



Health Plans

Q. Are there changes being made to the 2017 pharmacy benefit?

- **Pharmacy Benefit Administrator**: Effective January 1, 2017, CVS Caremark will replace Express Scripts as IU Health Plans pharmacy benefit administrator. IU Health Plans Pharmacy Benefits Management (PBM) will continue to implement, maintain, and oversee employee pharmacy benefits in 2017. Refer to the CVS Caremark FAQ below for more information.
- **Pharmacy Services Phone Number**: Effective January 1, 2017, the phone number to reach the Pharmacy Member Services is 844.432.0704.

CVS Caremark FAQ

Q. Will I receive a new ID card with updated pharmacy information?

A. Yes, all members will receive a 2017 ID card that will include the necessary information for your pharmacy to process a prescription under your benefit plan. Present your new ID card to the pharmacy before filling your first prescription in 2017 in order to avoid any prescription delays.

Q. What should I do if I have existing refills with Express Scripts or Accredo?

A. Express Scripts and Accredo will be transferring all existing refills to CVS Caremark. Because we have to wait until the refill information is transferred to CVS Caremark, there may be a delay in processing your mail service refill requests. In an effort to avoid a delay in filling your mail service prescriptions, we advise you to select one of the following options:

- Have your doctor write a new prescription for up to a 90-day supply, plus refills when appropriate, and mail it to CVS Caremark along with a mail service order form.
- Send your refill request after the 10th day of January 2017. A possible delay will only occur during the first 10 days of the transition from Express Scripts to CVS Caremark.

Q. How do I request a refill for a prescription that was transferred to CVS Caremark?

A. Once CVS Caremark receives the refills from the current vendor, there are three (3) ways for you to request a refill for a transferred prescription:

1. Online at www.caremark.com is the most convenient way to order refills and inquire about the status of your order any time of the day or night. You will need to register and log in to access service. Please note, you will not be eligible to register to www.caremark.com until on or after [effective date], and transferred prescriptions will not be viewable until the refills are received and loaded into the CVS Caremark system (anywhere from 1-10 days).
2. By phone, call CVS Caremark Customer Care toll-free at 844.432.0704 for fully automated refill service. Have your ID number ready.
3. By mail. Complete a CVS Caremark Mail Service Order Form for each prescription you are

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requesting and include the refill sticker/label that you received from [current vendor] in the designated box on the form. If you do not have a refill sticker, please provide the prescription number assigned by [current vendor] and the name of the medicine you are taking. Please mail the completed form and the appropriate copayment* in the pre-addressed envelope directly to CVS Caremark. If you are requesting a new mail service prescription, and/or a refill on a transferred prescription, you must complete a CVS Caremark Mail Service Order Form for your prescriptions.

Q. Are there any medicines that cannot be transferred to CVS Caremark?

A. There are certain medicines that cannot be transferred to CVS Caremark or another mail service pharmacy. Even if you have existing refills for the following types of medicine, you must obtain a new prescription from your doctor and mail it to CVS Caremark along with a mail service order form.

- Controlled Substances (If you are not sure if this pertains to you, please consult your doctor.)
- Compound Medicines

You will also need to obtain a new prescription for any expired prescriptions or for prescriptions that have no refills remaining

Q. How do I get a new mail service prescription filled through CVS Caremark?

A. For new maintenance medicines, ask your doctor to write two prescriptions:

- One, for up to a 90-day supply, plus any appropriate refills. This is for your order through CVS Caremark
- The other, for up to a 30-day supply, to be filled immediately at a CVS Caremark participating retail network pharmacy for use until you receive your prescription order from CVS Caremark. Complete a mail service order form and send it to CVS Caremark, along with your original prescription(s) and the appropriate copayment for each prescription. Be sure to include your original prescription, not a photocopy.

You must mail in a CVS Caremark Mail Service Order Form the first time you request a new prescription through the CVS Caremark Mail Service Program. The automated refill service at 844.432.0704 and www.caremark.com are not available to you until we process your first prescription order.

