

BlueCare Rx Pharmacy Benefits – \$10/\$60/\$100 after In-Network Health Deductible For BlueCare HSA Plans

The health plan your employer is offering includes our BlueCare Rx pharmacy benefits. To help you understand drug pricing, your plan includes a drug list (also known as a Formulary Medication Guide) that places prescription drugs into tiers. Your cost share for each drug depends on the tier your medicine is in. For a drug to be covered, it must be listed in the **Open Medication Guide** and filled through an in-network pharmacy. You'll find more details in the **Open Medication Guide** on FloridaBlue.com. Once logged in, click **My Plan** and then **Pharmacy**.

See the chart below for specific plan details.

Your Pharmacy Deductible (DED) = In-Network Health DED	In-Network Cost Shares	
	Retail Pharmacy per one-month supply	Home Delivery per three-month supply
Tier 1-Covered Generic Prescription Drugs and Supplies	DED + \$10	DED + \$20
Tier 2-Covered Preferred Brand Prescriptions Drugs and Supplies	DED + \$60	DED + \$120
Tier 3-Covered Non-Preferred Brand Prescription Drugs and Supplies	DED + \$100	DED + \$200
Specialty Drugs	DED + \$250	NOT COVERED
Oral Chemotherapy Drugs ¹	\$10	\$20
¹ Refer to the Oral Chemotherapy Drug List in the Medication Guide		

Important benefit information

Our pharmacy benefits include coverage for all drugs that are:

- Required by the state or federal government,
- Self-administered injectables, or
- Specialty medications listed in the Medication Guide.

You can get your prescriptions at convenient locations across our large network of participating pharmacies.

Generic prescription drugs

You'll pay a lower cost for any generic prescription drugs found on the Medication Guide. **Keep in mind:** If you request a brand name prescription drug when a generic brand is available, you'll typically pay a higher copay for the brand name drug. Amounts that exceed your copay won't count toward your health plan's out-of-pocket maximum.

Filling your prescriptions

Where you go to fill prescriptions will depend on the kind of medication you need. Tip: Always choose an in-network pharmacy.

Types of in-network pharmacies:

- **Retail pharmacy:** Your local in-network retail pharmacies can fill prescriptions for non-specialty generic and brand-name drugs, up to a 30-day supply. Select retail pharmacies can provide up to a 90-day supply for certain medicines you take regularly. **Note:** 30- or 90-day prescriptions can be filled at in-network retail pharmacies at the full cost share for the quantity

selected. For additional savings, home delivery may be used.

- **Home delivery:** Use home delivery for certain maintenance, non-specialty medications. You may pay less for a 90-day supply compared to monthly refills at a retail pharmacy. Learn more by calling the number on the back of your member ID card and saying, "pharmacy." Or log in to your account at FloridaBlue.com and go to **My Plan** and then **Pharmacy**.
- **Specialty pharmacy:** Certain self-administered specialty drugs such as injectables or infused, oral, or inhaled drugs must be filled by one of our participating specialty pharmacies.

Out-of-network pharmacy option:

- **Non-participating pharmacy:** Choosing a non-participating pharmacy will cost you more money. You may have to pay the full cost of the medication.

Prescription drug limitations

Responsible drug programs

- **Responsible quantities:** Some drugs can only be covered for a certain quantity, for a certain length of time. For example: If your doctor prescribes a medication with a 30-day limit for nine tablets, your plan will only cover nine tablets that month. These safety limits are based on guidelines from drug manufacturers and the U.S. Food and Drug Administration (FDA). Doctors can submit an authorization form for quantity limits based on medical need.

- **Step therapy:** Some drugs aren't covered unless you try another FDA-approved drug first. A lower-cost drug may be just as clinically effective in treating your condition. If, however, the other drug isn't recommended for you, or you had other insurance when you previously tried the other drug and it didn't work for you, your doctor can submit an authorization form to request an exception.
- **Prior authorization:** For certain medications, your doctor will need to submit medical records and the appropriate prior authorization form before a drug will be covered.

Drugs not covered

Your pharmacy benefits may not cover certain medications. Any drug not listed in the Medication Guide may not be covered under your pharmacy benefits. This could be because:

- The medication has not been approved by the FDA,
- The drug has been shown to have adverse effects and/or safer alternatives are available, or
- The drug has a preferred alternative.

Use a Florida Blue Prescription Discount Card

You can use a Florida Blue Prescription Discount Card at select participating pharmacies. It can provide savings for you or any of your family members who take medications that are not covered under your pharmacy benefits. The Florida Blue Prescription Discount Card is not an insurance product or part of your health plan. To learn more, log in to your account at [FloridaBlue.com](https://floridablue.com). Go to **My Plan** and then **Pharmacy** to find the link to the Florida Blue Prescription Discount Card. You can also call the customer service number on the back of your member ID card.

HMO coverage is offered by Health Options, Inc., DBA Florida Blue HMO. These companies are Independent Licensees of the Blue Cross and Blue Shield Association. Florida Blue does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation, or health status in the administration of the plan, including enrollment and benefit determinations