will there be changes to the eligible OTC products?

There may be changes throughout the year. To search OTC products available for retail purchase, visit **mybenefitscenter.com** or use the OTC Network<sup>®</sup> App.

For the most up-to-date listing of OTC products available for home delivery, visit **conveybenefits.com/ah**. Products and prices are accurate based on the date the catalog is published.

## I received letters about my AmeriHealth Care Card purchases. What are these letters?

When you use your AmeriHealth Care Card, you will receive a monthly per-claim *Explanation of Benefits* (EOB). When you exceed your quarterly OTC allowance or annual DVH allowance, you will receive an *Integrated Denial Notice* (IDN). If you have questions about these materials, please contact our Member Help Team at the number on the back of your member ID card.

## My AmeriHealth Care Card did not work at the register. Can I be reimbursed?

**OTC Benefit** – If you paid out of pocket for approved OTC items at a participating retailer due to an error with your AmeriHealth Care Card, please save your receipt. For information on how to submit for reimbursement, please call our Member Help Team at the number on the back of your member ID card. No other reimbursement will be considered.

**DVH Flex benefit** – If you've paid out of pocket at a dental, vision, or hearing provider due to an error with your AmeriHealth Care Card or your provider could not accept two forms of payment, you may submit for reimbursement. For information on how to submit for reimbursement, please call our Member Help Team at the number on the back of your member ID card.

OTC Network®, OTC Network® mobile app, and Convey Health Solutions are provided by InComm Payments™, an independent company.

AmeriHealth offers PPO Medicare Advantage plans with a Medicare contract. Enrollment in AmeriHealth PPO Medicare Advantage plans depends on contract renewal. AmeriHealth Medicare coverage issued by AmeriHealth Insurance Company of New Jersey.

