

Western Health Advantage contracts with Medco®, one of America's leading pharmacy benefit managers (PBMs), to provide pharmaceutical services to our members.

The information below is provided as an overview of WHA's prescription medication benefit, if your employer selected one. Please consult your Combined Evidence of Coverage and Disclosure Form and Copayment Summary for complete disclosure about your benefits.

Answers to common questions about your prescription benefit

Which medications are covered under my WHA prescription benefit?

Western Health Advantage (WHA) uses a three-tier prescription program that is based on our Preferred Drug List (PDL). You may view WHA's PDL on the website at westernhealth.com, or request a copy from Member Services at (916) 563-2250 or toll-free at (888) 563-2250.

There are three categories, or tiers, of medications under the program:

- **Preferred generic or Tier 1 medications** – generic medications listed on the PDL;
- **Preferred brand name or Tier 2 medications** – brand name medications listed on the PDL; and
- **Non-preferred or Tier 3 medications** – medications not listed on the PDL.

For the most part, medications for both medical and mental health conditions that are listed on the PDL are covered without prior authorization and all you'll need is the prescription from your physician. However, within all three categories, there are a few drugs that may require prior authorization to ensure the appropriate use of the drug.

Self-injectable medications are not listed on the PDL. These are covered under your WHA medical plan, and always require prior authorization from WHA. See "Self-injectable medications and other considerations" on the reverse for specific information about these and other limited medications.

Are over-the-counter (OTC) drugs covered?

When your doctor writes a prescription for insulin and/or diabetic supplies, they are covered under the prescription plan. No other OTC products are covered.

Do I have to use generics?

Under the WHA prescription program, your pharmacist will automatically substitute equivalent generics for brand name medications whenever possible, as this provides the greatest value.

If your physician determines there is a need to substitute a brand name medication for a generic medication, the physician will need to specify "Dispense as Written" on the

prescription, as required by the California Board of Pharmacy regulations.

How much will I have to pay for my medications?

As long as there isn't a deductible listed on your prescription copayment summary, you'll only be responsible for paying the relevant copayments for your medications.

You can see the copayment amounts for each medication tier on your Prescription Copayment Summary. It's a good idea to use first- and second-tier medications whenever possible, as this offers you the greatest savings.

Note: If you elect to receive a second- or third-tier medication rather than a first-tier one with no medical indication from the prescribing physician, you will have to pay the difference between the selected and the first-tier medication in addition to the relevant copayment.

If you are on a high-deductible plan, you will pay the cost of the medication until you meet the prescription deductible for your plan for the year. This deductible is detailed on your Prescription Copayment Summary. After that, you'll only need to pay the relevant copayment for your medication, as described above.

Where do I go to get my medications?

WHA members can obtain their prescription and refill medications through:

- **Retail Pharmacies**

Most prescription medications can be obtained at any retail pharmacy, but you'll get the most savings by going to a participating pharmacy with Medco. If you use a non-participating pharmacy, you will be reimbursed for the amount the medication would have cost WHA at a participating pharmacy, minus any applicable copayment or other payment obligation.

- **Mail Order**

You may save time and money on medications you take regularly by ordering a 90-day supply through the Medco Pharmacy, Medco's mail-order pharmacy program. Your prescription can be refilled online or by phone and will be delivered straight to your home or office - whichever is more convenient.

How much of my medication can I get at one time?

- Prescriptions filled at retail pharmacies are limited to a 30-day supply. In some cases, WHA will waive the 30-day limitation, such as for stimulants for children with attention deficit disorder.
- Prescriptions filled by mail-order allow up to a 90-day supply.
- Oral specialty medications that cost over \$500 for a 30-day supply, whether filled at retail pharmacies or through mail-order, are limited to a 30-day supply.
- By California law, controlled substance medications have limited refill capabilities.
- Some drugs are limited to a fixed number of doses per 30-day period. For example, sedative hypnotics and erectile dysfunction medications, among others, are limited to a certain number of doses per 30 days.
- WHA may add other quantity limitations when WHA's Pharmacy and Therapeutics (P&T) Committee determines that it is appropriate to do so.

Self-injectable medications and other considerations

Self-injectable medications

Self-injectable medications (excluding insulin) are covered under the WHA medical plan, not the prescription plan, and are limited to a 30-day supply. These drugs always require prior authorization. If the self-injectable medication is approved, all related supplies will also be approved. Insulin and related supplies are covered under the prescription plan, and do not require prior authorization.

Infertility medications

Medication for the treatment of infertility is covered only when the member's employer has purchased a separate infertility rider. All infertility services, including medical services and infertility drugs, require prior authorization. Please refer to your Infertility Benefit Copayment Summary for exclusions and limitations to this benefit.

Non-FDA approved drugs or quantities

When a physician prescribes a medication (or a quantity of a medication) that is non-FDA-approved, he/she must obtain prior authorization through the contracted medical group or WHA.

For a drug or indication that is not FDA-approved, the physician must provide information regarding the FDA-approved drugs that have been tried and failed or had unacceptable side effects. If the physician prescribes a dosage of an FDA-approved drug that exceeds the FDA-approved amount, he/she must submit additional documentation of the safety and effectiveness of that dose. For any of these exception requests, WHA adheres to required timelines to resolve the issue. In the case of a denial, there is an appeal process available to the member.

Investigational drugs

Any drug that is undergoing investigational testing in humans requires case-by-case review in order for the drug to be approved for the member. Investigational New Drugs (INDs) are approved by the FDA for use on patients with serious and immediately life-threatening diseases for which no other drug or therapy exists. INDs are not available to all members since they are not approved by the FDA for commercial marketing or general use.

Online services

Through the WHA website, you can link directly to the Medco website. There, you will find an array of resources and will be able to:

- Compare prescription benefits and determine your financial responsibility for your medications*;
- Order refills and renew prescriptions;
- Locate participating pharmacies;
- Determine drug-drug interactions;
- Learn about the common side-effects and significant risks of drugs;
- Determine the availability of generic substitutes for brand name medications; and
- Initiate the prior authorization process for certain drugs.

* *Prospective members* – if you are not yet a WHA member but would like to know what the cost of your medications would be under a high deductible plan, go to medco.com/openenroll and login with the access code PCWHA010 (or for CalChoice PCWHACC010).