



Frequently Asked Questions Regarding Salesforce Prescription Benefits 2021

Q1: What are the plan options available through CVS?

A1:

UHC Choice and Aetna Select			
	Individual	Family	Integrated with medical carrier?
Deductible	N/A	N/A	Yes. Both your medical spend through UHC/Aetna and prescription drug spend will also count toward your MOOP accumulation.
Maximum Out of Pocket (MOOP)	\$2,200	\$4,400	
UHC Choice Plus POS and Aetna Choice POS II PPO			
	Individual	Family	Integrated with medical carrier?
Deductible	N/A	N/A	Yes. Both your medical spend through UHC/Aetna and prescription drug spend will also count toward your MOOP accumulation.
Maximum Out of Pocket	\$2,500	\$4,500	
UHC Choice Plus HDHP-Premium and Aetna Choice Plus II HDHP-Premium			
	Individual	Family	Integrated with medical carrier?
Deductible	\$1,500	\$3,000	No. Your accumulations toward deductible and MOOP will be separate for medical and prescription drug spend.
Maximum Out of Pocket	\$3,000	\$6,000	
UHC Choice Plus HDHP-Standard and Aetna Choice Plus II HDHP-Standard			
	Individual	Family	Integrated with medical carrier?
Deductible	\$1,750	\$3,500	No. Your accumulations toward deductible and MOOP will be separate for medical and prescription drug spend.
Maximum Out of Pocket	\$3,000	\$6,000	

Q2: What is a deductible and maximum out of pocket (MOOP)?

A2: Your deductible is the amount you will need to pay for covered drugs before your insurance plan starts to pay. After meeting your deductible, you will pay your copay* amount.

*Copayment, copay or coinsurance means the amount a member is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

MOOP is the cap on what you will have to pay out of pocket for covered drugs in one plan year. If you meet your maximum out of pocket, you will not be responsible for additional costs of covered drugs for the remainder of the plan year.

Q3: What are the copays for my prescription drugs?

1. Actual quantity may vary depending on your plan.
2. Customers in Hawaii only may use a Longs Drugs location.
3. Where allowed by law. In-store pick up is currently not available in Oklahoma. Some states require first-fill prescriptions to be transmitted directly to the dispensing specialty pharmacy. Products are dispensed by CVS Specialty and certain services are only accessed by calling CVS Specialty directly. Certain specialty medication may not qualify. Services are also available at Long's Drugs locations.

A3:

All Plan Copays	1-month supply	3-month supply
Generic All (Tier 1)	\$10	\$20
Preferred Brand (Tier 2)	\$25	\$50
Non-Preferred Brand (Tier 3)	\$40	\$80

Specialty medications follow the same tiering and copay structure.

If you have one of the high deductible plans (HDHPs), you will need to meet your deductible before these copays will apply. Certain preventive medications bypass the deductible so members in HDHPs can still pay the copay even if they have not yet met their deductible. You can check what your medication will cost using the **Check Drug Cost & Coverage tool** (refer to Question 5).

Q4: How can I find out how much my cost is going to be for a medication?

A4: If you are already enrolled in a CVS plan, you can register online at [Caremark.com](https://www.caremark.com) to check your drug cost and coverage. After logging in, select red **Check Drug Cost and Coverage** icon on the upper right-hand side of the landing page. Or, under the header, hover over the “Plan & Benefits” tab and select “Check Cost Drug & Coverage”.

You will be prompted to enter in the drug name and strength and the pharmacy you would like to fill at, then select the drug name and strength and hit “Search”. You will be brought to the results, which will show you the cost of a 30-day supply and a 90-day supply (if applicable). If your drug is not covered, or requires a prior authorization, or is a specialty medication that must be filled at CVS Specialty®, it will be indicated here.

If you do not already have an account with [Caremark.com](https://www.caremark.com) or have not yet enrolled in the plan, you can find out the cost of medications by using one of the below mentioned links to the Check Drug Cost & Coverage tool specific to your plan selection.

- [Aetna or UHC HDHP Premium – Single](#)
- [Aetna or UHC HDHP Standard – Single](#)
- [Aetna or UHC HDHP Premium – Family](#)
- [Aetna or UHC HDHP Standard – Family](#)
- [Aetna or UHC EPO](#)
- [Aetna or UHC PPO](#)

Some drugs are covered at 100 percent, these include generic and some brand oral contraceptives and generic maintenance drugs for asthma, diabetes, hyperlipidemia, hypertension and heart disease.

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You may also contact Customer Care at 1-844-345-2824.

