



PRESCRIPTION DRUGS & MEDICA'S LIST OF COVERED DRUGS

ENROLLED IN INDIVIDUAL & FAMILY PLANS



YOUR PLAN COVERS DRUGS ON MEDICA'S LIST OF COVERED DRUGS

Medica's List of Covered Drugs (formulary) includes drugs that are designed to meet your medical needs and have been proven safe and effective. Your drugs will be covered under one of six different price categories (called tiers) that are arranged according to drug costs. Your cost may vary depending on how your drug is categorized.

Drug Tiers:

- » Preventive drugs are covered at 100 percent*
- » Retail drugs are divided into three tiers: generic, preferred brand and non-preferred brand
- » Specialty drugs are divided into two tiers: preferred specialty and non-preferred specialty

In most cases, your plan only covers drugs on the formulary. However, there are some cases when you can request an exception.

Follow These Steps to Request We Cover a Drug Not on the Drug List

1. **Work with your doctor to complete a Global Prior Authorization form.** Your doctor can download a copy of this form on medica.com or request a paper copy by calling our Pharmacist Help Desk at **(800) 922-1557**.
2. **Fax your completed form to Medica.** You may fax your completed form to **(877) 251-5896** (for non-specialty drugs) or **(888) 302-1028** (for specialty drugs). Please provide all requested information including:
 - » Which medications have been tried and did not work
 - » Dosages used
 - » Reason for failure (e.g., side effects, not effective, etc.)



PRICE A MEDICATION TOOL

Log into your secure member site on MedicaMember.com and use the Price a Medication tool to see if:

- » Your medication is covered and an estimate of what it will cost
- » There are lower-cost options available
- » Your medication requires prior authorization, step therapy or has quantity limits
- » A 90-day refill option is available at your pharmacy
- » Mail order fulfillment is available

*Medications displayed as "Tier 6" in the Drug Tier column are defined as preventive health services under the Affordable Care Act (ACA) and are provided without member cost sharing.

WHEN WE RECEIVE YOUR DRUG EXCEPTION REQUEST

We will review it as soon as possible and will let you know our decision within 72 hours. You may request an expedited review (decision within 24 hours). If you have a health condition that may seriously risk your life or health, or you are currently undergoing treatment with a drug not included on Medica's Drug List, you may request an expedited review. If you request an expedited review we will make a decision within 24 hours. After we review your request, we'll either:



Accept Your Request

We'll cover the drug at network-level benefits for the duration of the prescription, including refills.



Deny Your Request

If we deny, you can appeal. You or your provider may request an independent review of our decision. To make this request, you may:

- » Call Customer Service at the number on the back of your Medica ID card
- » Write to Customer Service at:

Medica
PO Box 856523
Minneapolis, MN 55485-6523



Have a question?

Call Customer Service at the number on the back of your Medica ID card.

Medica complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

If you want free help translating this information, call the number included in this document or on the back of your Medica ID card.

Si desea asistencia gratuita para traducir esta información, llame al número que figura en este documento o en la parte posterior de su tarjeta de identificación de Medica.

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If you'd like to request a copy of our drug list exception process or more information regarding the expedited review process, please call Customer Service at the number on the back of your Medica ID card.