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## **PLAN CHANGE NOTICE**

**Summary of Material Modifications** 

# Injectable Drugs – Prescription Solutions Specialty Pharmacy Program

RETAIN WITH YOUR BENEFIT PACKAGE FOR FUTURE REFERENCE

June 1, 2006

## To: Teamsters Benefit Trust Active and Retired Participants in Plans I, I-A, I-85, III, III-A, III-NEWS, IV, V, V-A, V-A-NEWS, A, CRP, RSP and SRP

## Re: Injectable Medications Benefit Change Effective July 1, 2006 – Prescription Solutions Specialty Pharmacy Program

Dear Participant:

This notice explains changes in the way TBT will cover *most* injectable medications beginning July 1, 2006. If you take injectable medications, please read this notice carefully. If you don't, please retain the notice for future reference.

Prescription Solutions administers your TBT prescription drug benefits (except if you are; a) a Medicare-entitled Kaiser or PacifiCare enrollee, or b) an active employee enrolled in Kaiser under a TBT Plan which requires that prescriptions be filled only through Kaiser). If you now use injectable medications covered by TBT, you have probably had your prescription filled at your retail pharmacy. However, effective JULY 1, 2006, injectable medications (except for those on the attached list) will not be covered unless filled through the mail order *Prescription Solutions Specialty Pharmacy Program.* Under the new program there will be a 30 day supply for injectable medications rather than the current 100 days.

Note: This program does not apply to INSULIN, which can continue to be purchased at your retail pharmacy subject to the existing 100 day maximum supply.

## How The Specialty Pharmacy Program Works:

• Your doctor must submit a request to Prescription Solutions for your injectable drugs by faxing a Prescription Solutions Prior Authorization Form to fax no. (800) 853-3844 or by contacting them by telephone at (800) 711-4555.

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Prescription Solutions will review the request and inform your doctor by fax whether the injectable drug has been approved. Upon receipt of the approval letter, your doctor can fax the prescription to (800) 853-3844 or call (800) 711-4555.

- Once the Prior Authorization Request has been approved, Prescription Solutions will contact you or your physician's office to coordinate the delivery and collect any co-pay, if applicable.
- Your order will be shipped to your home or the physician's office/ infusion clinic, at no additional cost to you. All orders are shipped UPS overnight delivery, with deliveries scheduled Tuesday through Friday.
- Injectable prescriptions will be limited to a 30 day supply. To avoid disruption to treatment, you will be contacted by a "Patient Care Coordinator" to schedule refills before your previous fill runs out.

#### **Current Injectable Prescriptions:**

Participants who are currently purchasing injectable drugs through the retail pharmacy will be contacted on the phone by a Prescription Solutions Patient Care Coordinator to help you transition your existing injectable medications to the Specialty Pharmacy Program. You will also receive a letter from Prescription Solutions explaining how coverage of your current prescriptions will be transitioned to the new program. Your doctor will receive a phone call from a Prescription Solutions Patient Care Coordinator.

#### **Prescription Solutions Specialty Pharmacy Customer Service:**

• If you have questions regarding the Specialty Pharmacy Injectable drugs program, contact Specialty Pharmacy Customer Service Help Desk at (800) 562-6223.

Please direct any questions regarding this notice to the TBT Plan Administration Office at (510) 796-4676 or (800) 533-0119 and ask for the Pharmacy Unit.

Attachment: List of injectable drugs available at retail.

## PLEASE NOTE

This Notice is intended to amend all TBT documents, notices and correspondence, including (but not limited to): Guide To Your Benefits, Summary of Coverage, Summary of Material Modifications (SMM), Plan Change Notices and Comparison of Medical Benefits.

This document is a Summary of Material Modifications ("SMM") intended to notify you of important changes made to your plan of benefits. You should take the time to read this SMM carefully (and share it with your family) and keep it with your copy of the *Guide To Your Benefits*. While every effort has been made to make this description as complete and as accurate as possible, this SMM, of course, cannot contain a full restatement of the terms and provisions of the Plan. If any conflict should arise between this summary and the Plan, or if any point is not discussed in this SMM or is only partially discussed, the terms of the Plan will govern in all cases. The Board of Trustees reserves the right, in its sole and absolute discretion, to amend, modify, terminate or interpret and decide all matters under the Plan, or any benefits provided under the Plan, in whole or in part, at any time and for any reason.