



## FREQUENTLY ASKED QUESTIONS

### PRIME THERAPEUTICS- NEW 2013 PHARMACY BENEFITS MANAGER

#### ABOUT PRIME AND MY BENEFITS

##### **1. Who is Prime Therapeutics?**

Texas Children's has selected Prime Therapeutics (or "Prime") as the new pharmacy benefits manager for the medical plans effective January 1, 2013. Prime is a partially-owned subsidiary of Health Care Service Corporation, the parent company of BlueCross BlueShield of Texas ("BCBSTX"). Through an exhaustive search, Texas Children's was able to reduce costs while also integrating the program into the overall BCBSTX medical plan.

##### **2. How will my pharmacy benefits through Prime compare to benefits under the 2012 plan with Express Scripts?**

- **Copays** under the PPO medical plan will now be the same as the EPO medical plan. The copays for both the PPO and EPO for 2013 for up to a 30-day supply at a network retail pharmacy will be \$10 for generics, \$35 for preferred brand drugs and \$50 for non-preferred brand drugs.
- **Specialty medications** are available through Prime Specialty Pharmacy for a 10% copay with a minimum of \$50 and maximum of \$150 per prescription for up to a 30-day supply. By obtaining specialty medications through Prime Specialty Pharmacy, you can limit your annual out-of-pocket per-member cost to \$2,000 per calendar year. For specialty medications obtained and administered in the physician's office, you will have a \$150 per prescription copay (up to 30-day supply) with no member out-of-pocket limit.
- **The Preferred Drug List** may be different with Prime than with Express Scripts; be sure to log on to [www.bcbstx.com/tch](http://www.bcbstx.com/tch) to review the current preferred brand drug listing.
- **PrimeMail for home delivery of maintenance medication** is like getting four months of prescriptions FREE each year.
  - For each 90-day supply, you pay the equivalent of a two-month copay.
  - The copays for up to a 90-day supply are \$20 for generic, \$70 for preferred brand, and \$100 for non-preferred brand.
  - Mail order benefits through PrimeMail are not available until January 1, 2013. Therefore, hold your new maintenance medication prescriptions and mail them in after December 30, 2012.
  - Current active prescriptions in Express Scripts Home Delivery will be transferred to PrimeMail. You MUST log on to the website AFTER January 1, 2013, and fill out personal information including form of payment in order to continue receiving mail order prescriptions under PrimeMail.

##### **3. Will Walgreens be a network pharmacy in 2013?**

No, Walgreens will not be a network pharmacy in 2013. Other national chains, however, continue to be considered network pharmacies. It is easy to switch to a network pharmacy; you can have the new pharmacist transfer your old prescription (provided it is still valid and there are refills available) by simply providing the prescription information to them.



**4. How do I find a network pharmacy?**

Visit [www.bcbstx.com/tch](http://www.bcbstx.com/tch) to find the nearest network pharmacy in your area.

**5. When does Prime become effective?**

Prime will be effective 12:01 a.m., January 1, 2013. You should use your current BCBSTX medical ID card and continue to fill prescriptions through Express Scripts until that time. After that time and date, you must present your new BCBSTX medical ID card with the reference to Prime on it to the pharmacy in order to receive benefits. Prime will only handle prescriptions on or after January 1, 2013; Express Scripts should be contacted for all prior prescriptions at 1-800-316-3102.

**6. Since we are changing pharmacy administrators, will I receive a new ID card?**

Before the January 1, 2013 effective date, you will receive a new BCBSTX ID card with a reference to updated prescription information, including Prime. On January 1, 2013, please discard your current BCBSTX ID card and begin using your new card. The old ID cards will NOT work for pharmacy benefits beginning January 1, 2013.

**7. What if I do not receive an ID card in the mail before January 1, 2013?**

ID cards will be mailed before January 1, 2013, but if you do not receive an ID card, please contact BCBSTX customer service at 1-877-734-8924 to have an ID card mailed to you. In the meantime, temporary ID cards can be printed by registering for **Blue Access for Members (BAM)** at [www.bcbstx.com/tch](http://www.bcbstx.com/tch).

