



Transitioning to Express Scripts

Frequently Asked Questions

We're pleased to announce that Express Scripts will be managing your prescription plan. We care about your health and work to make medications safer and more affordable. We encourage you to take advantage of the services and resources available to you to help you and your dependents manage your pharmacy benefit. We look forward to serving you soon!

GENERAL INFORMATION

Q: How can I contact Express Scripts?

A: For questions or information about your prescription plan, **please register and log in anytime on or after your plan effective date at express-scripts.com**. You can also call Express Scripts at the toll-free number on your member ID card.

WELCOME MATERIALS

Q: When will I receive a new member ID card?

A: Your new member ID card will be sent prior to your new plan start date. (Please note that the member ID card will cover all your dependents. Separate ID cards for dependents won't be issued.) Please show your new member ID card to your pharmacist when filling a prescription for yourself or a covered family member.

On or after your plan effective date, you'll also be able to access your member ID card anytime from your mobile device if you download the Express Scripts® mobile app. In addition, you can print a member ID card at express-scripts.com.

PRESCRIPTION COVERAGE

Q: How do I find an in-network pharmacy?

A: Please see the "**Pharmacy Network List**" document on this pre-enrollment site or go to express-scripts.com on or after your plan effective date.

Q: Are generics safe?

A: Yes. FDA-approved generic medication—like brand-name medications—must meet the same standards of quality and purity established by the U.S. Food and Drug Administration (FDA) to help ensure their safety and effectiveness, and generics usually cost less. Generic versions approved by the FDA have the same active ingredients as their brand-name counterparts, and they're equal in strength and dosage. Sometimes, drug manufacturers use different inactive ingredients, such as fillers and dyes, which may affect a generic medication's shape, color, size or taste.

Q: Why should I consider generics or preferred brand-name medications?

A: You may save money by taking generics or preferred brand-name medications, because they usually cost less under your plan than nonpreferred brand-name medications. Many new generics have become available over the past year. If you're taking a nonpreferred medication, ask your doctor if a lower-cost generic or preferred brand medication would be the right option for you.

Q: How do I know whether my medication is covered or if there's a generic equivalent?

A: To find coverage and pricing details or see if your medication has a generic equivalent, register or log in at [express-scripts.com](https://www.express-scripts.com) on or after your plan effective date. Then, choose **Price a Medication** from the menu under **Prescriptions**. After you look up a medication's name, you'll see cost and coverage information on the results page.

Q: How do I know which medications are preferred?

A: Your preferred medication list contains thousands of commonly prescribed medications. To see if a medication is covered on your medication list, see the list of preferred drugs on this pre-enrollment website. You can log in at [express-scripts.com](https://www.express-scripts.com) on or after your effective date and select **Price a Medication** from the menu under **Prescriptions**. Enter your medication name and click **Search**. If your drug isn't preferred, talk with your doctor to identify an appropriate alternative that will effectively treat your condition.

Q: How can I calculate my out-of-pocket cost for a preferred or a nonpreferred medication?

A: After your coverage begins, there's a tool on [express-scripts.com](https://www.express-scripts.com) called Price a Medication that will help you calculate the estimated cost of a prescription medication. Register or log in at [express-scripts.com](https://www.express-scripts.com) and click on **Price a Medication** in the menu under **Prescriptions**. Enter your medication name and view cost and coverage information on the results page. The Price a Medication tool is also available on the Express Scripts® mobile app.

Note: The Price a Medication calculator doesn't imply a guarantee of coverage, as covered products or categories are subject to individual plan restrictions and/or limitations. The Price a Medication tool displays cost and coverage information for the current calendar year.

Q: Will I need to obtain a new prescription?

A: No, you will not for prescriptions filled at a retail pharmacy. If you have refills remaining with your current home delivery pharmacy, in most cases, you won't need a new prescription. Your remaining refills should transfer automatically to Express Scripts® Pharmacy. Once this happens, you'll be able to refill them online, by mail or by phone. If you are due a refill within the first few days of your plan start date, please request a refill from your current home delivery pharmacy at least 2 weeks before your supply runs out. Refer to the **"Getting Started with Home Delivery"** information sheet on this pre-enrollment site for more information on submitting prescriptions for home delivery.

SPECIALTY MEDICATIONS

Q: What's a specialty medication?

A: Some prescription medications are called "specialty medications," and they're used to treat complex, chronic health conditions, such as multiple sclerosis or rheumatoid arthritis. These medications usually have to be stored or handled in special ways.

Q: Is there an extra cost to use Accredo's specialty pharmacy services?

A: No. As an Express Scripts specialty pharmacy, Accredo is part of your prescription plan.

Q: Can I order all my medications from Accredo?

A: No. Accredo dispenses only specialty medications.

Q: I currently use a specialty medication that I get through the mail. How do I continue to fill my specialty prescription?

A: Please see the **"Getting to Know Your Specialty Pharmacy"** brochure and the **"Commonly Prescribed Specialty Medications"** on this pre-enrollment site.

PRIOR AUTHORIZATION

Q: What's prior authorization (also known as coverage approval)?

A: Your plan may use coverage management programs to help ensure you receive the prescription medications you need at a reasonable cost. These programs include prior authorization, step therapy and quantity management.¹ Each program is administered by Express Scripts to determine whether your use of certain medications meets your plan's coverage requirements. In some cases, a coverage review may be necessary to determine whether a prescription can be covered under your plan.

If your prescription requires prior authorization, on or after your plan effective date, your doctor can initiate a coverage review by visiting our online portal, esrx.com/PA. Express Scripts will inform you and your doctor in writing of the coverage decision.

Q: Will my prior authorization (PA) information transfer to Express Scripts?

A: The PA may transfer. After your coverage begins, you can contact Express Scripts to verify whether your PA transferred.

PRIVACY INFORMATION

Q: Who has access to my prescription information?

A: Express Scripts has a strong commitment to your privacy. Express Scripts has established effective administrative and technical safeguards to protect the confidentiality of your prescriptions and other information and to secure this information from unauthorized or improper access, disclosure or use. In addition, Express Scripts does not sell individually identifiable information nor lists of members and their covered dependents to outside companies for solicitation or marketing purposes.

¹ The medications affected by this plan limit may change. To find out whether your medication's price is affected by these plan limits, log in at express-scripts.com and select Price a Medication under the Prescriptions menu. After selecting your medication, you'll see cost and coverage information on the results page. If you're a first-time visitor to our website, please take a moment to register and have your member ID number handy. If the cost of a medication at a retail pharmacy is lower than your plan's retail cost share, you won't pay more than the retail pharmacy's cash price, regardless of the number of times you purchase the prescription. In some cases, this price may be less than either your standard retail or mail cost share.