

2025 Transition Policy for Ultimate Health Plans

If your drug is not on Ultimate Health Plans formulary or is restricted, here are your options:

- You may be able to get a temporary supply of the drug.
- You can change to another drug.
- You can request an exception and ask Ultimate Health Plans to cover the drug or remove restrictions from the drug.

1) You may be able to get a temporary supply

Under certain circumstances, Ultimate Health Plans must provide a temporary supply of a drug you are already taking. This temporary supply gives you time to talk with your provider about the change in coverage and decide what to do.

To be eligible for a temporary supply, the drug you have been taking **must no longer be on our formulary** OR **is now restricted in some way.**

- If you are a new member, we will cover a temporary supply of your drug during the first **90 days** of your membership in the plan.
- If you were in the plan last year, we will cover a temporary supply of your drug during the first 90 days of the calendar year.
- This temporary supply will be for a maximum of 30 days. If your prescription is written for fewer days, we will allow multiple fills to provide a maximum of 30 days of medication. The prescription must be filled at a network pharmacy. (Please note that the long-term care pharmacy may provide the drug in smaller amounts at a time to prevent waste.)
- If you have been in the plan for more than 90 days, reside in a long-term care facility, and need a supply right away, we will cover one 31-day emergency supply of a particular drug or less if your prescription is written for fewer days. This is in addition to the above temporary supply.
- If you have been in the plan for more than 90 days and experience a level of care change (from one treatment setting to another), you may have an unplanned transition, such as a move from a hospital to a long-term care facility. If this happens and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover up to a 30-day temporary supply (or 31-day supply if you are a resident of a long-term care facility) when you go to a network pharmacy. This gives you time to talk to your doctor about other treatment options. After your first one-month supply in such situations, you are required to use the plan's formulary exception process. A level of care change is defined as when enrollees:
 - o Enter a Long-Term-Care (LTC) facility from a hospital or other setting.
 - Leave a Long-Term-Care (LTC) facility and return to the community.
 - Are discharged from a hospital to a home.
 - End a skilled nursing facility (SNF) stay covered under Medicare Part A (where all pharmacy charges are covered) and must revert to coverage under their Part D plan Formulary.
 - o Revert from hospice status to standard Medicare Part A and Part B benefits; or
 - Are discharged from a psychiatric hospital with a medication regimen that is highly individualized.



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For questions about a temporary supply, call Member Services.

When you are using a temporary supply of a drug, you should talk with your provider to decide what to do when your temporary supply runs out. You have two options:

2) You can change to another drug

Talk with your provider about whether there is a different drug covered by Ultimate Health Plans that may work just as well for you You can call Member Services to ask for a list of covered drugs that treat the same medical condition. This list can help your provider find a covered drug that might work for you.

3) You can ask for an exception

You and your provider can ask the plan to make an exception and cover the drug the way you would like it covered. If your provider says that you have medical reasons that justify asking us for an exception, your provider can help you request an exception. For example, you can ask Ultimate Health Plans to cover a drug even though it is not on our Drug List, or you can ask us to make an exception and cover the drug without restrictions.

Ultimate Health Plans will provide you with a written notice after we cover the Transition Supply. This notice will explain the steps to request an exception and how to work with your provider to decide if you should switch to an appropriate drug that Ultimate Health Plans covers.

If you and your provider want to ask for an exception, Chapter 9, Section 6.4 of your Evidence of Coverage tells you what to do. It explains Medicare's procedures and deadlines to ensure your request is handled promptly and fairly.

