

## Is there a generic drug available for my condition?

Most likely, yes. Many commonly prescribed drugs have generic versions. In fact, nearly 63 percent of prescriptions are now filled with generic drugs. Below are a few of the most common generics and their brand-name counterparts.

<b>Brand Drug</b>	<b>Generic Equivalent</b>
Adderall	amphetamine salts
Allegra	fexofenadine HCL
Amaryl	glimepiride
Ambien	zolpidem tartrate
Ativan	lorazepam
Climara	estradiol
Darvocet-N	propoxyphene-N/APAP
Diflucan	fluconazole
Estrace	estradiol
Flonase	fluticasone spray
Foltx Tablet	folbic
Glucophage	metformin HCL
Glucotrol XL	glipizide ER
Metrogel	metronidazole
Miacalcin	calcitonin nasal spray
Miralax	glycolax
Mobic	meloxicam
Pravachol	pravastatin
Proscar	finasteride
Prozac	fluoxetine
Valium	diazepam
Wellbutrin SR	bupropion SR
Xanax	alprazolam
Zithromax	azithromycin
Zocor	simvastatin

The drug names listed above are the registered and/or unregistered trademarks of third-party pharmaceutical companies. These trademarks are included here for informational purposes only and are not intended to imply or suggest any affiliation.

## A good choice

Remember, when you use a generic drug, you get the same quality as the brand-name drug – at a lower cost. To learn more about generic drugs, visit our Web site or talk to your doctor or pharmacist.

## Need help or have any questions?

Visit our Web site or call Caremark Customer Care toll free at 1-888-963-7290.  
Monday through Friday – 8 a.m. to midnight (EST)  
Saturday – 9 a.m. to 9 p.m. (EST)  
Sunday – 9 a.m. to 8 p.m. (EST)

## Special Services

If you have a hearing impairment and need telecommunications device (TDD) assistance, please dial toll free: 1-800-863-5488.

## Health and Prescription Information

Your health plan has selected Caremark to administer your prescription benefit program. Caremark uses health and prescription information of covered members and dependents to administer your benefit. Caremark generally reports that information to your health plan. Caremark also uses information and prescription data gathered from claims submitted nationwide for reporting and analysis without identifying individual patients.

Your privacy is important to us. Employees at your health plan and at Caremark are trained regarding the appropriate way to handle your private health information.



## Your Prescription Drug Card Program



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MyInsuranceManager.com/FL is a product of an independent company that provides administrative support and services to your local Blue health plan.

## Your Prescription Drug Card Program

Your prescription drug card program makes it easy for you to receive the prescriptions you need. When you use a participating network pharmacy, you'll have NO claim forms to file and NO waiting for reimbursement. At network pharmacies, the pharmacist will use a computer to check your eligibility for benefits and to determine the amount you will pay for prescriptions. If you don't present your ID card or you don't use a network pharmacy, you'll have to file a claim and you may not be reimbursed for the full amount you paid.

### How much will I pay for my drugs?

Your prescription drug card program allows you and your doctor to choose the right drugs for you. The amount you will pay for your drugs is based on your benefit plan and the status of your drug on our Preferred Drug List. For copayment plans, you typically pay a fixed copayment amount depending on the type of drug you receive. For coinsurance plans, you will pay a percentage of the cost of the drugs. You may also pay a higher percentage depending on the type of drugs.

### What is a Preferred Drug List (PDL)?

A PDL is a list of prescription drugs chosen for their clinical value and cost-effectiveness by an independent panel of doctors and pharmacists. With our PDL, you and your doctor have the freedom to choose the prescription drug that works best for you. Since there may be more than one drug available for your medical condition, we encourage you to use generic and preferred brand-name drugs whenever possible to help you manage your prescription costs. Although our PDL is subject to change without notice at any time during the year, you can always find the most up-to-date PDL information on the Prescription Drug Information page on the Web site noted on your ID card.

## What is a 3-tier plan?

*(Most benefits are based on a 3-tier plan. Refer to your benefit booklet to see if this applies to you.)*

Prescription drugs in a 3-tier plan are divided into three tiers – Tier 1, Tier 2 and Tier 3. Each tier is assigned a copayment or coinsurance amount, which is the amount you pay when you receive a prescription. Refer to your benefit booklet to find the amounts that apply to you. Tier 1 drugs are generic drugs. For the lowest out-of-pocket expense, you should always consider Tier 1 drugs if you and your doctor decide they are appropriate for you. Tier 2 drugs are preferred brand-name drugs. Consider Tier 2 drugs if no Tier 1 drug is available to treat your condition. Tier 3 drugs are non-preferred and will usually cost you more. If you are using a Tier 3 drug, talk to your doctor about Tier 1 and 2 drugs that may be appropriate for you. NOTE: Whenever a generic drug becomes available, most of the time the brand-name drug will automatically move to Tier 3.

### Selecting a Pharmacy

With your prescription drug card program, it's easy to use a network pharmacy. With more than 57,000 network retail pharmacies to choose from, you're sure to find one that's convenient for you. To locate a network pharmacy, refer to your network pharmacy directory. If you don't see your pharmacy listed, check first with your pharmacy to see if it has been added to our network since the list was developed. You can also use the pharmacy locator on the Prescription Drug Information page on our Web site or call Caremark toll free at 1-888-963-7290. On behalf of your health plan, Caremark assists in the administration of this program. Caremark is an independent company that administers prescription drug benefits. You should always check with your pharmacy to see if it is part of our network before you have your prescriptions filled.

## Filing a Claim

If you always use network pharmacies for your prescriptions, you'll never need to file a claim. For those rare times when you need to use a pharmacy that's not in our network or if you ever forget to show your pharmacist your ID card, you can file a claim for the amount you paid for your prescription. Here's how:

1. Pay the full amount of the prescription and complete a Prescription Drug Claim Form.
2. Mail your prescription drug receipt and your completed and signed claim form:

**Caremark  
Prescription Drug Claim Processing Center  
P.O. Box 52059  
Phoenix, AZ 85072-2059**

You can obtain claim forms on the Prescription Drug Information page on our Web site or by calling Caremark Customer Care toll free at 1-888-963-7290.

Your reimbursement check should arrive within 10-14 days from the day you mail your claim form. You will be reimbursed according to your schedule of benefits.

### Save money with generics!

If you want to lower your prescription drug costs, consider using generic drugs. Choosing generics can be an excellent way to save money.

### Are generic drugs safe?

Absolutely! Generic drugs become available when patents expire on brand-name drugs. They contain the same active ingredients as brand drugs, but are not manufactured under a brand name or trademark. The color and shape of a generic drug may be different from its brand-name counterpart, but the active ingredients are the same for both. Generic drugs must meet the same U.S. Food and Drug Administration (FDA) quality standards as the brand-name drugs. You should always ask your doctor to allow a generic substitution if one is available.