Q5: I am currently on a specialty medication and transitioning on to the Salesforce plan. What do I need to know?

A5: Specialty medications are specialized products used to treat complex conditions like rheumatoid arthritis, multiple sclerosis, human immunodeficiency virus (HIV), rare genetic disorders, fertility and cancers.

Many specialty medications will require a prior authorization. Use the **Check Drug Cost and Coverage Tool** on [Caremark.com](https://www.caremark.com) (refer to Question 5) to see if your medication is specialty, and whether it will require a prior authorization. You will need to fill your specialty medication through CVS Specialty.

Please reference the **Frequently Asked Questions Regarding CVS Specialty** for more information about specialty medications.

Q6: How do I register at Caremark.com?

A6: Go to [Caremark.com](https://www.caremark.com) to create your account. You will be asked for your member ID (number found on your prescription benefit card). If you do not have your member ID card, you will be asked additional questions to confirm your identity.

Q7: How do I order prescriptions?

A7: Choosing how to fill your prescription depends on whether you are ordering a short-term or long-term medication:

- **For short-term medications (like an antibiotic)**, fill anywhere in our network of more than 68,000 pharmacies nationwide, including chain pharmacies, 20,000 independent pharmacies and more than 9,900 CVS Pharmacy® locations (including those inside Target stores).
- **For long-term medications (such as for high blood pressure or diabetes)**, in addition to picking them up at any of our retail pharmacies nationwide, you also have the option of getting your medications through CVS Caremark® Mail Service Pharmacy.

To sign up for **mail service**, go to [caremark.com/manage-prescriptions/rx-delivery-by-mail](https://www.caremark.com/manage-prescriptions/rx-delivery-by-mail) and follow the instructions to request a new 90-day prescription.

You can also call Customer Care for assistance at **1-844-345-2824**.

Q8: I currently fill my medication at a retail pharmacy other than CVS Pharmacy. Do I need to use CVS Pharmacy or can I continue filling it at the existing pharmacy?

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A8: Your refill information will be maintained by the retail pharmacy in which you originally filled the prescription as long as the pharmacy is in the CVS Caremark® retail network. You may refill that prescription at the same pharmacy or choose to have it transferred to another pharmacy in our network of more than 68,000 pharmacies nationwide, including chain pharmacies, 20,000 independent pharmacies and more than 9,900 CVS Pharmacy locations (including those inside Target stores).

Regardless of which pharmacy you choose to refill your prescription, you will need to present your new prescription ID card to help ensure that your prescription will be covered under your plan.

Q9: How can I check that my current pharmacy is in the CVS Caremark Retail Pharmacy Network?

A9: You have access to a network of more than 68,000 pharmacies nationwide, including all major chain pharmacies and 20,000 independent pharmacies and more than 9,900 CVS Pharmacy locations (including those inside Target stores).

To see a list of in-network pharmacies closest to you, visit [Caremark.com](https://www.caremark.com), and under the Plan & Benefits tab at the top of the page, click on the **Pharmacy Locator** tool. Enter an address or ZIP code and apply search filters if needed.

You can also call Customer Care for assistance at **1-844-345-2824**.

Q10: I am currently filling my maintenance (long-term) medications through mail order under another plan. Will that prescription automatically transfer to CVS Caremark mail order once I join the Salesforce plan?

A10: No, mail order prescriptions will not automatically transfer over. Your doctor will need to send a new three-month prescription to CVS Caremark mail order pharmacy.

In addition to filling three-month supplies of your long-term medications at mail order, you can also fill three-month supplies of these medications at any in-network pharmacy.

Q11: How do I start using CVS Caremark Mail Service Pharmacy?

A11: You can get started with mail service by doing one of the following:

Ask your doctor to send an electronic prescription to CVS Caremark Mail Service Pharmacy. This is the easiest way to get started – you can expect to get your medication in 7 to 10 business days.

Or

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Request that CVS Caremark contact your doctor to get the process started for you. Go to [caremark.com/manage-prescriptions/rx-delivery-by-mail](https://www.caremark.com/manage-prescriptions/rx-delivery-by-mail) and follow the instructions. Once we reach your doctor and receive approval, it will take 7 to 10 business days for your medication to be delivered.

Q12: What kinds of medications can I fill through the CVS Caremark Mail Service Pharmacy?

A12: You can fill prescriptions for the medications you take regularly (also called “long-term” or “maintenance” medications) in 90-day supplies. These are medications you take for chronic conditions such as high blood pressure, asthma, diabetes and high cholesterol. Mail service is a convenient way to have 90-day supplies of your long-term medications to you at no added cost.

