

Medco Prescription Drug Changes Effective 11/1/2009

Medco Coverage Review and Prior Authorization Process Specialty Medication Access: Accredo Personalized Medicine Program

The endowed health plan offers faculty and staff members and their families a very comprehensive prescription drug program at relatively low costs to the consumer. Prescription drugs have become an important part of health plan coverage. The prescribing physicians in our region that serve most of our participants have been relatively comparable with national prescribing practices. But, this service category can be very expensive to plan participants and to the plan overall. So, in the interests of patient safety, eliminating waste in the system of delivery and yet maintaining physician-guided care, Cornell will be implementing new coverage management programs effective November 1, 2009. These complement a few management programs already in place that have shown to effectively control costs.

The endowed health plan will also introduce a new service, which will help physicians and patients access a new category of so-called 'specialty drugs' at the lowest possible cost and with enhanced support for the special delivery and use requirements of this class of drugs. As of November 1, 2009, most specialty medications will only be accessed through Accredo, a subsidiary of Medco Health Solutions.

Finally, Cornell will support a pre-testing program that will help doctors and patients determine in advance how a patient will metabolize a specific drug for advanced treatment. This program called Personalized Medicine will be paid for by the health plan upon recommendation from your prescribing physician.

All three of these changes to your prescription drug benefit program are detailed below. All three go into effect on November 1, 2009. If you have any questions about these programs after reading the information below, please call Benefit Services at (607) 255-3936.

Coverage reviews/prior authorization:

Some medications are not covered unless you receive approval through a coverage review. This review uses plan rules based on FDA-approved prescribing and safety information, clinical guidelines, and uses that are considered reasonable, safe, and effective. Likewise, there are other medications that *may* be covered, but with limits (for example, only for a certain amount or for certain uses) unless you receive approval through a review.

During this review, Medco asks your doctor for more information before the prescription can be covered under your plan. Cornell has sent out advance notice of this program to most of the prescribing physicians in the region.

The following drug categories listed are subject to the coverage review program and will require pre-approval. Those drugs with an asterisk (*) have previously been subject to a coverage review. Please note that the medications and drug categories listed are subject to change.

Note: This is not a complete list of affected medications. The drugs listed in each category are only examples. You can contact Medco (800) 417-1764, 8am to 9pm EST, Monday through Friday) if you need to review the medications for each category.

- Allergy & Asthma Therapy (such as *Xolair*[®])
- *Antineoplastic Agents (*Gleevec*[®])
- *Appetite & Weight Loss Therapy (such as *Meridia*[®])
- Erythroid Stimulants (such as *Procrit*[®])
- Growth hormones (such as *Genotropin*[®] and *Saizen*[®])
- Interferon Agents (such as *Peg-Intron*[®])
- Multiple Sclerosis Therapy (such as *Rebif*[®])
- Myeloid Stimulants (such as *Neulasta*[®])
- *Smoking Deterrents (such as *Chantix*[®])
- *Erectile Dysfunction Agents (such as *Viagra*[®] quantity limits)

Coverage Review/Step Therapy

Beginning November 1, 2009, your plan will use a coverage tool called step therapy, which requires you to try first one or more specified medications to treat a particular condition before the plan will cover another (usually more expensive) drug that your doctor may have prescribed. Step therapy is intended to reduce costs for you and your plan by encouraging the use of medications that are less expensive but still treat your condition effectively. *This applies only to individuals taking Proton Pump Inhibitors due to certain stomach conditions. The target medications and the preferred alternatives are listed in the box below.*

If you're taking a medication that requires step therapy, you'll receive a letter explaining that your plan will not cover it unless you try the alternative medication first. The letter will also have information on starting a coverage review if your doctor believes that you should take the original medication.

*To avoid potential service disruption, it is important that you discuss the options with your doctor prior to your next medication fill after the effective date of **November 1, 2009**. This will allow time for obtaining a new prescription or completing the coverage review process.*

If you're taking one of these noncovered medications:	Ask your doctor about these lower-cost alternatives:
<i>Aciphex</i> [®] , <i>Kapidex</i> , <i>Prevacid</i> [®] , <i>Prilosec</i> [®] 40 mg, <i>Protonix</i> [®] , <i>Zegerid</i> [®] , and pantoprazole	omeprazole, and <i>Nexium</i> [®]

The coverage review process

To save you time and help avoid any confusion, we'd like to highlight the coverage review process, both at a retail pharmacy and when using mail order.

At a retail pharmacy in your plan:

- You drop off the prescription with your local pharmacist, who submits the information to Medco. If a coverage review is necessary, Medco automatically notifies the pharmacist, who in turn tells you that the prescription needs to be reviewed for prior authorization.
- You, the pharmacist, or your doctor may start the review process by calling Medco toll-free at (800) 753-2851, 8 am to 9 pm, Eastern Time, Monday through Friday.
- Medco sends your doctor a fax form, requesting more information. After receiving the necessary information from your doctor, Medco sends you and the doctor a letter (usually within two (2) business days), confirming whether or not coverage has been approved.
- If coverage is approved, you simply pay the normal co-payment for the medication. If coverage is not approved, you will be responsible for the full cost of the medication. If appropriate, you can talk to your doctor about alternatives that may be covered. (*You have the right to appeal the decision. Information about the appeal process will be included in the letter that you receive.*)
- *Special note:* If your plan has a limit on the amount of medication covered, your pharmacist will fill your prescription up to the amount allowed. If the prescription exceeds the amount covered by your plan, Medco will tell the pharmacist whether a review might help you obtain coverage for the additional amount.

