



# PRESCRIPTION DRUGS & THE MEDICA DRUG LIST

ENROLLED IN INDIVIDUAL & FAMILY PLANS



## YOUR PLAN COVERS DRUGS ON THE MEDICA DRUG LIST

The Medica Drug List (drug list) includes drugs that provide the most value and have proven safety and effectiveness. Your drugs will be covered under one of seven different price categories (called tiers) that are arranged according to drug costs. Your cost may vary depending on which tier your drug belongs.

### Drug tiers:

- » Preventive drugs are covered at 100 percent
- » Retail drugs are divided into four tiers: preferred generic, 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 drug list. 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](http://medica.com) or request a paper copy by calling our Pharmacy Help Desk at **1-800-364-6331**.
2. **Fax your completed form to Medica.** You may fax your completed form to **1-855-245-2134** (for non-specialty drugs) or **1-866-249-6155** (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.)



### CHECK DRUG COST AND COVERAGE TOOL

Log into your secure member site on [medica.com/IndividualLogin](http://medica.com/IndividualLogin) and use the Check Drug Cost and Coverage 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

# 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, if you are currently undergoing treatment with a drug not included on the list. 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.

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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.