



Frequently Asked Questions (FAQ)

WHAT HAPPENS IF I DIDN'T RECEIVE MY NEW ID CARD?

You should have received two (2) MedImpact ID cards in your MedImpact Welcome package. If you did not receive your new ID cards, contact MedImpact Customer Service at 844-863-0356. Remember that before October 1, representatives will not be able to assist you if you call.

HOW DO I OBTAIN ADDITIONAL ID CARDS?

You may go online at www.medimpact.com/members and print ID cards. *(First time users must Register. Your MedImpact member ID number is located on your MedImpact ID card.)*

Remember that before October 1, you will not be able to register on the MedImpact member website. You will need your MedImpact ID card when you first register.

WHERE CAN I OBTAIN A COPY OF THE MEDIMPACT FORMULARY?

You will find the MedImpact formulary on the GUSD website under Departments – Benefits.

WHAT IF MY DRUG IS NO LONGER COVERED ON MEDIMPACT'S FORMULARY?

Excluded Drugs/"Not Covered" Drugs: These drugs are excluded and are not covered under the current formulary structure. Formulary equivalent drugs are available.

How do I obtain an alternative drug that is on the formulary?

1. Review the MedImpact formulary OR

Go to www.medimpact.com/members, log-in and search for your medication on the Drug Price Check tool. It will give you a list of alternatives. *(First time users must Register. Your MedImpact member ID number is located on your MedImpact ID card.)*

2. You should discuss these alternative with your physician. A new prescription will need to be written for the alternative drug.

WHAT IF MY DRUG IS NOW A NON-PREFERRED DRUG?

Drugs that are now Non-Preferred are still covered under your Prescription Benefits, however, these drugs now require a higher copay.

What can I do to keep a lower copay?

You can review the formulary document or search your current drug utilizing the MedImpact's Drug Price Check tool at www.medimpact.com/members for formulary alternatives. These alternative medications should be discussed with your physician. A new prescription will need to be written if you wish to change medications.

WHAT IF THERE ARE NEW RESTRICTIONS FOR MY MEDICATION?

To limit any disruption to your current medications, MedImpact will waive any restrictions for **current users** on drugs which require new restrictions for the **first 90 days**. **MedImpact will be contacting you via mail if they have identified you as using medications that falling under one of the two categories below. Open all correspondence from MedImpact. Further action from you will be required before January 1st, 2018 to avoid any disruptions.**

Prior Authorization Required: Not all medications are automatically covered by your pharmacy benefit. To obtain these medications, the physician must request coverage of the medication before it is prescribed.

What should I do?

1. Schedule an appointment with your doctor to discuss changing to a preferred drug alternative. Alternatives can be found by utilizing the Drug Price Check tool at www.medimpact.com/members. *(First time users must Register. Your MedImpact member ID number is located on your MedImpact ID card.)*
2. If your therapy requires you to continue to use your current medication, your doctor will need to fill out and fax a Medication Request Form. This form will be included in the letter you receive from MedImpact. Your physician may also call MedImpact Customer Service at 1-844-863-0356 to initiate the Medication Request Form.

Quantity and Age Restrictions: These medications are within the current formulary, but require specific quantity and day supplies to be prescribed and may be limited to certain age groups.

How do I know what restriction applies to my prescription?

These restriction can be found by calling MedImpact Customer Service or visiting the Drug Price Check tool at www.medimpact.com/members. (First time users must Register. Your MedImpact member ID number is located on your MedImpact ID card.)

What if I need to continue on the medication under the current restriction?

1. If your therapy requires you to continue to use the drug at the current restriction, your doctor will need to fill out and fax a Medication Request Form. This form will be included in the letter you receive from MedImpact. Your physician may also call MedImpact Customer Service at 1-844-863-0356 to initiate the Medication Request Form. This process must be completed by December 31, 2017 to avoid any disruptions.

WHAT DO I DO IF I AM CURRENTLY USING BLUE SHIELD’S MAIL ORDER PROGRAM?

If you have a current and valid mail-order prescription(s) with Blue Shield’s Caremark, your prescriptions will be transferred to our mail-order program called MedImpact Direct. There are certain medications that cannot be transferred; compounds, controlled substances, expired prescriptions and prescriptions with no remaining refills. For these specific medications, you will need to a new prescription faxed by your doctor to MedImpact Direct. You may call the number on the contact list for additional assistance.

WHAT ARE MY COPAYS FOR 2017-2018?

Plan Type	HMO			PPO		
Fulfillment Channels	Retail	Mail	Specialty	Retail	Mail	Specialty
Generic	\$5	\$10	\$30	\$10	\$20	\$30
Preferred Brand	\$20	\$40	\$30	\$25	\$50	\$30
Non-Preferred Brand	\$35	\$70	\$30	\$40	\$80	\$30
Day Supply	30 Days	90 Days	30 Days	30 Days	90 Days	30 Days

WHAT DO THESE TERMS MEAN?

For a full list of terms, please visit www.medimpact.com/members, Glossary of Terms.

Exclusions

The plan sponsor determines pharmacy benefit coverage, and may exclude specific drug classes, individual medications, pharmacy-related services or medical devices from that coverage.

Formulary

A formulary is a list of drugs designated for coverage both from a therapeutic and an economic standpoint through your pharmacy benefit plan. The drugs on the formulary have been reviewed by a Pharmacy and Therapeutics (P&T) committee, and found to be appropriate for formulary inclusion on the basis of safety, efficacy, approved indications, ease of use, potential for adverse effects, and cost effectiveness.

Generic

A product that is therapeutically equivalent (contains the same active ingredient(s), is the same strength and the same dosage form) to a brand name drug, is referred to by its chemical name, and is generally made available when patent protection on the brand name drug expires.

Formulary/Preferred Brand

There may be more than one drug within a therapeutic category to treat your condition. Therefore, your plan sponsor designates selected drugs as formulary/preferred because of their overall ability to meet your therapeutic needs at a lower cost. If appropriate, ask your physician to consider prescribing a formulary/preferred drug as highlighted on Drug Price Check.

Non-formulary/Non-preferred Brand

There may be more than one drug within a therapeutic category to treat your condition. Therefore, your plan sponsor designates selected drugs as non-formulary/non-preferred because the relative cost of the drug is higher than others in the therapeutic category without demonstrating additional beneficial value.

Tier

A tier usually represents the copayment level that applies to a certain formulary status and medication type (i.e., Tier 1: generic, Tier 2: preferred brand, or Tier 3: non-formulary/non-preferred brand).

HAVE QUESTIONS OR NEED ASSISTANCE?

NOTE THAT REPRESENTATIVES WILL NOT BE ABLE TO ASSIST YOU IF YOU CALL BEFORE OCTOBER 1. THEY WILL NOT HAVE ACCESS TO YOUR INFORMATION UNTIL THE PLAN'S EFFECTIVE DATE OF 10/1.

MEDIMPACT CONTACTS

MedImpact Customer Service

Toll Free: 844-863-0356

www.medimpact.com/members *(First time users must Register. Your MedImpact member ID number is located on your MedImpact ID card.)*

Mail Order Pharmacy- MedImpact Direct

Toll Free: 855-873-8739

Email: customerservice@medimpactdirect.com

Fax: 888-783-1773

www.medimpactdirect.com *(First time users must Register. Your MedImpact member ID number is located on your MedImpact ID card.)*

Specialty Drugs- MedImpact Direct

Toll Free: 877-391-1103

Email: specialtyhub@medimpactdirect.com