

## **Transition Notice**

### **What if my current prescription drugs are not on the formulary or have certain restrictions?**

#### New Members

As a new member to our plan, you may take drugs that are not listed on our formulary. You may also take drugs that require prior authorization, step therapy or have a quantity limit. In instances like these, you need to talk to your doctor about appropriate alternative therapies available on our formulary. If there are no appropriate alternative therapies on our formulary, you or your doctor may request a formulary exception. If the exception is approved, you will be able to obtain the drug you are taking for a specified period of time. While you are talking to your doctor to determine the right course of action for you, you may be eligible to receive a temporary 30-day supply (unless you have a prescription written for fewer days) of the non-formulary Part D medication (or the medication with Prior Authorization or Step Therapy requirements) anytime during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or for situations where your ability to get your drugs is limited, we will cover a temporary 30-day supply (unless you have a prescription written for fewer days) when you go to a network pharmacy. After your first 30-day transition supply, we may not continue to pay for these drugs under the transition policy.

If you are a resident of a long-term care facility, we will cover a temporary 31-day transition supply (unless you have a prescription written for fewer days). We will cover more than one refill of these drugs for the first 90 days you are a member of our plan. If you need a drug that is not on our formulary or your ability to get your drugs is limited, but you are past the

first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug (unless you have a prescription written for fewer days) while you pursue a formulary exception.

### Continuing Members

As a continuing member in the plan, you will receive the Annual Notice of Change (ANOC) and the upcoming year drug formulary by October 31st. You may notice that a formulary medication, which you are currently taking, is not on our upcoming year formulary. In this case, you need to talk to your doctor about appropriate alternative therapies available on our formulary.

While you are talking to your doctor to determine the right course of action for you, you may be eligible to receive a temporary 30-day transition fill of the non-formulary Part D drug anytime during the first 90 days of the new calendar year. If your doctor decides that there are no appropriate alternative therapies available on our formulary, you or your doctor may request a formulary exception beginning the new calendar year.

If you are a current member transitioning to a different level of care, you may be prescribed medications not on our formulary. In this instance, you need to talk to your doctor about appropriate alternative therapies available on our formulary. If there are no appropriate alternative therapies on our formulary, you or your doctor may request a formulary exception. If the exception is approved, you will be able to obtain the drug you are taking for a specified period of time. While you are talking to your doctor to determine the right course of action for you, you are eligible to receive a 31-day transition supply of the non-formulary Part D drug (or the drug with Prior Authorization or Step Therapy requirements) since you are transitioning to a different level of care.

If you have any questions about our transition policy or need help asking for a formulary exception, please call our Member Services.