



**THE  
EMPIRE  
PLAN**

# REPORTING ON

## Prescription Drugs

**NEW YORK STATE HEALTH INSURANCE PROGRAM (NYSHIP) for Empire Plan enrollees and their enrolled dependents, COBRA enrollees with their Empire Plan benefits and Young Adult Option enrollees**

The cost of prescription drugs is one of the fastest-growing components of the cost of health care in the United States and for The Empire Plan. Between 2005 and 2012, the average cost of a brand-name drug claim covered under The Empire Plan increased 136 percent while the average cost of a generic drug claim increased 46 percent. During that same time period, the Plan's total cost per covered individual for prescription drug claims increased 43 percent from \$1,113 to \$1,594 (see chart below).

Your prescription drug benefit is designed to help The Empire Plan manage drug costs and establish copayment levels that are more in line with the relative cost of various drugs to the Plan. While copayments have sometimes increased, the Plan continues to pay most of the cost of covered prescription drugs.

To keep your out-of-pocket costs for prescription drugs as low as possible, let your doctor know that your copayments are lower when you use generic and/or preferred brand-name drugs (see page 2 for details).

The Empire Plan Prescription Drug Program provides access to participating pharmacies, a mail service pharmacy and non-participating pharmacies nationwide. A Specialty Pharmacy Program is also available.

UnitedHealthcare insures and administers The Empire Plan Prescription Drug Program and partners with ESI/Medco Health Solutions, Inc. (Medco) for retail pharmacy network and mail pharmacy services (Medco Pharmacy).

### WHAT'S INSIDE

<b>Empire Plan Prescription Drug Costs: 2005 vs. 2012*</b>			
	<b>2005</b>	<b>2012</b>	<b>% Change</b>
Average cost to Plan per brand-name drug claim	\$160.79	\$379.62	136%
Average cost to Plan per generic drug claim	\$24.15	\$35.18	46%
Average annual cost to Plan per covered individual	\$1,113	\$1,594	43%

\*Source: Employee Benefits Division, March 2013.

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This issue of *Reporting On* is for information purposes only. Please see your doctor for diagnosis and treatment. Read your plan materials for complete information about coverage.

### Three Copayment Levels

The Empire Plan Prescription Drug Program has three levels of copayments. Your copayment amount depends on the drug, the quantity supplied and where the prescription is filled. A list of copayment amounts can be found in your *Empire Plan At A Glance* and *Empire Plan Certificate Amendments*.

### Level 1 Drugs

Level 1 drugs have the lowest copayment and include most generic drugs and certain brand-name drugs. Generic drugs have the same active ingredients, strength and dosage form (pill, liquid or injection) as their brand-name counterparts. The U.S. Food and Drug Administration (FDA) approves generic drugs for safety and effectiveness.

Other manufacturers can offer generic drug versions when the patent protecting a brand-name drug expires. Generic drugs are usually identified by chemical names. For example, omeprazole is the generic or chemical name for the brand-name drug Prilosec®.

Generic medications may look different in color or shape from their corresponding brand-name medications. And, when several different companies manufacture the same generic drug, the drug's appearance may differ from one manufacturer to another.

**Note:** If you and your doctor agree on a generic drug produced by a specific manufacturer to treat your condition, be sure to ask your doctor to write your prescription for that specific generic drug. If you have questions about generic drugs, ask your doctor or pharmacist.

### Level 2 and Level 3 Drugs

Brand-name drugs are given names by their manufacturers. The manufacturers' cost of research, development and marketing are often passed on to consumers in the form of higher priced drugs.

- Level 2 drugs have a mid-range copayment and include preferred or compound drugs that have been selected because of their overall health care value.
- Level 3 drugs have the highest copayment and include non-preferred drugs. In many cases Level 3 drugs have a generic equivalent and/or one or more preferred alternatives.

