

Pennsylvania Public School  
Employees' Retirement System (PSERS)

# Health Options Program

**DISTRICT OF COLUMBIA**

## Participating Pharmacy Directory

### FOR THE BASIC AND ENHANCED MEDICARE Rx OPTIONS

**This booklet provides a list of the HOP Basic and Enhanced Medicare Rx Plan participating network pharmacies. *This directory is current as of January 1, 2009.* Pharmacies may have been added or removed from the list after this directory was printed. Therefore, all network**

**pharmacies may not be listed in this directory and *the fact that the pharmacy is listed in the directory does not guarantee that the pharmacy is still in the network.* To get current information about participating network pharmacies in your area, please visit the HOP Web site at [www.HOPbenefits.com](http://www.HOPbenefits.com) or contact Prescription Solutions Customer Service at (888) 239-1301, 24 hours a day, seven days a week. (TTY/TDD users should call (800) 498-5428.)**

### Introduction

This booklet provides a list of participating HOP Basic and Enhanced Medicare Rx Plan (Employer PDP) network pharmacies and includes some basic information about how to best utilize the pharmacy network to have your prescriptions filled. A complete description of your prescription drug coverage, including how to have your prescriptions filled, is included in the Annual Notice of Change and Evidence of Coverage document.

We call the pharmacies on this list our “network pharmacies” because we have contracted with them to dispense prescription drugs to HOP Basic and Enhanced Medicare Rx Plan beneficiaries. A network pharmacy is a pharmacy where beneficiaries can obtain prescription drug benefits provided under the HOP Basic and Enhanced Medicare Rx Plans. Your prescription drug claim can be processed at the point of sale whenever it is filled at a participating network

pharmacy or through our mail-order pharmacy service. Once you go to a particular pharmacy, you are not required to continue going to the same pharmacy to fill future prescriptions; you can go to any of our network pharmacies. We will reimburse beneficiaries for covered prescriptions filled at non-network pharmacies under certain circumstances as described later.

### Can the list of network pharmacies change?

Yes, although it is very unusual for a pharmacy to leave the network, HOP may remove or add new pharmacies to the network directory. To get current information about HOP Basic and Enhanced Medicare Rx Plan network pharmacies in your area, please visit our Web site at [www.HOPbenefits.com](http://www.HOPbenefits.com) or call Prescription Solutions Customer Service at (888) 239-1301, 24 hours a day, seven days a week. (TTY/TDD users should call (800) 498-5428.)

## How do I find a HOP Basic and Enhanced Medicare Rx Plan network pharmacy in my area?

To find a retail pharmacy in your area:

- **Chain Pharmacies** are listed alphabetically on page 5. If a chain is listed, pharmacies in the chain are in the network. The chain pharmacies all have a telephone number you can call to find a local chain pharmacy.
- **Other Retail and Independent Pharmacies** are listed by city beginning on page 6. The HOP Web site, [www.HOPbenefits.com](http://www.HOPbenefits.com), provides access to a lookup tool to help you locate a chain or independent retail pharmacy in your area.
- Information on our **Mail-Order Pharmacy** can be found on page 8.
- Information on **Long-Term Care Pharmacies** can be found on page 8. Long-Term Care Pharmacies are listed by city.

For further assistance you can visit our Web site at [www.HOPbenefits.com](http://www.HOPbenefits.com) or call Prescription Solutions Customer Service at (888) 239-1301, 24 hours a day, seven days a week. (TTY/TDD users should call (800) 498-5428.)

## How do I fill a prescription at a network pharmacy?

To fill your prescription at a network pharmacy, present the prescription received from your physician along with your HOP Basic or Enhanced Medicare Rx Plan member ID card to your pharmacist. With each prescription order or refill you can obtain up to a 33-day supply of your medication. As an added HOP service, many participating retail pharmacies offer the option of obtaining up to a 90-day supply of maintenance medications. You can consult with your local pharmacist about the availability of this service. More information about this program is included in your Annual Notice of Change and Evidence of Coverage document.

