



High-Cost Drug Discount Optimization Program, powered by PillarRx Frequently Asked Questions

Overview

What is the High-Cost Drug Discount Optimization Program?

This is a copayment assistance program that reduces the out-of-pocket costs Blue Cross Blue Shield of Michigan and Blue Care Network members pay for certain medications. This helps members afford their medication and adhere to their therapies. It may also result in cost savings to their employer groups.

Through copay assistance programs, drug manufacturers cover all or some of the member cost sharing for certain medications. Our copay assistance program is operated by PillarRx Consulting, an independent prescription benefit consulting company. PillarRx will help arrange copay assistance from drug manufacturers for our members who purchase certain medications.

How does the program work?

Members who enroll have all or some of their out-of-pocket costs for certain medications covered by drug manufacturers.

The amounts members pay toward their prescriptions (their copays and coinsurance) **will** apply toward their out-of-pocket maximums, as outlined in plan documents.

Will the reduced copay remain constant throughout the benefit year? What happens if funding disappears or is no longer available for these medications?

Typically, yes. If funding for a drug runs out before the end of the benefit year, members will resume paying the regular copays they were paying without the discounts.

Dates of Availability

When is the program available to HMO and PPO groups?

Self-funded group customers can opt into the program July 1, 2020. Groups must sign a letter of understanding to opt in.

Qualifying fully insured small groups will be enrolled at their renewals, starting Jan. 1, 2021.

Fully insured large groups will be enrolled Jan. 1, 2021.

Can self-funded groups enroll in this program in the middle of the benefit year?

No, not at this time.



High-Cost Drug Discount Optimization Program, powered by PillarRx Frequently Asked Questions

Member Participation

Who contacts the members: PillarRx or Blue Cross?

PillarRx will contact members through letters and phone calls. Letters are cobranded with both the Blue Cross and PillarRx logos.

Can groups with plans that include an integrated medical and pharmacy deductible enroll?

No, not at this time. Groups cannot enroll segments for which a deductible applies to the prescription drug program, including health savings account plans. Enrollment for segments with prescription plan deductibles is planned as a future program expansion.

What can members expect?

If a member currently takes one or more medications for which copay assistance is available, he or she can expect a phone call from a PillarRx copay assistance team representative. The representative will help the member to enroll in the discount program.

The PillarRx team will monitor member claims. They'll also ensure that copays are processing as expected and applied to the out-of-pocket costs appropriately.

Members can call the PillarRx copay assistance team at 636-614-3126.

Can groups with health savings account plans enroll?

Health savings account group plans are not included in the Jan. 1, 2021 launch. Blue Cross plans to expand this program to these groups in the next phase.

Is there a certificate or rider that groups need to add to enroll?

Self-funded groups that want to enroll in the program starting July 1, 2020, should work with their assigned account managers. A rider or update to each group's benefit design documents will be required, in addition to a letter of understanding for this program.

Beginning Jan. 1, 2021, we'll incorporate the program into the benefit design for fully insured small groups on their plan year renewal dates. The program will be effective for fully insured large groups on Jan. 1, 2021.

Can members choose not to participate in the program?

No. Members who take medications included in this program are required to participate. This program not only provides cost-savings for members, but for group customers as well.



High-Cost Drug Discount Optimization Program, powered by PillarRx Frequently Asked Questions

Does the entire group have to enroll?

The entire group does not have to enroll. A group customer can choose a division or package code of the group to enroll. All members within that division or package code would be included for their eligible medications.

[Fees and Funding](#)

What is the fee for this service, and how often is the group invoiced?

The fee is 25% of the amount saved on medications in the program. We'll bill this to self-funded groups on monthly invoices.

Fully insured groups will not be billed for the program.

Is reporting available?

Reporting is available for self-funded groups and larger fully insured groups. Reporting will show the assistance amount that goes toward each medication. Reporting will also show the 25% fee and the net savings to the group.

Does Blue Cross retain any of the 25% fee that PillarRx charges?

Yes, Blue Cross receives 5% of the savings generated by the program. PillarRx retains 20% and uses these funds to manage the vendor partnership, manage claim and authorization files and perform other administrative duties.