What PEBB members need to know about the prescription drug benefit for UMP Classic, UMP Select, UMP CDHP, and UMP Plus

Contact us with any questions
All times are listed in Pacific Time.

Washington State Rx Services (WSRxS)
Prescription drug benefits
Customer Service: 1-888-361-1611 (TRS: 711)
Website Assistance: 1-877-277-7079
ump.regence.com/pebb/benefits/prescriptions
Monday-Friday: 7:30 a.m. to 5:30 p.m.
Available outside these hours with limited services.

Postal Prescription Services
Network mail-order pharmacy
1-800-552-6694
ppsrx.com
Monday – Friday: 6 a.m. – 6 p.m.
Saturday: 9 a.m. – 2 p.m.

Ardon Health
Network specialty pharmacy
1-855-425-4085
ardonhealth.com
Monday – Friday: 8 a.m. – 7 p.m.
Saturday: 8 a.m. – noon

Benefits described are for Public Employees Benefits Board (PEBB) members.
What you’ll pay for covered prescription drugs

You pay a coinsurance for most prescription drugs, which is a percentage of the total cost of the prescription drug. Your coinsurance depends on the total cost of the drug, its tier on the UMP Preferred Drug List (PDL), and the day supply of the prescription. You may purchase up to a 90-day supply for most prescription drugs. For the majority of specialty drugs, you may purchase up to a 30-day supply. Specialty drugs are high-cost injectable, infused, oral, or inhaled drugs or products that require special handling and storage. These are subject to additional rules. You can find out if a drug is a specialty drug by checking the UMP PDL by visiting forms and publications at hca.wa.gov/ump-pdl or by calling WSRxS. Most specialty drugs must be purchased through the plan’s network specialty pharmacy, Ardon Health.
The following table shows how much you will pay for covered prescription drugs.

<table>
<thead>
<tr>
<th>Tier and description</th>
<th>UMP CLASSIC</th>
<th>UMP SELECT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prescription drug deductible</strong></td>
<td>$100 per member</td>
<td>$250 per member</td>
</tr>
<tr>
<td></td>
<td>$300 maximum for family of three or more</td>
<td>$750 maximum for family of three or more</td>
</tr>
<tr>
<td></td>
<td>Separate deductible for medical services</td>
<td>Separate deductible for medical services</td>
</tr>
<tr>
<td><strong>Annual out-of-pocket limits</strong></td>
<td>$2,000 per member</td>
<td>$2,000 per member</td>
</tr>
<tr>
<td></td>
<td>$4,000 per family of two or more max.</td>
<td>$4,000 per family of two or more max.</td>
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</table>

<table>
<thead>
<tr>
<th>Tier and description</th>
<th>Non-Specialty Drugs: All network pharmacies (Retail &amp; mail-order)</th>
<th>Specialty Drugs: Available from Ardron Health, except when a drug can only be dispensed by certain pharmacies</th>
</tr>
</thead>
<tbody>
<tr>
<td>**Preventive *****</td>
<td>No deductible</td>
<td>No deductible</td>
</tr>
<tr>
<td></td>
<td>No coinsurance</td>
<td>No coinsurance</td>
</tr>
<tr>
<td><strong>Value Tier</strong> Specific high-value prescription drugs used to treat certain chronic conditions</td>
<td>No deductible</td>
<td>No deductible</td>
</tr>
<tr>
<td></td>
<td>0-30 day supply: 5% coinsurance or $10*</td>
<td>0-30 day supply: 5% coinsurance or $10*</td>
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<tr>
<td></td>
<td>31-60 day supply: 5% coinsurance or $20*</td>
<td>31-60 day supply: 5% coinsurance or $20*</td>
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<tr>
<td></td>
<td>61-90 day supply: 5% coinsurance or $30*</td>
<td>61-90 day supply: 5% coinsurance or $30*</td>
</tr>
<tr>
<td><strong>Tier 1</strong> Primarily low-cost generic prescription drugs</td>
<td>No deductible</td>
<td>No deductible</td>
</tr>
<tr>
<td></td>
<td>0-30 day supply: 10% coinsurance or $25*</td>
<td>0-30 day supply: 10% coinsurance or $25*</td>
</tr>
<tr>
<td></td>
<td>31-60 day supply: 10% coinsurance or $50*</td>
<td>31-60 day supply: 10% coinsurance or $50*</td>
</tr>
<tr>
<td></td>
<td>61-90 day supply: 10% coinsurance or $75*</td>
<td>61-90 day supply: 10% coinsurance or $75*</td>
</tr>
<tr>
<td><strong>Tier 2</strong> Preferred brand-name prescription drugs and high-cost generic prescription drugs</td>
<td>Deductible applies **</td>
<td>Deductible applies **</td>
</tr>
<tr>
<td></td>
<td>0-30 day supply: 30% coinsurance or $75*</td>
<td>0-30 day supply: 30% coinsurance or $75*</td>
</tr>
<tr>
<td></td>
<td>31-60 day supply: 30% coinsurance or $150*</td>
<td>31-60 day supply: 30% coinsurance or $150*</td>
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<th>UMP PLUS</th>
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<tbody>
<tr>
<td><strong>Prescription drug deductible</strong></td>
<td>$1,400 subscriber</td>
<td>$0</td>
</tr>
<tr>
<td></td>
<td>$2,800 family</td>
<td>Separate deductible for medical services</td>
</tr>
<tr>
<td></td>
<td>Combined medical and prescription drug deductible</td>
<td></td>
</tr>
<tr>
<td><strong>Annual out-of-pocket limits</strong></td>
<td>One member covered: $4,200</td>
<td>$2,000 per member,</td>
</tr>
<tr>
<td></td>
<td>Two or more members covered: $8,400</td>
<td>Two or more members covered: $8,400,</td>
</tr>
<tr>
<td></td>
<td>Once a member meets $7,000 in covered out-of-pocket expenses annually, the plan will pay for covered services at 100% for that member.</td>
<td>$4,000 per family of two or more max.</td>
</tr>
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<td>Deductible applies ** 15% coinsurance (except insulins)</td>
<td>0-30 day supply: 10% coinsurance or $25*</td>
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*Whichever is less.
**Deductible does not apply to covered insulins
***Drugs required under the PPACA/recommended by the U.S. Preventive Services Task Force and the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention
6. If I currently have UMP, will I still be able to get my prescriptions at my current pharmacy?