**8. Who do I call with questions about my 2013 pharmacy benefits through Prime?**

Should you have questions before January 1, 2013, you may call our onsite BCBSTX representative, Debbie Popp, directly at 832-824-2168, or email her at [debbie\\_popp@bcbstx.com](mailto:debbie_popp@bcbstx.com). You may also call the Total Rewards Mainline at 832-824-2421, option 1. Debbie is available for Prime and BCBSTX questions currently and will continue to be a local resource for your needs. She is located on the 3<sup>rd</sup> floor of the Meyer Building in Human Resources. You can, of course, also call BCBSTX at 1-877-734-8924, say "medical" and then ask to speak to a Prime pharmacy representative.

After January, 1, 2013, the number on your ID card, 1-877-734-8924, will allow you to connect directly to Prime by indicating "pharmacy" or "prescription drugs" when prompted for the reason for your call.

**9. What are generic drugs?**

Generic drugs have the same chemical makeup and same effect in the body as an original brand-name drug, except generics usually have a different name, color and/or shape. Generics have been rigorously tested by the U.S. Food & Drug Administration (FDA) and have been approved as safe and effective. Unlike manufacturers of brand-name drugs, the companies that make generic drugs do not spend a great deal of money on research and advertising, so their generic drugs cost less than the original brand-name, and the savings can be passed along to you.

**10. How much will I have to pay if I choose to take a brand-name drug when a generic is available?**

You will have to pay the generic copay plus the difference between the actual cost of the brand selected and the generic drug available. This is the same as the current benefit plan.

**11. Will my diabetic monitor or supplies be covered under Prime and, if so, at what copay?**

Yes, you will be sent a flyer for a free diabetic monitor, and you can call the number on the flyer to receive the monitor prior to January 1, 2013. This new monitor uses the preferred diabetic testing supplies at the



preferred brand copay. After January 1, 2013, you may call 1-877-734-8924 and ask to speak directly with a pharmacy representative to request your monitor.

#### **12. Will I have to file claim forms?**

- Network claims will not require a claim form.
- Should it be necessary to utilize a non-network pharmacy (in an emergency), you will be required to pay the full cost of the prescription and later submit the claim to Prime for reimbursement. The benefit plan will reimburse at 60% of the negotiated rate for eligible prescriptions, with the required authorizations.

#### **MAIL ORDER DELIVERY/SELECT HOME DELIVERY**

**13. What if I am currently receiving my prescriptions through mail order with Express Scripts' Select Home Delivery? If you are currently receiving medication through Express Scripts' Select Home Delivery, you must take action to receive your prescriptions from PrimeMail.**

**Important:** You must log on to <http://www.bcbstx.com/tch> AFTER January 1, 2013, and transition your prescription in order to receive your first prescription. You will need to provide your current information and indicate your desired form of payment. Provided your prescription is still valid and has remaining refills, it can be transferred with some exclusions for compounds and controlled substances. Once the information has been completed, you can expect your new prescription within five to eight business days from the allowable date or the approval from your prescriber. The timing of the refill may depend on the last date filled in order to avoid refilling too soon.

All new maintenance medication prescriptions will require a completed claim form along with a valid prescription. Your provider can e-prescribe or can fax in a NEW prescription request to 1-877-774-6330. The physician fax form can be found at MyPrimeMail.com. Prime cannot accept prescriptions via fax from anyone but the prescribing physician. You, the member, must still complete the claim form and form of payment in order to adequately process the prescription.

#### **14. My prescription is currently a preferred brand medication; will it remain the same with Prime?**

Every year the list of preferred brand medications is reviewed and updated. With new treatments emerging rapidly and additional generics becoming available, new medications are added to this list while others are removed. You may refer to [www.bcbstx.com/tch](http://www.bcbstx.com/tch) under Preferred Drug List to determine if your specific medication is on the Prime Preferred Drug List. You should receive a letter from BCBSTX / Prime detailing additional information regarding copays, alternative options, next steps and contact information if you have a current prescription for a preferred brand medication that will move to non-preferred brand. **If you do not receive a letter, we recommend that you still check to see what and how each prescription will be covered in 2013.** Please note: Under Prime, the Formulary and Preferred Drug Listing are the same list. The term formulary and preferred are used interchangeably.

