



Highlights of

TEAMSTERSCARE PHARMACY BENEFITS

MOVING & STORAGE AND TRADE SHOW INDUSTRY MEMBERS

PHARMACY & PRESCRIPTION DRUGS

TeamstersCare offers several options for prescription drug coverage

- **Walk-in Service:**

Charlestown & Stoughton TeamstersCare In-house Pharmacies – up to 90-day supply.

TeamsterShare Payment per prescription: \$5 generic/\$15 brand name, if no generic available

Walk-in or have your doctor phone, fax, or e-prescribe your prescription

Monday-Saturday hours; health-related counseling

At TeamstersCare Walk-in Pharmacies, refill your prescriptions via telephone or online.

Telemanager...an automated telephone system available to refill a prescription at the in-house TeamstersCare Pharmacies in Stoughton and Charlestown. Simply follow the prompts and use the keypad on your telephone to submit the information required to refill a prescription. Be sure to have your old prescription available, as you will need the 6 digit refill number.

Refill Netmanager...an online option to refill your prescriptions at the in-house TeamstersCare Pharmacies in Stoughton and Charlestown. Simply go to our website www.teamsterscare.com and click on the TeamstersCare Pharmacy Benefit icon on the left side of the screen. This will bring you to the Refill Netmanager system where you can complete the Online Prescription Refill Form. Be sure to have your old prescription available, as you will need the 6 digit refill number.

- **Mail-Order Service:**

The Medco Pharmacy Mail-Order Service – up to 90-day supply.

Copay per prescription: \$5 generic/\$15 brand name, if no generic is available

To fill a prescription at mail-order:

- mail your prescription and copay along with the Medco Prescription Order Form
- Forms available by calling Medco or online at www.medco.com

For refills through mail-order:

- logon to www.medco.com and click on Order Status, or
- call the Medco automated phone service at 1-877-543-7097, or
- mail a Refill Request Form along with a refill slip or prescription label to Medco

- **Retail Pharmacy Service:**

A retail pharmacy that participates in the national Medco Network – up to 30-day supply.

Copay per prescription: \$10 generic/\$20 brand name, if no generic is available or \$20 + cost difference between brand name & generic, if generic is available

- **Any other non-network retail pharmacy – up to 30-day supply.**

Member pays full amount at point of sale, including copay; submits claim to Medco within 12 months; receives check based on Medco network rates, less amount of copay

Specialty Medications

Certain high cost prescription medications that treat complex conditions

Many available at our in-house TeamstersCare pharmacies (walk-in)

TeamsterShare Payment per prescription: \$15, up to 30-day supply

Or through Accredo, Medco's Specialty Pharmacy (mail-order only) at 1-877-543-7097

Copayment per prescription: \$15, up to 30-day supply

Important Information

Generic vs. Brand - You will *pay less for a generic* prescription than for a brand name. Be sure to *ask your doctor*, whenever you get a new prescription, if the prescription is for a generic. If it's not, ask if there's a generic alternative available that might work just as well for you. In some states, retail pharmacies don't always make generic substitutions, particularly if the pharmacy doesn't have a generic on hand.

TeamstersCare Pharmacies & Medco Mail-Order Copayment - Your copayment will be lower if you get your prescriptions at a TeamstersCare Pharmacy or through Medco mail-order rather than at a retail pharmacy.

Managed Drug Limitations - For certain drugs, the quantity that is covered during a certain timeframe is limited due to safety and utilization concerns, based on FDA approved guidelines and manufacturers' recommendations. Some examples of such drugs are Ambien and Imitrex. Ask one of our TeamstersCare pharmacy staff if you have any questions, or if you would like a list of drugs that currently have quantity limits.

Medication Prior Authorizations

Some drugs require Prior Authorization (PA) before coverage is provided. The drug's prescribed use is evaluated against certain criteria. Examples of drugs currently requiring a PA are Nexium and Crestor. Ask one of our TeamstersCare Pharmacy staff about the process for obtaining a medication PA. In most cases, your doctor will have to fax a completed PA Form to TeamstersCare at 617-241-5025 with certain information needed to make a determination. Forms are available on our website www.teamsterscare.com or at our TeamstersCare Pharmacies. *The list of drugs requiring Prior Authorization is subject to change.*

TeamstersCare Pharmacies Locations and Hours

Charlestown TeamstersCare Pharmacy

552 Main Street-Sullivan Square, Charlestown, MA 02129

Phone: 800-235-0760; Fax: 617-241-5025

Hours: Mon-Thu, 8am - 6pm; Fri & Sat, 8am - 4pm

Stoughton TeamstersCare Pharmacy

1214 Park Street, Stoughton, MA 02072

Phone: 781-297-9764; Fax: 781-297-9370

Hours: Mon, Tue, Thu, Fri, Sat, 8am - 4pm; Wed, 8am - 6pm