If you do not have your ID card with you when you fill your prescription, you may have to pay the full cost of the prescription rather than paying just your coinsurance. If this happens, you should request reimbursement of the Plan's share of the cost by submitting a paper claim form. To find out how to submit a claim, look in your Annual Notice of Change and Evidence of Coverage document or call Prescription Solutions Customer Service at (888) 239-1301 to request a claim form.

## How do I fill a prescription through the HOP mail-order pharmacy service?

You can use the mail-order service to fill prescriptions for what we call "maintenance drugs." These are drugs that you take on a regular basis for treatment of a chronic or long-term medical condition. When you order prescription drugs by mail, you can obtain up to a 90-day supply of the drug. If you need an immediate supply of a maintenance medication, ask your physician to write two prescriptions, one for a short-term supply to be filled at a local retail pharmacy and another for a long-term supply to be filled at the mail-order pharmacy.

To get order forms and information about filling your prescriptions by mail, call Prescription Solutions Customer Service at (888) 239-1301 and select the mail-order pharmacy option or go to the HOP Web site at [www.HOPbenefits.com](http://www.HOPbenefits.com). Please note that you must use the HOP Mail-Order Pharmacy; prescription drugs obtained through any other mail-order service are not covered.

## How do I fill a prescription at a non-network pharmacy?

The following are a few exceptions when we will pay for a prescription filled at a pharmacy outside of our network.

### ***How do I get coverage when I am traveling?***

If you take a prescription drug on a regular basis and you are going on a trip, be sure to check your supply of the drug before you leave. When possible, take along all the medication you will need. You may be able to order your prescription drugs ahead of time through our mail-order pharmacy service. Network pharmacies are available throughout the country. If you need to transfer your prescription, call the pharmacy you wish to transfer the prescription from and ask them to transfer the prescription. You will need to provide the pharmacy with the new pharmacy name, phone number, and Rx number.

If you are traveling within the United States and become ill or lose or run out of your prescription drugs, we will cover prescriptions that are filled at our network or out-of-network pharmacy. In this situation, you will have to pay the full cost (rather than paying just your coinsurance) when you fill your prescription. You can ask us to reimburse you for our share of the cost by submitting a claim form. If you go to an out-of-network pharmacy, you may be responsible for paying the difference between what we would pay for a prescription filled at an in-network pharmacy and what the out-of-network pharmacy charged for your prescription. To learn how to submit a paper claim, please refer to the paper claims process described later.

You can also call Customer Service to find out if there is a network pharmacy in the area where you are traveling. If there are no network pharmacies in that area, Customer Service may be able to make arrangements for you to get your prescriptions from an out-of-network pharmacy.

We cannot pay for any prescriptions that are filled by pharmacies outside of the United States, even for a medical emergency.

### ***What if I need a prescription because of a medical emergency or because I need urgent care?***

We will cover prescriptions that are filled at an out-of-network pharmacy in the U.S. if the prescriptions are related to care for a medical emergency or urgent care. In this situation, you will have to pay the full cost (rather than paying just your coinsurance) when you fill your prescription. You can ask us to reimburse you for our share of the cost by submitting a paper claim form. If you go to an out-of-network pharmacy, you may be responsible for paying the difference between what we would pay for a prescription filled at an in-network pharmacy and what the out-of-network pharmacy charged for your prescription. To learn how to submit a paper claim, please refer to the paper claims process described later.

### ***Will my prescription be covered if I go to an out-of-network pharmacy?***

We will cover your prescription at an out-of-network pharmacy if at least one of the following applies:

- If you are trying to fill a prescription drug that is not regularly stocked at an accessible network retail or mail-order pharmacy (including high cost and unique drugs).
- If you are getting a vaccine that is medically necessary but not covered by Medicare Part B or some covered drugs that are administered in your doctor's office.

