



2019 U-M Prescription Drug Plan

For University of Michigan
Faculty, Staff, Graduate Students, Retirees and Dependents

Contact Information

University of Michigan

Benefits Office website: hr.umich.edu/benefits-wellness

The Shared Services Center (SSC) Contact Center answers questions about your enrollment in the University of Michigan Prescription Drug Plan. Representatives are available 8:00 a.m. - 5:00 p.m., Eastern Time, Monday - Friday.

Phone: 734-615-2000 (5-2000 on the Ann Arbor campus), 866-647-7657 toll-free for off-campus long-distance calling within the U.S.

TTY/TDD phone service is available to you through the Michigan relay Center at: 800-649-3777. Ask the operator to connect you to the SSC Contact Center.

MedImpact Member Service

MedImpact member website: mp.medimpact.com/umh

For coverage questions regarding the Prescription Drug Plan, please call MedImpact Member Services toll free directly at 1-800-681-9578. Telecommunications Relay Service (TRS) is available for persons who are deaf by dialing 711.

NoviXus Pharmacy Services

NoviXus Pharmacy Services website: umich.novixus.com

For mail order prescriptions, please call NoviXus directly at 877-269-1160 (TTY 711). After hours, all phones go to an on-call pharmacist for urgent situations 7 days a week.

Standard Operating Hours (Eastern Time):

Monday - Friday 8:00 a.m. - 8:00 p.m.

Saturday 9:00 a.m. - 5:00 p.m.

More Information

Questions about items covered or excluded by your health plan should be directed to your health plan. Flexible Spending Account (FSA) reimbursement for some excluded drugs may be available to participants.

The university in its sole discretion may modify, amend, or terminate the benefits provided in this booklet with respect to any individual receiving benefits, including active faculty and staff members, retirees, and their dependents. Although the university has elected to provide these benefits for calendar year 2019, no individual has a vested right to any of the benefits provided. Nothing in these materials gives any individual the right to continued benefits beyond the time the university modifies, amends, or terminates the benefit. Anyone seeking or accepting any of the benefits provided will be deemed to have accepted the terms of the benefits programs and the university's right to modify, amend or terminate them.

The University of Michigan, as an equal opportunity/affirmative action employer, complies with all applicable federal and state laws regarding nondiscrimination and affirmative action. The University of Michigan is committed to a policy of equal opportunity for all persons and does not discriminate on the basis of race, color, national origin, age, marital status, sex, sexual orientation, gender identity, gender expression, disability, religion, height, weight, or veteran status in employment, educational programs and activities, and admissions. Inquiries or complaints may be addressed to the Senior Director for Institutional Equity, and Title IX/Section 504/ADA Coordinator, Office of Institutional Equity, 2072 Administrative Services Building, Ann Arbor, Michigan 48109-1432, 734-763-0235, TTY 734-647-1388. For other University of Michigan information call 734-764-1817.

**University of Michigan 2019
Prescription Drug Benefits
Welcome Packet**

The University of Michigan Benefits Office is pleased to supply you and your eligible dependents with the following information about your 2019 prescription drug plan coverage. Your U-M Prescription Drug Plan (“the plan”) is administered by MedImpact. Mail order services are handled through NoviXus Pharmacy Services. Your enclosed Welcome Packet includes:

- Two (2) new U-M Prescription Drug Plan ID cards.
- A NoviXus Pharmacy Services order form with instructions and a return envelope. (Use the service to receive a 90-day supply of maintenance medications delivered free to your home.)
- Other general information about your prescription drug plan.

Your cost-share information for purchasing prescription drugs (co-pay and out-of-pocket maximum) is found on the U-M Benefits Office website at hr.umich.edu/benefits-wellness. You may also call MedImpact toll-free at 1-800-681-9578 to ask any questions about your drug plan.

Your New ID Cards

Your two new U-M Prescription Drug Plan ID cards are enclosed. These cards contain your name and member identification number and the names of any dependents you have enrolled for university health plan and prescription drug plan coverage. If you need additional prescription drug ID cards for your dependents, please call MedImpact at 1-800-681-9578. Please show this card to your pharmacist on your first pharmacy visit. Your card also allows you to get prescriptions by mail from NoviXus.