Your copayment for a Level 1 drug is lower than for a Level 2 drug. Your copayment is highest for a Level 3 drug. The Empire Plan gives participating providers the Plan's prescription drug list and encourages them to prescribe Level 1 and Level 2 drugs when medically appropriate. Remind your health care provider that you have lower copayments for Level 1 and Level 2 drugs.

### What's New with The Empire Plan

To keep enrollees informed of any changes to their Empire Plan benefits, the Employee Benefits Division posts new information on the New York State Department of Civil Service web site at <https://www.cs.ny.gov>.

Select Benefit Programs, then NYSHIP Online and follow the prompts to the NYSHIP Online homepage. Click on What's New? to find an overview of the most current Empire Plan topics.

Since you need to be aware of prescription drug benefit changes as soon as they occur, the web site is the most up-to-date resource. For example, if a manufacturer takes a drug off the market or the FDA approves a new drug for treatment, this information will appear on the What's New? page. There are also links to up-to-date lists of drugs that require prior authorization, drugs that are part of the Specialty Pharmacy Program and drugs that are part of the Brand for Generic Program.

Be sure to check this page for any new information regarding The Empire Plan.

## MANDATORY GENERIC SUBSTITUTION

If your prescription is written for a covered brand-name drug that has a generic equivalent, mandatory generic substitution will apply unless the brand-name drug has been placed on Level 1. You will pay the Level 3 copayment plus the difference in cost between the brand-name and generic drug (ancillary charge), not to exceed the full cost of the drug.

If your doctor believes it is medically necessary for you to have a covered brand-name drug that has a generic equivalent, your doctor will indicate Dispense As Written (DAW) on the face of the prescription. To appeal a generic substitution requirement, have your prescribing physician call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose the Prescription Drug Program.

If your appeal is granted, you can fill your prescription at a participating retail pharmacy or through the mail service pharmacy (Medco Pharmacy) and pay only the applicable Level 3 copayment; the ancillary charge will not apply. (**Note:** You may not appeal the level of a drug or its applicable copayment. The exclusion of a drug under The Empire Plan Flexible Formulary also may not be appealed.)

Certain drugs are exempt from the generic substitution requirement. You are responsible for only the applicable Level 3 copayment; you do not pay the ancillary charge for these drugs.

See your *Empire Plan Reports* and *Certificate Amendments* for details about generic substitution appeals and for specific drugs exempt from generic substitution.

### Did You Know...

Generics are available for the following drugs:

- Atacand HCT<sup>®</sup> – a drug used to treat high blood pressure. The generic for Atacand HCT<sup>®</sup> is candesartan/hydrochlorothiazide.
- Avapro<sup>®</sup> – a drug used to treat high blood pressure and nephropathy in Type II diabetic patients. The generic for Avapro<sup>®</sup> is irbesartan.
- Diovan HCT<sup>®</sup> – a drug used to treat high blood pressure. The generic for Diovan HCT<sup>®</sup> is valsartan/hydrochlorothiazide.
- Lexapro<sup>®</sup> – a drug used for the treatment of depression and generalized anxiety disorder. The generic for Lexapro<sup>®</sup> is escitalopram.
- Plavix<sup>®</sup> – a drug that prevents blood clots after a recent heart attack or stroke. The generic for Plavix<sup>®</sup> is clopidogrel.
- Singulair<sup>®</sup> – a drug used for the treatment of asthma and allergic rhinitis. The generic for Singulair<sup>®</sup> is montelukast.

### Coming Soon...

The following drugs are expected to become available as a generic in 2013:

- Aciphex<sup>®</sup> – a drug used for the treatment of ulcers and gastroesophageal reflux disease. The generic for Aciphex<sup>®</sup> will be rabeprazole.
- Atacand<sup>®</sup> – a drug used for the treatment of high blood pressure and heart failure. The generic for Atacand<sup>®</sup> will be candesartan.
- Cymbalta<sup>®</sup> – a drug used for the management of fibromyalgia and neuropathic pain associated with diabetic peripheral neuropathy. The generic for Cymbalta<sup>®</sup> will be duloxetine.
- Diovan<sup>®</sup> – a drug used for the treatment of high blood pressure and heart failure. The generic for Diovan<sup>®</sup> will be valsartan.
- Zomig<sup>®</sup> – a drug used for the acute treatment of migraines in adults. The generic for Zomig<sup>®</sup> will be zolmitriptan.

