

## Important Information about Your Prescription Drug Coverage

See Page 4 for Changes to Your Plan Effective September 1, 2019



As of **September 1, 2019**, prior authorization, step therapy and the Generic Advantage Program will apply to prescriptions for select medications. Please review this important benefit information and tips to help you save money on your prescription drug costs.

**Your Benefit** | Under your prescription drug plan, your copay varies depending on which tier your prescription drug is placed. Our practicing physicians and clinical pharmacists regularly review and evaluate tier placement to assure the quality of drug care and to control costs. Here's how the three tiers work:

Tier 1	Tier 2	Tier 3
These drugs are typically <b>generic</b> .	These drugs are <b>brand-name</b> and they have unique, significant clinical advantages and offer overall greater value over the other products in this class.	These drugs are also <b>brand-name</b> and they include new brand-name drugs and drugs that have generic equivalents. Tier 3 drugs have the highest copay amount.

To check the costs of your medications, visit [ExcellusBCBS.com/Member](http://ExcellusBCBS.com/Member). Once you log in with your user name and password, select [Prescriptions > Check Our Drug List > Check Drug Prices](#). Simply enter your drug name and follow the prompts.

**Your Copays** | Copays for prescriptions, written for a **30-day** supply and filled through a participating retail pharmacy, are as follows:



Rx Filled at a Retail Pharmacy - 30-Day Supply	Tier 1 \$5	Tier 2 \$20	Tier 3 \$40

**Participating Network Pharmacies** | You have access to more than 65,000 participating pharmacies in our nationwide Pharmacy Network\*, including national chains and most independents. Simply show your member card at any participating pharmacy; it identifies you as having prescription drug coverage.



**Specialty Medications and Specialty Pharmacies** | Specialty medications are designed for conditions (such as multiple sclerosis, rheumatoid arthritis, hepatitis C and others) that are difficult to treat with traditional medications. These medications are self-administered and are taken orally, by injection or inhaled.

Your prescription drug plan requires you to purchase certain specialty medications through our specialty pharmacy network in order to receive coverage. Nationally recognized specialty pharmacy Accredo Health participates in our network, as well as several local and regional specialty pharmacies.

To learn more about our specialty medication program, or for a complete listing of the specialty medications that must be purchased through the specialty pharmacy network, visit our website at [ExcellusBCBS.com/Member](http://ExcellusBCBS.com/Member). Once you log in with your user name and password, select [Prescriptions > Specialty Medications](#).

\*For a list of participating pharmacies in your area, visit [ExcellusBCBS.com](http://ExcellusBCBS.com) and select [Find a Doctor > Find a Pharmacy](#), or contact Customer Care at the number listed on the back of your Member Card.



**Home Delivery Pharmacies** | You have an opportunity to save money on your prescriptions when you order your medications through one of our mail-service pharmacies, Express Scripts Home Delivery Pharmacy® or Wegmans Home Delivery®.

When you purchase your medications through one of these mail-service pharmacies, you can receive a 90-day supply of your medication for only two copays. *That's a savings of one copayment – and the savings can add up over the course of a year!*

Under your prescription drug plan, you pay the following copayment amounts through Express Scripts Home Delivery Pharmacy or Wegmans Home Delivery for a **90-day** supply:



**Rx Filled at a Mail-Service Pharmacy - 90-Day Supply**

**Tier 1  
\$10**

**Tier 2  
\$40**

**Tier 3  
\$80**



Select a Mail-Service Pharmacy That's Right for YOU!

Home Delivery Pharmacy Options

**Express Scripts Home Delivery Pharmacy**

Go to Express Scripts and register [www.express-scripts.com](http://www.express-scripts.com). When you log into your account, you'll be able to quickly fill prescriptions your doctor has sent in electronically, order a refill, check the status of orders, and find savings opportunities. Your account is private and secure.

If you have questions, call 1-800-820-9729 (TTY: 1.800-716-3231), 24 hours a day, 7 days a week, to talk with a prescription plan specialist at any time.

**Here's how:**



Get started with home delivery by using our **mobile app or send in orders through the mail** (see below for mail option). Download the Express Scripts mobile app from the App Store ([appstore.com](http://appstore.com)) for iOS devices or Google Play ([play.google.com](http://play.google.com)) for Android devices.



