Maximize Your Pharmacy Benefits

Counselor-to-Consumer Discussion Guide

Client info:

Current Part D plan: __________________________________________________________________________
Current pharmacy: ____________________________Preferred?:  □ Yes  □ No (if not, discuss)
□ Option for a preferred pharmacy? _______________________________________________________________________________________
□ Ask about the consumer’s transportation needs to enable them to pick up their medications at the pharmacy
□ New pharmacy (if consumer chooses to change): _______________________________________________________________________

Medications review

□ Are all prescriptions filled by the same pharmacy (to monitor for drug interactions)?
(Counselor prompt—Explain the benefits of having all prescriptions filled at the same pharmacy. Refer to their pharmacist for more information.)

□ Is their primary care physician consulted about ALL medications, including over-the-counter (OTC) medications and supplements?
(Counselor prompt—If not, refer to doctor for follow-up.)

□ Are all prescriptions in the lowest tier for the therapeutic class (generic/preferred brand)?
(Counselor prompt—If not, explain the formulary tiers and refer to plan and pharmacist for follow-up about lower-tiered medications in plan that may be suitable.)

□ Are maintenance drugs filled in a 90-day supply where a lower copay applies?
(Counselor prompt—If not, discuss 90-day supply option and refer to pharmacist.)

□ Has the consumer discussed OTC options with his/her doctor?
(Counselor prompt—If not, discuss and refer to doctor and plan for benefits check.)

□ Doctor or pharmacist review of prescriptions for falls risk.
(Counselor prompt—Sometimes medications interact or affect someone in a way that could increase their risk of falling. Discuss falls risk and refer to a doctor or pharmacist for follow-up.)

□ Assess eligibility and discuss medication therapy management (MTM) with qualified candidates.
(Counselor prompt—Refer to pharmacist for more information.)

□ Is prescription drug plan deductible or copay affordability an issue?
(Counselor prompt—If so, discuss and assess eligibility for programs that can help.)

□ Assess and advise consumer on other services and supports to help with medication adherence.
(Counselor prompt—Example: Transportation to the pharmacy or doctor’s appointment, medication reminders, caregiver support, etc.)
Understanding key terms

The terms used in pharmacy benefits plans can be confusing, and finding answers can be a challenge. Here are a few key terms to remember:

**Premium** — The monthly fee for your Medicare Part D prescription drug plan coverage.

**Deductible** — The amount you’ll pay out of pocket for your prescription medications before your Part D plan begins to pay its share. Deductibles vary by Medicare Part D drug plans.

**Copay and coinsurance** — The portion of your prescription drug costs that you are responsible for paying after your deductible (if any) is met. Depending on your plan, the copay may be a fixed amount or a percentage (also called coinsurance) that you pay for your medication.

**Formulary (or drug list)** — Every prescription drug plan has a list of covered drugs called a formulary. That list is divided into “tiers,” which vary by plan. Typically, you will pay less when you fill your prescriptions from the lower tiers and when you choose “preferred” drugs. Ask your doctor or pharmacist if there are lower-cost options, such as lower-cost brands or generic substitutes on your plan’s formulary or even over-the-counter options that can properly treat your medical condition.

**Preferred pharmacy network** — Many prescription drug plans have a preferred pharmacy network. If your plan has a preferred pharmacy network, you will likely pay lower prescription copays by using a preferred pharmacy.

Ways to maximize your pharmacy benefits

1. **Know your pharmacy network**
   - You will likely pay less by filling your medications at a preferred pharmacy if your plan offers that option
   - If not, be certain to choose a pharmacy that is in-network for cost savings

2. **Know your medications**
   - Ask your doctor and pharmacist if you can lower your pharmacy costs by filling a:
     - Generic alternative
     - Lower-cost brand alternative
     - 90-day supply instead of 30-day

3. **Know your situation**
   - At least once a year, evaluate changes in your health and prescription needs
   - Ask your doctor and pharmacist about ways you can reduce your medication costs