Mail service can save you both time and money—you don’t have to worry about making a trip to the pharmacy every 30 days, and 90-day supplies typically cost less than three 30-day supplies. 90-day¹ supplies can also be filled at your local CVS Pharmacy² store. These 90-day fills at retail come with the same cost benefits as mail service. You pay the mail service copay, instead of three 30-day copays, resulting in savings equivalent to one 30-day fill each time you fill your long-term medication.

Q13: How long does it take to receive my medications that I order through CVS Caremark Mail Service?

A13: For new prescriptions, it can take up to 10 days from the day you submit your order for delivery of your medication. Refills are usually delivered within seven days of placing your order. Although CVS Caremark processes the orders within a day or two, the exact delivery day depends on the U.S. Postal Service.

Q14: How can I check the status of my refill order?

A14: You can check the status of your mail order refill for non-specialty medications by logging in to your account on [Caremark.com](https://www.caremark.com). Click “My Account” on the top right of the page, then click “Prescription History and Order Status.” You can also call Customer Care at **1-844-345-2824**.

Q15: What if I want to speak with a pharmacist?

A15: You can speak to a pharmacist 24 hours a day, seven days a week, by calling Customer Care at **1-844-345-2824**. The pharmacist may ask you several questions to verify your identity.

Q16: What is a formulary? Are there drugs that are excluded on the formulary?

A16: A formulary is a list of preferred prescription medications covered by your prescription benefit plan. It may also be called a drug list. There may be drugs that are excluded on your formulary. Your doctor may submit a medical necessity prior authorization for a formulary excluded medication; if approved, your drug would be covered.

To see if your drug is covered, use the **Check Drug Cost & Coverage tool** on [Caremark.com](https://www.caremark.com).

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Q17: What are compound drugs and are they covered?

A17: Compound drugs are prescriptions for which the pharmacist must mix two or more ingredients to prepare a medication specially requested for you by your doctor. Compound drugs that meet certain criteria are covered under your prescription benefit plan; however, they are subject to prior authorization review. If approved, they will be covered under the prescription portion of your plan.

Q18: Are there medications that are not covered under my prescription plan?

A18: Yes, some medications are not covered by your prescription plan. These include but are not limited to:

- Products used for cosmetic purposes
- Medications used for weight loss
- Over-the-counter (OTC) medications
- Certain scar treatments, wound dressings and cleansers, and artificial saliva products
- Drugs that are not approved by the U.S. Food and Drug Administration (FDA)
- Auvi-Q
- Rayos
- Aplenzin tablets
- Prodigen capsules

Always verify coverage by using the **Check Drug Cost & Coverage tool** on [Caremark.com](https://www.caremark.com).

Some products are not covered under your prescription plan, but may be covered under the medical benefit:

- Respiratory supplies (spacers, peak flow meters, nebulizers)
- Medical devices
- Subcutaneous immunotherapy (allergy shots)
- Periodontal products (e.g., Arestin)

Always verify coverage by using the **Check Drug Cost & Coverage tool** on [Caremark.com](https://www.caremark.com).

Q19: How do I view my accumulations (i.e., deductible and maximum out of pocket)?

A19: You can view your accumulations by logging into [Caremark.com](https://www.caremark.com) and under the *Plan & Benefits* tab, select **Plan Summary**. Here, you can see at-a-glance progress toward reaching your deductible and/or maximum out-of-pocket.

Q20: Where can I get an overview of my prescription spend?

A20: You can access your financial summary by logging in to [Caremark.com](https://www.caremark.com), and under the Prescriptions tab, select Financial Summary. You can select your timeframe (up to 36 months back) to see your prescription drug spend. You can expand each individual fill to see additional information. The report can be printed or downloaded.

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Q21: Does CVS Caremark have a mobile app?

A21: Yes. Visit the iTunes App Store or Google Play to download the CVS Caremark app to your mobile device. (Ensure that the app is CVS Caremark with a navy blue background; this is different from the CVS Pharmacy app with a red background and used for retail pharmacy customers). Use the same login credentials that you use for [Caremark.com](https://www.caremark.com).

In the mobile app, you can refill prescriptions, view recent orders, check drug cost and coverage, view your ID card, find nearby network pharmacies, view financial summary, and more.

Q22: I lost my prescription ID card. What can I do?

A22: You can access your member ID card on [Caremark.com](https://www.caremark.com) by logging in and under the Plan & Benefits tab, select Print Member ID Card. You can also download and open the CVS Caremark mobile app and select “View ID Card”

To have a new ID card mailed to you, please contact Customer Care at **1-844-345-2824**.