**Download, print and mail a home delivery order form.** Include your home delivery copay, a 90-day prescription from your doctor plus refills for up to one year (if applicable). The form is available at [ExcellusBCBS.com/Member](http://ExcellusBCBS.com/Member). Once you log in with your user name and password, select *Prescriptions > Mail Service Pharmacy*.



**ePrescribe.** Ask your doctor to send your prescription electronically to the Express Scripts Pharmacy.

**Wegmans Home Delivery**

**Call 1-800-586-6910 to set up a home delivery account.**

When you call, be sure to provide the drug name along with your doctor's name, phone number and address.

To take advantage of this cost-saving opportunity, your prescription must be written for up to a 90-day supply. Additional details on how to use Express Scripts Home Delivery Pharmacy or Wegmans Home Delivery are available at [ExcellusBCBS.com/Member](http://ExcellusBCBS.com/Member). Once you log in with your user name and password, select *Prescriptions > Mail Service Pharmacy*.



**Safety is Our Priority** | To help ensure that you have access to safe, effective drug therapy, prior authorization and step therapy requirements apply to select medications.

**New – Effective September 1, 2019**

**Prior Authorization** | As of **September 1, 2019**, if you need to take a medication therapy with a drug that requires prior authorization, your health care provider will need to complete and submit our prior authorization form. Your health care provider must obtain approval before your prescription claim can be processed.

**Step Therapy** | Medications with step therapy requirements mean that you must first try a certain drug to treat your condition before we will cover any other drug for that condition. Medication therapy is organized in a series of steps:

- **Step one** is generally a generic or lower-cost drug option
- **Step two** is typically a higher-cost, brand-name drug

If you are taking a drug that requires step therapy, we may have your drug claims history on file, and you may have already fulfilled the step requirement. If so, your prescription will continue to be covered. If you have had a trial of the preferred drug, but the history is not in our records, your physician or pharmacist may call our Pharmacy Help Desk to verify for approval.

Medications requiring prior authorization and step therapy are indicated on our 3-Tier Formulary Guide, which is available on our website at [ExcellusBCBS.com/Member](http://ExcellusBCBS.com/Member). Once you log in with your user name and password, select [Prescriptions > Check Our Drug List > View or Print Our Drug Lists > For Other Plans offered through Employers > 3-Tier Formulary](#). You can also check the costs of your medications, visit [ExcellusBCBS.com/Member](http://ExcellusBCBS.com/Member). Once you log in with your user name and password, select [Prescriptions > Check Our Drug List > Check Drug Prices](#). Simply enter your drug name and follow the prompts.

**Generic Advantage Program** | Medications that apply to the Generic Advantage Program are brand name drugs that have Food and Drug Administration-approved generic equivalents. Generic equivalents have the same active ingredients as the brand-name drug. If you purchase brand-name medications when there are generic equivalents available, you will pay:

- The generic copay/coinsurance amount, **AND**
- The difference between the pharmacy's charge for the more costly brand-name medication and our allowable expense for the less-expensive generic.

If you are taking a brand-name drug that has a generic equivalent available, you should speak to your health care provider right away about switching your prescription to the generic equivalent.

**If you continue to take the brand-name drug as of September 1, 2019, you will pay the additional cost-sharing amounts stated above.**



**Questions** | If you have questions about information provided in this communication, please contact our Pharmacy Help Desk, or visit us at [ExcellusBCBS.com/Member](https://ExcellusBCBS.com/Member) for easy access to pharmacy services and prescription drug information.

### Click or Call Us!

Website: [ExcellusBCBS.com/Member](https://ExcellusBCBS.com/Member)

Toll-free: 1-800-499-1275

TTY: 1-800-662-1220

### Service Hours:

Monday – Thursday: 7 a.m. – 7 p.m.

Friday: 9 a.m. – 7 p.m.

Saturday: 9 a.m. – 1 p.m.

### Home Delivery (Mail-Service) Pharmacies:

Express Scripts: 1-855-315-5220

Wegmans: 1-800-586-6910

### Specialty Pharmacy:

Accredo Health: 1-866-413-4137