We are focused on making sure members will be able to access a broad range of pharmacies for their prescription needs. If there’s a change that will negatively impact your coverage, we will contact you at least 60 days before with details about what you need to do.

7. How do I check which pharmacies are network pharmacies in 2022?

To check which pharmacies are available in our 2022 pharmacy network, visit the UMP PEBB Open Enrollment webpage at ump.regence.com/pebb/benefits/oe-2022 and use the 2022 Pharmacy Locator. The 2022 Pharmacy Locator is subject to change. After January 1, 2022, visit the Prescription Drug Coverage webpage at ump.regence.com/pebb/benefits/prescriptions.

Our 2022 pharmacy network will include over 52,000 pharmacies nationwide, including most major chain pharmacies and most independent pharmacies.

8. I’m considering enrolling in UMP and am currently taking a prescription drug. How will UMP cover this drug?

There may be changes in how your prescription drugs are covered under UMP. To get a general idea, use the UMP Preferred Drug List (PDL) by visiting forms and publications at hca.wa.gov/ump-pdl to find out if your prescription requires a preauthorization, has a quantity limit, is a step therapy, or is a specialty drug. The UMP PDL is subject to change.

Preauthorization for non-specialty drugs is waived for the first 90 days you are enrolled in UMP. If you are taking a specialty drug, call WSRxS to request a preauthorization in 2022. We will work with you and your prescribing provider to get information to complete the review of the specialty drug and begin the specialty pharmacy enrollment process. In case there is a delay in processing your prescription, try to refill your prescription before January 1, 2022, to make sure you don’t run out.

9. What if I use a specialty or mail-order pharmacy?

Your specialty pharmacy, Arden Health, and your mail-order pharmacy, Postal Prescription Services (PPS), will remain the same.

10. How can I find out how much my prescription drugs will cost?

To check how much your prescription drugs will cost in 2022, visit the UMP PEBB Open Enrollment webpage at ump.regence.com/pebb/benefits/oe-2022 and use the 2022 Drug Price Check Tool. The 2022 Drug Price Check Tool is subject to change. After January 1, 2022, visit the Prescription Drug Coverage webpage at ump.regence.com/pebb/benefits/prescriptions.

11. How can I save money on prescription drugs that I take every day?

Some ways you may be able to save money are:

- **Postal Prescription Services (PPS) mail-order pharmacy:** You may save on select brand-name drugs when you order from PPS, UMP’s mail-order pharmacy. Use of PPS mail-order is an option, but not required, if you prefer to use a retail pharmacy.

- **Value Tier drugs:** If you are taking a drug to treat diabetes, high cholesterol, high blood pressure, or depression, talk with your provider to see if a Value Tier drug may be right for you. Members covered under the UMP Classic, UMP Select, or UMP Plus plans pay a 5% coinsurance for Value Tier drugs at network pharmacies. For a complete listing of Value Tier drugs, see the UMP PDL on forms and publications at hca.wa.gov/ump-pdl.

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**Frequently asked questions**

1. **Who is eligible to enroll in the UMP plans?**

For information about eligibility and enrollment in the UMP plans, please visit the Health Care Authority (HCA) website at hca.wa.gov/erb.

