

## Highmark Blue Cross Blue Shield of Western New York Member Handbook Insert

The pharmacy benefit section of your member handbook will no longer be valid after April 1, 2023. Instead, refer to the information below.

## PHARMACY BENEFIT CHANGE:

Starting April 1, 2023, your prescriptions will not be covered by Highmark Blue Cross Blue Shield of Western New York. They will be covered by Medicaid NYRx, the Medicaid pharmacy program.

Most pharmacies in New York State take the Medicaid NYRx pharmacy program. If your pharmacy does not take Medicaid, you may:

- Ask your doctor to send a new prescription to a pharmacy that takes Medicaid NYRx pharmacy program, or
- Ask your pharmacist to transfer a refill to a pharmacy that takes Medicaid NYRx pharmacy program, or
- Locate a pharmacy that takes Medicaid NYRx at: member.emedny.org.

You will need to show the pharmacist either your Medicaid card <u>or</u> your health plan card. This will tell them your Client Identification Number (CIN).

Medicaid NYRx has a list of covered drugs. Over-the-counter drugs and most drugs are on the list. This list of covered drugs can be found at: emedny.org/info/formfile.aspx.

- Some drugs need prior approval before they can be filled. This list will tell you if a drug needs prior approval. Your doctor will call to get prior approval.
- If your drug is not on this list:
  - o Your doctor can ask Medicaid for approval to let you get the drug, or
  - Your pharmacist can talk to your doctor about changing to a drug that is on the list.

Medicaid NYRx pharmacy plan also has a preferred drug list. This list can be found at: newyork.fhsc.com/downloads/providers/NYRx\_PDP\_PDL.pdf.

- If you need a drug that is listed as a non-preferred drug, you will be able to get a **one-time only** fill of this drug from April 1, 2023, through June 30, 2023.
- If you need a non-preferred drug, please contact your pharmacist or doctor so that

they can get approval for you to get this drug.

The Medicaid copayment structure is not changing. <u>Your</u> copayment might change depending on if the drug is preferred or non-preferred.

Your pharmacy benefit also covers certain supplies:

- A list of covered supplies can be found at: member.emedny.org.
- A list of preferred diabetic meters and test strips can be found at: newyork.fhsc.com/downloads/providers/NYRx\_PDSP\_preferred\_supply\_list.pdf.
  - Medicaid will allow a **one-time only** fill from April 1, 2023, through June 30, 2023, for non-preferred test strips.
  - You will need to change to a preferred diabetic meter and test strip.

**Do you have questions or need help?** The Medicaid Helpline can assist you. They can talk to you in your preferred language. They can be reached at **855-648-1909** (**TTY 800-662-1220**).

They can answer your call:

- Monday through Friday, 8 a.m. through 8 p.m.
- Saturday, 9 a.m. through 1 p.m.

Enclosures: Get help in another language Nondiscrimination notice

## bcbswny.com/stateplans

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