



Prescription Benefits Guide

Coverage made for you.

Benefit Basics

Understanding Drug Tiers

Think of tiers like steps: the lower the step (tier), the less you pay for your medication. Before filling a prescription, it's a good idea to check our drug formulary for your medication's tier. The plan you're on will affect your copayments or coinsurance. You'll always pay the lowest amount for a Tier 1 drug.

If you or your doctor requests a brand-name drug when the generic is available on a lower tier, you'll usually pay the copayment or coinsurance for the brand-name, plus the difference in cost between the brand-name drug you requested and the generic drug.

Specialty Tier Drugs

These drugs are usually for complex and ongoing conditions. To work correctly, they often have special directions or need to be administered by a healthcare professional. Check your plan documents for your tier and copayment information.

Specialty medications are available through Optum Specialty Pharmacy nationwide and through Carle Specialty Pharmacy in select states.

Mail-Order Program

Our mail-order program brings savings to your doorstep. To enroll in our mail-order program, contact OptumRx®, our pharmacy benefits manager, at (855) 209-1292.

You may be able to get a discount on your 90-day supply of medications. Please refer to your plan benefits for more information.

Finding Resources Online

Join our many members already using hally.com to get instant access to your drug coverage anytime, anywhere. When you register as a member, you can:

- View your prescription drug benefits.
- Print a temporary ID card or order a new one.
- Connect to our prescription benefits program, which lets you:
 - Look up information about drugs and their prices.
 - See a history of your prescriptions.
- Find information about our free care coordination services, including how to sign up. Care coordination can help those who have questions about their medications, are struggling to take them or are having trouble affording them. Check our website, or call the number on the back of your ID card to find out more information about Care Coordination support.

Answers to Common Questions

Will my doctor always prescribe a drug on the lowest tier?

Not always. Your doctor sees patients on many different health plans and probably doesn't know the details of everyone's specific pharmacy coverage.

Before your doctor writes your prescription:

- Tell your doctor you have a tiered pharmacy plan.
- Ask if there's a generic or lower-tier drug that's right for you.
- Remember that to be covered, most plans require you to fill prescriptions at an in-network pharmacy. Visit HealthAlliance.org/Find-a-Pharmacy to find covered pharmacies near you.

Can I get a refill of my prescription before I go on vacation if I know I'll run out before I get back?

Each year, you can ask for two early refills per 30-day supply of each of your maintenance drugs (except schedule II controlled substances) from your local pharmacy to take with you on a trip.

If you'll be staying in the United States, you can also fill your prescriptions at an in-network pharmacy, like Walmart or CVS, while on your trip.

Specialty drugs are excluded from early refill requests. Our specialty drug vendor will ship your drugs to your destination within the U.S. Please refer to your drug formulary to learn more.

For travel outside the U.S., check the country's drug restrictions before you go. Some countries have strict rules about which drugs you can bring with you. Please note, we don't cover routine medical care or maintenance drugs provided outside the U.S.

What else do I need to fill a prescription?

You'll need to show the pharmacist your member ID card to make sure you pay the right copayment amount and to make sure your plan covers the drug.

When can I get a refill?

You can refill your prescription after you've taken three-fourths (75%) of your last prescription as prescribed. For instance, if you have a 30-day prescription, you can get your next month's drugs after you have taken 23 days' worth of the drugs you have.

Why do I need prior authorization to take a drug my doctor prescribed?

Step therapy is a tool to control costs for certain drug groups. If you have a new prescription for a certain type of drug, you have to first try the most cost-effective drug in that group before another one is covered. In most cases, the cost-effective drug will work for you. If it doesn't, your doctor will need to request prior authorization for another drug in the same group.

We also have prior authorization for some other drugs to make sure they're being used for the right medical diagnosis.

Medications that require prior authorization (PA), step therapy (ST) or any coverage requirements will be notated with letters next to them in your drug formulary.

Visit HealthAlliance.org/Pharmacy to view your drug formulary and find other helpful information about your pharmacy benefits. You may also call our Pharmacy department at (800) 851-3379, option 4, for more information.