2. **Who administers the UMP Plans?**

Uniform Medical Plan is a self-insured health plan offered through the HCA’s Public Employees Benefits Board (PEBB) Program. The medical benefits are administered by Regence BlueShield, and the prescription drug benefits are administered by Washington State Rx Services (WSRxS).

3. **What’s changing in 2022?**

- Continuous glucose monitors will only be available under UMP’s prescription drug benefit. This change does not apply to Medicare retirees.
- The WSRxS online pharmacy account might look different, but you will have access to the same pharmacy tools.
- Your prescription information on your ID card is changing. You will need to use the new prescription information beginning January 1, 2022, to purchase drugs. Use your current ID card through December 31, 2021. Your new ID card will not work until January 1, 2022.

4. **Will I still have access to my pharmacy claims history?**

In order to view your previous prescription claims history in 2022, you need to access your prescription claims history by December 31, 2021. Claims histories may be needed for Health Savings Account submissions, Flexible Spending Account submissions, or tax purposes. By viewing your claims history before the new year, you have access to previous claims.

You can view your claims by signing in to your Regence account at ump.regence.com/ump/signin. After you sign in, select “My benefits” and choose the “Pharmacy” tab. Then select “Sign in to your pharmacy account” and select “Claims for [your name].”

If you have questions, please call WSRxS Customer Service at 1-888-361-1611 (TRS: 711).

5. **Will I get a new ID card?**

Yes. A new member ID card will be mailed to you in December 2021. Please remember to show your new ID card at the pharmacy when you have your first prescription filled in 2022. Use your current ID card through December 31, 2021. Your new ID card will not work until January 1, 2022.

If you don’t have a new ID card on hand, you will need to share the following information with your pharmacy starting January 1, 2022:

- PCN: NVTU
- BIN: 610602
- PEBB Rx group #: 10008217

6. **What’s new in the UMP plans for 2022?**

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Preauthorization for non-specialty drugs is waived for the first 90 days you are enrolled in UMP. If you are taking a specialty drug, call WSRxS to request a preauthorization in 2022. We will work with you and your prescribing provider to get information to complete the review of the specialty drug and begin the specialty pharmacy enrollment process. In case there is a delay in processing your prescription, try to refill your prescription before January 1, 2022, to make sure you don’t run out.

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12. I am taking a drug that’s not covered by UMP. How can I request an exception?

If you are prescribed a noncovered drug, and you have tried all alternative drugs and none are found to be effective, or if the alternatives are found to be not medically appropriate, you or your prescribing provider can request an exception by calling WSRxS. WSRxS will work with your prescribing provider to submit the required clinical information. If an exception is approved, you will pay the amounts listed below:

• UMP Classic, UMP Select: Deductible applies, Tier 2 cost-share (30% of the allowed amount, $75 maximum payment per 30-day supply).
• UMP CDHP: Deductible applies, 15% coinsurance.
• UMP Plus: No deductible, Tier 2 cost-share (30% of the allowed amount, $75 maximum payment per 30-day supply).

If an exception is not approved, the drug will not be covered by UMP.

13. I’ve been prescribed an opioid prescription drug. Are there any limits I should know about?

UMP has a policy on how opioid prescription drugs are covered for patients starting on a new opioid prescription. The policy limits opioid prescription drugs to:

• For people ages 20 or younger: 18 pills or 90 ml of liquid per prescription (about a three-day supply).
• For people ages 21 or older: 42 pills or 210 ml of liquid per prescription (about a week’s supply).

The policy limits do not apply to UMP members who are:

• Receiving cancer treatment
• In hospice care, palliative care, or end-of-life care

Find the full policy by visiting forms and publications at hca.wa.gov/ump-forms-pubs.

14. How are compounded drugs covered?

Compounded drugs require preauthorization. If the plan approves the preauthorization, compounded prescription drugs are covered under Tier 2. This applies to all UMP plans except for UMP CDHP, where it is covered the same as any other covered prescription drug. For more information, read your plan’s certificate of coverage by visiting forms and publications at hca.wa.gov/ump-pebb-coc.

15. Who decides coverage changes and what criteria are used?

As a state-sponsored health plan, UMP follows the Washington State Pharmacy & Therapeutics (P&T) Committee coverage recommendations. This committee consists of Washington State health care professionals, including physicians and pharmacists. Not all drug classes are reviewed by the Washington State P&T Committee. For these drug classes, the WSRxS P&T Committee will make tier recommendations to UMP for review and final determination of a drug’s coverage level. The coverage criteria follow the Food and Drug Administration (FDA) guidelines and are reviewed and updated regularly by pharmacists from WSRxS and HCA.

