

Medicare Part D Transition Policy Overview

We want to make the transition into the new benefit year for GuildNet Gold HMO SNP members as seamless as possible. That's why we have policies in place for any prescription drugs that you may be taking. During the first 90 days of membership, we offer a temporary supply of medications to Medicare Part D members who:

- Are taking a medication that is not on the formulary or
- Are taking a medication that is subject to certain restrictions such as prior approval, quantity limits or step therapy, depending on place of service.

Pharmacy Services will offer a temporary one-time fill for a non-formulary drug. The copay will be based on one of our approved formulary tiers. It will also be consistent with cost-sharing charged for non-formulary drugs that are approved under a coverage exception. Copays for members who are eligible for "extra help" will never exceed the copay maximums set by CMS for low-income members.

If you are a current member affected by a formulary change from one year to the next, we will provide a temporary supply of the non-formulary drug if you need a refill for the drug during the first 90 days of the new plan year when you use a participating pharmacy or during the first 90 days of the new plan year for a long-term care facility residents.

What are the details of the participating pharmacy policy?

Provided that the drug is dispensed from a participating pharmacy, Pharmacy Services will offer a one-time fill of up to a 30-day supply of a drug if:

- The drug is not a formulary drug.
- The drug requires prior approval.
- The drug does not meet the required step therapy edits.
- The drug is subject to a quantity limit

Who is eligible?

Newly eligible Medicare Part D participants or those enrolling from another plan during their first **90 days** of membership.

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What are the details of the long-term care facility transition policy?

Provided that the drug is dispensed from a participating pharmacy, qualified long-term care facility residents will be provided multiple fills of a 31-day supply up to a 98-day supply during the 90 day LTC transition window if:

- The drug is not a formulary drug.
- The drug requires prior approval.
- The drug does not meet the required step therapy edits.
- The drug is subject to a quantity limit.

If the prescription is written for fewer days and has applicable refills, it will be authorized.

Who is eligible?

Newly eligible Medicare Part D participants or those enrolling from another plan, or current enrollees for medications utilized by the current enrollees in the previous plan year if that medication has also had a negative formulary change across years during their first **90 days** of membership.

GuildNet Gold is a HMO SNP plan with a Medicare contract and a contract with the New York Medicaid program. Enrollment in GuildNet Gold depends on contract renewal.

Benefits, formulary, pharmacy network and provider network may change on January 1 of each year.

This information is available for free in other languages. Please call our Member Services number at **1-800-815-0000** for additional information, TTY users should call **1-800-662-1220**, Monday through Sunday, 8am to 8pm. Member Services has free language interpreter services available for non-English speakers.

Esta información está disponible en otros idiomas a gratis. Por favor llame a Servicios a los Clientes, al **1-800-815-0000** para obtener información adicional. (Los usuarios de TTY deben llamar al **1-800-662-1220**). Se atiende lunes a domingo, 8am a 8pm. Servicios a Los Clientes tienen servicios gratuitos de intérprete de idioma disponibles para altavoces de noinglés.