## **Answers on Aging** | Pharmacy Benefits

# Maximize Your Pharmacy Benefits Consumer Checklist

By checking the boxes below, you are helping to make sure that you have the information you need to maximize your pharmacy benefits.



- □ Is your pharmacy a preferred pharmacy that may offer additional savings and benefits? Check your Medicare Part D plan to see if your pharmacy is on their preferred pharmacy list. If a preferred pharmacy is available to you, it may provide savings and be worth the change. If not, confirm that the pharmacy you choose is included in your plan's pharmacy network.
- ☐ Is your pharmacy convenient?
- ☐ Does your pharmacist take time to answer your questions?

### 2 Know your medications

- ☐ What is the formulary tier for each of your medications? Can you save money with a different tier? Each plan has different drug formularies and costs—tier 1 being the least expensive. Ask your doctor if your plan's tier 1 formulary will meet your needs.
- □ Do you take medications for more than one medical condition? If so, you may qualify for medication management therapy (MTM) with a pharmacist or other health professional to help ensure that your medications are working to improve your health.

## 3 Know your situation

- □ Have you checked your plan's formulary tier list to see where your medications rank in costs? Medications range from the lowest cost preferred generics, to nonpreferred generics, to preferred medications, to nonpreferred prescription drugs, to specialty tier drugs that cost the most. Are your medications on the lowest tier? If not, ask questions about solutions for lower-cost medications.
- ☐ Does your plan offer savings on over-the-counter (OTC) medications?
- ☐ Does your plan offer transition-of-care supplies?



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Follow the numbers to complete this form and take it to your doctor and pharmacy with all of your current medication bottles and any new prescriptions.

#### Know your pharmacy network

| Does your plan offer a preferred pharmacy network?  If so, consider using a preferred pharmacy as you will likely save to |          |         | ☐ I don't know medications. |
|---|----------|---------|-----------------------------|
| Do you fill ALL your prescriptions at one pharmacy?   | ☐ Yes    | □ No    | ☐ I don't know              |
| If not consider consolidating them. Check with your pharmacist:   | for more | informa | ation                       |



#### **Know your medications**

Talk to your doctor and pharmacist to determine if you can lower your prescription costs. Add your medications below and take this completed checklist with you when you visit your doctor and pharmacy (remember to bring your pill bottles and prescriptions to the pharmacy).

| Medication name                      | Formulary tier   | Options to save money                       |
|--------------------------------------|------------------|---|
| (including vitamins and supplements) | (from your plan) | (ask your pharmacist to help you with this) |
|                                      |                  |   |
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#### **Know your situation**

Complete the following information and discuss with your doctor or pharmacist to evaluate if health changes could impact your annual prescription drug plan costs.

| Medical conditions (including allergies and drug reactions) |  |
|---|--|
|   |  |

#### Where can I go for more information?

- Using this checklist, talk with your doctor and pharmacist about ways to save money on your prescriptions.
- Contact your prescription drug plan. The contact information is in your member materials, on your membership card, or on your plan's website.
- Call your local Area Agency on Aging, your State Health Insurance Assistance Program, or the Eldercare Locator service at 1-800-677-1118 or visit www.eldercare.gov.
- Call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

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