Contacting MedImpact

For general information	<ul style="list-style-type: none"> • Call MedImpact toll-free at 1-800-681-9578 • Visit the MedImpact website: mp.medimpact.com/umh
To locate a network pharmacy, check for covered and excluded drugs, or determine your co-pay and cost saving options	<ul style="list-style-type: none"> • Call MedImpact toll-free at 1-800-681-9578 • Visit the MedImpact website: mp.medimpact.com/umh • Ask your pharmacist
To request prior authorization, when required	Your physician will need to contact MedImpact at 1-800-681-9578 or send a fax to 1-858-790-7100. Drug specific PA forms are available at hr.umich.edu/benefits-wellness/health/prescription-drug-plan/prior-authorization
For appeals	Call MedImpact toll-free at 1-800-681-9578
To request a new ID card	Call MedImpact toll-free at 1-800-681-9578
To request a claim form for prescriptions filled without your ID card or filled at a non-network pharmacy	Claim form available at: hr.umich.edu/benefits-wellness/health/prescription-drug-plan/prescription-drug-plan-forms-documents

Note: Telecommunications Relay Service (TRS) is available for persons who are deaf by dialing 711.

Participating Network Pharmacies

MedImpact's network for University of Michigan prescription drug plan members covers over 95% of the pharmacies in Michigan, including most major pharmacy chains, and 55,000 pharmacies nationwide. You can also save time and money on filling prescriptions when you fill eligible medications through mail order with NoviXus Pharmacy Services. (See **Mail Order Pharmacy Offers Convenience and Lower Costs** for more details.)

Michigan Medicine Ambulatory Care Pharmacy in the Taubman Center, the Comprehensive Cancer Center Pharmacy, the East Ann Arbor Health Center Pharmacy, the Michigan Medicine Specialty Pharmacy, the Michigan Medicine Brighton Center for Specialty Care Pharmacy and University Health Service pharmacies also participate in the MedImpact network, along with many independent pharmacies.

To find out if a pharmacy will accept your MedImpact ID card, call the pharmacy directly. You may also find a list of participating pharmacies by visiting the MedImpact website at mp.medimpact.com/umh or calling MedImpact member services at 1-800-681-9578. Telecommunications Relay Service (TRS) is available for persons who are deaf by dialing 711.

Using Non-Network Pharmacies – CAUTION

If you have a prescription filled at a non-network pharmacy, you must pay the full cost of the drug and then file a claim with MedImpact for reimbursement. Claim reimbursement is limited to a 34-day supply at the University of Michigan pharmacy network contracted rate, which may be lower than the cash price you paid.

You must submit claim forms within 90 days of the fill date to receive reimbursement. This reimbursement process also applies if you do not present your U-M Prescription Drug Plan ID card when filling a prescription at a participating pharmacy.

If you wish to regularly use an independent pharmacy that is not part of the MedImpact network, contact MedImpact to request that the pharmacy be added to the network.

For medications purchased while you are outside the United States, please submit a claim form, which is available at hr.umich.edu/benefits-wellness/health/prescription-drug-plan/prescription-drug-plan-forms-documents. Reimbursement claims are limited to a 34-day supply.

Member Co-Pays

1-Month Supply at Retail Pharmacy	3-Month Supply at Retail Pharmacy	3-Month Supply at NoviXus Mail Order Pharmacy
\$10 generic	\$30 generic	\$20 generic
\$20 preferred brand	\$60 preferred brand	\$40 preferred brand
\$45 non-preferred brand*	\$135 non-preferred brand*	\$90 non-preferred brand*

*Cost will be higher if a brand product is selected when a generic equivalent is available.

Notes:

1) Co-pay rates for active employees represented by a union or bargaining unit can be found in your contract book or at hr.umich.edu/benefits-wellness.

2) Note: The annual out-of-pocket maximum for catastrophic prescription drug expenses is \$2500 per individual up to a maximum of \$5000 per family. The maximum does not apply to the cost of penalty co-pays for brands with a generic available or to items not covered by the prescription drug plan.

