Your Prescription Drug Benefits

Frequently Asked Questions

Starting January 1, 2025, Blue Cross and Blue Shield of Illinois will provide your prescription drug benefits through Prime Therapeutics®. This guide can help you learn more about your benefits and get answers to some commonly asked questions.

What's New

What is Prime Therapeutics (Prime)? How is it different from Prime Therapeutics Management (previously Magellan Rx Management)?

Prime Therapeutics is an independent company that provides pharmacy solutions for BCBSIL members. Prime handles prescription claims, oversees pre-approvals, builds drug store networks, and develops drug lists.

As a reminder, on October 1, 2024, Magellan Rx Management became Prime Therapeutics Management. This was because Magellan Rx Management, your current pharmacy benefit manager, was bought by Prime Therapeutics in late 2022. If you used Magellan Rx Pharmacy, that became Prime Therapeutics Pharmacy.

What's changing? Do I need to do anything?

Prime will offer many of the same services and features as your current PBM, including a large national network of retail pharmacies and a home delivery and specialty pharmacy.

You will receive a letter if there are changes with your new benefits that will affect you. That letter will tell you how the changes apply to you and what you should do next.

When will I receive my ID card?

You should receive a new member ID card by the end of December. Make sure you show your member ID card to both your doctor and pharmacist after January 1, 2025.

Will my medications still be covered?

Your new Performance Select Drug List covers many of the same prescription drugs as your current plan. Starting January 1, 2025, some drugs will change coverage tiers and some will no longer be covered. You can check to see if the drugs you are taking will be covered at https://www.bcbsil.com/docs/rx-drugs/drug-lists/il/rx-list-per-sel-il-2025.pdf. If a medicine you take now is not on the list, talk to your doctor about other treatment options that might be right for you.



Filling Your Prescriptions

Where can I fill my prescriptions?

You can use any retail pharmacy in the Traditional Select pharmacy network. Starting January 1, 2025, you can find these network pharmacies by logging into your online account.

You have two options for filling your covered long-term medicines. Your medicine may not be covered if you do not use one of these options:

- During annual benefits enrollment, you needed to select either CVS Pharmacy or Walgreens as your preferred pharmacy chain. You can use any participating store location to fill up to a 90-day supply. If you do not select CVS Pharmacy or Walgreens, your pharmacy election will default to CVS.
- You also have the option of using Amazon Pharmacy® to have up to a 90-day supply of your covered prescriptions mailed directly to your home.

What home delivery options are available?

Your pharmacy benefit with Blue Cross and Blue Shield of Illinois offers Amazon Pharmacy to easily get your non-specialty medicines delivered to your home.

Amazon Prime members get free 2-day shipping on most orders and 5-day shipping is free without Amazon Prime. Drug discount card pricing is built into your shopping experience so you pay the lowest available price. To start using the pharmacy service after January 1, 2025, create an account at https://pharmacy.amazon.com/myw or call (855) 206-0459. Your doctor can send new prescriptions electronically to AMAZON PHARMACY HOME DELIVERY.

What if I take a specialty medication? Can I still use Payer Matrix?

Prescriptions that are approved for self-administration (like oral capsules or injections you can give yourself) must be filled through Accredo® or another in-network specialty pharmacy to avoid paying higher out-of-pocket costs.

On January 1, 2025, your specialty prescriptions with refills remaining will be automatically moved to Accredo.

If your specialty prescription is a controlled substance, is regulated by a REMS program, is expired, or has no refills left on January 1, 2025, contact your doctor. Ask them to send a new prescription to Accredo on or after January 1, 2025. When Accredo receives your prescription, they will call or email you to get you signed up and ready for your first order. You can also call Accredo directly at (833) 721-1619 after January 1, 2025.

Please note: The Payer Matrix manufacturer assistance program is ending December 31, 2024. Your pharmacy benefit plan will have a new coupon program available starting January 1, 2025, but the amount you pay for your prescription may increase.

How much will my drug cost?

How much you pay out of pocket is determined by whether your drug is on the Performance Select Drug List and at what coverage level, or tier. You can estimate how much your prescription medications will cost at MyPrime.com.

Prescription Drug Benefit Basics

What is a drug list? Why should I use it?

A drug list is a list of drugs available to Blue Cross and Blue Shield of Illinois members. How much you pay out-of-pocket for prescription drugs is determined by whether your medication is on the list. These prescription drug lists have different levels of coverage, which are called "tiers."

Generally, if you choose a drug that is a lower tier, your out-of-pocket costs for a prescription drug will be less. Your doctor should consult the Drug List when prescribing drugs for you. This may help lower your out-of-pocket costs.