### The Flexible Formulary Drug List

The Empire Plan Prescription Drug Program uses a Flexible Formulary to provide enrollees and the Plan with the best value in prescription drug spending.

The Empire Plan Flexible Formulary uses a three level copayment schedule to encourage enrollees to use covered generic and preferred brand-name drugs. Covered brand-name prescription drugs may be assigned to different copayment levels based on clinical judgment and value to the Plan.

All drugs included on the Flexible Formulary have been approved by the FDA. The list is developed by a committee of pharmacists and physicians and is subject to change in January of each year. The new list is posted online each year by December 1. A drug may be placed on a different tier mid-year when such changes are advantageous to The Empire Plan.

The most commonly prescribed covered generic and brand-name prescription drugs on the list can be found on the NYS Department of Civil Service web site at <https://www.cs.ny.gov>. Select Benefit Programs, then NYSHIP Online and follow the prompts to the NYSHIP Online homepage. Click on Using Your Benefits to find the Flexible Formulary.

The Flexible Formulary Drug List will help you find out if your prescription is for a generic or a preferred drug. However, it is not a complete list of all prescription drugs covered under The Empire Plan. Call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose the Prescription Drug Program for more information.

### Exclusions

In some cases, drugs may be excluded from coverage if a therapeutic equivalent or over-the-counter drug is available. These exclusions cannot be appealed. Refer to the New York State Department of Civil Service web site at <https://www.cs.ny.gov> for a complete list of excluded drugs.

### Prior Authorization

Certain medications require prior authorization for coverage under The Empire Plan Prescription Drug Program. When one of these medications is prescribed for you, the Prescription Drug Program will require clinical information to determine coverage. If you are prescribed a medication that requires prior authorization, have your physician contact The Empire Plan Prescription Drug Program to begin the authorization process. If a medication you are taking changes to require prior authorization, you will receive a notice in advance of the effective date.

Refer to your *NYSHIP General Information Book* and *Empire Plan Certificate* for a list of drugs that require prior authorization. For the most recent list of Prior Authorization drugs, go the NYS Department of Civil Service web site and follow the prompts to access NYSHIP Online. Click on Find A Provider then scroll to Empire Plan Drugs that Require Prior Authorization under the Prescription Drug Program.

### For More Information

For more prescription drug information, visit the web site or call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and choose the Prescription Drug Program.

### Brand for Generic

Under the Enhanced Empire Plan Flexible Formulary (available to employee groups that have settled their contracts and retirees), the Brand for Generic feature saves you money on certain brand-name drugs that have a new generic equivalent available. When the generic version of a drug first becomes available, the cost to the Plan is often higher than the cost of the brand name version. This feature allows The Empire Plan to place a brand-name drug on Level 1 (the lowest copayment level) and place the generic equivalent on Level 3 (the highest copayment level) or exclude it. These placements are for a limited time, typically six months, and may be revised mid-year when such changes are advantageous to The Empire Plan.

When you go to the pharmacy to fill your prescription, a message will prompt the pharmacist to dispense the lower cost brand-name version at the Level 1 copayment instead of the Level 3 generic version and higher copayment.

For more information and to find out about recent additions to the Brand for Generic Program, refer to the New York State Department of Civil Service web site at <https://www.cs.ny.gov>. Select Benefit Programs, then NYSHIP Online and follow the prompts to the NYSHIP Online homepage. Click the link for What's New?

## SPECIALTY PHARMACY PROGRAM

The Empire Plan Specialty Pharmacy Program offers enhanced services to individuals using specialty drugs. Most specialty drugs will only be covered when dispensed by The Empire Plan's designated specialty pharmacy, Accredo, a subsidiary of ESI/Medco. Prior authorization is required for some specialty drugs.

