

Midwest Operating Engineers Prescription Drug Program- Active Members and Non-Medicare Retirees



The Prescription Drug Program provides prescription benefits through the Midwest Operating Engineers Welfare Fund for all eligible active and retired members of Local 150 and their eligible dependents, who are **not** eligible for Medicare. If you are eligible under the Retiree Welfare Plan (RWP) and eligible for Medicare, your Prescription Drug Plan is under the RWP Medicare Prescription Drug Plan (RWP Medicare PDP). For additional information, visit the Medicare-Eligible Prescription Drug Program page at <https://local150.org/moe/>. We are proudly partnered with OptumRx to provide, you and your family, all your pharmaceutical needs.

Filling Prescriptions

- **Short-Term Medication** can be filled at any in-network pharmacy (CVS, Target, Walgreens etc.). To locate an in-network pharmacy closest to you, register on www.optumrx.com.
 - You may receive up to two 30-day supplies of a short-term medication. If you seek a third refill of that medication it is considered a long-term medication (maintenance medication), and you must transition to a CVS retail pharmacy or the OptumRx Home Delivery pharmacy and fill a 90-day supply. If you choose to stay at your current pharmacy, you will be responsible for paying 100% of the cost of the medication for that refill and future refills of that medication and ***no reimbursement will be allowed***.
- **Long-Term Medication (Maintenance Medication)** must be filled at a CVS retail pharmacy or through OptumRx Home Delivery pharmacy for a 90-day supply. Please note that all prescriptions **must** be written for a 90-day supply when using the OptumRx Home Delivery Pharmacy. If the prescription is written for anything less than 90-days, you will still be responsible for paying a 90-day copayment.
 - If filling at a CVS retail pharmacy, be sure to specify to your doctor the location you would like to use.
 - If utilizing the OptumRx Home Delivery, indicate that to your doctor. For assistance with OptumRx Home Delivery, contact their Customer Care Call Center at 855-MYRX150 (855-697-9150).

4- Tier Program

Our program offers a convenient 4-tier structure, they are as follows:

- Generic Medication (Tier 1)
- Preferred Brand Name Medication (Tier 2)
- Non-preferred Brand Name Medication (Tier 3)
- Specialty Medication (Tier 4)

OptumRx's Select Formulary List

The OptumRx Select Formulary list is a guide within select therapeutic categories for Plan members and health care providers. Ask your physician to consider prescribing generic medication as a first line option, when medically appropriate, from the OptumRx Select Formulary list. Generic medications are typically a lower cost to the plan, and these savings are immediately passed directly to the membership. If there is no generic available, there may be a preferred brand name medication listed. You can find the OptumRx Select Formulary list by visiting the Prescription Drug Program page at <https://local150.org/moe/>, and click on the Active Members and Non-Medicare Retirees tile. Be sure to mention to your physician that your plan uses the OptumRx Select Formulary for your prescription drug coverage.

Utilization Management

Some covered medications may require a Prior Authorization or Step Therapy or may have Quantity Limits. To find out if your medication has any additional requirements or limits, refer to the OptumRx Select Formulary list.

Limitations/Exceptions- Dispense as Written (DAW) Penalty

When available, generic medications will be substituted for all brand name medications. If a Participant requests a brand name medication, or if the prescribing physician indicates "no substitutions", when a generic equivalent is available, the Participant will be required to pay the brand name copay plus the difference in cost between the brand name medication and its generic equivalent unless determined medically necessary through the appeals process.

Prescription Copayments

Each time you pick up a medication you are responsible for a copay. If the cost of the medication is less than your copay, you are only responsible for paying the lower amount. The chart below outlines the copay structure for Short-Term and Long-Term medications listed by plan name:

	Retail* 30-day supply	Maintenance Medication** 90-day supply
Copay Schedule for all Non-Marketplace Plans, Operators' Health Center Plan, Marketplace Plan A, Platinum PPO, Gold PPO, Silver PPO, EPO, Retiree Welfare Plan		
Generic (Tier 1)	\$5 copay	\$15 copay
Preferred Brand (Tier 2)	\$10 copay	\$30 copay
Non-preferred Brand (Tier 3)	\$25 copay	\$45 copay
Specialty (Tier 4)	\$100 copay	N/A

	Retail* 30-day supply	Maintenance Medication** 90-day supply
Copay Schedule for the Bronze PPO Plan		
Generic (Tier 1)	\$20 copay	\$50 copay
Preferred Brand (Tier 2)	\$40 copay	\$100 copay
Non-preferred Brand (Tier 3)	\$55 copay	\$115 copay
Specialty (Tier 4)	\$100 copay	N/A

* Maximum of up to two 30-day supplies before patient is required to obtain a 90-day supply (excludes specialty medication)

** Prescriptions can be filled at any CVS Retail Pharmacy or through the OptumRx Home Delivery Pharmacy ONLY

Billing Information

Please be sure to present your vendor card to your local pharmacist when dropping or picking up a prescription. The “Pharmacy Benefit” tab of this card contains all the information needed to bill your pharmacy claims properly. The required billing information is as follows:

Rx Bin: 610011 Rx Group: IUOEMOE PCN: IRX

Processing a Prescription Through the Prescription Drug Program

If your prescription does NOT go through the insurance, for any reason, after you have presented your MOE Vendor Card, call the Pharmacy Benefit Department at 708-387-8331 promptly so our staff can investigate what is going on. Claims can be re-processed at a pharmacy within 7 days that the prescription was originally processed, and an accurate refund can be issued at the pharmacy. The Pharmacy Benefit Department cannot issue a reimbursement for prescriptions that you paid out-of-pocket for outside of 7 days that the prescription was picked up.

Additional Resources

For additional information regarding the Prescription Drug Program, please visit the Active Members and Non-Medicare Retirees Prescription Drug Program Page on the Midwest Operating Engineers Fringe Benefit Funds website at <https://local150.org/moe/>.

If you have any questions regarding the Prescription Drug Program, please contact the Pharmacy Benefit Department at (708) 387-8331.



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