What are generic drugs?

A generic drug generally works just like a brand drug at the same dose, strength and use. Generics are also approved by the U.S. Food and Drug Administration (FDA) but often cost less.

If your medication is available in a generic equivalent version with the same active ingredients and at the same dosage, you may pay more if you choose to buy the brand-name version.

Are there any additional requirements or coverage limits?

Your plan has programs to help make sure medicines are used safely and appropriately. These include prior authorization, step therapy and dispensing limits. Your medicine(s) may need to be reviewed even if you have participated in a similar program in the past.

- **Prior Authorization:** For some drugs, your doctor will need to get an approval from us before they are covered.
- **Step Therapy:** A "step" approach is required to receive coverage for certain high-cost drugs. This means that a drug will not be covered unless you try another lower-cost drug first. This program will only apply to those high-cost drugs you begin taking on or after January 1, 2025.
- **Dispensing Limits:** Some drugs may have limits on how much can be filled per prescription or in a given time span. If your doctor thinks you need more than what the dispensing limit allows, you can still get the drug, but you may have to pay more for the extra supply, based on your benefit plan. Your doctor may also submit a Dispensing Limit authorization request to us.

Visit <u>bcbsil.com/hub/pharmacy</u> for more information about these programs and examples of which drugs and drug categories are included. The drugs and drug categories included are subject to change.

I just received a new PA approval. Does my physician need to approve again?

<u>Unless you have a benefit exclusion</u>, no, your active prior authorizations will transfer from your previous pharmacy benefit manager. If you are required to have clinical review on a prescription you are taking, you will receive a letter in the mail with instructions. If your PA is expired, you will need your doctor to provide a new one.

Will Over-the-Counter (OTC) Medications be covered?

Medications that can also be found OTC are usually not covered through your prescription drug plan, even if your doctor has prescribed it. Because these drugs are not covered under your plan, buying the OTC version may save you money.

Are preventive drugs covered by my plan?

As part of the Affordable Care Act, certain preventive drugs are required to be covered without member cost-share. You can see which drugs are included here.

Are there any coupon programs available?

Starting January 1, 2025, your benefits will include FlexAccess™. FlexAccess™ is a program that helps you find cost assistance or coupon programs to help reduce the cost of select covered medicine(s). If you are taking a drug that is included in this program, you will receive a letter with more information about how to enroll.

Please note: If you choose, or have chosen, a high deductible health plan for your medical coverage, your benefits for this program will vary. You can get assistance enrolling in an available manufacturer's coupon program to save money on your prescription costs. However, the coupon value will not apply to your plan's deductible or yearly out-

of-pocket maximum amount. Only the actual amount you pay may apply.

Be sure to use your ID card at the pharmacy. Your medicine may be eligible for the MedsYourWay® drug discount card program. This program works with your benefit to automatically find available lower costs on your prescriptions. You'll pay the lower available price between drug discount card pricing or your plan cost share amount. Also, what you pay will count toward your plan's deductible or yearly out-of-pocket maximum amount. Not all network pharmacies may participate with MedsYourWay.

How can I contact customer service?

If you have any questions after January 1, 2025, you can call the number on your Member ID card.

Digital Tools & Resources

Can I manage my benefits online before January 1, 2025?

Before January 1, 2025, you can visit the Prime member website, MyPrime.com, to check coverage of your drugs and search for network pharmacies near you. On MyPrime.com, click "explore MyPrime" and follow the prompts in the drop-down menu. Be sure to answer "No" for Medicare Part D when selecting your plan.

To see coverage information, select "Find medicines" and choose the Performance Select Drug List.

To find an in-network pharmacy, select "Pharmacies" and choose the Traditional Select Network.

How can I access my online account after January 1, 2025?

After January 1, 2025, you can view your specific prescription drug plan benefit information by registering or logging in to your Blue Access for Members[™] account from bcbsil.com/hub. Once in BAM[™], you can click on "Pharmacy" or link to your own account on MyPrime.com.

In BAM you can:

- Find in-network medical and pharmacy providers
- Get your member ID
- Check coverage
- View claims status and history
- Compare drug costs at different pharmacies
- Access information about prescription drugs, including medication details, lower cost options, pre-approvals and refills
- Get clinical review status and details
- Live chat with a pharmacy customer service representative

Is there an app available?

You can also download the BCBSIL App from the Apple Store or Google Play to help manage your prescription drug benefits. Please note, you can register for BAM or download the mobile app now, but your pharmacy benefits info will not be available until January 1, 2025.