Through your mail-order pharmacy, Medco By Mail:

- You mail the prescription to Medco.
- If a coverage review is necessary, Medco calls your doctor to start the review process. After receiving the necessary information from your doctor, Medco sends you and the doctor a letter (usually within two (2) business days), confirming whether or not coverage has been approved.
- If coverage is approved, you receive your medication and simply pay the normal co-payment for the medication. If coverage is not approved, the prescription is returned to you. (*You have the right to appeal the decision. Information about the appeal process will be included in the letter that you receive.*)
- *Special note:* If your plan has a limit on the amount of medication, then Medco will only dispense the amount allowed. Medco will send you a statement that explains the limit and tells you whether a review might help you obtain coverage for the additional amount.

You can also visit Medco Health Solutions online at **www.medco.com**. After you log in, click “Price a medication” in the “Prescriptions & benefits” section. After selecting a medication, see if there are any coverage notes. If you are a first-time visitor to our website, take a moment to

register. (Please have your member ID number as listed on your Medco ID card and a recent prescription number ready.)

Frequently Asked Questions

How much do I pay if the medication is approved?

If coverage is approved, you simply pay your normal co-payment for the medication. If coverage is not approved, you will be responsible for the full cost of the medication.

How do I find out more about medications requiring coverage review/prior authorization?

For more information or a detailed listing of medications, please visit www.medco.com and click on “Drug information” in the “Prescriptions & benefits” section. If you are a first-time visitor to www.medco.com, take a moment to register. (Be sure to have your member ID number as listed on your Medco ID card and a recent retail or Medco By Mail prescription number handy.) Or call Medco Member Services at (800) 230-0508.

Who approves the coverage review?

Medco will contact your doctor to find out why the nonpreferred medication is needed. Medco will make a determination, approval or denial of the coverage, based on information received from the doctor. If coverage is approved, you simply pay your normal co-payment/coinsurance for the medication. If coverage is not approved, you will be responsible for the full cost of the medication or, if appropriate, you can talk to your doctor about alternatives that may be covered. (You have the right to appeal the decision. Information about the appeal process will be included in the letter that you receive.)

When is a coverage review not approved?

The most common reason for a denial is that a doctor does not respond to the coverage review request.

What happens if I don't obtain a coverage review before filling my next prescription/refill for the nonpreferred medication?

At retail: The prescription will be stopped, and you'll be informed that a coverage review is needed. Your options include paying 100 percent of the cost, waiting for a coverage review, or trying an over-the-counter (OTC) product, if applicable.

At Medco By Mail: The prescription will be stopped, and a Medco pharmacist will reach out to your doctor for a coverage review. If your doctor authorizes the switch, the new medication will be dispensed and a letter will be sent to you. If a coverage review is approved, the medication will be dispensed as written. If a coverage review is not approved, your options include paying 100 percent of the cost or trying the over-the-counter (OTC) product if applicable.

Medco will not switch a medication without approval from the doctor.

How long does a coverage review take to complete?

The time needed to complete the coverage review depends on your doctor's response to Medco's request.

What if I don't agree with the coverage review decision?

You can file an appeal with Medco at 8111 Royal Ridge Parkway, Irving, TX 75063

Are all members affected?

- Members with a current prescription as of September 2009 for one of the targeted drugs will be pre-notified.
- Coverage reviews will be required effective November 1, 2009.
- If you begin taking a medication subject to a prior authorization or a medication on the Step Therapy list after September 2009, you will not receive written pre-notification from Medco.
- Contact Medco Member Services or visit Medco online at www.medco.com to see if your prescription requires prior authorization or is subject to step therapy.

Specialty Drug Access Program

Specialty medications are drugs that are used to treat complex conditions, such as cancer, growth hormone deficiency, hemophilia, hepatitis C, immune deficiency, multiple sclerosis, and rheumatoid arthritis. Whether they're administered by a healthcare professional, self-injected, or taken by mouth, specialty medications require an enhanced level of service.

To get the most from your prescription drug benefit, purchase your specialty medications from Accredo. If you use a pharmacy other than Accredo after November 1, 2009 to purchase any of the specialty medications, you will be responsible for their full cost.

The services Accredo provides include:

- Toll-free access to specialty-trained pharmacists and nurses 24 hours a day, 7 days a week
- Expedited, scheduled delivery of your medications at no additional charge
- Registered nurses available for in-home medication administration, when clinically appropriate Necessary supplies, such as needles and syringes, provided with your medications
- Refill reminder calls

If you have questions about specialty medications, please call Accredo at 1 800 501-7260.

Personalized Medicine:

Did you know that different people can respond to the same medication in different ways? That's because there are genetic differences between us that determine how well we respond to certain drugs. Fortunately, new tests are available that measure how a person metabolizes certain drug components. The results of these tests can give doctors important information about the right drugs and doses for individual patients. Effective November 1, 2009 your prescription drug plan will pay for the Personalized Medicine Program that helps you gain the full benefit of these tests.

The Personalized Medicine Program currently focuses on patients who are using warfarin, usually for a heart condition, or tamoxifen for breast cancer. The conditions, drugs, and testing covered by the program will change from time to time as new tests become available and are included in the program.

If your medication history indicates that the testing could be beneficial for you, a Medco pharmacist will contact your physician to discuss the program. If your doctor agrees that the test results would be helpful, you will be contacted by a pharmacist to let know that the testing is available. If you agree to participate, you will receive a cheek swab test that you can administer on your own. It's as simple as rubbing a swab on your cheek and mailing it back in an envelope.

The results of your test will be sent to your doctor and to a Medco pharmacist who has received special training in personalized medicine. The pharmacist is available to help your doctor interpret the results of your test. Of course, your participation is voluntary, and your doctor is still solely responsible for deciding which drug and dose is right for you.

For up-to-date information on the conditions and drugs covered by the program, please call Medco Member Services at (800) 230-0508.

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