



Providing access to the medications you need with the convenience you want



Your employer has partnered with RxBenefits to provide you and your dependents with pharmacy benefits. As part of RxBenefits' commitment to getting members the right medication at the right time, we offer clinical oversight of all member prescriptions. Part of that oversight includes requiring a Prior Authorization (or PA), a common practice by pharmacy benefit providers, before certain medications can be dispensed by your pharmacy. PAs ensure certain prescription drugs are used as approved by the Food and Drug Administration. This helps to make sure that your medications are safe, effective, and more affordable.

What is a Prior Authorization?

A Prior Authorization is a required approval from a health plan before certain prescriptions will be covered. PAs are used to confirm some medications are being prescribed for their intended use based on FDA approval guidelines and standards of care.

What do I do if my medication requires a Prior Authorization?

When you're prescribed certain medicines, your pharmacist may tell you it requires a PA. That means we need more information to make sure the prescribed medicine will work well for you and your condition, and that it's covered by your pharmacy benefit. Your prescriber has access to the required information to submit the PA request.

If your medication requires a PA, your prescriber may choose to switch medications, in which case they would not submit a PA and a new medication would be sent to your pharmacy. If they do not want to switch your medication, their office will need to initiate a PA.

What is the Prior Authorization process and how long does it take?

A PA typically takes 3 - 7 business days to process. On occasion, we may need additional information from your doctor to process the PA. This countdown starts once all the information needed is received, so if we need more information, the turnaround time resets once that information is received.

If the PA is approved, you will be able to pick up your prescription at the pharmacy or have it delivered to your home. Whether a PA is approved or not, a notification letter will be sent within 2 weeks of the decision.

What if my Prior Authorization is denied?

Contact your doctor to discuss the next steps. If you, or your doctor, disagrees with the decision to not cover a medication during the initial review, you may appeal this decision for a second look. Your doctor may be asked to provide additional information related to your condition and the reason for the medication being prescribed.

Introducing My RxBenefits:

Signing up for My RxBenefits gives you instant access to your pharmacy plan like never before. You'll have the information you need on your plan and prescriptions at your fingertips.

And when you sign up for My RxBenefits, you'll have access to real time PA updates for certain medications and be kept up to date on your PA status. You'll know right away when a decision has been made on your PA – no more waiting for a letter to arrive.

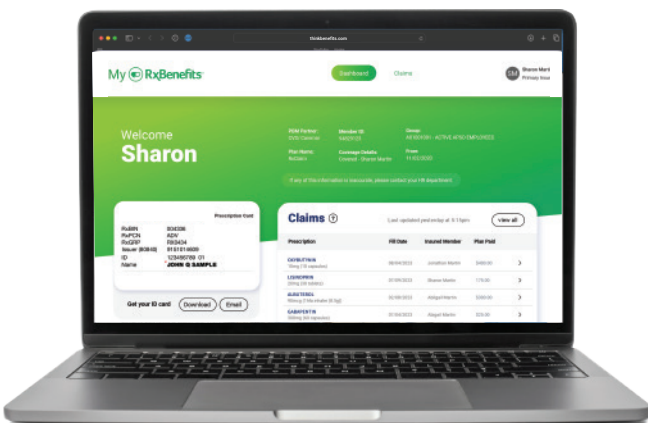


What is My RxBenefits?

My RxBenefits is our new digital tool that provides access to your pharmacy plan information 24 hours a day, 7 days a week, using the device of your choice.

With My RxBenefits you can:

- Access real-time prior authorization status, including explanations of determinations
- View 18 months of previous PA activity and pharmacy claims
- View, download, and email copies of ID cards
- Manage your communication preferences



Enhanced Prior Authorization process for members taking anti-inflammatory or dermatological treatments

Finding the best option, the first time

There are many options for treatments of anti-inflammatory and dermatological conditions, a number of which may work equally well. Some treatments may be covered by your plan while others may not, so we work directly with your doctor to find the right medication for you based on your plan.



- 1 Your new prescription requires a PA, which your doctor submits to RxBenefits.
- 2 You log into My RxBenefits and can see the status of the PA. We recommend selecting your preferred method of communication so RxBenefits can reach out to you as your PA is processed.
- 3 As part of the process, RxBenefits and your doctor may agree to update your medication from the one your doctor originally prescribed. If that happens, you'll get a text message or email (depending on your communication preferences) letting you know.
- 4 You can log into My RxBenefits and see the new medication that was approved. Your pharmacy will process your prescription and let you know when it's ready to be picked up. *

Finding a better option when your current treatment is not working

Members taking anti-inflammatory or dermatological agents for an extended period may notice their medication isn't working as well as it did initially. This can happen for a few reasons, including a change in your body's reaction to the medication. In this situation, our goal is to find an alternate treatment that provides the best clinical outcome for you.

Sign up for My RxBenefits at:
<http://member.rxbenefits.com>

- 1 An RxBenefits pharmacist may contact you to understand how your medication is working. Before they do, you'll receive a text message or email letting you know to expect their call.
- 2 If your condition is not managed, RxBenefits and your doctor may agree to update your medication. If that happens, you'll be notified through your preferred communication channel.
- 3 You can log into My RxBenefits and see the new medication you've been prescribed. Your pharmacy will process your prescription and let you know when it's ready to be picked up.*

**Note: You will still get a letter in the mail with details of your Prior Authorization outcome.*

Questions?

Contact RxBenefits Member Services

800.334.8134

7 a.m. to 8 p.m. CT Monday-Friday
or any time at customer care@rxbenefits.com