**Before you fill your prescription in any of these situations, call Prescription Solutions Customer Service to see if there is a network pharmacy in your area where you can fill your prescription.** If you do go to an out-of-network pharmacy for the reasons listed above, you will have to pay the full cost (rather than paying just your coinsurance) when

you fill your prescription. You can ask us to reimburse you for our share of the cost by submitting a claim form. If you go to an out-of-network pharmacy, you may be responsible for paying the difference between what we would pay for a prescription filled at an in-network pharmacy and what the out-of-network pharmacy charged for your prescription. To learn how to submit a paper claim, please refer to the paper claims process described next.

### ***How do I submit a paper claim?***

Be sure to obtain a complete prescription drug receipt from the non-network pharmacy when you purchase your medication. To obtain a paper claim form call Prescription Solutions Customer Service at (888) 239-1301 and request a claim form. When completing the claim form you will need to refer to information on the pharmacy receipt including the amount charged, prescription number, name of drug dispensed, manufacturer, dosage form, strength, quantity and date dispensed. Submit your claim form and your receipt to

the following address: Prescription Solutions, MS CA106, Attn: Claims Department, P.O. Box 6037, Cypress, CA 90630-0037. Upon receipt, we will make an initial coverage determination on the claim and determine the amount of reimbursement you are entitled to based on what the plan would have paid to a participating pharmacy for the covered medication. For additional information on coverage determinations, please refer to your Annual Notice of Change and Evidence of Coverage or call Customer Service.

### **For more information**

For more detailed information about your HOP Basic and Enhanced Medicare Rx Plan prescription drug coverage, please review the Annual Notice of Change and Evidence of Coverage and HOP Basic and Enhanced Medicare Rx Plan formulary documents, visit [www.HOPbenefits.com](http://www.HOPbenefits.com) or call Prescription Solutions Customer Service at (888) 239-1301, 24 hours a day, seven days a week. TTY/TDD users should call (800) 498-5428.

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**CHAIN PHARMACIES**

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**Acme Pharmacy**  
(877) 932-7948

