



## Prescription Drug Transition Policy

If your drug is not on the Drug List (formulary) or is restricted, here are things you can do:

- You may be able to get a temporary supply of the drug (only members in certain situations can get a temporary supply). This will give you and your provider time to change to another drug or to file a request to have the drug covered.
- You can change to another drug.
- You can request an exception and ask the plan to cover the drug or remove restrictions from the drug.

### You may be able to get a temporary supply

Under certain circumstances, the plan can offer a temporary supply of a drug to you when your drug is not on the Drug List or when it is restricted in some way. Doing this gives you time to talk with your provider about the change in coverage and figure out what to do.

To be eligible for a temporary supply, you must meet the two requirements below:

#### 1. The change to your drug coverage must be one of the following types of changes:

- The drug you have been taking is **no longer on the plan's Drug List**.

-- or --

- The drug you have been taking is **now restricted in some way** (Section 4 in Chapter 5 of the Evidence of Coverage tells about restrictions).

#### 2. You must be in one of the situations described below:

- **For those members who are new or who were in the plan last year:**

We will cover a temporary supply of your drug **during the first 90 days of your membership in the plan if you were new and during the first 90 days of the new calendar year if you were in the plan last year**. This temporary supply will be for a maximum of a 30-day supply. If your prescription is written for fewer days, we will allow multiple fills to provide up to a maximum of 30-day supply of medication. The prescription must be filled at a network pharmacy. (Please note that the long-term care pharmacy may provide the drug in smaller amounts at a time to prevent waste.)

- **For those members who have been in the plan for more than 90 days, and reside in a long-term care (LTC) facility, and need a supply right away:**

We will cover one 31-day supply of a particular drug, or less if your prescription is written for fewer days. This is **in addition** to the above temporary supply situation.

- **For those members who have been in the plan for more than 90 days and experience a change in the level of care, such as a move from a hospital or a nursing care facility to a home setting, and need a supply right away:**

We will cover a one-time temporary supply for up to 30-days if pharmacy submits an appropriate NCPDP (National Council for Prescription Drug Programs) SCC (Submission Clarification Code). We can also accommodate a one-time fill in these scenarios via a manual override at point-of-sale if requested through Member Services.

While you are getting a temporary supply of a drug, you should talk with your provider to decide what to do when your temporary supply runs out. You can either switch to a different drug covered by the plan or ask the plan to make an exception for you and cover your current drug. The sections below tell you more about these options.

### **You can change to another drug**

Start by talking with your provider. Perhaps there is a different drug covered by the plan that might work just as well for you. You can call our Pharmacy Helpdesk at 1-888-807-5717 from 8:00AM to 8:00 PM, seven days a week (TTY users call 711) to ask for a list of covered drugs that treat the same medical condition. This list can help your provider find a covered drug that might work for you.

### **You can ask for an exception**

You and your provider can ask the plan to make an exception for you and cover the drug in the way you would like it to be covered. If your provider says that you have medical reasons that justify asking us for an exception, your provider can help you request an exception to the rule. For example, you can ask the plan to cover a drug even though it is not on the plan's Drug List. Or you can ask the plan to make an exception and cover the drug without restrictions.

If you and your provider want to ask for an exception, Chapter 9, Section 6.4 of the Evidence of Coverage tells what to do. It explains the procedures and deadlines that have been set by Medicare to make sure your request is handled promptly and fairly.

This information is available for free in other languages. Should you need more information on the formulary transition process, please call our Pharmacy Helpdesk at 1-888-807-5717 (TTY users call 711), seven days a week from 8:00AM to 8:00 PM; or call Member Services at 1-877-940-9330 (TTY users call 711) seven days a week from 8:00AM to 8:00 PM.

Esta información está disponible en otros idiomas gratuitamente. Si necesita más información sobre el proceso de transición del formulario, llame a nuestro servicio de asistencia de farmacia al 1-888-807-5717 (los usuarios de TTY deben llamar al 711), los siete días de la semana de 8:00AM a 8:00PM o llame a Servicios para Miembros al 1-877-940-9330 (los usuarios de TTY deben llamar al 711) los siete días de la semana de 8:00AM a 8:00PM.

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09/14/2020