Covered Drugs

The plan covers most FDA-approved medications that require a written prescription from a person licensed to prescribe. FDA drug approval does not guarantee coverage by the plan. New drugs are subject to review by the University of Michigan before being granted coverage. Certain medications are excluded and others may be limited or require prior authorization (PA) from the plan to determine coverage. The list of covered, limited, and excluded medications is updated regularly and located on the university's website at hr.umich.edu/formulary.

The plan covers injectable medications only when FDA deems they can be safely self-administered. Select insulin products (see formulary hr.umich.edu/formulary), needles and syringes are covered with \$0 copay for all members

Diabetic supplies (injection devices, alcohol swabs, testing strips, lancets and blood glucose testing monitors) are covered through your U-M health plan coverage. Contact your health plan for details.

Certain preventive products are covered by the prescription drug plan at \$0 copay under the Affordable Care Act with a written prescription from your health care provider, including for over-the-counter (OTC) products. Please see hr.umich.edu/benefits-wellness/health/prescription-drug-plan/coverage-drug-information for more information.

Save Money with Generic or Biosimilar Drugs

Generic or biosimilar drugs are approved by the United States Food and Drug Administration (FDA), contain the same active ingredients and come in the same dosage forms as their brand-name counterparts, and must meet comparable safety, production and performance standards. The use of generic or biosimilar drugs offers a safe and effective alternative that helps reduce prescription drug costs for you and may help avoid substantial increases in university health care costs and copays.

Mail Order Pharmacy Offers Convenience and Lower Costs

If you take any long-term “maintenance” medications for conditions like high cholesterol, diabetes or high blood pressure, the university’s mail order pharmacy program can help simplify your busy life. U-M plan members praise NoviXus Pharmacy Services for their fast, convenient home delivery, helpful pharmacists and lower cost under the U-M drug plan. When you use NoviXus, you will save one co-pay every three months compared to the cost of filling a prescription at a retail pharmacy.

Please note that mail service should not be used for urgent medications, such as an antibiotic needed immediately, or medications you will use for less than three months.

To get started,

1. Create an account with NoviXus. You will need your prescription drug plan ID number, which should be the letter “U” followed by your UMID. You can:
 - Download the free NoviXus Pharmacy app from the App Store or Google Play
 - Visit **umich.novixus.com**
 - Call NoviXus at 877-269-1160
2. Contact NoviXus to help you transfer any existing prescriptions.
3. Tell your health care provider you want to use NoviXus the next time you get a prescription.

For a new medication, you will need two prescriptions: an initial 30-day prescription to be filled at a retail pharmacy and a 90-day prescription for up to 3 refills by mail through NoviXus. Your provider can e-prescribe, call 877-269-1159 or fax to NoviXus at 877-395-4836. If you have a paper prescription, send it to NoviXus Pharmacy Services, P.O. Box 8004, Novi, MI 48376-8004 along with your co-pay payment to NoviXus Pharmacy Services using the self-addressed envelope provided in this Welcome Kit.

Additional mail service order forms may be downloaded from **umich.novixus.com** or **hr.umich.edu/mail-order-form**.

Order mail service refills at least two weeks before your maintenance medications run out. You may order online at **umich.novixus.com**, via the NoviXus Pharmacy app or by calling the toll-free number shown on your prescription label or 1-877-269-1160. Please allow 10 business days from the time you place your order until you receive your order at the address specified.

Notes: Over-the-counter drugs and certain prescription medications may not be available through the mail service for medical reasons or because of federal or state laws that prohibit dispensing certain drugs through the mail. Contact NoviXus Patient Care if you have any questions about drugs available through the mail service program.

Prescription drugs cannot be mailed outside the United States when using the U-M Prescription Drug Plan.