**Albertson's**  
(877) 932-7948

**Baker's Pharmacy**  
(800) 362-2183

**Brooks**  
(800) 325-3737

**Carrs Quality Centers**  
(877) 723-3929

**City Market**  
(877) 415-4647

**Costco**  
(800) 607-6861

**CVS**  
(800) SHOP-CVS

**Dillon Pharmacies**  
(800) 362-2183

**Dominick's**  
(877) 723-3929

**Food 4 Less**  
(800) 362-2183

**Fred Meyer**  
(888) 247-4439

**Fry's Pharmacy**  
(623) 936-2100

**Genuardi's**  
(877) 723-3929

**Gerbes**  
(800) 362-2183

**Hilander Pharmacy**  
(317) 579-8100

**K-Mart Pharmacies**  
(800) 866-0086

**King Soopers**  
(877) 415-4647

**Kroger**  
(800) 576-4377

**Longs**  
(800) 865-6647

**Osco Drug**  
(877) 932-7948

**Pavilions**  
(877) 723-3929

**Pay Less Pharmacy Group**  
(317) 579-8100

**Quality Food Centers, Inc.**  
(800) 201-6261

**Ralphs Grocery Company**  
(888) 437-3496

**Randalls Pharmacies**  
(877) 723-3929

**Rite Aid**  
(800) 748-3243

**Safeway**  
(877) 723-3929

**Sam's Club**  
(800) 925-6278

**Sav-on Drugs**  
(877) 932-7948

**Shaws/Osco Pharmacies**  
(877) 932-7948

**Smith's Food & Drug**  
(888) 876-4847

**Target**  
(800) 440-0680

**Tom Thumb**  
(877) 723-3929

**Vons**  
(877) 723-3929

**Walgreens**  
(800) 925-7433

**Wal-Mart**  
(800) 925-6278

# District of Columbia

## RETAIL PHARMACIES

### Alpha Care Drugs LLC

1638 R St Nw Ste 1, 20009  
(202) 265-7979

### Apex Care Pharmacy

4047 Minnesota Ave NE, 20019  
(202) 388-1900

### 90 Bioscrip Pharmacy

1325 14th St NW, 20005  
(202) 332-8811

### Capitol Hill Care Pharmacy

650 Pennsylvania Ave SE,  
20003  
(202) 548-0008

### Cathedral Care Pharmacy

3000 Connecticut Ave NW,  
20008  
(202) 265-1300

### Chartered Medical Pharmacy

3924 Minnesota Ave NE, 20019  
(202) 627-7809

### Chevy Chase Pharmacy

3812 Northampton St NW, 20015  
(202) 966-8600

### Columbia Heights Prof Care Phcy

3316 14th St NW, 20010  
(202) 232-1455

### 90 CVS Pharmacy

1100 New Jersey Ave SE, 20003  
(202) 488-2364

### 90 CVS Pharmacy

2530 Virginia Ave NW, 20037  
(202) 333-5031

### 90 CVS Pharmacy

1403 Wisconsin Ave NW, 20007  
(202) 337-4848

### 90 CVS Pharmacy

661 Pennsylvania Ave SE,  
20003  
(202) 543-3305

### 90 CVS Pharmacy

1199 Vermont Ave NW, 20005  
(202) 628-0720

### 90 CVS Pharmacy

1901 Pennsylvania Ave NW  
20006  
(202) 331-7077

### 90 CVS Pharmacy

433 Lenfant Plz Center SW  
20024  
(202) 554-5270

### 90 CVS Pharmacy

5550 Connecticut Ave NW,  
20015  
(202) 966-6600

### 90 CVS Pharmacy

6 7 Dupont Circle NW, 20036  
(202) 785-1466

### 90 CVS Pharmacy

401 M St SW, 20024  
(202) 554-2144

### 90 CVS Pharmacy

3327 Connecticut Ave NW,  
20008  
(202) 966-7210

### 90 CVS Pharmacy

2125 E St NW, 20037  
(202) 338-6337

### 90 CVS Pharmacy

2646 Naylor Rd SE, 20020  
(202) 582-4800

### 90 CVS Pharmacy

4309 Connecticut Ave NW,  
20008  
(202) 966-3023

### 90 CVS Pharmacy

4851 Massachusetts Ave NW  
20016  
(202) 363-9554

### 90 CVS Pharmacy

320 40th St NE, 20019  
(202) 396-2331

### 90 CVS Pharmacy

3240 Pennsylvania Ave SE  
20020  
(202) 584-5700

### 90 CVS Pharmacy

845 Bladensburg Rd NE, 20002  
(202) 397-2600

### 90 CVS Pharmacy

5227 Georgia Ave NW, 20011  
(202) 723-5811

### 90 CVS Pharmacy

500 12th St SE, 20003  
(202) 543-1555

### 90 CVS Pharmacy

6514 Georgia Ave NW, 20012  
(202) 829-5234

### 90 CVS Pharmacy

128 130 Kennedy St NW, 20011  