Q23: Can I get reimbursed if I paid for a covered prescription out-of-pocket without using my insurance card?

A23: Yes, as long as you were covered under the plan at the time your prescription was filled, and the prescription is covered by your plan. To do so online, log in to your [Caremark.com](https://www.caremark.com) and click **Submit Prescription Claim** under the *Plan & Benefits* tab. A paper reimbursement request form is not needed if you use the online claim submission.

Q24: What is the ACA Preventive Drug List?

A: The ACA Preventive Drug List contains medications that are offered at no cost to you as part of the Affordable Care Act (ACA). You will not pay a copay or coinsurance for these drugs. These include vaccines and immunizations, contraceptives for women, and medicines and supplements to prevent certain health conditions. Please reference the following link to see the current ACA Preventive drug list:

https://www.caremark.com/portal/asset/NoCost_Preventive_List.pdf

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Frequently Asked Questions Regarding CVS Specialty

Q1: What are specialty medications?

A1: Specialty medications are used to treat complex and chronic conditions like rheumatoid arthritis and other autoimmune conditions, multiple sclerosis, human immunodeficiency virus (HIV), psoriasis, rare genetic disorders, infertility and cancer. Often times these are injectable or infused medications, though many are oral medications. They tend to be high cost and can require additional monitoring or support.

Q2: How do I know if my medication is considered specialty?

A2: You can find out if your drug is a specialty medication by using the **Check Drug Cost & Coverage tool** on [Caremark.com](https://www.caremark.com). Please reference Question 5 in the above FAQs for more information on how to locate and use this tool.

You can also check the [CVS Specialty Drug List](#) to see if your drug is specialty and must be filled at CVS Specialty.

You can also call CVS Caremark® Customer Care at **1-844-345-2824** to verify if your drug is a specialty medication, or if you'd like more information.

Please note: most specialty medications require a prior authorization. This means your doctor needs to submit more information to CVS Caremark showing why you may need this specialty medication before you are able to fill it. In the **Check Drug Cost & Coverage tool** referenced in Question 5 of the above FAQ (**Frequently Asked Questions Regarding Salesforce Prescription Benefits**), you can also see whether a prior authorization is required for your medication.

Q3: Where do I fill my specialty medication?

A3: Most specialty medications must be filled through CVS Specialty. As part of your Salesforce plan benefits, the first fill of your specialty medication can be filled at any pharmacy within your network. However, subsequent refills must be filled through CVS Specialty.

Please note: there are a small number of drugs that cannot be filled through CVS Specialty and must be filled at a different specialty pharmacy. If your specialty medication is not on the [CVS Specialty Drug List](#), check with your doctor to see which specialty pharmacy can fill your medication.

Q4: How do I have my prescription sent to CVS Specialty?

A4: You can either ask your doctor to send a prescription to CVS Specialty, call the CVS Specialty Customer Care at 1-866-846-3095, or start the process online at [CVSpecialty.com](https://www.cvspecialty.com) and click on *Get Started*. Enter your information, the name of the medication and your doctor's contact information. The CVS Specialty CareTeam will contact your doctor to get your prescription.

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You may also drop off your specialty prescription at any CVS Pharmacy® retail store location. It will automatically be transferred to CVS Specialty and a member of the CareTeam will then contact you.

Q5: What can I expect when onboarding with CVS Specialty?

A5: When CVS Specialty receives your prescription(s), a member of your CVS Specialty CareTeam will call you. The CareTeam representative will introduce themselves, ask you to verify your information to protect your privacy and let you know what services CVS Specialty can provide. The representative will ask how you prefer to receive messages and notifications – by text message, email or both. You will also be offered a link, sent by text or email, so you can create an account at CVSpecialty.com.

The CareTeam representative will review your prescription and insurance information, and determine whether your medication needs a prior authorization. (If so, we will ask your doctor to submit a request.) You'll also find out how you'll pay for your medication. If you need help paying for your medication, CVS Specialty will assist you in finding financial assistance from the manufacturer or other sources.

If your medication is injected or infused, the CareTeam representative will help you set up any needed services – like self-injection training or in-home infusion assistance. If you need supplies or nursing orders, the representative will request them from your doctor.

The CareTeam representative will ask some questions about your health so a CVS Specialty pharmacist can conduct a complete safety review of your medications. These questions may include:

- Do you have any vision or hearing impairments that we should be aware of?
- Do you have any allergies?
- What other medications do you take (if any)?
- Do you have any questions for the pharmacist about the medication or how to take it?