Specialty drugs are used to treat complex conditions and usually require special handling, special administration or intensive patient monitoring. The major drug categories include, but are not limited to, drugs for rheumatoid arthritis, cancer, multiple sclerosis, human growth hormone deficiency, deep vein thrombosis and anemia. When Accredo dispenses a specialty medication, the applicable mail service copayment will be charged.

The Program provides enrollees with enhanced services that include disease and drug education, compliance management, side-effect management, safety management, expedited and scheduled delivery of your medications at no additional charge, refill reminder calls and all necessary supplies, such as needles and syringes applicable to the medication.

When enrollees begin a therapy on one of the drugs included in the Program, a letter is sent describing the Program and any action necessary to participate in it.

The complete list of specialty drugs included in the Specialty Pharmacy Program is available on the New York State Department of Civil Service web site at <https://www.cs.ny.gov>. Select Benefit Programs, then NYSHIP Online and follow the prompts to the NYSHIP Online homepage. Click on Find a Provider, then scroll down to Prescription Drug Program and select Specialty Pharmacy Program. Each of these drugs can be ordered through the Specialty Pharmacy Program using the Medco Pharmacy mail order form.

To request mail service envelopes, refills or to speak to a specialty-trained pharmacist or nurse regarding the Specialty Pharmacy Program, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447). Choose the Prescription Drug Program and ask to speak with Accredo, 24 hours a day, seven days a week.

### Dual Coverage

If you are covered under more than one insurance plan for prescription drugs, or are covered under two Empire Plan policies, it is important that you verify with your dispensing pharmacy that the correct plan is being used as the primary coverage. By making sure your claims are processed in the correct order initially, your secondary reimbursement will be processed more efficiently.

Generally, the plan that covers a person as an enrollee is primary over a plan that covers the same person as a dependent. When the same dependent child is covered under two plans, the plan of the parent whose birthday falls earlier in the year is usually primary. More information on determining primary and secondary coverage is found in your *NYSHIP General Information Book* and *Empire Plan Certificate*.

### Through the Mail Service Pharmacy

The most cost-effective way to receive your prescription drugs is through the mail service pharmacy. When you fill your covered prescription drugs through The Empire Plan mail service pharmacy (Medco Pharmacy), you can order up to a 90-day supply shipped to your home. Once your prescription is on file at the mail service pharmacy, you can order refills by mail, phone or online (see below). If you take prescription medications on a long-term basis, the mail service pharmacy can save you time and money.

You can print the Medco Pharmacy mail order form from the New York State Department of Civil Service web site at <https://www.cs.ny.gov>. Select Benefit Programs, then NYSHIP Online and follow the prompts to the NYSHIP Online homepage. Select Using Your Benefits, then select Forms, scroll down and choose Medco Pharmacy mail order form.

Or, you can call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose the Prescription Drug Program.

The address for the mail service pharmacy is: Medco Pharmacy, P.O. Box 6500, Cincinnati, OH 45201-6500. Once a prescription is on file at the mail service pharmacy, you can order refills either online or by calling The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) 24 hours a day, seven days a week.

### At a Participating Pharmacy

When you use your Empire Plan Benefit Card at an Empire Plan participating pharmacy, including the mail service pharmacy, you pay only your copayment for covered prescription drugs. For most brand-name drugs with a generic equivalent, you will also pay the ancillary charge (see Mandatory Generic Substitution, page 3).

You can fill the prescription for a supply of up to 90 days and receive refills for up to one year from the date the prescription is written. One copayment covers up to a 90-day supply.

To find an Empire Plan participating pharmacy, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose the Prescription Drug Program. You can also locate a participating pharmacy online through the New York State Department of Civil Service web site at <https://www.cs.ny.gov>. Select Benefit Programs, then NYSHIP Online and follow the prompts to the NYSHIP Online homepage. Click on Find a Provider, then scroll down to Prescription Drug Program and select The Empire Plan Prescription Drug Program web site link. Choose Click here for Pharmacy Locator to generate a list of participating pharmacies in your area, using your zip code.