(202) 829-3235

### 90 CVS Pharmacy

660 Rhode Island Ave NE  
20002  
(202) 635-8520

### 90 CVS Pharmacy

1637 P St NW, 20036  
(202) 328-1250

### 90 CVS Pharmacy

1900 7th St NW, 20001  
(202) 232-2201

### 90 CVS Pharmacy

1000 U Street NW, 20001  
(202) 518-2978

### 90 CVS Pharmacy

1700 Columbia Rd NW, 20009  
(202) 234-8601

### 90 CVS Pharmacy

3601 12th St NE, 20017  
(202) 529-8559

### 90 CVS Pharmacy

717 14th St NW, 20005  
(202) 737-9525

- 90 CVS Pharmacy**  
2000 M St NW, 20036  
(202) 862-8417
- 90 CVS Pharmacy**  
1275 Pennsylvania Ave NW  
20004  
(202) 638-4583
- 90 CVS Pharmacy**  
1990 K St NW, 20006  
(202) 223-8735
- 90 CVS Pharmacy**  
5013 Connecticut Ave Nw  
20008  
(202) 966-1815
- 90 CVS Pharmacy**  
1500 K St NW, 20005  
(202) 638-6250
- 90 CVS Pharmacy**  
4859 Macarthur Blvd NW, 20007  
(202) 965-6548
- 90 CVS Pharmacy**  
4555 Wisconsin Ave NW, 20016  
(202) 537-1459
- 90 CVS Pharmacy**  
2000 L St NW, 20036  
(202) 452-6194
- 90 CVS Pharmacy**  
110 Carroll St NW, 20012  
(202) 722-7593
- 90 CVS Pharmacy**  
1025 Connecticut Ave NW,  
20036  
(202) 785-3102
- 90 CVS Pharmacy**  
435 8th St NW, 20004  
(202) 783-4293
- 90 CVS Pharmacy**  
3031 14th St NW, 20009  
(202) 332-4865
- 90 CVS Pharmacy**  
2226 Wisconsin Ave NW, 20007  
(202) 944-8671
- 90 CVS Pharmacy**  
1418 P St NW, 20005  
(202) 939-5735
- 90 CVS Pharmacy**  
2240 M St NW, 20037  
(202) 296-9876
- 90 CVS Pharmacy**  
400 Massachusetts Ave NW  
20001  
(202) 289-2236
- 90 Ensign Pharmacy At WHC**  
106 Irving St NW, 20010  
(202) 877-6309
- Foers Pharmacy**  
2141 K St NW, 20037  
(202) 296-7190
- Foers Pharmacy**  
818 18th St NW, 20006  
(202) 833-3675
- 90 Giant Pharmacy 375**  
1050 Brentwood Rd NE, 20018  
(202) 281-3901
- 90 Giant Pharmacy 376**  
1414 Eighth Street NW, 20001  
(202) 628-0577
- 90 Giant Pharmacy 378**  
1345 Park Road NW, 20010  
(202) 777-1078
- 90 Giant Pharmacy**  
1535 Alabama Avenue Street,  
20032  
(202) 610-6450
- 90 Giant Pharmacy 380**  
3400 Wisconsin Ave NW, 20016  
(202) 363-3809
- Goodcare Pharmacy**  
2906 Martin Luther King Jr Ave  
20032  
(202) 561-4343
- Grubbs Care Pharmacy**  
326 E Capitol St SE, 20003  
(202) 543-4400
- 90 Harris Teeter Pharmacy**  
1631 Kalorama Road NW,  
20009  
(202) 299-0874
- 90 Harris Teeter Pharmacy**  
1350 Potomac Avenue SE,  
20003  
(704) 844-3100
- Medical Faculty Assoc Phcy**  
2150 Pennsylvania Ave NW  
20037  
(202) 741-3600
- 90 Medicine Shoppe Pharmacy**  
7814 Eastern Avenue, 20012  
(202) 722-2426
- 90 Morgan Care Pharmacy**  
3001 P St NW, 20007  
(202) 337-4100
- 90 Morton's Pharmacy**  
724 E Capitol St NE, 20003  
(202) 543-1616
- Mt Olivet Care Pharmacy & Med Equip**  
1809 W Virginia Ave NE, 20002  
(202) 529-7001
- Mt Pleasant Care Pharmacy**  
3169 Mt Pleasant St NW, 20010  
(202) 387-3100
- 90 National Rehab Hosp Phcy**  
102 Irving St NW, 20010  
(202) 877-1730
- Neighborhood Care Pharmacy**  
1932 Martin Luther  
King Jr Ave SE, 20020  
(202) 889-1119
- New Hampshire Care Pharmacy**  
5001 New Hampshire NW,  
20011  
(202) 726-3100
- Petworth Care Pharmacy**  
4809 Georgia Ave NW, 20011  
(202) 722-4330
- Phamily Care Pharmacy**  
6323 Georgia Ave NW, 20011  
(202) 722-0171
- 90 Pharmicare Specialty Pharmacy**  
1517 17th St NW, 20036  
(202) 588-0186
- 90 Rite Aid Corporation**  
Universal Building, 20009  
(202) 332-1718

