

Understanding your Blue Cross prescription drug plan

**Blue Cross** Blue Shield of Michigan gives you comprehensive coverage for your medications. Your prescription drug plan includes Blue Cross' support and expertise to help ensure that your medicine is safe. effective, convenient and a good value. We think it's the perfect mix to help keep you healthy and your costs low.

# How do I learn more about my prescription drug plan?

You can find useful information about your pharmacy benefits anytime on our website by following these steps:

- Visit bcbsm.com.
- Log in to your member account. If you don't have an account, it's easy to start one. Just click on the Login button on our website, then click on the Register Now link.
- Click on My Coverage.
- Click on Prescription Drugs.

Use our online benefit tools to:

- Find out what's covered: View your prescription drug benefits, such as deductibles and copayments.
- Price a medication: Find the total cost of a medication and the amount you owe. Compare the cost of brand-name prescription drugs and generics. See which medications require prior authorization or step therapy.
- Research medications: Look up possible side effects and find answers to common questions.
- View your prescription drug history:
   See the list of medicine you've received and view your pharmacy claims.
- Locate a pharmacy: Find pharmacies near you. Most pharmacies nationwide accept Blue Cross insurance.

- Mail order medications: Certain medications can be sent directly to your door. You can track your order status online and see the number of refills remaining on each prescription.
- Get answers: If you still have questions about your pharmacy benefits, call us. The customer service number is listed on the back of your member ID card.

## What costs am I responsible for?

Some plans have annual deductibles, copayments and an out-of-pocket maximum. To find out more about your coverage, log in to your account on **bcbsm.com** or call the customer service number on the back of your member ID card.

Annual deductible: A deductible is the amount you pay out-of-pocket each plan year for covered health care services before your insurance plan begins to pay. Let's say your plan's deductible is \$1,500. That means for most services, you'll pay 100 percent of your medical and pharmacy bills until the total amount you have paid reaches \$1,500. After that, you share the cost with your plan by paying copays. Some plans do not include pharmacy costs in the deductible.

Copay: A copay is the amount you pay when you get a prescription filled. This could mean a fixed copay (for example, \$10 for a generic drug or \$80 for a brand-name drug) or a percentage (for example, 20 percent of the total cost of a medication).

### Annual out-of-pocket maximum:

The most that you will have to pay out-of-pocket during the plan year. This includes copays and your deductible.



### How are my medications covered?

The medications listed on the Blue Cross drug list are grouped into categories called tiers, with the safest and least expensive medicine included in the lower tiers. Prescription drugs can be expensive. One way Blue Cross works to keep costs down while maintaining high-quality care is by encouraging doctors to prescribe generic versions of brand-name drugs. Generics contain the same active ingredients as brand-name drugs, but at lower prices. You'll pay more if you take the brand-name version of a drug instead of the generic.

Tier	Description	Copayment requirements
1. Generics (Some plans may have two tiers for generic drugs.)	<ul> <li>Generic drugs</li> <li>Safe and effective</li> <li>Requires the lowest copay, making them the most cost-effective option for treatment</li> </ul>	Lowest copay
2. Preferred brand	<ul><li>Brand-name drugs</li><li>Safe and effective</li></ul>	Higher copay
3. Non-Preferred brand	<ul> <li>Brand-name drugs that may not have as much clinical value as drugs in Tiers 1 and 2</li> <li>Safe and effective, but with a shorter track record of safety and effectiveness compared to Tiers 1 and 2</li> <li>Generic or preferred brand alternatives available for many of these drugs</li> </ul>	Highest copay
Some drug benefits require a different copay for specialty drugs.		
4. Preferred specialty	Safe and effective	Lower specialty drug copayment
5. Non-Preferred specialty	<ul> <li>Brand-name drugs that may not have as much clinical value as Tier 4 drugs</li> <li>Safe and effective, but with a shorter track record of safety and effectiveness compared to Tier 4 drugs</li> </ul>	Higher specialty drug copayment

Certain types of medicine and medical supplies may not be covered under your prescription drug plan. For more information about your coverage, please call the customer service number on the back of your member ID card or visit **bcbsm.com/pharmacy**. Log in to your member account for copay information.

# Why does some medicine need approval?

Blue Cross makes sure you get the safest, most effective and most reasonably priced medicine for the treatment of your condition. Our pharmacists do this in several ways. Blue Cross requires review of certain medications before your plan will cover them, which is called prior authorization.

Our pharmacists review your medication history to determine whether you've tried a preferred alternative first, which is known as step therapy. Step therapy requires you to try less expensive options before "stepping up" to drugs that cost more. For example, you may need to try an over-the-counter allergy medicine and then a Tier 1 medicine before we'll approve your coverage for the more expensive Tier 3 medication. Prior authorization and step therapy ensure that medically sound and cost-effective medications are prescribed appropriately.

You can find out if your medicine needs prior authorization or step therapy by referring to the covered drug list at **bcbsm.com/pharmacy**, logging in to your account on **bcbsm.com** or calling the customer service number on the back of your member ID card. If your medicine requires prior authorization, you or your pharmacist will need to tell your doctor. Your doctor may instead prescribe another medication that doesn't require approval, or your physician can contact Blue Cross to provide more information and request review of your coverage for the medicine.



# What kinds of medicine need prior authorization or step therapy?

- Medications that have dangerous side effects or can be harmful when combined with other drugs
- Medications that should only be used for certain health conditions
- Medications that are often misused or abused
- Medications that are prescribed when less expensive drugs might work better

### How do I fill my prescription?

There are several ways you can fill a prescription\*:

- At a retail pharmacy Blue Cross' participating pharmacy network includes more than 69,000 retail pharmacies nationwide, including regional and national drug store chains, as well as independent community pharmacies. That's more than 98 percent of pharmacies in Michigan and thousands more across the nation.
- Mail order through Express Scripts\* Home Delivery

   You may be able to fill up to a 90-day supply of your medicine, if your benefits cover mail order. To request a mail order form, go to bcbsm.com/pharmacy then click on Mail Order Drug Forms at the bottom of the page, or call the customer service number on the back of your member ID card.
- Specialty drug mail order through Walgreens Specialty
   Pharmacy\* or at a participating retail pharmacy —
   Walgreens Specialty Pharmacy handles mail- order prescriptions for specialty drugs used to treat complex or rare conditions such as arthritis, asthma, multiple sclerosis, hepatitis C and others. You may be able to get up to a 30-day supply of specialty drugs from Walgreens Specialty Pharmacy or a participating retail pharmacy. For more information, please call Walgreens Specialty Pharmacy Customer Service at 1-866-515-1355.

<sup>\*</sup>Express Scripts and Walgreens are independent companies providing pharmacy benefit administration services on behalf of Blue Cross Blue Shield of Michigan. Blue Cross is not responsible for content available on their websites.

#### Want better value?

Did you know that presenting your Blue Cross Blue Shield of Michigan identification card ensures that you always pay the lowest cost for your medicine and provides an extra safety check? If a pharmacy provides a medication for free or includes a special discount for it, using your insurance card makes sure that you get the medicine for the lowest cost possible.

As a Blue Cross Blue Shield of Michigan member, you get discounted prices on covered prescription drugs. By using your Blue Cross ID card, you will benefit from the lowest possible price at a network pharmacy, even if the pharmacy sells a medication for less than your copay. For example, if a pharmacy sells a drug for \$4 and your copay for that drug is \$10, you will only pay \$4.

If you have an annual deductible, the amount that you pay will apply to your deductible when you use your Blue Cross ID card. It will also apply to the annual maximum amount your plan says you will pay before your benefits pay 100 percent of your health care costs.





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