### Cost-saving Ideas

- Talk with your doctor about using over-the-counter drugs. Prescription drugs occasionally move to the over-the-counter market and are then available without prescriptions. An over-the-counter drug might be a cost-effective alternative to your prescription medication.
- When your doctor starts you on a new maintenance medication, you may want to have your prescription filled for a 30-day supply to ensure that the prescription medication is right for your condition, before spending a higher copayment on a 31- to 90-day supply. Note: You may be required to fill two 30-day supplies of certain maintenance medications before a supply for greater than 30 days will be covered. Please see your *Empire Plan Reports and Certificate Amendments* for more details regarding the New to You Prescription Program.
- Ask your agency Health Benefits Administrator if a Health Care Spending Account is available to set aside part of your salary before taxes to pay for health-related expenses or go to [www.flexspend.ny.gov](http://www.flexspend.ny.gov).
- Check with your doctor to see if The Empire Plan Prescription Drug Half Tablet Program is appropriate for you. See page 8 for Program details.
- Don't use The Empire Plan Prescription Drug Program for drugs related to a workers' compensation injury. These claims should be covered in full by your workers' compensation carrier.

### At a Non-participating Pharmacy

If you use a non-network pharmacy to fill a prescription, or pay the full amount for your prescription at a network pharmacy (instead of using your Empire Plan Benefit Card) you will be required to pay the entire cost to fill your prescription upfront. To be eligible for reimbursement, you must fill out a claim form and submit it with any receipts from the pharmacy. In almost all cases, you will not be reimbursed the total amount you paid for the prescription and your out-of-pocket expense may exceed the usual copayment amount. To reduce your out-of-pocket expenses, use your Empire Plan Benefit Card and network pharmacies whenever possible.

Several factors affect the amount of your reimbursement. If your prescription was filled with:

- A covered generic drug, a brand-name drug with no generic equivalent, or insulin, you will be reimbursed up to the amount the Program would reimburse a network pharmacy for that prescription as calculated using the Program's standard reimbursement rate for network pharmacies less the applicable copayment.
- A covered brand-name drug with a generic equivalent (other than drugs exempt from mandatory generic substitution), you will be reimbursed up to the amount the Program would reimburse a network pharmacy for filling the prescription with that drug's generic equivalent as calculated using the Program's standard reimbursement rates for network pharmacies less the Level 3 copayment.

You are responsible for the difference between the amount charged and the amount reimbursed.

These reimbursement rules also apply if you pay the full amount for your prescription at a participating pharmacy instead of using your Empire Plan Benefit Card.

### Pharmacy Limitations

The Empire Plan does not cover vaccines/immunizations administered by a pharmacist or purchased from a pharmacy. You will be responsible for the entire cost of any vaccine supplied by a pharmacy. Check your plan materials or call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) to find out where you are covered for vaccines.

### Pharmacy Processing Information

Some pharmacies may not be familiar with The Empire Plan. If you need to fill a prescription at a pharmacy that is not familiar with The Plan, you may be asked to provide additional information. Be prepared to provide the nine-digit Empire Plan enrollee ID number (listed on your benefit card) and the following information:

Bin number: 610014

Group: UH0712959

PCN: Blank

## HALF TABLET PROGRAM

### Lower Your Prescription Medication Cost

The Empire Plan Prescription Drug Half Tablet Program is a voluntary program that allows you to reduce the out-of-pocket cost of select generic and brand-name drugs you take on a regular basis by:

- Allowing your physician to write a prescription for twice the dosage of your medication and half the number of tablets (see example),
- Having you split them in half using the free pill splitter that The Empire Plan will provide and
- Instructing the participating retail pharmacy or the mail service pharmacy (Medco Pharmacy) to automatically reduce your copayment to half the normal charge.