**DISTRICT OF COLUMBIA > SPECIALTY LISTINGS**

**90 Rite Aid Corporation**  
Executive Building, 20005  
(202) 296-6171

**90 Rite Aid Corporation**  
5600 Georgia Avenue NW,  
20011  
(202) 722-5252

**90 Rite Aid Corporation**  
801 H Street NE, 20002  
(202) 675-2555

**90 Rite Aid Corporation**  
1306 U Street NW, 20009  
(202) 328-8761

**90 Rite Aid Corporation**  
3301 New Mexico Avenue NW  
20016  
(202) 966-4900

**90 Rite Aid Corporation**  
4635 South Capitol Street SW  
20032  
(202) 561-0939

**90 Rite Aid Corporation**  
1401 Rhode Island Avenue  
20018  
(202) 636-3648

**Rodmans Drug Store**  
5100 Wisconsin Ave NW, 20016  
(202) 363-7233

**90 Safeway Pharmacy**  
490 L Street NW, 20001  
(202) 719-2439

**90 Safeway**  
1855 Wisconsin Avenue NW  
20007  
(202) 333-6048

**90 Safeway**  
415 14th Street SE, 20003  
(202) 547-4350

**90 Safeway**  
1601 Maryland Ave NE, 20002  
(202) 398-6900

**90 Safeway**  
4203 Davenport Street NW  
20016  
(202) 364-0292

**90 Safeway**  
514c Rhode Island Ave NE  
20002  
(202) 636-8643

**90 Safeway**  
2845 Alabama Ave SE, 20020  
(202) 575-7527

**90 Safeway**  
5545 Connecticut Ave NW,  
20015  
(202) 364-0320

**90 Safeway**  
3830 Georgia Avenue NW,  
20011  
(202) 291-0892

**90 Safeway**  
6500 Piney Branch Rd, 20012  
(202) 723-5612

**90 Safeway**  
1747 Columbia Rd NW, 20009  
(202) 667-2080

**Seat Pleasant Care Pharmacy**  
350 Eastern Ave NE, 20019  
(202) 396-3400

**State Care Pharmacy Inc**  
2041 Martin Luther King Jr Ave  
20020  
(202) 610-2100

**90 Statscript Pharmacy**  
1125 Spring Rd, 20010  
(202) 576-7053

**Sterling Care Pharmacy**  
1647 Benning Rd NE, 20002  
(202) 399-7876

**90 Super Care Pharmacy**  
1019 H Street NE, 20002  
(202) 388-0050

**90 Target Pharmacy**  
3100 14th Street NW Suite 201,  
20010  
(202) 777-3774

**Tschiffely Phcy Dupont Cir**  
1330 Connecticut Ave NW, 20036  
(202) 331-7176

**Tschiffely Union Sta Phcy**  
50 Massachusetts Ave NE  
20002  
(202) 408-5178

**Tschiffly Phcy 19th St**  
1145 19th Street NW, 20036  
(202) 466-8440

**90 Walgreen Drug Store**  
1217 22nd Street NW, 20037  
(202) 776-9084

**Wellington Apothecary**  
1160 Varnum St NE, 20017  
(202) 832-2200

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**MAIL ORDER PHARMACY**

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**Prescription Solutions**  
P.O. Box 509075  
San Diego, CA 92150-9075

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**LONG TERM CARE**

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**Medicine Shoppe**  
7814 Eastern Avenue, 20012  
(202) 722-2426

**New Hampshire Care  
Pharmacy**  
5001 New Hampshire Ave NW,  
20011  
(202) 726-3100