

Prescription Drugs – Non-Medicare Eligible Participants

How Does My Outpatient Prescription Drug Program Work?

For COVA Care Members

Your prescription drug benefit under the COVA Care Plan is administered by Medco and has a three-tier copayment structure. This means that medications are categorized based primarily on their cost. Tier 1 drugs are typically generics. Tier 2 generally includes low to medium-cost, brand-name drugs. Tier 3 includes higher-priced, brand-name drugs. To use your benefit, just present your Medco ID card at a participating retail pharmacy, or order your medication through the Medco Health Home Delivery Pharmacy Service. Copayment levels are as follows:

For up to a 34-day supply of a prescription obtained at a participating retail pharmacy:

Tier 1	Tier 2	Tier 3
\$15.00	\$20.00	\$35.00

For a 35 to 90-day supply of a prescription obtained at a participating retail pharmacy:

Tier 1	Tier 2	Tier 3
\$45.00	\$60.00	\$105.00

For a 35 to 90-day supply of a prescription obtained through the Medco Health Home Delivery Pharmacy Service:

Tier 1	Tier 2	Tier 3
\$30.00	\$40.00	\$70.00

Note: If your prescription costs less than the copayment amount, you just pay the cost of the prescription, and the copayment amount will not apply.

You may determine a drug's tier level by contacting Medco at **1-800-355-8279** or by going to its Web site at **www.medco.com**.

The COVA Care Outpatient Prescription Drug Benefit is a **mandatory generic** program. This means that if a participant purchases a brand-name drug that has a generic equivalent, he/she must pay the applicable copayment plus the difference between the cost of the generic and the brand.

Consult your Member Handbook for more information.

For Kaiser Permanente HMO Members

Kaiser offers a generic program. (Brand-name drugs are covered only when a generic equivalent is not available or when a physician prescribes it.) Copayment levels are as follows:

Kaiser On-Site Pharmacy	\$10 for up to a 60-day supply
Community Pharmacy	\$20 for up to a 90-day supply
Mail Service	\$8 for up to a 90-day supply

Please consult your Evidence of Coverage or Kaiser Member Services for additional information.

For COVA HDHP Members

Prescription drug benefits under the COVA HDHP (High Deductible Health Plan) are administered by Anthem Blue Cross and Blue Shield. Coverage is 80% of the allowable charge after your plan year deductible is met. This is a **mandatory generic** program, which means that if a generic equivalent exists for a brand name drug, you (and your physician) may request the generic, and you would pay only your deductible and/or coinsurance. However, if you (and your physician) request a brand name drug when a generic equivalent is available, you would pay the following:

- At a participating pharmacy, you will be responsible for the applicable deductible or coinsurance plus the difference between the allowable charge for the generic and the brand.

To find a pharmacy that participates in the WellPoint NetRx Network, refer to your health plan's directory of network providers at www.anthem.com/cova, check with your local pharmacy to see if it participates, or call Anthem Member Services at 800-552-2682.

You may also use the WellPoint NextRx Pharmacy mail service program. See your Member Handbook or contact Anthem Member Services for more information.

Where Do I Obtain Home Delivery Pharmacy Service Forms?

COVA Care members have access to the Medco Health Home Delivery Pharmacy Service. All forms required for processing a mail service order may be obtained at the Medco Web site (www.medco.com) or by calling 1-800-355-8279. With your first mail service order, please be sure to complete the *Health, Allergy, and Medication Questionnaire*. Refills from the mail service may be ordered by phone, on-line, or by using the refill form included with your last order.

COVA HDHP members may contact Anthem at 1-800-552-2682 or visit its web site at www.anthem.com/cova to obtain mail service information.

Are There Drugs That Require Approval in Advance?

The COVA Care Plan requires review of selected drugs before a benefit may be authorized. You or your doctor may contact Medco at 1-800-355-8279 to obtain additional information about drugs that require prior approval and to request a Drug Prior Authorization Form. You may also get additional information at the Medco Web site (www.medco.com). Drug Prior Authorization forms must be signed by the prescribing physician.