### Splitting Tablets Is Easy

Using a tablet splitter makes splitting your medication easy. Never attempt to split tablets with anything other than a device designed specifically for that purpose. **Not all medications are appropriate for tablet splitting. Be sure to consult your doctor before splitting any prescribed medication.**

### Order Your FREE Tablet Splitter

The Empire Plan will offer one free tablet splitter to each enrollee who is currently prescribed a drug that is covered as part of The Empire Plan Prescription Drug Half Tablet Program. If you are on a medication eligible for The Empire Plan Prescription Drug Half Tablet Program, you will receive a welcome letter with details on how to order your free tablet splitter.



### Half Tablet Medications

For a list of drugs eligible for The Empire Plan Prescription Drug Half Tablet Program, visit the New York State Department of Civil Service web site at <https://www.cs.ny.gov>. Select Benefit Programs, then NYSHIP Online and follow the prompts to the NYSHIP Online homepage. Click on Find a Provider, then scroll down to Prescription Drug Program and select Empire Plan Prescription Drug Half Tablet Program.

### Example:

#### Old Prescription:

Crestor 10 mg

Quantity: 30

Dosage: Take one tablet every morning

Copayment: \$25

#### New Prescription:

Crestor 20 mg

Quantity: 15

Dosage: Take half tablet every morning

Copayment: \$12.50



Prescription drugs can work wonders in curing ailments and keeping you healthy – often at a cost much lower than surgery or other procedures. But they may also cause serious harm if taken in the wrong dosage or in combination with another drug or drugs.

The Empire Plan Prescription Drug Program includes a Drug Utilization Review (DUR) program to check your prescriptions for possible inappropriate drug consumption, medical conflicts or dangerous interactions.

When you use your Empire Plan Benefit Card at a network or mail service pharmacy and the pharmacist enters the information into the computer, the computer system will review your recent Empire Plan Prescription Drug Program medication history. The review assures that:

- Your prescription is written for the recommended daily dose.
- You are not already taking another drug that might conflict with the newly prescribed drug.
- Your age has been taken into account in prescribing this medication.
- Your prescription drug record does not indicate a medical condition that might be made worse by this drug.
- The quantity being dispensed is consistent with your doctor's dosage instructions.

If a possible problem is found, a warning message will be flashed to your pharmacist who may then talk with you and your doctor. Once any issues are resolved, the appropriate medication can be dispensed.

The DUR safety process also has a “refill too soon” component for all claims submitted under The Empire Plan Prescription Drug Program. When a claim is processed, the last 180 days of your prescription drug claim history is reviewed by the computer system.

The claim will be rejected if, based on the prescription dosage, you should have consumed less than 75 percent of the medication on a cumulative basis over that time period. When a claim is rejected, the pharmacist will receive a message indicating the date when you can refill your prescription.

This confidential DUR process is designed to safeguard your health, and it may help your doctor make more informed decisions about your prescription drugs.

### Safeguard Your Prescription Drug Benefits

Nearly all prescription claims are transmitted electronically from your local or mail service pharmacy to The Empire Plan for payment. Take these important steps to guard against fraudulent use of your prescription drug benefit:

- Keep your insurance card in a safe place and do not share your Empire Plan ID number with others.
- When submitting a prescription to your pharmacy, make sure it includes the full name of the patient (spelled correctly and legibly), as well as his or her date of birth and home address.
- When picking up a prescription, make sure you or your representative signs for each one.
- You can ask your pharmacist for a printout of the prescription drugs processed under your Empire Plan coverage. This practice will ensure only those covered by your benefit are being provided prescriptions under your plan.

Empire Plan retirees and dependents, who are Medicare-primary on or after January 1, 2013, will be enrolled automatically in Empire Plan Medicare Rx. Each person will receive a unique ID number and Empire Plan Medicare Rx Card to use at the pharmacy.

