



**BlueCross
BlueShield**

Federal Employee Program.

MEDICARE PART D

Transition Supply Policy

The transition policy allows you to obtain a supply of certain Part D drugs after you join a new plan. Some drugs may have new limits compared to your previous plan, such as prior authorization, step therapy, or quantity limits. While others may not be covered on your new plan or your new plan may have different limits than your old plan. The transition policy helps you transition to your new coverage.



Who is eligible?

- New Members to the FEP Medicare Prescription Drug Program
- Members who have had the plan for more than 90 days, live in a long-term care facility, and need a supply right away
- Members who have had the plan for more than 90 days, experience a change in their level of care, and need a supply right away

Our transition policy applies to:

- Medicare Part D drugs not on the covered drug list
- Medicare Part D drugs on the covered drugs list with limits such as:
 - Prior Authorization (PA)
 - Step Therapy (ST)
 - Quantity limit (QL)

What you can expect

Your transition fill amount depends on whether you are in long-term care or if you are a new member. If your prescription is for fewer days than the specified amounts below, you are still able to refill up to the maximum supply.

Eligibility

New Members (not in long-term care)

- Up to a 30-day supply during the first 90 days after joining the new plan

New Members (in long-term care)

- Up to a 31-day supply during the first 90 days after joining the new plan

Long-term care members enrolled for more than 90 days

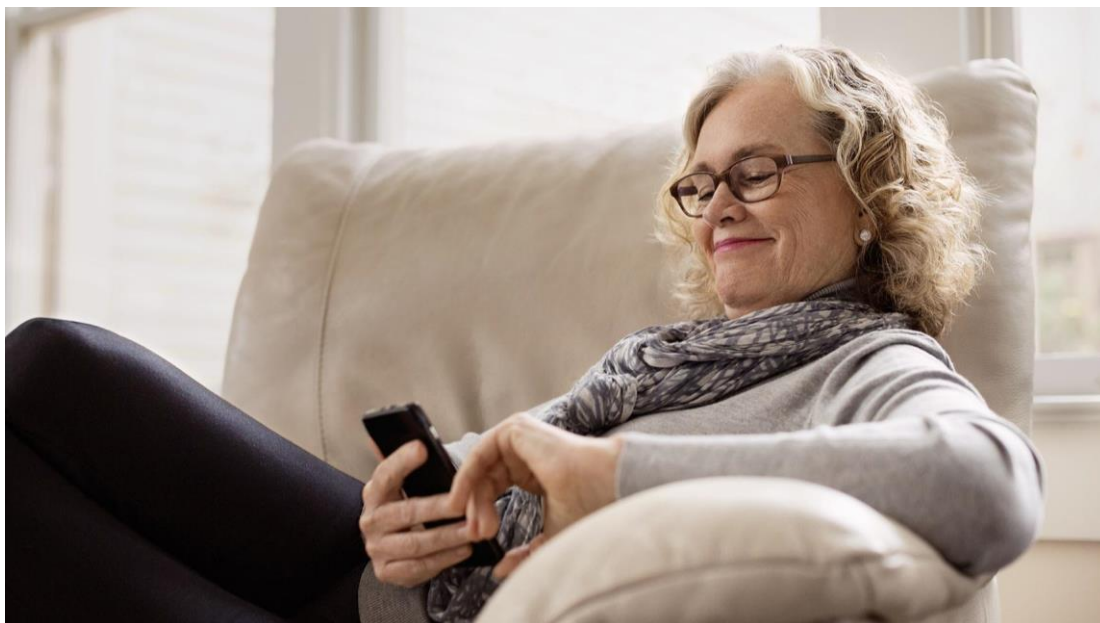
For drugs that are not on our covered drug list or have limits (such as prior authorization, step therapy, or a quantity limit), we will cover up to a **31-day emergency supply** of an eligible drug. In the meantime, you, your doctor, or your authorized representative will need to ask for an exception or submit for a prior authorization, step therapy, or quantity limit if you need to keep taking the same drug.

Members enrolled for more than 90 days with a level of care change

If you have had the plan for more than 90 days, experienced a change in your level of care, and need a supply right away, we will cover **up to a 30-day supply** (or **31-day supply** for long-term care). For example, if you were discharged from the hospital, that is a change in your level of care.

What can you expect to pay for a transition supply?

If you have Low Income Subsidy, you will not pay more than the amount the Centers for Medicare and Medicaid Services sets. If you do not have Low Income Subsidy, you will pay the normal amount for the drug according to its tier on the covered drug list.



Important things to know:

- Our transition policy is for eligible Medicare Part D drugs only
- You will need to use a network pharmacy unless you qualify for out-of-network access
- Our policy does not apply to drugs that need a determination to see if they are under Part B or Part D coverage
- Our policy does not apply to drugs that have safety reviews to prevent unsafe use, which may include some opioid prescriptions
- We will send you a letter within three business days after you fill a transition supply. This letter will include the reason for the transition supply, your right to request an exception or a coverage determination, and the process to follow

Ask for an exception or a coverage determination

If you and/or your doctor decide you need to keep taking a drug that is not on our covered drug list, you, your doctor, or your authorized representative can ask us for an exception. You can also ask for an exception or a coverage determination if your drug has limits such as prior authorization, step therapy, or quantity limits.

How to reach us when you need assistance:



fepblue.org/medicareRx



1-888-338-7737, TTY 711

For more recent information or other questions, please contact us, FEP Medicare Prescription Drug Program Customer Care at 1-888-338-7737 (TTY users should call 711) 7 days per week, 24 hours per day, or visit fepblue.org/medicareRx. The FEP Medicare Prescription Drug Program (MPDP) is a prescription drug plan with a Medicare contract. Enrollment in MPDP depends on contract renewal. The Blue Cross and Blue Shield Federal Employee Program® and FEP® are trademarks owned by the Blue Cross Blue Shield Association.