

Understanding your Blue Care Network drug benefit



If you have a prescription drug rider, you have prescription drug coverage. Your rider outlines the terms and conditions of your coverage. It also lists your copayment as a dollar amount or as a percentage of the pharmacy price.

Our formulary makes drugs affordable

Our formulary lists Food and Drug Administration-approved medications. The list is regularly reviewed by the Blue Cross Blue Shield and Blue Care Network of Michigan Pharmacy and Therapeutics Committee. It represents the clinical judgment Michigan physicians, pharmacists and other health care experts who select formulary drugs based on their clinical effectiveness, safety and cost-savings.

The formulary is categorized by tiers, indicating the level of coverage and copayment required:

- **Formulary Preferred (Tier 1):** These drugs have a proven record of safety and effectiveness and offer the best value for members. They require the lowest copayment, making them your most cost-effective option for treatment. Most generic drugs are Formulary Preferred (Tier 1).
- **Formulary Options (Tier 2):** These drugs also have a proven record of safety and effectiveness. Since a more cost-effective therapy or a generic alternative is usually available, Tier 2 drugs require a higher copayment.
- **Nonformulary (Tier 3):** Nonformulary drugs are not on our list of approved drugs. These drugs may not have a proven record for safety or their clinical value may not be as high as drugs in the Tier 1 or Tier 2 categories. Depending on your drug rider, you may pay a higher copayment or the entire cost of these drugs.

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You can order (at a retail pharmacy or through mail order) up to a 90-day supply of the medications you use regularly and pay only two copayments instead of three.

Here are two other cost opportunities:

- Brand-name formulary asthma controller medications are available for the lowest Tier 1 copayment.
- Generic Risperdal is available for a \$0 copayment.

Go generic

Generic drugs are made with the same active ingredients as their brand-name equivalents, making them safe and effective treatment options. Because they are significantly less costly than brand-name drugs, your prescription will automatically be filled with a generic drug when medically appropriate.

Drug management ensures safety

We monitor the use of certain medications to help ensure that members receive the most appropriate and cost-effective drug therapy. For example, before drugs in the step-therapy category can be prescribed, you may need to try one or more cost-effective drugs in our formulary. Our prior authorization program requires that certain clinical criteria be met before coverage is provided.

For more information

Check your rider or the *Member Handbook* for more information on your drug benefits. You can also call Customer Service using the number on the back of your ID card.