16. Can prescription drugs change tiers, or can UMP stop covering a prescription drug mid-plan year?

Yes, common reasons may include, but are not limited to:

• A more cost-effective alternative is available to treat the same condition.
• A nonprescription alternative, including an over-the-counter alternative, becomes available.

17. Why do some drugs require a preauthorization?

Preauthorizations are in place to ensure the prescribed drugs are medically necessary, appropriate, safe, and cost effective for a condition, and UMP covers the condition that the drug treats. An authorization review can:

• Reduce risks for patients from taking a dosage that is either too high or too low to be effective for the condition being treated.
• Limit drug interactions.
• Identify when there is a need for an additional prescription drug to be taken with the prescribed drug to optimize outcomes.

18. Does having dual coverage pay for my prescription drugs in full?

It depends. UMP uses a type of coordination of benefits called nonduplication of benefits. When UMP pays second to another plan that covers you, we will pay only an amount needed to bring the total benefit up to the amount UMP would have paid if you did not have another plan. When UMP pays as the primary plan, your other plan will determine how much they will pay as secondary coverage.

19. I’m going on vacation and need to refill before I go, what can I do?

You may request a travel override up to two weeks before you leave. You may receive no more than two travel overrides per calendar year, including all travel within or outside the U.S. To request a travel override, call WSRxS.

20. If I paid out of pocket and need to submit a claim, what do I do?

You will need to complete the “UMP (WSRxS) Prescription drug claim form,” which you can get by visiting forms and publications at hca.wa.gov/ump-forms-pubs. Print and mail the completed form to the address listed on the form.

For prescription drugs filled in 2022, there will be a new prescription drug claim form available on January 1, 2022, on the forms and publications page.

Free vaccines, including COVID vaccines and flu vaccines, at certain pharmacies!

Many vaccines are available at no cost to you if you use a network vaccination pharmacy. UMP covers vaccines according to the immunization schedules set by the Centers for Disease Control (CDC), including COVID vaccines, flu vaccines, and other common vaccinations, such as whooping cough (pertussis), tetanus, shingles, cervical cancer, and meningococcal. UMP does not cover travel vaccines or vaccines for employment purposes.

Always show your UMP ID card to the pharmacy when receiving services.

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We follow federal civil rights laws. We do not discriminate based on race, color, national origin, age, disability, gender identity, sex or sexual orientation.

We provide free services to people with disabilities so that they can communicate with us. These include sign language interpreters and other forms of communication. If your first language is not English, we will give you free interpretation services and/or materials in other languages.

If you need any of the above, call Customer Service at: 1-888-361-1611 (TRS: 711)

If you think we did not offer these services or discriminated, you can file a written complaint. Please mail or fax it to:
Washington State Rx Services
Attention: Appeal Unit
PO Box 40168
Portland, OR 97240-0168
Fax: 1-866-923-0412

If you need help filing a complaint, please call Customer Service. You can also file a civil rights complaint with the U.S. Department of Health and Human Services Office for Civil Rights at ocrportal.hhs.gov/ocr/portal/lobbyjsf, or by mail or phone:
U.S. Department of Health and Human Services
200 Independence Ave. SW, Room 509F
HHH Building, Washington, DC 20201
800-368-1019, 800-537-7697 (TDD)

You can get Office for Civil Rights complaint forms at hhs.gov/ocr/office/file/index.html.

If you need any of the above, call Customer Service at: 1-888-361-1611 (TRS: 711)

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If you need help filing a complaint, please call Customer Service. You can also file a civil rights complaint with the U.S. Department of Health and Human Services Office for Civil Rights at ocrportal.hhs.gov/ocr/portal/lobbyjsf, or by mail or phone:
U.S. Department of Health and Human Services
200 Independence Ave. SW, Room 509F
HHH Building, Washington, DC 20201
800-368-1019, 800-537-7697 (TDD)

You can get Office for Civil Rights complaint forms at hhs.gov/ocr/office/file/index.html.

Dave Nesseler-Cass coordinates our nondiscrimination work:
Dave Nesseler-Cass,
Chief Compliance Officer
601 SW Second Ave.
Portland, OR 97204
855-232-9111
compliance@modahealth.com

ATTENTION: Si habla español, hay disponibles servicios de ayuda con el idioma sin costo alguno para usted. Llame al 1-888-361-1611 (TRS: 711).


注意：如果您說中文，可得到免費語言幫助服務。請致電 1-888-361-1611 (聾啞人專用 TRS: 711)

ATENÇÃO: Caso fale português, estão disponíveis serviços gratuitos de apoio em português para você. Ligue para 1-888-361-1611 (TRS: 711)

注意: 日本語をご希望の方には、日本語サービスを無料で提供しております。1-888-361-1611 (TRS, テレタイプライター)

Nondiscrimination notice