



100% Pass-Through
360° Disclosure
Stewardship
Innovation

Navitus – Your Pharmacy Benefits

*State and Wisconsin Public Employers Group
Health Insurance Program*

Presented By: Navitus Health Solutions
September 2010



N3465-0610



Agenda

- About Navitus
- What is a Pharmacy Benefit Manager (PBM)?
- What are your pharmacy benefits?
- What is a formulary and how is it developed?
- Navitus cost-saving programs
- Additional Resources



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What is Navitus?

- Navitus is your Pharmacy Benefits Manager (PBM)
 - Our mission is to deliver superior service and improve the health of members while lowering drug costs to provide the best value possible
- No matter which health plan you choose, your prescription drug coverage is through Navitus
- Coverage for medical benefits differ from your pharmacy benefits
 - The health plans contract directly with ETF to administer and pay claims for your health care benefits, however
 - Your *pharmacy benefits* are administered *separately* by Navitus Health Solutions
 - The State of Wisconsin Group Insurance Board oversees both programs

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What is a Pharmacy Benefit Manager?

- A PBM administers prescription drug benefits and is responsible for the following:
 - Partnering with ETF to offer prescription drug coverage to its members and control rising costs
 - Processing and paying prescription drug claims
 - Providing cost savings and safety programs
 - Maintaining the drug formulary
 - Negotiating rebates with drug manufacturers
 - Negotiating the pharmacy network discounts on prescription drugs

100% of all savings achieved through negotiation of improved pharmacy network discounts and rebates are passed on to the Group Health Insurance Programs

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Pharmacy Benefit ID Card





Pharmacy Benefit Manager
RxBIN 610602
RxPCN ETF
RxGrp 83359

SUBSCRIBER J SAMPLE
ID: 12345678

23456789
 SPOUSE SAMPLE
 34567891
 CHILD SAMPLE

Navitus Customer Care
 1-866-333-2757 (toll-free)
 TTY Only 1-920-225-7005

Hours
 24 hours a day, 7 days a week

Mailing Address:
 Navitus Health Solutions
 P.O. Box 999
 Appleton, WI 54912-0999
www.navitus.com

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State and Public Employer Group Health Plan Pharmacy Benefits

	Participating Retail Pharmacy (up to 30 days) Member Pays...	Participating Retail Pharmacy (up to 90 days) Member Pays...	Mail Order (up to 90 days) Member Pays...	Applies to Out-of-Pocket Maximum
Level 1 – Generics, certain brand drugs and certain over-the-counter (OTC) products as specified by the benefit plan	\$5 Copay	\$15 Copay	\$10 Copay	Yes
Level 2 – Brand drugs and certain high cost generic drugs	\$15 Copay	\$45 Copay	\$30 Copay	Yes
Level 3 – Covered Non-Formulary drugs & Compounds	\$35 Copay	\$105 Copay	\$105 Copay	No
Formulary blood glucose monitors	\$0	\$0	\$0	N/A
Disposable diabetic supplies, diaphragms, spacers, peak flow meters	20% Coinsurance of drug price	20% Coinsurance of drug price	20% Coinsurance of drug price	Yes

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State and Public Employer Group Health Plan **Out-of-Pocket Maximums**

Plan	Annual Out-of-Pocket Maximum Member Pays...
Participants enrolled in an HMO or in Medicare Plus	\$410 <i>Individual</i> \$820 <i>Family</i>
State Participants enrolled in State Maintenance Plan (SMP)	\$410 <i>Individual</i> \$820 <i>Family</i>
State Participants enrolled in Standard Plan	\$1,000 <i>Individual</i> \$2,000 <i>Family</i>
Local Participants enrolled in the Standard Plan or State Maintenance Plan (SMP)	No annual out-of-pocket maximum

IMPORTANT

- When you meet the out-of-pocket maximum, you pay \$0 for Level 1 and 2 prescription drugs, insulin and diabetic supplies
- Level 3 copayments do NOT apply toward the out-of-pocket maximum

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What is a Formulary and How is it Developed?

- **A formulary is a list of drugs covered as part of your pharmacy benefit**
- **The Pharmacy and Therapeutics Committee (P&T) decides what drugs to place on your formulary**
 - Medications are chosen based on clinical therapeutic value, effectiveness, drug interactions and side effects
 - Drug products are then reviewed to compare costs of similar medications
 - The committee reviews on a continuous basis to ensure the formulary is up to date and your needs are met
 - If a drug you are on is moved to a higher level or no longer covered, you will be notified by Navitus and given a transition period to make the change

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Your Formulary

Formulary Requirements

- Some medications in the formulary require:
 - **Prior Authorization (PA)** - Authorization is initiated by the prescribing physician
 - **Step Therapy (ST)** - In order for a drug to be covered, you may need to try one or more alternatives first
 - **Quantity Limits (QL)** - The primary reason for quantity limits is for safety purposes
- Applicable medications are designated on your formulary

Please note: Your formulary can change at any time in order to provide you with the most up-to-date access to drugs