Q. Where do I send my prescription order?

A: Beginning January 1, 2017, all refill requests on transferred prescriptions and new prescription orders should be submitted to CVS Caremark. Send your order and the appropriate copayment to the pre-printed mailing address on the CVS Caremark Mail Service Order Form. Forms are available in your CVS Caremark Welcome Kit and on our website at www.caremark.com. You will also receive a new CVS Caremark Mail Service Order Form with each prescription order.

Q. How do I pay for my prescriptions?

A. While we prefer payment by credit card, you can also make payment by check or money order. For credit card payments, simply include your Visa®, Discover®, MasterCard®, or American Express® number and expiration date in the space provided on the CVS Caremark Mail Service Order Form. Please note, that although your prescriptions from a previous vendor may transfer to CVS Caremark, privacy laws do not permit personal credit card information to be transferred.

Q. When will I receive my prescription?

A. You can expect to receive your prescription approximately 10-14 calendar days after CVS Caremark receives your order. Remember, you may experience a delay in receiving your prescription if you submit a request for a refill on a transferred prescription within the first 10 days after the date

of the transition.

Q. What should I do if I have a prior authorization that expires after December 31, 2016?

A. If you have a prior authorization that expires after December 31, 2016, Express Scripts will transfer the authorization to CVS Caremark along with the original expiration date. Questions related to an authorizations can be directed to Pharmacy Member Services at 844.4632.0704.

Q. Where can I find more information about prescription saving opportunities?

A. Go to Caremark.com and create a member profile to access pharmacy claims history, order refills at CVS pharmacies, find a network pharmacy, or find lower cost medications covered on the IU Health Plans formulary. You can also manage your prescriptions on the go with the CVS Caremark mobile app.

2017 Benefit and Formulary FAQ

Q. Who should I call if I have any pharmacy benefit related questions?

A. If you have pharmacy related questions, ranging from copays, coinsurance, prior authorizations, less expensive options, and anywhere in between, please call Pharmacy Member Services at 844.432.0704 starting January 1, 2017. Also be sure to refer to www.iuhealthplans.com or www.caremark.com for additional benefit information.

Q. What is the Mandatory Generic program?

A. Mandatory Generic is a program that encourages the use of generic medicines, which are safe and effective. If a brand medicine is filled when a generic is available, the member pays the brand copay/coinsurance in addition to the difference in cost between the brand and generic.

Q. What is a formulary?

A. A formulary is a listing of medicines that are covered by your pharmacy benefits. Formulary medicines are divided into tiers which determine the amount of coverage for that particular medicine.

Q. Where can I find the drug formulary for 2017?

A. All benefit information for the 2017 pharmacy and health benefits including the formulary can be found at www.iuhealthplans.com or www.caremark.com.

Q. What if I take a medicine that is not listed on the formulary?

A. Medicines that are not listed on the formulary are not covered by the plan because there are preferred options that are on the formulary and should be utilized first. Please call 844.432.0704 with any questions related to the formulary and preferred alternative therapies. We can work with your prescriber to be sure we have all necessary information of previously tried medicines documented.

Q. What if I take a medicine that requires Step Therapy?

A. Step Therapy is a program that asks members to try generic medicines before brand medicines of the same class. The program follows clinical guidelines and is in place for fourteen classes of medicines to ensure appropriate utilization.

- For a listing of medicines that require Step Therapy, please refer to the formulary and information found at www.iuhealthplans.com or www.caremark.com or call IU Health Pharmacy Benefits at 844.432.0704.

Q. What if I take a medicine that requires Prior Authorization?

A. For those medicines listed on the formulary as Prior Authorization, a request is required from your prescriber. This request is then evaluated based on clinical, safety, and dosing information.

- For a listing of medicines that require a Prior Authorization, please refer to the formulary and information found at www.iuhealthplans.com or www.caremark.com.
- Please call 844.432.0704 with any questions related to Prior Authorizations