



Law Enforcement Health Benefits, Inc.

2233 Spring Garden Street • Philadelphia, PA 19130 • (215) 763-8290 • FAX (215) 763-8808

LEHB PRESCRIPTION FUND

Information Updated as of September 2017

LEHB Prescription Fund will remain mandatory generic (if you select a name brand when generic is available you will be financially responsible for difference in cost.)

COPAYS:

Retail Pharmacy- Prescriptions at a network pharmacy up to a 30 day supply:

*****Maintenance Medications Must Use Mail Order After 4 Fills at Retail**

- Generic Drug (Chemical copies of their brand name)
 - \$5.00 co-pay *****If the cost is less than \$5.00 you will pay that amount**
- Brand Name Drug (Trade name under which the product is advertised and sold) Patent protected for 17 years.
 - Brand Name Non-Formulary \$15.00 co-pay
 - Brand Name Formulary \$10.00 co-pay

Mail Order- Prescription filled at Express Scripts

Mail Order for a 90 day supply.

- Generic Drug(Chemical copies of their brand name)
 - \$10.00 co-pay for a 90 day supply
- Brand Name
 - Formulary \$20.00 for a 90 day supply
 - Non-Formulary \$30.00 for a 90 day supply
- You should receive medication within 7 to 10 days after Express Scripts receives the prescription.
- Complete list of maintenance medications available at listed website www.express-scripts.com

ACCREDITO (Specialty Injectables)

- Accredo has been chosen as your preferred specialty pharmacy
- Accredo specializes in oral and injectable specialty medications. Specialty medications treat chronic, complex conditions such as hepatitis C, multiple sclerosis and rheumatoid arthritis.
- Accredo offers many products and services.
 - Assigns you a Patient Care Coordinator who serves as your personal advocate and your point of contact. This highly trained individual works closely with your physician and your insurer to obtain prior authorizations, coordinating billing with your insurer and will even contact you when it's time to refill your prescription.
 - Has a complete specialty pharmacy inventory with many specialty medications that aren't readily available at a local pharmacy.
 - Delivers your specialty medications directly to you or your doctor to insure receipt of prescription.

- Provides you with the necessary supplies (such as syringes, etc.) you need to administer your medications – at no additional cost.
- Offers clinically based care management programs – which include consultation with your doctor – to help you get the most benefit from the specialty medications that your doctor has prescribed for you.
- All Medications that are processed through Accredo are dispensed as a 30 day supply and have the following copayments:
 - Generic Drug \$20.00
 - Brand Name \$20.00

STEP THERAPY PROGRAM

- Has been in effect since April 1, 2006.
- Since many different drugs are available for treating a medical condition, step therapy follows a step wise process to find the best-most efficient treatment for you at your lowest co-pay.
- You will be recommended to use a first line medication (defined by clinical experts as the simplest treatment and the preferred therapy for most people – at your lowest co-pay)
- Listed below are an example of the classes of drugs under Step Therapy:

ADHD	High Blood Pressure	<u>Specialty Medications:</u>
Asthma/ Allergies	Arthritis/Pain	Multiple Sclerosis
High Cholesterol	Hypnotics	Inflammatory Conditions
Dermatitis/Eczema	Diabetes	Growth Hormones
Depression	Ulcer/Acid Reflux	Erythroid Stimulants

Note: Current users of above classes will continue their second line therapies. You must fill your prescriptions within 130 days to stay in Step Therapy.

- You must ask your doctor to approve changing your current second line treatment to affect a lower co-pay – this is only a suggestion and the decision is entirely between you and your doctor.

PRESCRIPTION COVERAGE TWO TIERED

- **Up to \$16,000 Family Usage Normal Co-pays**
- **Over \$16,000 -50% Co-insurance up to the ACA Out of Pocket Maximum of \$5,850 for Single \$11,700 for Family**
- **ABSOLUTELY NO EXCEPTIONS**

EXCLUSIVE HOME DELIVERY (Mandatory Mail Order after four (4) fills at retail)

- Maintenance medication (same prescription/same strength for four months) mainly affects ongoing conditions such as diabetes, high blood pressure, etc. A complete list of maintenance medications available at listed website www.express-scripts.com
- First 30 day prescription you will fill at retail pharmacy; you will receive notice after your 3rd 30 day refill, that you must go Mail Order after the 4th refill.
- Mandatory mail order will provide:
 - 3 month (90 day) supply
 - 2 month co-pay
 - 24 hour access to pharmacist
 - Free home delivery
- Two easy ways to start “exclusive home delivery” mandatory mail order.

1. Online at www.express-scripts.com
2. By mail
 - ✓ Ask doctor to write prescription for 90 day supply (if appropriate) plus three (3) refills providing you with a one (1) year prescription supply
 - ✓ Complete home delivery order form available online www.express-scripts.com or call 1-800 number on your member ID card.
 - ✓ Mail your order form and your prescription to the address on the form.
 - ✓ Mail order forms can be obtained at LEHB's Center City Office

OVER THE COUNTER (OTC)

Over the counter (OTC) means medications that are available to you without a prescription.

Limited to below:

- Claritin/Claritin D OTC
- Zyrtec/Zyrtec D
- Allegra/Allegra D
- Flonase
- Childrens Flonase
- Nasacort Nasal Spray
- Centirizine
- Loratidine
- Rhinocort or the Generic Equivalent
- Prilosec OTC
- Zegrid
- Omeprazole
- Nexium

Effective September 1, 2017:

- You must have your doctor write a prescription for all of the above medications in order for you to receive them free over the counter.
- **You will have two (2) options:**
 - Option 1. Doctor writes prescription for the OTC product.**
 Present your prescription to the pharmacist along with the product.
 ➤ **Your copayment is zero (\$0)**
 - Option 2. Continue taking one of the following brand name medications your co-pay will be either \$5.00, \$10.00, or \$15.00 depending on the medication and the cost to LEHB will be much greater.**

Alternatives to Claritin OTC and Zyrtec
 Fexofenadine
 Clarinex/D
 Xyzal

Alternatives to Prilosec OTC
 Nexium
 Pantoprazole
 Lansoprazole

QUESTIONS

- Please call LEHB Prescription Fund (215) 763-8290 and speak with Helen ext. 226 or Phyllis ext. 220

Under NO circumstances do YOU change or adjust YOUR prescription without doctor approval.