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Example of Your Formulary

State of Wisconsin Group Health Insurance Program Formulary

Alphabetical Index
Last Updated* 6/16/2010

Drug Name	Special Code	Level	Chapter
8-MOP	-	2	Dermatologicals
ABILIFY	PA/ ϕ	2	CNS & ANS Agents
ABILIFY DISCMELT	PA	2	CNS & ANS Agents
ACANYA	-	3	Dermatologicals
acarbose (PRECOSE equiv)	-	1	Diabetic Agents
ACCOLATE	PA	3	Respiratory Agents
ACCU-CHEK ACTIVE METER (No Copay)	-	-	Diabetic Agents
ACCU-CHEK ADVANTAGE METER (No Copay)	-	-	Diabetic Agents
ACCU-CHEK AVIVA CONTROL SOLUTION	-	20%	Diabetic Agents
ACCU-CHEK AVIVA METER (No Copay)	-	-	Diabetic Agents
ACCU-CHEK AVIVA TEST STRIPS	-	20%	Diabetic Agents
ACCU-CHEK COMPACT METER (No Copay)	-	-	Diabetic Agents
ACCU-CHEK COMPLETE METER (No Copay)	-	-	Diabetic Agents
ACCU-CHEK CONTROL SOLUTIONS	-	20%	Diabetic Agents
ACCU-CHEK TEST STRIPS	-	20%	Diabetic Agents
ACCUNEBS	-	3	Respiratory Agents
ACCU-PRIL	-	3	Cardiovascular
ACCURETIC	-	3	Cardiovascular
ACCUTANE	-	3	Dermatologicals
ACCUZYME OINT	-	2	Dermatologicals
acetabutool (SECTRAL EQUIV)	-	1	Cardiovascular
ACEON	-	3	Cardiovascular
acetaminophen/codeine (TYLENOL #3 EQUIV)	-	1	CNS & ANS Agents

Brand vs. Generic Drugs

- **Are generics as good as brand name drugs?**
 - Yes, the FDA requires generic companies to prove that the generic version of the brand name drug provides the same benefits as the branded product
 - The active ingredients are the same
- **What is your benefit?**
 - If a generic equivalent is available, the brand name drug is no longer covered (benefit plan determines any exceptions)
 - You pay a lower copayment for the generic drug
 - If your physician requests the brand name drug on the prescription order, it is covered for you at the highest copayment level

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Participating Pharmacies

- Navitus contracts with more than 62,400 national chains and independent pharmacies throughout the United States
- Certain retail pharmacies are contracted to provide a 90-day benefit
 - Convenient for members
 - Allows for 90-day supply of medication to be dispensed at one time

Please Note: Three 30-day fills are required before a 90-day fill is allowed
- A pharmacy can refill most prescriptions when 70% of the medication is used
- Mail order service through Prescription Solutions
Phone 1-800-908-9097 or Online www.rxsolutions.com

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Vacation -Travel Overrides

- **If traveling less than one month**
 - Have your pharmacy call Navitus Customer Care to enter an override for an additional one-month supply
- **If traveling for more than one month (in the U.S.)**
 - Fill your prescription by mail order prior to your trip
 - Request a prescription transfer
 - Request an additional prescription to take to a participating pharmacy in your travel location
- **If traveling for more than one month (outside the U.S.)**
 - Have your pharmacy call *Navitus Customer Care* to enter override for up to a 90 day supply for out-of-country travel

Please note: In all cases, make sure your prescription is written for the quantity needed for your travel plans

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Programs to Save You Money Tablet-Splitting

- Rx Cents (tablet splitting): Breaking a higher-strength tablet in half to deliver the same prescribed dose
 - You get the same medication and dosage, while purchasing fewer tablets and saving on your copayment
 - Medications in this program are denoted with “¢” on your formulary
 - By splitting your tablets, your copayment is also cut in half

Sample

Program	Product and Strength	Quantity	Cost to Member	Member Annual Savings
WITHOUT TABLET SPLITTING	Drug A 40 mg tablets	30	\$15.00	\$0
WITH TABLET SPLITTING	Drug A 80 mg tablets	15	\$7.50	\$90.00

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Programs to Save You Money **Generic Waiver Program**

- Allows you to sample a select group of medications as alternatives to higher cost brand equivalents
 - Medications in this program are denoted with a “GW” on your formulary
- Your first fill costs you \$0
 - Your normal copay resumes after the first fill
- Your physician only needs to write a prescription for one of the program medications
 - The zero dollar copay will apply automatically at a retail or mail order pharmacy

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Programs to Save You Money **Mail Order**

Available through *Prescription Solutions*

- Provides up to a 90-day supply for two copayments instead of three
 - Does not apply to Level 3 medications
- Generally recommended for *maintenance* medications (medications you take for longer periods of time)
- To register
 - Call Prescription Solutions: **1-800-908-9097** Monday – Friday
 - Access Prescription Solutions Web site www.rxsolutions.com
 - Fill out the brochure sent with your member materials upon enrollment
- You will need a prescription from your physician for a 90-day supply
 - Your physician can fax this for you

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Other Navitus Programs **Navitus Specialty Rx**

- Provided by *Diplomat Specialty Pharmacy*
- Specialty medications are high-cost medications requiring special handling and are often injectable
- Free delivery to your home, physician's office or other location
 - Medication consultations with pharmacists experienced in providing care to patients with complex medical conditions
 - Refill reminders to help you avoid running out of medication
- To you access this service
 - You or your physician can call Navitus SpecialtyRx toll-free at **1-877-651-4943**

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Your Pharmacy Resources Where to find information

- *It's Your Choice*: Reference Guide
- *It's Your Choice*: Decision Guide
- Member Booklet from Navitus
- Navi-Gate for Members at www.navitus.com
 - Activate your account using the Member Login link
- Navitus Customer Care
 - Toll-free at **1-866-333-2757**
 - Available 24 hours, seven days a week

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Thank you...