Contacting NoviXus

For general information or to register	<ul style="list-style-type: none"> • Visit benefits.umich.edu/mailorder • Call NoviXus toll-free at 1-877-269-1160 or (TTY 711), visit umich.novixus.com or download NoviXus Pharmacy app
Download a NoviXus mail service order form	<ul style="list-style-type: none"> • Visit umich.novixus.com • Visit hr.umich.edu/mail-order-form
To submit a mail service prescription for the first time	<p>Use the pre-addressed envelope provided or submit the mail service order form and prescription to:</p> <p>NoviXus P.O. Box 8004 Novi, MI 48376-8004</p>
To obtain a mail service refill over the phone or check the status of your order	Call the toll-free number shown on your prescription label or 1-877-269-1160 (TTY 711)
To obtain a mail service refill on the Internet or check the status of your order	Visit umich.novixus.com

Specialty Drugs

A “specialty drug” is a prescription drug that requires special handling, special administration, special monitoring, or has a very high cost. Specialty drugs include select oral and self-injected medications used to treat a variety of medical conditions, including infertility. The list of covered specialty drugs is subject to change by the University of Michigan. Specialty drugs are identified on the plan formulary with S, LD or LFM in the “Drug Tier” field (hr.umich.edu/formulary).

Specialty drugs may be dispensed in quantities up to a 34-day supply. Prescriptions for immunosuppressive and antiretroviral medications may be dispensed in quantities up to a 90-day supply.

Specialty drugs are covered when filled at designated specialty drug pharmacies. For specialty medication information, call the Michigan Medicine Specialty Pharmacy at 855-276-3002 or visit hr.umich.edu/benefits-wellness/health/prescription-drug-plan/coverage-drug-information/specialty-drugs.

Limitations and Prior Authorization on Certain Drugs

Certain types of medications require prior approval from the plan or may be subject to limits on the amount of medication that you may receive (number of days’ supply, quantity limits, frequency of refills, etc.). If your doctor prescribes any medication that requires prior authorization, or for amounts in excess of supply limits, your physician must contact MedImpact toll-free at 1-800-681-9578 to obtain the prior authorization

form before the plan considers coverage for the medication. In some cases, your physician may be required to verify the medical necessity of the prescribed drug. Medications requiring prior authorization are updated regularly and are subject to change by the University. Medications that need prior authorization can be found on the U-M Benefits Office website at hr.umich.edu/benefits-wellness/health/prescription-drug-plan/prior-authorization.

Prescription refills are not covered by the plan before 75% of the days dispensed have elapsed (26 days for a 34-day supply or 68 days for a 90-day supply).

Plan Exclusions

Current updates of plan exclusions are on the U-M Benefits Office website at: hr.umich.edu/benefits-wellness/health/prescription-drug-plan/coverage-drug-information. The exclusions listed below apply to both the mail order and retail pharmacies.

- i. Drug products that have not been reviewed by the plan.
- ii. Drug products that must be administered by a health care professional.
- iii. Prescription drugs that are the main active metabolite, an isolated enantiomer, prodrug, or some other alteration of an available product that does not offer clear clinical advantage over existing products.
- iv. Most over-the-counter (OTC) medications, any prescription medication that contains the same active ingredient(s) as an existing OTC medication, or kits that are packaged with an OTC medication.
- v. Prescription drugs with equivalent OTC options.
- vi. Prescription drugs packaged in “kits” with OTC components.
- vii. Prescription products that offer no additional clinical benefit over existing available therapies or existing therapeutically equivalent products in the drug class.
- viii. Experimental, investigational or unproven drugs, or drug products that are being used for treatment that have not been approved by the FDA for a particular indication and/or have limited supportive data.
- ix. Medical foods, nutritional supplements, and vitamins (exceptions include select prescription prenatal vitamins, vitamin D, K, injectable B-12 and ACA-required vitamin products).
- x. Stimulant-based weight loss products.
- xi. Blood products.
- xii. Diagnostic products.
- xiii. Therapeutic devices, appliances or medical equipment, support garments, or ostomy supplies (diabetic syringes are covered under the prescription plan; for durable medical equipment [diabetic testing supplies, ostomy supplies, etc] coverage information, contact your medical benefit provider).
- xiv. Cosmetic products or any drug used for cosmetic purposes, such as treating facial wrinkles or hair loss.

- xv. Compounded prescription medications that do not comply with the plan's compound coverage policy or are not compounded per the Michigan Pediatric Safety Collaboration's published list of standard formulations.

Your U-M health plan coverage may include certain medical equipment and supplies and/or injectables administered by your health care provider. Call your health plan company about items covered by your health plan.