#### **SPECIALTY AND FERTILITY MEDICATIONS**

#### **15. What are Specialty Medications and why is the copay so expensive?**

Specialty medications (also known as biotech, biological or injectables) are those medications used for certain rare or complex conditions. These drugs are extremely expensive and may have potentially serious side effects or interactions. These medications can be obtained through Prime Specialty Pharmacy.



Specialty medications are classified as Tier 4 drugs and you will pay 10% of the cost of the medications with a minimum copay of \$50 and a maximum of \$150 per prescription up to a 30-day supply. The cost of these medications can run into the tens of thousands of dollars per dosage; so while \$150 copay may seem excessive, it is a relatively small portion of the overall expense. Each member's out-of-pocket maximum is limited to \$2,000 per calendar year for specialty medications obtained through Prime Specialty Pharmacy.

In some cases, these medications are dispensed by the physician and are subject to the \$150 copay per prescription with no per-member out-of-pocket limit per year.

Prior to January 1, 2013, please direct any questions regarding specialty medications to Debbie Popp at 832-824-2168 the onsite BCBSTX/Prime representative. Beginning January 1, 2013, any questions regarding specialty medications can be directed to 1-877-627-6337 or by calling BCBSTX at 1-877-734-8924, indicating "pharmacy" as the reason for the call and then asking for Prime Specialty.

#### **16. What if I am receiving a specialty prescription through a retail pharmacy or Curascript?**

Prime Specialty Pharmacy will be the new specialty vendor effective January 1, 2013. You may call Prime Specialty Pharmacy AFTER January 1, 2013, directly at **1-877-627-6337**, Monday-Friday, 7 a.m. - 6 p.m. CT with any questions. Please have your member ID card ready and be prepared to give your name, address and phone number. In addition, please have the name and phone number of the current pharmacy being used, your prescription numbers and name of medication along with your doctor's name and phone/fax number. Prime Specialty can be reached directly at [www.PrimeTherapeutics.com/Specialty](http://www.PrimeTherapeutics.com/Specialty). Should you have questions prior to January 1, 2013, please contact the BCBSTX/Prime onsite representative, Debbie Popp, directly at 832-824-2168.

#### **17. I am currently receiving medications through Freedom Fertility, or have in the past. How will my care be transitioned?**

Freedom Fertility is a part of Express Scripts and will continue to provide medications through December 31, 2012. Effective January 1, 2013, all open refills for Fertility medications will transition to Prime Specialty Pharmacy.

The process for filling or refilling these medications will be the same as other Specialty medications referenced in Question 16. There is a combined lifetime limit per member of \$20,000 for fertility medical and pharmacy benefits under all Texas Children's medical plan. Any amount previously accumulated with Express Scripts/BCBSTX will be transferred to Prime/BCBSTX.

#### **PRIOR AUTHORIZATION AND STEP THERAPY**

##### **18. What is a Prior Authorization?**

Some drugs your physician prescribes will require special approval or authorization before being filled. This will ensure you meet the plan's conditions and requirements for coverage. Prior Authorization encourages appropriate drugs and usage for certain designated conditions. Prior Authorizations will only be provided for a specific time period. Should you decide to obtain the medication without a prior authorization, you will be required to pay the full cost of the medication.

##### **19. I am currently taking a prescription that required a Prior Authorization. Will I have to obtain a new authorization to continue to take my medication?**

As long as the Prior Authorization is still valid, you can continue to receive the medication that has been approved. Every Prior Authorization has an expiration date, which will still apply under Prime. All new



prescriptions or those prescriptions not currently being filled that require Prior Authorization will be subject to all the normal Prior Authorization rules January 1, 2013.

More information about Prior Authorization can be found on the Blue Access for Members (BAM) website at [www.bcbstx.com/tch](http://www.bcbstx.com/tch) or by calling **1-877-734-8924** and speaking with a pharmacy representative after January 1, 2013. Any assistance needed prior to January 1, 2013, should be obtained by calling Debbie Popp at 832-824-2168 or by visiting [www.myprime.com](http://www.myprime.com) and clicking on "Find Drugs & Estimates" on the left hand column, entering "BCBS of Texas" under Select Health Plan, "No" under Medicare Part D Member and "Preferred Drug List 1" as the preferred drug list. You will then see information on the Preferred Drug List, Specialty Drug Listing, Prior Authorization, Step Therapy and Dispensing Limits.

