Arkansas Blue MEDICARE
An Independent Licensee of the Blue Cross and Blue Shield Association

2027 Transition Policy for Arkansas Blue Medicare Part D Prescription Drug Coverage

Arkansas Blue Medicare Applicable Plans

- HMO: BlueMedicare Premier (H6158-001) and BlueMedicare Classic Plus (H9699-007)
- PFFS: BlueMedicare Preferred (H4213-020)
- PDP: BlueMedicare Premier Rx (S5795-002) and BlueMedicare Value Rx (S5795-003)

Transition Policy

Arkansas Blue Medicare wants to avoid disruption to your drug therapy in 2027. Under this policy, Arkansas Blue Medicare can offer a one-time temporary supply of a drug you are taking that is not on the Formulary or is restricted in some way. This temporary supply will give you and your prescriber time to change to another covered drug or to file an exception request to have the drug covered.

Eligibility for Our Transition Policy

To be eligible for this one-time supply, you must meet the following two requirements:

1. The drug you have been taking is no longer on our Formulary or the drug you have been taking is now restricted in some way.
2. One of the following scenarios applies to you:
   - You're a new member to the plan.
   - You are a current member affected by formulary changes.
   - You are a member who has been in the plan for more than 90 days and you reside in a long-term care (LTC) facility and need an emergency supply.

Transition Supply at a Retail Pharmacy (Non-LTC Members)

Arkansas Blue Medicare will cover a one-time, 30-day supply of a covered Part D drug during the first 90 days of your enrollment. If the prescription is written for fewer than 30 days, we will allow multiple fills to provide up to a total of 30 days.

Transition Supply for Residents of LTC Facilities

If you're a long-term care resident, Arkansas Blue Medicare will cover a 31-day supply during the first 90 days of your enrollment. If the prescription is written for fewer than 31 days, we will allow multiple fills to provide up to a total of 31 days. After the transition period has ended or the days supply is exhausted, we will allow up to a 31-day emergency supply while an exception request or prior authorization determination is pending.

Transition Supply for Level-of-Care Changes

If you experience a level-of-care change, Arkansas Blue Medicare will cover a 31-day transition supply within a 90-day window. If the prescription is written for fewer than 31 days, we will allow multiple fills to provide up to a total of 31 days.

Transition Fill Notices

Within three days of receiving your transition supply, a transition policy notification letter explaining the transition supply will be mailed to you. When you receive this letter, talk to your prescriber about changing to another drug that is on the plan's Formulary OR requesting an exception. For detailed information on coverage determinations, appeals, and exceptions, refer to your Evidence of Coverage (EOC).

Transition Fill Cost Share

If you are a low-income subsidy (LIS) beneficiary, your cost share for transition supplies will not exceed your LIS limit. If you're a non-LIS beneficiary, your cost share will be on the same cost-sharing tier as if a non-formulary exception was applied (generally Tier 4).

Excluded Drugs for Part D Transition Fills

Certain drugs are excluded from this transition fill policy:

- Drugs excluded from Medicare Part D coverage
- Drugs that need a determination if they are covered under Medicare Part B or Part D
- Drugs that have safety concerns (e.g., opioids, benzodiazepine or other pain management medications, drug interactions, etc.)

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