

2018 Prescription Drug Benefits

January 1, 2018 – December 31, 2018

HealthSelectSM Medicare Rx (PDP) is the Medicare Part D prescription drug plan offered through the Employees Retirement System (ERS) of Texas and available to Medicare-eligible retirees.

Frequently Asked Questions

1. How do I find out if my drugs are covered and what they will cost?

You have several ways to determine if your drugs are covered:

1. Refer to the drug list included in the information you received from UnitedHealthcare when you enrolled in the plan.
2. Go online to www.HSMedicareRx.com. Click on Prescription Drug Information and use the Prescription drug lookup tool to see if your drugs are covered.
3. Call UnitedHealthcare Customer Service at the number listed below and on the back of your ID card.

2. What if my drug is not on the list of covered drugs (formulary)?

If you find that the drug you are taking is not covered, talk to your doctor to see if other options are available. You may be eligible for at least a 30-day supply transition fill, giving you time to talk to your doctor. You or your doctor can request a formulary exception if none of the other covered drugs will work for you. Call UnitedHealthcare Customer Service at the number listed at the end of this document and on the back of your ID card.

3. What if my drug is on a higher cost tier?

If you find that the drug you are taking is on a higher cost tier, talk to your doctor to see if another drug in a lower cost tier will work for you. (Note: You will not qualify for a transition fill if your drug moves to a

higher cost tier, but is still covered by HealthSelect Medicare Rx.)

4. What if the drug I'm taking requires a prior authorization?

If the drug you are taking requires [Prior Authorization](#), you may be given at least a 30-day supply to give you time to talk to your doctor. If your doctor decides to keep you on the drug, you or your doctor can ask that the drug be covered by calling UnitedHealthcare Customer Service at the number listed at the end of this document and on the back of your ID card. If you continue to fill prescriptions for the drug without getting a prior authorization, the drug will not be covered and you may have to pay the full retail price.

5. What if the pharmacy says my medication isn't covered?

There are several reasons why a medication may appear to not be covered. One reason may be that the medication requires a prior authorization. This means the plan needs more information from your doctor to make sure the drug is being used and covered correctly by Medicare for your medical condition. Certain drugs may be covered by either Medicare Part B (doctor and outpatient health care) or Medicare Part D (prescription drugs) depending on how it is used. If you don't get prior approval, the plan may not cover the drug.

Please contact customer service at the number listed at the end of this document and on the back of your ID card.

6. What is a specialty pharmacy and how do I find one?

A specialty pharmacy can create and dispense specialty drugs. Specialty drugs are prescription drugs that, in general, require special handling or ongoing monitoring and assessment by a health care professional. You may fill your specialty drug at any retail pharmacy in the network that has the capability, or you may use UnitedHealth Group's specialty pharmacy, BriovaRx. For assistance locating a pharmacy that can fill your specialty medication, call UnitedHealthcare Customer Service at the number below.

7. How do I obtain a 90-day supply of my medication?

In addition to home delivery services from OptumRx®, some participating HealthSelect Medicare Rx retail pharmacies are part of the Extended Day Supply (EDS) retail network and will fill a long-term medication (31- to 90-day supply) at the same price as the mail order pharmacy. For a listing of the pharmacies in this network, please click on the [EDS Pharmacy List](#).

For instructions on how you can submit your prescriptions to the mail order pharmacy, please review the [Mail Order Brochure](#).

8. Why was I charged an amount that was not one of my copayment amounts?

Drugs and prices may vary between pharmacies and are subject to change during the plan year.

You will never pay more than your copayment amount, but you could pay less.

9. What is a Medicare Part D Late Enrollment Penalty (LEP)?

Most people first become eligible for Medicare when they turn 65. This is your initial enrollment period. It's your first chance to enroll in Medicare Part D. Once you first become eligible for Medicare Part D, there is a 63-day period in which you don't have Part D or other creditable coverage, you may receive a late enrollment penalty. Creditable coverage is prescription drug coverage that is at least as good as or better than what Medicare provides. The late enrollment penalty is an amount added to the monthly Medicare premium you may have to pay. If you receive a letter from UnitedHealthcare asking for information about your prescription drug coverage history, please respond as quickly as possible to avoid an unnecessary penalty. Once you become a member, more information will be available in your Evidence of Coverage (EOC).

10. How do I confirm if my coverage is up to date?

Please call customer service at the number listed at the end of this document and on the back of your ID card.

11. I've enrolled in HealthSelect Medicare Rx. What information will I receive from UnitedHealthcare?

You should receive all of your plan documents from UnitedHealthcare prior to your effective coverage date. Many of these are required by the Centers for Medicare & Medicaid Services (CMS), like your Evidence of Coverage (EOC). This is the official description of your plan coverage and how it works. Then each month that you have a prescription filled, you will receive an Explanation of Benefits (EOB) that confirms the prescriptions you filled, what you paid and what your plan paid.

Give UnitedHealthcare a call.



UnitedHealthcare's dedicated, Texas-based customer service team makes it easy to get your questions answered. Give them a call for questions about your plan benefits and to look up drugs and pharmacies.

(866) 868-0609, TTY 711

7 a.m. – 7 p.m. CT, Monday – Friday

7 a.m. – 3 p.m. CT, Saturday

HealthSelectSM Medicare Rx is an Employer Prescription Drug Plan provided by ERS and administered by UnitedHealthcare Insurance Company, a Medicare-approved Part D sponsor. Enrollment in UnitedHealthcare depends on UnitedHealthcare's contract renewal with Medicare.

The Formulary and/or pharmacy network may change at any time. You will receive notice when necessary.

You are not required to use OptumRx home delivery for a 90- or 100-day supply of your maintenance medication. If you have not used OptumRx home delivery, you must approve the first prescription order sent directly from your doctor to OptumRx before it can be filled. New prescriptions from OptumRx should arrive within ten business days from the date the completed order is received, and refill orders should arrive in about seven business days. Contact OptumRx anytime at 1-888-279-1828, TTY 711. OptumRx is an affiliate of UnitedHealthcare Insurance Company.

The information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Premium and/or copayments/coinsurance may change on January 1 of each year.