The next step is to schedule delivery. Your medication can be sent to your home or work address, your doctor's office or even a CVS Pharmacy store (in all states except Oklahoma*). If your medication has any special storage requirements, the representative will review those with you. They will also review your payment and billing information. You'll receive a new patient guide with your first shipment that includes a Health Insurance Portability and Accountability Act (HIPAA) notice of privacy and assignment of benefits forms. These must be signed and returned by mail, or electronically signed at CVSpecialty.com. If you chose to receive text or email communications, you'll get a message and tracking number when your package ships.

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The CareTeam representative will then schedule your medication delivery. It can be sent to your home or work address, your doctor's office or even a CVS Pharmacy retail location (in all states with the exception of Oklahoma). The representative will also review storage of your medication (if special storage requirements are needed), as well as go over payment/billing information.

A new patient guide will be sent to you with your first shipment. The guide contains a **Health Insurance Portability and Accountability Act (HIPAA)** notice of privacy and assignment of benefits forms that must be signed and returned via mail, or may also be electronically signed at [CVSpecialty.com](https://www.cvspecialty.com). It also has important information about CVS Specialty. If you are opted into communications, you will receive a message via text/email when your package ships that contains a tracking number.

Q6: What can I expect when I refill my prescription through CVS Specialty?

A6: You will receive a refill reminder before your next refill is due. You may refill in any of the following ways:

- Call CVS Specialty Customer Care at 1-866-846-3095
- Online via [CVSpecialty.com](https://www.cvspecialty.com)
- On the CVS Specialty digital app

Please note: there are a few medications that must be refilled by phone due to monitoring requirements.

You may be asked the following questions at each refill to help ensure safe and accurate dispensing. These questions include:

- 1) Have there been any changes to the following: medication dose, strength drug allergies or prescriber?
- 2) Would you like this order shipped to your home, office or local CVS Pharmacy location?
- 3) When do you need your medication?
- 4) Please confirm demographic information (i.e., address, phone number).
- 5) Have you had any changes to your other medications or started any new medications?
- 6) Do you have any questions for the pharmacist?
- 7) Have you noticed any mental or physical side effects?

You may be asked other questions depending on the medication.

Q7: Can I use manufacturer copay assistance programs to pay for my specialty medication?

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 106-43442A 121620 TDD: 1-800-863-5488

A7: Yes. Some specialty medications may qualify for third-party copayment assistance programs that could lower your out-of-pocket costs for those products. These are often called copay coupon cards and provided by the drug manufacturer.

Please be aware that amounts paid by a third-party copayment assistance program for specialty medications will not be credited toward meeting your deductible and maximum out-of-pocket. Only the amount you have truly paid out-of-pocket will count toward your deductible and maximum out-of-pocket. Please keep in mind that these third-party copayment assistance programs may have a maximum allowable benefit (maximum amount they will pay per year).

Q8: What digital resources are available?

A8: CVS Specialty has a website (CVSpecialty.com), as well as a free digital app available on [Android](#) and [Apple](#).

- To create an account on CVSpecialty.com: Visit the homepage and create an account. You will be asked to enter in the prescription number on your specialty medication label. If you do not have a prescription number, you can answer questions about yourself in order for us to verify your identity and link you with your CVS Specialty medication profile.
- To download the app, visit these links: [Android](#) and [Apple](#)

Using our website and/or app, you can order refills, view order status, view prescription history, manage payments and securely message your CareTeam with any questions or concerns. See the following short videos below for additional information:

[CVS Specialty Digital Tools](#)

[Refills Made Easy](#)

[Easy Online Payments](#)

[Tracking Orders](#)

[Send Secure Message](#)

[Pickup or Delivery](#)

Q9: What phone number should I call if I have a question?

A9: We understand that challenges in managing your health can occur at any time. Your CVS Specialty CareTeam is here to help. For any questions about your care, call us (phone numbers below) or [sign in](#) and send us a secure message.

- For questions about prescription refills, shipments or delivery, please call the CVS Specialty Care Team at: **1-866-846-3095** (TTY: 711).
 - If you have an issue that was not resolved via the regular CVS Specialty Customer Care line above, please call the Member Escalations line for assistance at **1-855-264-3240** (TTY: 711).
- For login and technical support: **1-855-264-3239** (TTY: 711)
- For billing and payment questions: **1-800-250-9631** (TTY: 711)

For all other questions about your care: **1-800-237-2767** (TTY: 711)

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