Privacy and Security

The information you provide us is kept confidential in accordance with HIPAA and other applicable state privacy laws. In addition, we use technology that is designed for use with secure web servers. This technology ensures that your personal, health, prescription and credit card information cannot be accessed when submitted over the Internet.

Frequently Asked Questions About Mail Order (NoviXus)

Mail order pharmacy services save you money and are a convenient way to receive maintenance medications for chronic or long-term health conditions. Here are the answers to some commonly asked questions.

Q: What medications are considered maintenance medications?

A: Any medication that is prescribed to be taken for 3 months or longer, and not classified as a specialty drug, may be considered a maintenance medication.

Q: How do I begin using the NoviXus mail order pharmacy?

A: To get started, you'll need to create an account with NoviXus. You will need your prescription drug plan ID number, which should be the letter "U" followed by the subscriber's UMID. You can:

- Download the free NoviXus Pharmacy app from the App Store or Google Play
- Visit umich.novixus.com
- Call NoviXus at 877-269-1160

Q: What forms of payment does NoviXus accept?

A: A credit card is required for NoviXus orders. NoviXus accepts American Express, Discover Card, MasterCard and Visa.

For orders submitted by mail, include your credit card information (you only need to provide NoviXus with your credit card information one time; NoviXus will add it to your personal profile), or you may send a check or money order made payable to NoviXus Pharmacy Services. **DO NOT SEND CASH.**

Your check or money order must include your name, your family members' names (if you are paying for their prescription orders), address, telephone number(s) and one of the following: order number, prescription number, invoice number or member ID number.

If you are mailing a check and are unsure of your cost, please use the "Benefit Highlights" feature at <https://mp.medimpact.com/umh> or call your plan administrator, MedImpact at 1-800-681-9578 for specific drug cost information.

Q: Are there other special circumstances?

A: If your prescription order exceeds \$150.00, a NoviXus Patient Care Specialist will contact you for authorization prior to processing your order.

Q: Can my prescriber call in my prescription to NoviXus Pharmacy Services?

A: Yes. NoviXus Pharmacy Services can accept prescriptions by phone with the exception of controlled substance (Schedule 2) drugs. Your doctor can also fax a completed prescriber fax form to NoviXus, or e-prescribe your prescription if your doctor has the technology to electronically prescribe medications. By law, faxed and e-prescribed prescriptions are only valid if sent from a prescriber's office.

Q: Can I transfer my prescriptions from a local pharmacy to NoviXus?

A: Yes. Call the NoviXus Patient Care Center at 877-269-1160 and a representative will assist you in transferring your prescriptions.

Q: How do I check the status of my order?

A: You can view order status information at any time by logging in on the umich.novixus.com website or app and clicking on **Orders**. To check status by phone, contact NoviXus Patient Care at (877) 269-1160. You should receive your order within 7-10 business days. If you have not received your prescription order within 10 business days from the time the order was placed, be sure to contact NoviXus Patient Care.

Q: Why can't I see my spouse's or my child's information through my online account?

A: Because NoviXus values your security, the system identifies registered members by a unique prescription profile and stores each person's prescription medication history in his or her own secure account.

Q: How do I order a refill of my current NoviXus Pharmacy Services prescription?

A:

1. To refill personal prescriptions online using the NoviXus website or app:

- Go to umich.novixus.com or app and login, then click **Prescriptions** at the top of the screen or at home page of app.
- Check the green "Refill Now" box for the prescriptions you wish to refill.

2. To refill personal prescriptions using the phone Automated Prescription Refill System:

Please call NoviXus Patient Care at (877) 269-1160 and select option # 1

3. To refill your personal prescriptions with a NoviXus Patient Care Specialist:

Please call NoviXus Patient Care at (877) 269-1160 and select option # 2

4. To refill your personal prescriptions through the mail:

Please complete the refill order form enclosed with your previous order.

Q: Why would NoviXus not automatically fill a prescription when my prescriber sent it in?

A: To avoid potential waste, NoviXus will send out an automated call, email, or text to the patient once a new prescription is received. This is to let you know it has been received and when you are ready place the order.

Q: What happens when my prescription refills expire or there are no refills remaining?

A: Please contact your physician for a prescription renewal when your refills remaining are zero to avoid delays on your next fill.

