



PRESCRIPTION DRUGS

Your pharmacy benefits explained

Top tips to make the most of your coverage and save money

Do you have a prescription and wonder what to do next? Here's a guide to walk you through the basics of your pharmacy benefits, starting with the most common questions from students like you.

Q What is a drug list?

A drug list is a list of drugs that are covered under your prescription drug benefit. How much you pay out of pocket is determined by whether your drug is on the list and at what coverage level, or tier.

Q What if my doctor prescribes a drug that is not on the drug list?

If a drug is not on the drug list, call the number on your Blue Cross and Blue Shield of Illinois member ID card to see if the drug may be covered.

Q What is a generic drug?

A generic drug is the same as a brand name drug in dose, strength, performance and use. Generics are also approved by the FDA. But generic drugs often cost less.

Q Can I get a brand drug when a generic equivalent is available?

Some plans may require you to pay more if your doctor prescribes a brand drug when a generic equivalent is available. A generic equivalent is made with the same active ingredient(s) at the same dosage as the brand drug.

Q What if my drug has a special requirement or limit?

Some drugs on the drug list may have additional requirements, or extra steps to take, before you can fill your prescription. You may need to meet certain criteria for approval. Or, some drugs may have limits on how much medicine can be filled per prescription or in a given time span.

Q What if I have questions?

Ask your doctor or pharmacist about the choices you have and which drug is right for you. Remember, treatment decisions are always between you and your doctor. If you have any questions about your prescription drug benefit, see your plan materials or call the number on your member ID card.

Ways to save:

- View the BCBSIL drug list. Ask your doctor to check this list when recommending prescription drug options for you.
- Fill your prescriptions at an in-network pharmacy to save money.
- Check with your Student Health Center (if available) to see if they offer an on-site medication distribution program.
- If you regularly take prescription drugs, consider using the home delivery services (if available) to get up to a 90-day supply of covered long-term prescription medicines shipped directly to you. You'll want to allow at least one week to get any prescription refills.

MedsYourWay®

MedsYourWay is a program that works with your BCBSIL health plan pharmacy benefit to automatically search for and find lower costs for your eligible medicines. When you fill your prescriptions at a participating in-network retail pharmacy, simply show your BCBSIL member ID card to the pharmacist, and you'll pay the lower available price option at check-out.

Online resources:

- Take advantage of the pharmacy's online refills, text or smartphone app reminders.
- Go to **bcbsil.com** and log in to Blue Access for MembersSM:
 - get information about your out-of-pocket cost for a prescription, view your claims history and more.
 - access Medication Finder under "Find Care" to search your medications and discover saving opportunities at the most convenient pharmacy locations.

The relationship between Blue Cross and Blue Shield of Illinois and contracting pharmacies is that of independent contractors, contracted through a related company, Prime Therapeutics LLC. Prime Therapeutics also administers the pharmacy benefit program. BCBSIL, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics.

MedsYourWay is not insurance. It is a drug discount card program that compares the drug discount card price for an eligible medication at participating pharmacies to the member's benefit plan cost share amount and then applies the lower available price. Eligible medications are subject to change, prescription prices may vary by location and not all pharmacies participate. MedsYourWay is administered by Prime Therapeutics, LLC, which administers the pharmacy benefit management services for your plan.

Blue Cross and Blue Shield of Illinois complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, sex, gender identity, age, sexual orientation, health status or disability. To get help and information in your language at no cost, please call us at 855-710-6984.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 855-710-6984 (TTY: 711).
UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 855-710-6984 (TTY: 711).



Health care coverage is important for everyone.

If you, or someone you are helping, have questions, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 855-710-6984. We provide free communication aids and services for anyone with a disability or who needs language assistance.

We do not discriminate on the basis of race, color, national origin, sex, gender identity, age, sexual orientation, health status or disability. If you believe we have failed to provide a service, or think we have discriminated in another way, contact us to file a grievance.

Office of Civil Rights Coordinator
300 E. Randolph St., 35th Floor
Chicago, IL 60601

Phone: 855-664-7270 (voicemail)
TTY/TDD: 855-661-6965
Fax: 855-661-6960

You may file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, at:

U.S. Dept. of Health & Human Services
200 Independence Avenue SW
Room 509F, HHH Building 1019
Washington, DC 20201

Phone: 800-368-1019
TTY/TDD: 800-537-7697
Complaint Portal: <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>
Complaint Forms: <https://www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html>

To receive language or communication assistance free of charge, please call us at 855-710-6984.

Español	Llámenos al 855-710-6984 para recibir asistencia lingüística o comunicación en otros formatos sin costo.
العربية	لتلقي المساعدة اللغوية أو التواصل مجاناً، يرجى الاتصال بنا على الرقم 855-710-6984.
繁體中文	如欲獲得免費語言或溝通協助，請撥打855-710-6984與我們聯絡。
Français	Pour bénéficier gratuitement d'une assistance linguistique ou d'une aide à la communication, veuillez nous appeler au 855-710-6984.
Deutsch	Um kostenlose Sprach- oder Kommunikationshilfe zu erhalten, rufen Sie uns bitte unter 855-710-6984 an.
ગુજરાતી	ભાષા અથવા સંચાર સહાય મફતમાં મેળવવા માટે, કૃપા કરીને અમને 855-710-6984 પર કોલ કરો.
हिंदी	निःशुल्क भाषा या संचार सहायता प्राप्त करने के लिए, कृपया हमें 855-710-6984 पर कॉल करें।
Italiano	Per assistenza gratuita alla lingua o alla comunicazione, chiami il numero 855-710-6984.
한국어	언어 또는 의사소통 지원을 무료로 받으려면 855-710-6984번으로 전화해 주세요.
Navajo	Niná: Doo bilagáana bizaad dinits'á'góó, shá ata' hodooni nínízingo, t'áájíík'eh bee náhaz'á. 1-866-560-4042 jí' hodíilni.
فارسی	برای دریافت کمک زبانی یا ارتباطی رایگان، لطفاً با شماره 855-710-6984 تماس بگیرید.
Polski	Aby uzyskać bezpłatną pomoc językową lub komunikacyjną, prosimy o kontakt pod numerem 855-710-6984.
Русский	Чтобы бесплатно воспользоваться услугами перевода или получить помощь при общении, звоните нам по телефону 855-710-6984.
Tagalog	Para makatanggap ng tulong sa wika o komunikasyon nang walang bayad, pakitawagan kami sa 855-710-6984.
اردو	مفت میں زبان یا مواصلت کی مدد موصول کرنے کے لیے، براہ کرم ہمیں 855-710-6984 پر کال کریں۔
Tiếng Việt	Để được hỗ trợ ngôn ngữ hoặc giao tiếp miễn phí, vui lòng gọi cho chúng tôi theo số 855-710-6984.