The COVA HDHP requires prior review of selected drugs before payment is authorized. Your doctor has a list of drugs that require special approval. This list is periodically modified. You may obtain a copy of this list by calling Anthem Member Services at 1-800-552-2682 or obtaining the list from the Web at www.anthem.com/cova. Your physician may request prior authorization by calling 800-338-6180 or by faxing the request to 800-601-4829. A written request, including drug name, quantity per day and strength, period of time the drug is to be administered, medical condition for which the drug is being prescribed, the patient's name, ID number, date of birth and relationship to the employee, must be sent by your doctor along with applicable medical records to:

WellPoint NextRx
Drug Prior Authorization
P. O. Box 746000
Cincinnati, OH 45274

You will be notified in writing if a prescription is denied for coverage. Your physician will be notified of both approval and denial decisions.

How Can I Reduce My Out-of-Pocket Expense for Prescription Drugs Under The COVA Care Plan?

Use generic drugs whenever possible. When a generic equivalent is available for

your prescribed medication, discuss its possible use with your physician. The decision to use a generic is between you, your doctor, and your pharmacist, but using generics will generally reduce your out-of-pocket expense. In some cases, use of generics can also reduce the cost to the program, thereby helping to control premium costs for all participants.

Use the Mail Service Pharmacy. Generally, for COVA Care members, out-of-pocket costs will be lower when using mail service since copayment levels are lower under this program. Also, once you have submitted your initial prescription for a 35 to 90-day supply, arranging for refills can be as easy as a phone call or a few clicks at the Medco Web site.

Use Participating Pharmacies. For COVA Care members, using participating pharmacies ensures that you will not have to pay an amount above the allowable charge. Also, by using a participating pharmacy, you will not be required to file a claim.

For COVA Care members, be sure that your participating pharmacy has the information on your Medco ID card. If the pharmacy is unable to process your claim and you have to file a paper claim for reimbursement, you risk losing the discount that would have been available at the point of sale.

Is the Medco Health Home Delivery Pharmacy Service Safe?

Prescriptions ordered through the Medco Home Delivery Pharmacy Service are delivered in protective shock and tamper-resistant packages with no indication that medications are enclosed. Dispensing systems are utilized to assist pharmacists in filling each prescription accurately and efficiently. The mail service uses the same database to verify eligibility and monitor drug utilization as the retail pharmacies, and it is subject to the same degree of regulation and scrutiny as retail pharmacies.

Medco has identified those medications that may lose potency when exposed to extreme temperatures. While housed in Medco pharmacies, medications that are sensitive to heat are kept in refrigerated areas, and when mailed, they are placed in special insulated packages with gel packs designed to maintain the correct temperature.

Are My Diabetes Supplies Covered Under My Prescription Drug Program?

Please consult your Member Handbook for information explaining what diabetic supplies and equipment are covered under your prescription drug benefit or under your medical benefit.

I Will Be Traveling For An Extended Period Of Time. Can I Get Extra Medication To Take With Me?

Participants may request one additional refill at either a retail pharmacy or through home delivery by contacting the appropriate pharmacist. However, more than one early refill must be approved by the Department of Human Resource Management. Prescription Drug Refill Exception Request Forms may be obtained at the Department of Human Resource Management's Web site at:

www.dhrm.virginia.gov/hbenefits/cova/care/prescriptiondrugs.html

or from your Benefits Administrator. Send the completed form by fax or US Mail to:

The Department of Human Resource Management (DHRM)
Office of Health Benefits
Attn: Policy and Instruction
101 North 14th Street, 13th Floor
Richmond, VA 23219
Fax: (804) 371-0231

DHRM will approve all valid requests and forward them to Medco or Anthem, as appropriate to your coverage. You will then have 14 days to complete your purchase. Some restrictions may apply.

Will I Have A Separate Prescription Drug Card?

No, both the COVA Care and COVA HDHP plans require only one card to access all benefits.

**State Retiree Health Benefits Program
Prescription Drug Claims Administrators
For Non-Medicare Plans**

COVA Care	Call or Visit the Website:
Medco	Member Services: 1-800-355-8279 www.medco.com
Regional Plan	Call or Visit the Website
Kaiser Permanente HMO	Member Services: 1-800-777-7902 <u>http://my.kaiserpermanente.org/mida/ commonwealthofvirginia/</u>
COVA HDHP	Call or Visit the Website:
Anthem Blue Cross and Blue Shield	Member Services: 1-800-552-2682 www.anthem.com/cova