

A review of prescription drug coverage management programs

The following information explains a feature of your prescription plan known as coverage management. Coverage management determines how your prescription plan will cover certain medicines.

Marsh & McLennan uses coverage management programs to help ensure that you receive the prescription medicines you need at a reasonable cost. Each program is administered by Express Scripts.

THE COVERAGE REVIEW PROCESS

For your prescription medicines that need special authorization your doctor or pharmacist may initiate the review process by calling Express Scripts at 800.753.2851. When you use the Express Scripts PharmacySM, Express Scripts will call your doctor to start the review process.

Your doctor will be sent a Coverage Management Review Fax Form to fill out and fax back to Express Scripts. Express Scripts will send you and your doctor a letter confirming whether or not coverage has been approved (usually within 2 business days of receiving the necessary information).

If coverage is approved, you simply pay your normal copayment for the medicine. If coverage is not approved, you will be responsible for the full cost of the medicine. NOTE: You have the right to appeal the decision. Information about the appeal process will be included in the notification letter that you receive.

For more information, please visit Express-Scripts.com and select “Price a Medication” from the menu under “Manage Prescriptions.” Follow the steps to view coverage rules – such as quantity limits, prior authorization or step therapy – and cost for your medicine. If you are a first-time visitor to Express-Scripts.com, take a moment to register (be sure to have your member ID number handy). Or, call Express Scripts Member Services at the number on the back of your ID card.

PRIOR AUTHORIZATION

Prior authorization is a program that lets you get the effective medicine that you and your family need and helps your plan sponsor maintain affordable prescription coverage. The main purpose of prior authorization is to make sure the medicine prescribed is right for you and your condition.

Some medicines are not covered unless you receive preapproval or prior authorization. A review based on information provided by your doctor will determine whether your plan covers your prescribed medicine.

DRUG QUANTITY MANAGEMENT

Drug quantity management (DQM) is a program that makes sure that patients are using medications at doses that have been proven effective. It provides the medication you need for good health and the health of your family while making sure you receive them in the amount – or quantity – considered safe.

For example, your doctor might write a prescription for two 20mg pills once a day. If the medicine is available as a 40mg pill, you would need just one a day. Asking your doctor to prescribe the 40mg strength can save you and your plan money.

Drugs that aren't easily measured, like nose sprays and inhalers, are frequently included in DQM. U.S. Food & Drug Administration (FDA) guidelines recommend the maximum quantities of these drugs that are proven to be safe and effective.

STEP THERAPY

Step therapy is a program that lets you get safe and effective treatment you and your family need. It helps your plan sponsor maintain affordable prescription-drug coverage for everyone your plan covers.

In step therapy, medicines are grouped in categories based on treatment and cost.

- First-line medicines are the first step. First-line medicines are generic and lower-cost brand-name medicines approved by the U.S. Food & Drug Administration (FDA). They are proven to be safe and effective, as well as affordable. Step therapy suggests that you should try these medicines first because in most cases they provide the same health benefit as more expensive drugs, but at a lower cost.
- Second-line drugs are the second and third steps. Second-line drugs typically are brand-name drugs. They are best suited for the few patients who don't respond to first-line medicines. Second-line drugs are the most expensive options.

To find out more about your prescription plan, please visit Express Scripts online at Express-Scripts.com or call Express Scripts Member Services.