



MASSACHUSETTS

# REDUCE YOUR PHARMACY COSTS WITH OUR MAINTENANCE CHOICE PROGRAMS

Maintenance Choice Voluntary is automatically included in your pharmacy benefit, while Maintenance Choice Exclusive is an opt-in.

With Maintenance Choice Voluntary and Maintenance Choice Exclusive, you and your members save money when they switch their maintenance medications to 90-day prescriptions and fill them at a CVS Pharmacy® retail location, or through the mail service pharmacy.

## HOW THE PROGRAM WORKS



Members fill 90-day supplies of their maintenance medications at a CVS Pharmacy retail location, or through the mail service pharmacy.



Members pay 33% less for 90-day fills.<sup>1</sup>



Members are more likely to adhere to their medications, leading to fewer sick days.



You save money on your total pharmacy costs.

## WHY SHOULD I OPT IN TO MAINTENANCE CHOICE EXCLUSIVE?

Maintenance Choice Exclusive saves you up to 5% of your pharmacy costs, compared to up to 1% for Maintenance Choice Voluntary. That's because Maintenance Choice Exclusive requires members to switch their maintenance medications to 90-day fills, while Maintenance Choice Voluntary is optional for members.

### Questions?

If you have any questions, contact your account executive.

1. In most cases for eligible maintenance medications. Check your plan materials for more details about your plan design.

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## WHAT HAPPENS IF I CHOOSE MAINTENANCE CHOICE EXCLUSIVE, AND A MEMBER DOESN'T SWITCH TO 90-DAY FILLS?

Members will be notified about the program approximately 30 days before the program's effective date. Once the program begins, they'll be required to change their maintenance medications to 90-day fills. To give members time to switch, they'll be allowed to fill two 30-day supplies of their maintenance medications at a retail pharmacy. After that, **if they don't fill a 90-day supply at a CVS retail pharmacy or through the mail service pharmacy, they'll be responsible for paying the full retail cost of the medication.** During the transition, members will receive up to two follow-up letters reminding them to switch before their third fill.

### SAVINGS EXAMPLE FOR MEMBERS<sup>2</sup>

TYPE OF PRESCRIPTION	MEDICATION COPAY		
	Tier 1	Tier 2	Tier 3
30-day supply, retail pharmacy	\$15	\$30	\$50
90-day supply, CVS retail pharmacy or mail service pharmacy	\$30	\$60	\$150

### HOW MEMBERS CAN SWITCH TO 90-DAY FILLS



#### CVS Retail Pharmacy

Members can either talk to their doctor about getting a 90-day prescription, or show the pharmacist one of the communications they receive about switching to 90-day fills.



#### Mail Service Pharmacy

Members can download the MyBlue app or create an account at [bluecrossma.org](https://bluecrossma.org), then click **90-Day Mail Service Pharmacy** under **My Medications**. They can also call CVS Customer Care at **1-877-817-0477** (TTY: **711**).



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<sup>2</sup> For illustrative purposes only, using a 3-tier plan.

Blue Cross Blue Shield of Massachusetts complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

ATTENTION: If you don't speak English, language assistance services, free of charge, are available to you. Call Member Service at the number on your ID card (TTY: **711**).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al número de Servicio al Cliente que figura en su tarjeta de identificación (TTY: **711**).

ATENÇÃO: Se fala português, são-lhe disponibilizados gratuitamente serviços de assistência de idiomas. Telefone para os Serviços aos Membros, através do número no seu cartão ID (TTY: **711**).