- A one-month supply of your medication covers up to 31 days, and a long-term supply covers up to 90 days.
- Empire Plan Medicare Rx coverage includes a Formulary of Medicare Part D covered drugs and a Bonus Drug List of additional covered drugs.
- An ancillary charge applies only to certain medications on the Bonus Drug List.
- If Empire Plan Medicare Rx excludes a Part D drug you take or limits your coverage of a Part D drug, you or your doctor can request a coverage determination or make a medical necessity appeal. Drugs excluded from the Bonus Drug List are not subject to appeal or review, including medical necessity appeals.
- Prior authorization continues to be required for certain drugs. Call 1-877-7-NYSHIP (1-877-769-7447), press 4 and then press 1 to speak with an ESI/Medco customer care representative if you have questions.
- Certain covered medications may have restrictions. You may be required to try a specific drug before Empire Plan Medicare Rx will cover the drug your doctor has prescribed. Or, in some cases, the quantity of a drug that can be dispensed over a period of time may be limited. Also, you or your doctor may need to provide clinical information about your health to ensure your drug is covered correctly by Medicare.

- Prescriptions covered under Medicare Part B are covered under The Empire Plan's Medical/Surgical benefit and are excluded from Empire Plan Medicare Rx. Most pharmacies already know which Medicare program covers which drugs. You may be required to pay the 20 percent balance after Medicare at the pharmacy. Your claim will automatically cross-over to the Empire Plan Medical program and you will be reimbursed in full, about four weeks after the drug is dispensed.
- Once you qualify for Catastrophic Coverage, you pay the greater of a \$2.65 copayment for generic drugs and a \$6.60 copayment for brand-name drugs or five percent coinsurance, not to exceed your usual copayment.
- People with limited incomes may qualify for Extra Help to pay for their prescription drug costs. For more information about this Extra Help, contact The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447), your local Social Security office or [www.socialsecurity.gov](http://www.socialsecurity.gov), your state Medicaid office or call 1-800-MEDICARE (1-800-633-4227), 24 hours per day, seven days per week. TTY users should call 1-877-486-2048.

### Specialty Pharmacy

You may continue to fill your specialty medications through Accredo, but under Empire Plan Medicare Rx you now can obtain specialty medications at any network pharmacy where they are available. If Accredo dispenses your specialty drug, however, you also have access to the enhanced clinical services offered through The Empire Plan Specialty Pharmacy Program, including disease and drug education, compliance management, side-effect management and safety management. To speak to a specialty-trained pharmacist or nurse regarding the Specialty Pharmacy Program, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447), press 4 and then press 1 when prompted for Empire Plan Medicare Rx and ask to speak with Accredo, 24 hours a day, seven days a week.

**Reminder:** You can be enrolled in only one Medicare Part D plan at a time. If you enroll in another Medicare Advantage Plan that includes Part D coverage, Medicare will terminate your membership in Empire Plan Medicare Rx and, in some cases, from The Empire Plan completely (i.e., you will have no drug OR medical coverage under The Empire Plan).

## THERAPEUTIC RESOURCE CENTERS

Many people suffer from long-term conditions such as diabetes, high blood pressure, cancer, stomach issues, asthma or arthritis and need to take costly medications daily to maintain their health. The Empire Plan Prescription Drug Program offers a pharmacy benefit service called Therapeutic Resource Centers to help people with long-term conditions manage their prescription drugs in a safe and cost-effective manner.

The Therapeutic Resource Centers have specialist pharmacists with advanced training on the medications used to treat specific long-term conditions. They will review an individual's prescription drug history and can quickly identify potentially harmful drug interactions and alert the individual and his or her doctor immediately. Specialist pharmacists are also up to date on new drug therapies and the cost of medications and can provide information on more affordable, but equally effective treatment options.

To take full advantage of this program, you must fill your long-term prescriptions through Medco Pharmacy, The Empire Plan mail

service pharmacy. If you're taking medication for a long-term condition, ESI/Medco will automatically route your prescriptions to the Therapeutic Resource Center. After reviewing your prescription drug history, a specialist pharmacist will contact you to learn more about how your condition and medications personally affect you. They are available to talk with you – one on one, in private, 24 hours a day, seven days a week and will even talk with your doctor if appropriate.