## **20. What is Step Therapy?**

Step Therapy is a program especially for people who take prescription drugs regularly to treat an ongoing medical condition, such as arthritis, asthma or high blood pressure. The program is an approach to getting you the prescription drugs you need, with safety, cost and, most importantly, your health in mind. The program makes prescription drugs more affordable for most members and helps Texas Children's control the rising cost of drugs.

In Step Therapy, the covered drugs you take are organized in a series of "steps," with your doctor approving and writing your prescriptions. The program usually starts with generic drugs in the first step. Rigorously tested and approved by the U.S. Food & Drug Administration (FDA), the generics covered by our plan have been proven to be effective in treating many medical conditions. This first step allows you to begin or continue treatment with safe, effective prescription drugs that are also affordable. Your copayment is usually the lowest with a first-line drug. More expensive brand-name drugs are usually covered in the second-line. Your doctor is consulted, and approves/writes your prescriptions based on the list of Step Therapy drugs covered by our plan. For instance, your doctor must write your new prescription when you change from a second-line drug to a first-line one.

## **21. Who decides what drugs are covered in Step Therapy?**

Step Therapy is developed under the guidance and direction of independent, licensed doctors, pharmacists and other medical experts. Together with Prime, they review the most current research on thousands of drugs tested and approved by the FDA for safety and effectiveness. Then they recommend appropriate prescription drugs for a Step Therapy program, and our organization's pharmacy benefit plan chooses the drugs that will be covered.

If you would like a list of drugs covered under our Step Therapy program, it is available through the Blue Access for Members (BAM) website at [www.bcbstx.com/tch](http://www.bcbstx.com/tch) after January 1, 2013 or by visiting [www.myprime.com](http://www.myprime.com) or by calling BCBS TX customer service at 1-877-734-8924.

## **22. I recently had to go through the Step Therapy process for a prescription; will I have to do it again with Prime?**

If you have been through the Step Therapy process and are taking a second-line brand drug, you can continue to fill that prescription provided the prescription is valid and refilled on a timely basis. New prescriptions or new diagnoses that have Step Therapy protocols will require those steps be completed before a different medication can be approved. All new prescriptions or those prescriptions not currently being filled that require Step Therapy will be subject to all the normal Step Therapy rules on January 1, 2013.



More information about Step Therapy can be found on the Blue Access for Members (BAM) website at [www.bcbstx.com/tch](http://www.bcbstx.com/tch) or by calling 1-877-734-8924 and speaking with a pharmacy representative after January 1, 2013. An assistance needed prior to January 1, 2013, should be obtained by calling Debbie Popp at 832-824-2168 or by visiting [www.myprime.com](http://www.myprime.com) and clicking on "Find Drugs & Estimates" on the left hand column, entering "BCBS of Texas" under Select Health Plan, "No" under Medicare Part D Member and "Preferred Drug List 1" as the preferred drug list. You will then see information on the Preferred Drug List, Specialty Drug Listing, Prior Authorization, Step Therapy and Dispensing Limits.

**23. Why couldn't I fill my prescription at the pharmacy? They say I have to try a different drug first. What does this mean?**

The first time you submit a prescription that has a Step Therapy protocol, and the prescription is not for a first-line drug, your pharmacist will tell you that the Texas Children's plan uses Step Therapy. This simply means that if you would rather not pay full price for your prescription drug, your doctor should give you a prescription for a first-line drug. To receive a first-line drug:

- Ask your pharmacist to call your doctor and request a new prescription, or
- Contact your doctor to get a new prescription.

Only your doctor can change your current prescription to a first-line drug covered by our program.

**24. How do I know what first-line drug my doctor should prescribe?**

A list of first-line prescription drugs covered by our plan can be obtained at [www.bcbstx.com/tch](http://www.bcbstx.com/tch) or by calling 1-877-734-8924. Provide your doctor with this list to know which drugs are covered, and allow them to write your prescription accordingly.

