



South Carolina

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## Specialty Drug Copayments: True (Actual) Days' Supply

Effective July 1, 2014, our pharmacy benefit management system will begin calculating specialty drug prescription payments based on “true” (or actual) day’s supply. Only a small number of members will be immediately impacted by this change. However, it will apply to any new members or prescriptions going forward.

The specialty pharmacy benefit covers up to a maximum 30-day supply of a specialty medication for each specialty copayment. Previously, with most specialty drug claims, medication was dispensed and calculated as a 30-day supply, even when the package size or quantity would provide more than 30 days of treatment. Effective July 1, our pharmacy benefit system will calculate all member copayments, for all specialty prescriptions, based on the actual (“true”) days’ supply of the drug. Members whose cost share is in the form of coinsurance will not be affected, because they are already paying a percentage of the total cost of the drug, regardless of how long it provides treatment.

If a specialty drug comes in a package size or quantity large enough to treat for longer than 30 days, members will be charged a copayment for each 30-day supply they receive. Some medications cannot be separated into 30-day portions due to packaging (for example, certain vials or prefilled syringes). A full copayment will be charged per each 30 days. The system cannot calculate copayments for treatment amounts less than 30 days.

### **Example:**

Botox prescribed for medical reasons is given as a series of injections once every 12 weeks. Botox is dispensed in quantities that would be enough to treat for 90 days. As of July 1, that will mean three 30-day copayments.

### **How will this affect current users?**

We have identified approximately 30 BlueCross members who are taking specialty drugs that may cost them more than they have paid in the past, depending upon their benefit plan. In May, we will send these members a letter informing them of the



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upcoming change in how their copayment/coinsurance will be calculated. Please refer to the chart below for a list of the drugs most likely to cost members more.

These changes are already coded in the pharmacy benefit system, so members may encounter the increased copayments before July 1. To help them deal with this situation, we will explain in the letter how to get an override to allow them a “grace period.” With the override, their costs will be calculated the current way until July 1.

<b>Specialty Drugs That May Cost Members More</b>			
Bethkis	Botox	Dysport	Eligard
Eylea	Hyalgan	HyperRho S/D	Ilaris
Lupron Depot	Macugen	Makena	Ozurdex
Prolia	Qutenza	Remicade	Retisert
Rhogam	Simponi Aria	Stelara	Supartz
Synvisc	TOBI	Tobramycin	Vantas
Zoladex			

**For more information, please contact your BlueCross representative.**