This is a voluntary program with no additional costs. Filling your prescriptions through Medco Pharmacy, The Empire Plan mail service pharmacy, not only ensures that you receive personalized care from a specialist pharmacist, but it also provides you with the safety, savings and convenience of having medications delivered right to your home.

To find out more about Therapeutic Resource Centers, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose the Prescription Drug Program.

### Easy-Open Tops

For safety reasons, all prescriptions sent from the Medco Pharmacy have a tamper-proof top on the bottle. If you would prefer to use tops that are easier to open, please contact ESI/Medco and request that easy-open tops be sent with your prescription drug bottles. ESI/Medco representatives can be reached 24 hours a day, seven days a week at 1-877-7-NYSHIP (1-877-769-7447). Choose the Prescription Drug Program when prompted. Keep your supply of easy-open tops when you finish a bottle of medication. Additional tops will not be automatically sent with subsequent orders. Requests for additional tops can be noted on your Medco Pharmacy mail order form.

## WHERE TO FIND MORE INFORMATION

### By Telephone

You can reach The Empire Plan Prescription Drug Program toll free at 1-877-7-NYSHIP (1-877-769-7447) 24 hours a day, seven days a week. Callers who use a teletypewriter (TTY) device may call the Program toll free at 1-800-759-1089.

The Empire Plan has a dedicated phone line with an Interactive Voice Response (IVR) Unit to help answer your questions. Have your nine-digit health insurance identification number (located on your Empire Plan Benefit Card) or Social Security number (SSN)

ready when you call. After reaching the Prescription Drug Program phone line, state the reason you are calling. See the chart below for more information.

Purpose of Call	What to Say	Information Needed to Complete Request
Order a refill	"Refill"	Prescription number, credit card information
Check status of an order	"Order Status"	Prescription number and zip code
Locate a participating pharmacy	"Pharmacy Location"	Enrollee date of birth, zip code and nine-digit health insurance identification number or SSN
Verify your eligibility	"Eligibility"	Nine-digit health insurance identification number or SSN
Request forms for using the mail service pharmacy or for filing a paper claim	"Forms"	Indicate if you are requesting the Medco Pharmacy mail order form or paper claim form
Verify copayment	"Pricing"	Nine-digit health insurance identification number or SSN, name of drug, strength, and dosage form (liquid, capsule, tablet or cream)

If you are unable to get an answer to your questions, please stay on the line to speak with a representative.

### On the Web

Empire Plan enrollees have access to additional online resources on the ESI/Medco/UnitedHealthcare web site. From the Civil Service homepage, select Benefit Programs, then NYSHIP Online and follow the prompts to the NYSHIP Online homepage. Select Find a Provider, then scroll down to Prescription Drug Program and select Empire Plan Prescription Drug Program Web Site.

You can:

- Find forms to place a mail order, request a new prescription from your doctor, file a claim or designate a caregiver
- Refill a prescription
- Track your order
- Find generic drugs or less costly alternatives to medications
- View your retail and mail order prescription history

- Locate a pharmacy
- View prescription claim details, payment details and balances
- Use the online chat feature to ask a pharmacist questions about your medications

New York State Department of Civil Service, Employee Benefits Division, Albany, New York 12239 ▪ <https://www.cs.ny.gov>

It is the policy of the New York State Department of Civil Service to provide reasonable accommodation to ensure effective communication of information in benefits publications to individuals with disabilities. These publications are also available on the Department of Civil Service web site (<https://www.cs.ny.gov>). Check the web site for timely information that meets universal accessibility standards adopted by New York State for NYS Agency web sites. If you need an auxiliary aid or service to make benefits information available to you, please contact your agency Health Benefits Administrator. NYS and PE Retirees, NYS and PE COBRA Enrollees and Young Adult Enrollees: Contact the Employee Benefits Division at (518) 457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

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