Q: Will a Pharmacist always be involved in the filling of my prescription?

A: Yes. To ensure quality and safety, a Pharmacist is involved in both the review and the dispensing of every prescription order. If a question about your prescription order arises, a NoviXus Pharmacy Services Pharmacist will contact your prescriber.

Q: Can I speak to the Pharmacist directly?

A: Yes. Call NoviXus Patient Care at (877) 269-1160 to take advantage of one-on-one Pharmacist consultations or receive answers to your questions. You may also send a question to a Pharmacist using the **Ask the Pharmacist** page on the NoviXus website or mobile app.

Q: Do you ensure that medications are maintained at certain temperatures?

A: Yes. NoviXus Pharmacy Services follows strict guidelines when shipping medications that require special handling. Temperature sensitive medications are shipped using overnight delivery at no additional cost to the member.

Q: How are prescription orders shipped?

A: Orders are shipped free of charge, in secure, confidential and tamper-evident packaging via the U.S. Postal Service, FedEx, or other expedited courier (we use ProMed a Detroit Metropolitan Area Private Courier under certain circumstances) . Schedule II controlled substances require an adult signature upon delivery. Prescriptions can be shipped Next Business Day. If you choose Next Business Day delivery, there is a \$25 charge.

Q: How soon will my prescription order arrive?

A: Allow 10 business days from the time you place your order. Next Business Day shipping is available for an additional charge.

Q: Why did I receive a generic medication instead of the brand-name medication that was originally prescribed?

A: Depending on your plan, your prescriber's wishes and what is allowed by state law, NoviXus Pharmacy Services will substitute generic equivalents for brand-name medications whenever possible. Generic medications have the same active-ingredient formula as the brand-name equivalent and save you money.

Q: What do I do if I need an emergency prescription?

A: If you have lost or forgotten your medication, contact NoviXus Patient Care at (877) 269-1160 during normal business hours: Monday-Friday 8 a.m. to 8 p.m., Saturday 9 a.m. to 5 p.m. Eastern Time.

NoviXus

Pharmacy Services

NoviXus Pharmacy Services
PO Box 8004
Novi, MI 48376-8004



The University of Michigan's Mail Order Pharmacy Provider

This Mail Order Enrollment Form available at hr.umich.edu/mail-order-form is only necessary for first-time orders, including dependents who have been added since the last order, or to change current information.

To start your Mail Service Benefit, follow these steps:

Step 1: *Enroll*

Complete the mail order enrollment form or enroll online through umich.novixus.com or NoviXus Pharmacy app from the App Store or Google Play.

Step 2: *Fill Your Prescription*

Mail the original prescription to NoviXus with your enrollment form, or have your health care provider send the prescription directly to NoviXus. Your provider can send the prescription to NoviXus through the following options:

- Provider E-prescribes to NoviXus
- Provider Faxes: 1-877-395-4836
- Provider Calls: 1-877-269-1159
- Patient Mails Paper Prescription: NoviXus Pharmacy Services, PO Box 8004, Novi, MI 48376-8004

Step 3: *Complete Payment*

Make your copayment through umich.novixus.com, NoviXus app, by phone at 1-877-269-1160, or by mail. NoviXus accepts major credit cards and checks.

How to Order REFILLS:

Refill orders should be placed two weeks prior to when the medication will be needed.

- Online at umich.novixus.com or through the NoviXus Pharmacy app
- By phone at 1-877-269-1160 (24-hour automated phone line)

Generic Drugs

NoviXus Pharmacy Services will fill your order with an FDA-approved equivalent generic, unless otherwise indicated by your prescriber. FDA-approved generic drugs contain the same active ingredients and come in the same dosage forms as their brand-name counterparts, and must meet comparable safety, production and performance standards.

Shipping Information

Your prescription order will be shipped using U.S. Mail. Some items may be shipped by expedited courier. Refrigerated items are shipped in accordance with FDA and manufacturer's specifications. For your security, some controlled substances may require a signature at delivery.

Prescriptions cannot legally be mailed from a mail order pharmacy (or any other pharmacy operating within the United States) to locations outside of the United States, with the exception of U.S. territories, protectorates and military installations.