



**BlueRx**  
**Express**<sup>SM</sup>  
Prescription  
Drug Program

[www.MyInsuranceManager.com/FL](http://www.MyInsuranceManager.com/FL)

## Your BlueRx Express Prescription Plan

### Prescription drug prices are skyrocketing

Did you know the cost of prescription drugs has gone up significantly over the last five years? If you've been to the pharmacy lately, you're sure to have noticed it. But, you may not know that prescription prices also have an impact on your health coverage premiums. When medical costs including the price of drugs go up, so do your insurance premiums. As you know, your health benefits plan will cover a certain percentage of the cost of prescription drugs after you meet your deductible. In an effort to keep your costs and premiums as low as possible, BlueRx Express is available to you. Blue Cross and Blue Shield of Florida has selected Caremark to administer your pharmacy benefits.

#### Q. What is BlueRx Express?

A. BlueRx Express is a major medical drug benefit. Typically, you must meet an annual deductible and pay some level of coinsurance. Deductible and coinsurance amounts vary based upon the type of benefit plan that you have. When you fill a prescription under the BlueRx Express plan, you'll pay the pharmacy 100% of the allowed amount. Then, 30 days after the prescription is filled, we automatically submit a claim for you. There's no need to save receipts or file claims! We will apply your deductible and coinsurance amounts, process your claim and send you an explanation of benefits. (We wait 30 days to give you time to pick up your prescription.)

BlueRx Express has a network of pharmacies around the country that have agreed to accept set prices for prescription drugs. When you go to a participating network pharmacy, just show your ID card to receive the special low price. To locate a participating pharmacy, refer to your participating pharmacy directory or visit the Members section of our Web site at: [www.MyInsuranceManager.com/FL](http://www.MyInsuranceManager.com/FL). If you don't see your pharmacy listed, check first with your pharmacy to see if it has been added to the network since the list was printed. Also, you

may call Caremark at 1-888-963-7290 to see if your pharmacy is in the network or to find the nearest participating pharmacy.

#### Q. After I show the ID card, what then?

A. After you show your ID card, give the pharmacist your prescription. You will pay the special low price when you get your prescription.

#### Q. What happens if I go to a non-participating pharmacy?

A. You'll pay the full price for your prescription. You'll then need to fill out a retail claim form, sign it and mail it to the address on the claim form. You can get claim forms on our Web site at [www.MyInsuranceManager.com/FL](http://www.MyInsuranceManager.com/FL) or by calling Caremark Customer Care at 1-888-963-7290. Please note that your benefits at a non-participating pharmacy will be lower than your benefits at a participating pharmacy.

Use a separate claim form for each member of your family. For example, if your daughter gets three prescriptions at one time at a non-participating pharmacy, you may file all of them on one form. But if your son and daughter each get one prescription from non-participating pharmacies, you must file those on separate forms.

#### Q. How will I know what my reimbursement will be?

A. Please read your health benefits booklet or policy. It will show the coinsurance percentage after you have met your deductible. Remember, to get the best price on prescriptions, always use a participating network pharmacy and show your ID card.

#### Q. Who can I call if I have further questions?

A. Call the customer service number listed in your health benefits booklet or policy.

#### Request generic drugs

Generic drugs are cost-effective alternatives to brand medications. Choosing a generic product will usually result in a lower drug cost at the pharmacy. Ask your physician to allow a generic

substitution whenever one is available. Generic drugs save money, and that helps maintain your current prescription benefit! Listed below are some of the most commonly prescribed brand-name drugs and their generic versions. If you take any of these brand-name medications, please ask your doctor to consider the generic equivalent by indicating on your prescription that generic substitution is permitted.

<b>Brand name</b>	<b>Generic equivalent</b>
Adderall	amphetamine
Ativan	lorazepam
Buspar	bupropion HCL
Cardura	doxazosin mesylate
Desogen	Apri
Dyazide	triamterene/HCTZ
Estrace	estradiol
Glucophage	metformin HCL
Glucovance	metformin/glyburide
Keflex	cephalexin
Lac-Hydrin	ammonium lactate
Lasix	furosemide
Lopressor	metoprolol
Maxzide	triamterene/HCTZ
Naprosyn	naproxen
Paxil	paroxetine
Procardia	nifedipine ER
Provera	medroxyprogesterone
Prozac	fluoxetine
Ritalin	methylphenidate
Tagamet	cimetidine
Tenormin	atenolol
Valium	diazepam
Vaseretic	enalapril/HCTZ
Vasotec	enalapril maleate
Zantac	ranitidine
Ziac	bisoprolol/HCTZ

**Please note:** These are not all the medications that may be dispensed. This is only a sample of the more commonly prescribed drugs.

## Special services

- Hearing-impaired customers who have special TTY equipment in their homes may call a special toll-free number: 1-800-863-5488.

## Health and prescription information

Caremark uses health and prescription information of members to administer your health benefits programs. Caremark generally reports that information to the administrator or sponsor of your benefits plan. Caremark also uses that information and prescription data gathered from claims submitted nationwide for reporting and analysis without identifying individual patients.

## Things to remember

- Use a participating network pharmacy to save more money and avoid paperwork!
- Show your ID card to the pharmacist along with your prescriptions.
- Ask your doctor if a generic version of your drug is appropriate for you. If so, ask your doctor to allow the pharmacy to fill your prescription with the generic.
- If there is no generic available, ask your doctor if a preferred drug is appropriate for your condition.

**If you need help or have questions regarding BlueRx Express, call Blue Cross customer service at the number printed on your ID card or in your health benefit booklet or policy.**

**Q. *Where do I mail my claim?***

**A. Caremark**

**Attn: Blue Cross and Blue Shield of Florida  
PO Box 52059  
Phoenix, AZ 85072-2059**

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