Your Student Health Insurance Plan
Pharmacy Transition Program

Effective August 1, 2017, your pharmacy coverage will transition from OptumRX® to Blue Cross Blue Shield of Massachusetts. Your prescription medications will be administered by Express Scripts® (ESI), an independent company working on behalf of Blue Cross.

We’re excited to have you as a member and to provide you with the support you need to get the most value out of your health plan. It’s important to us to prevent any disruptions to your current prescriptions. If you have any questions, please contact Harvard University Student Health Program Member Services at 1-617-495-2008 or MServices@huhs.harvard.edu.

Please note: your existing authorization through OptumRX will transition over to your new plan.

What does this mean for you?
Beginning August 1, 2017, you’ll have access to ESI’s nationwide pharmacy network, which provides coverage for over 4,000 prescription medications. Our covered drug list is based on a three-tiered cost structure. When you fill a prescription, the amount you pay the pharmacy is determined by the tier your medication is on. Medications are placed on tiers according to a variety of factors, including their use, their cost, and if equivalent or alternative medications are available. The pharmacy will tell you the amount you owe.

To find a complete listing of covered drugs, click here.

When will I receive my Blue Cross Blue Shield ID card and prescription information?
You’ll receive one ID card, which will have both your medical and prescription information. Your new member ID card will arrive at the beginning of August. Please be sure to present your new card when going to a participating network pharmacy on or after August 1, 2017. The pharmacy will need this card to process your prescriptions. Your existing OptumRx ID card will be invalid as of August 1.

If I’m not switching pharmacies, do I still need to present my new card?
It’s important to present your new member ID card to your pharmacy for any prescriptions you need filled on or after August 1, 2017. Your member ID card has contact information for questions about your prescription benefit.
Is there a website for members?
For more information about your prescription coverage, visit bluecrossma.com/pharmacy. You can also call Member Service at the number on the front of your Blue Cross ID card.

What pharmacy locations are in the ESI network?
ESI’s pharmacy network includes over 68,000 pharmacies nationwide. In addition to the Harvard University Health Services Pharmacy, most national chains—including CVS—are part of the ESI network. To find a list of pharmacy locations go to bluecrossma.com/pharmacy, click the Express Script’s pharmacy locator tool, and select Traditional Network.

How do I know what my copay is?
Just like your previous pharmacy coverage, prescriptions fall into three tiers that determine your copayment. Prescription copayments have an out-of-pocket maximum: $1,300 for individuals and $2,600 per plan year for the family plan. Once you meet your out-of-pocket maximum for prescription drugs, you won’t be charged a copayment for your prescriptions for the rest of the plan year.

In a 3-Tier Structure: Usually, you’ll pay the least for Tier 1 medications and the most for Tier 3 medications.

<table>
<thead>
<tr>
<th>Tier</th>
<th>Copayment</th>
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<tbody>
<tr>
<td>Tier 1</td>
<td>$17</td>
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<tr>
<td>Tier 2</td>
<td>$40</td>
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<tr>
<td>Tier 3</td>
<td>$55</td>
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Additional Copayment Information: You’ll pay a $0 copayment for prescription contraceptive products that are generic or brand name without a generic equivalent and 50% co-insurance for Malarone, Mefloquine, Coartem and Primaquine.

To view your copayment online, create a MyBlue Account at bluecrossma.com/myaccount, and select “Review Benefits.”

Important Information Regarding Non-Formulary Drugs: If you fill a prescription for a non-covered medication on or after August 1, 2017, you’ll be allowed a one-time fill of your medication. You can then work with your doctor to switch to a covered alternative or over-the-counter equivalent. Your doctor can apply for a formulary exception if medically appropriate. Please note that a one-time fill is not available for medications with an over-the-counter equivalent.

What happens to existing prior authorizations?
If you have one or more existing prior authorizations that have already been approved, your existing authorization through OptumRx will transition over to your new plan, with minimal disruptions.

Where can I find a list of drugs covered under my new plan?
To learn whether your medications will be covered, you can visit bluecrossma.com/medications, and use our Medication Look Up tool. The medication information represents our standard pharmacy coverage; your individual coverage may vary.
What if I need to get a specialty medication or have an existing specialty medication filled through BriovaRx®?

Accredo, an independent company, manages your specialty medications on behalf of Blue Cross. Specialty medications are drugs that typically require special handling, administration, or monitoring, and most likely need special approval to order. Beginning August 1, 2017, these medications can be purchased through Harvard University Health Services (HUHS), Accredo, or Freedom Fertility. If bought at any other pharmacy, including Briova, you’ll pay the full cost of the medication.

#### Specialty Network Pharmacy Information

<table>
<thead>
<tr>
<th>Harvard University Health Services</th>
<th>Accredo Health Group, Inc.</th>
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<tbody>
<tr>
<td>Richard A. and Susan F. Smith</td>
<td>1-877-988-0058</td>
</tr>
<tr>
<td>Campus Center – 1st Floor</td>
<td>accredo.com</td>
</tr>
<tr>
<td>75 Mt. Auburn Street</td>
<td></td>
</tr>
<tr>
<td>Cambridge, MA 02138</td>
<td>Freedom Fertility Pharmacy</td>
</tr>
<tr>
<td>1-617-496-6661 Toll-free 1-866-486-9150</td>
<td>1-866-297-9452</td>
</tr>
<tr>
<td>huhs.harvard.edu/services/pharmacy</td>
<td>freedomfertility.com</td>
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Note: Your prescription must be written by an HUHS clinician if you want to fill it at the HUHS pharmacy.

Any active prescriptions with refills will be transferred from Briova to Accredo (or Accredo’s Fertility Pharmacy for fertility medications). Members currently filling specialty medications through Briova will receive a letter with additional information regarding the Accredo pharmacy.

Questions?

If you have any questions about this transition, contact our Member Service team at 1-800-257-8141.