An authorization form can be found at [www.myprime.com](http://www.myprime.com) then clicking on "Find Drugs & Estimates" on the left hand column, entering "BCBS of Texas" under Select Health Plan, "No" under Medicare Part D Member and "Preferred Drug List 1" as the preferred drug list. You will then see information on Prior Authorization and Step Therapy and can click on the specific drug or category applicable to your situation.

**25. I need a prescription filled immediately. What can I do?**

At the pharmacy, you may be informed that your drug is not covered if you have just started taking a prescription drug regularly or if you are a new member of our plan. If this occurs and you need your medication quickly, you can:

- Talk with your pharmacist about filling a small supply of your prescription right away. You may have to pay full price for this drug.
- Then, ask your doctor to write you a new prescription for a first-line drug, so you are sure your medication will be covered by our plan.

Only your doctor can approve and change your prescription to a first-line drug.

**26. I've already tried the first-line drugs on the list. What can I do?**

With Step Therapy, more expensive brand-name drugs are usually covered in a later step in the program if:

- 1) You have already tried the generic or first-line drugs covered in our Step Therapy program,
- 2) You cannot take them (for instance, because of an allergy), or
- 3) Your doctor decides you need a brand-name drug for medical reasons.

If one of these scenarios applies to you, your doctor can ask for an override for you to take a second-line prescription drug. Once the override is approved, you pay the appropriate copay for this drug. If the override is not approved, you may have to pay the full price for the drug.



**27. What happens if my doctor's request for an override is denied?**

Guidelines of our pharmacy benefit plan exclude certain drugs from coverage. To learn more about what drugs are excluded under our plan, log on to Blue Access for Members (BAM) at [www.bcbstx.com/tch](http://www.bcbstx.com/tch) and view a copy of the Preferred Drug List.

For a copy of the criteria our plan uses to decide which overrides will be covered, call Customer Service at **1-877-734-8924** and ask to speak with a pharmacy representative.

**28. I sent in a prescription for mail-order delivery and was told I need to use a first-line drug. What happens now?**

Our Step Therapy program applies to prescriptions you receive at your local pharmacy or through mail service, so the same basic process applies.

- Your doctor should write a prescription for a first-line drug that is covered by our plan, or
- Your doctor may request an override.

The mail order pharmacy that our plan has chosen – PrimeMail – can help with the process. When PrimeMail receives your prescription, a representative will contact you first, and then they will contact your doctor to request a new prescription for a first-line drug. You may want to let your doctor know that the Mail Service Pharmacy will be requesting this information.



BlueCross BlueShield  
of Texas

## IMPORTANT CONTACT INFORMATION

### BEFORE JANUARY 1, 2013

BCBSTX onsite rep (Debbie Popp)

[debbie\\_popp@bcbstx.com](mailto:debbie_popp@bcbstx.com)

**832-824-2168**

Located on the 3<sup>rd</sup> floor of Meyer Building in Human Resources, M-F 8 am to 5 pm

Total Rewards Mainline

**832-824-2421, option 1**

[totalrewards@texaschildrens.org](mailto:totalrewards@texaschildrens.org)

BCBSTX Customer Service

**877-734-8924**

*Indicate "medical"*

*Ask to speak to a Prime representative*

### AFTER JANUARY 1, 2013

BCBSTX and Prime Website

[www.bcbstx.com/tch](http://www.bcbstx.com/tch)

[www.myprime.com](http://www.myprime.com)

BCBSTX and Prime Customer Service

**877-734-8924**

*Indicate "medical" or "pharmacy"*

*Your one stop number for all medical/prescription needs*

PrimeMail Customer Service

**877-357-7463**

Prime Specialty Pharmacy

**877-627-6337**

BCBSTX onsite rep (Debbie Popp)

**832-824-2168**

[debbie\\_popp@bcbstx.com](mailto:debbie_popp@bcbstx.com)

Located on the 3<sup>rd</sup> floor of the Meyer Building in Human Resources, Monday - Friday 8 a.m. to 5 p.m.

Total Rewards Mainline

**832-824-2421, option 1**

[totalrewards@texaschildrens.org](mailto:totalrewards@texaschildrens.org)