

# Frequently Asked Questions

## AUSD Blue Shield Drug Card Plan for Members of the Alhambra Teachers Association - 9/23/08

### 1. **What is the AUSD Blue Shield Drug Card Plan?**

It is administered by Blue Shield of California, through Argus Health System, and has:

- No annual deductible
- A \$10 co-pay per prescription (both Brand or Generic drugs)
- No annual cap or lifetime maximum on the amount of prescription benefits
- Up to a 90-day supply
- No claim forms.

### 2. **What is a prescription co-payment?**

A prescription co-payment is the portion of the covered drug that you pay each time you fill a prescription (your medical plan pays the remainder). The co-payment for the AUSD Blue Shield Drug Card Plan is \$10 per prescription.

### 3. **How would the AUSD Blue Shield Drug Card Plan benefit ATA members?**

- Lower out of pocket costs
- The convenience of a drug card delivery system
- Deductibles no longer have to be met before obtaining the benefits
- Members would no longer have to submit claim forms for reimbursement
- The self insured AUSD Plan will pay less for the drugs keeping costs down

### 4. **What pharmacies accept the AUSD Blue Shield Prescription Card Plan?**

- Blue Shield has 5,792 pharmacies in California.
- There are 57 pharmacies in Alhambra, Monterey Park, and San Gabriel alone.
- All major chains are part of the Blue Shield Network including Costco, CVS, Rite Aid, Sav-On, and Walgreens.

### 5. **Would making this change to the AUSD Blue Shield Drug Card Plan change any other benefits of my Blue Shield medical plan?**

No, all other benefits of the ATA Blue Shield Indemnity Medical Plan would remain the same.

### 6. **Does the AUSD Blue Shield Prescription Card Plan offer the same prescription drug coverage that we currently have under Blue Shield?**

Yes, the same prescription drugs that are currently covered under our Blue Shield major medical 80/20 plan are also covered under the AUSD Blue Shield Prescription Card Plan. The AUSD Blue Shield Prescription Card Plan offers more extensive drug coverage than the "regular" Blue Shield Prescription Card Plan described on the Blue Shield web site. The AUSD Blue Shield Prescription Card Plan has an "Open" formulary that covers more prescribed drugs than the "regular" Blue Shield Prescription Card Plan.

### 7. **What is an "Open" Formulary?**

The AUSD Blue Shield Drug Plan is an "open" formulary plan. An "open" formulary plan, in addition to covering the generic and brand name drugs on the Blue Shield formulary, also covers non-formulary generic and brand name drugs. Non-formulary drugs need prior authorization just as required under our present prescription drug coverage. All the prescription drugs currently covered under our current Blue Shield major medical 80/20 plan are covered under the AUSD Blue Shield Prescription Card Plan.

# Frequently Asked Questions

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### **8. What is a drug formulary?**

The Blue Shield Drug Formulary is a comprehensive list of covered preferred generic and brand-name drugs. The formulary is developed by the Blue Shield Pharmacy and Therapeutics (P&T) Committee, whose voting members do not work for Blue Shield of California and are physicians and clinical pharmacists in community practice. The Committee also reviews and updates the formulary quarterly, to assist physicians in prescribing medically appropriate and cost-effective medications.

### **9. How do I know if a drug is on the Blue Shield Drug Formulary or Non-Formulary list?**

You can review the most updated drug formulary and non-formulary listing on the [blueshieldca.com](http://blueshieldca.com) web site by clicking on the *Pharmacy* tab, then selecting the *Drug Database & Formulary* and finally the *Drug Formulary* tab. Just as with the current Blue Shield prescription drug coverage, non-formulary drugs need prior authorization. If a non-formulary drug is not authorized you have the right to appeal.

### **10. Will changing to the AUSD Blue Shield Drug Card Plan require me to take generic drugs?**

No! The AUSD Blue Shield Drug Card Plan does not require that you take a generic drug in the place of a brand name drug.

### **11. Can I request a Brand Name drug?**

Yes! The way to guarantee a brand name will be dispensed is to have the doctor write "Brand Name Only" on the prescription.

### **12. Are new medications considered for inclusion in the formulary?**

Yes, newly FDA approved drugs are reviewed by the Blue Shield Pharmacy and Therapeutics committee on a quarterly basis.

### **13. Are there any exclusions on the AUSD Blue Shield Drug Card Plan?**

Yes. Listed below are some of the exclusions:

- Over the Counter (OTC) medications, except insulin; or prescription drugs which have an OTC equivalent
- Medications for cosmetic use
- Appetite suppressants and other weight loss drugs, except when medically necessary for the treatment of morbid obesity which is subject to prior authorization
- Compounded medications with formulary alternatives or those with no FDA-approved indications
- Dietary or nutritional products
- Medications for investigational or experimental use
- Replacement of lost, stolen, or destroyed medications

### **14. How often can my prescription be refilled?**

A medication can be refilled after 75% of the drug has been taken according to the written prescription, and as long as the physician has written for refills. If you're going on vacation or your doctor has increased your dosage, your pharmacy can call the Blue Shield Pharmacy Services department at (800) 535-9481 to request an authorization.

# Frequently Asked Questions

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- 15. I am going on vacation and will need an extra supply of medications, what should I do?**  
If your regular pharmacy is one that has affiliate stores nationwide, such as Walgreens or Rite-Aid, you can order a refill as you normally would from any store in that pharmacy chain if you have refills left on your prescription. If your prescription needs a refill while you are away on vacation, you or your pharmacy can contact Blue Shield's Pharmacy Services at (800) 535-9481 for an extra refill. You will be responsible for any additional copayments or other charges for the medications that may apply.
- 16. I had to pay out of pocket for my medication, how do I get reimbursed?**  
There are a few circumstances when you need to file for reimbursement of a prescription drug claim.
- If you have filled your prescription at a non-participating pharmacy, you can submit a completed claim form along with a detailed receipt. You will be reimbursed the cost minus the \$10 co-pay. Members can obtain additional claim forms by contacting the Member Services phone number listed on their Blue Shield ID card or through the AUSD Risk Management Office.
  - If you just joined the plan and did not receive a Blue Shield ID card during the first 30 days of membership and need a prescription, you may submit claims to Blue Shield for any covered medication obtained at a Blue Shield participating pharmacy.
- 17. How long does it take to process a pharmacy reimbursement claim?**  
Most Blue Shield member submitted claims are finalized within 21 days. You can usually expect to receive notification within three weeks of submitting your claim.
- 18. What can I do if a pharmacy reimbursement claim is rejected?**  
If a claim has been denied and you would like to appeal the claim denial, you can contact Blue Shield Member Services at the toll-free number on your ID card.
- 19. If ATA decides to go with the AUSD Prescription Drug Card what will the transition look like?**  
The transition will be as close to "seamless" as possible. You will receive a **new** Blue Shield ID card that will show "rx: Yes" on it, indicating your prescription drug card coverage. You should continue to receive covered drugs without having to repeat prior authorizations. The main change with the drug card will be that you will only pay a \$10 co-payment for each prescription.

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