

Pennsylvania Public School
Employees' Retirement System (PSERS)

Health Options Program

NORTH DAKOTA

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 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 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, 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.
- If applicable, information on **Indian Health Services/Tribal/Urban Indian Health Program (I/T/U) Pharmacies** can be found on page 8, with I/T/U Pharmacies listed by city.

For further assistance you can visit our Web site at 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. 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 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.

CHAIN PHARMACIES

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

North Dakota

RETAIL PHARMACIES

Arthur

- 90 Arthur Drug**
340 Main St, 58006
(701) 967-8900

Ashley

- 90 Ashley Drug**
109 W Main St, 58413
(701) 288-3355

Belcourt

- 90 Belcourt IHS Pharmacy**
#1 Hospital Dr, 58316
(701) 477-9426

- 90 Belcourt Drug Inc**
9838 43rd Avenue NE, 58316
(701) 477-0202

Bismark

Arrowhead Plaza Drug Inc
1116 N 3rd St, 58501
(701) 223-8806

Churchill Pharmacy Inc
1190 W Turnpike Avenue,
58501
(701) 224-0339

- 90 CVS Pharmacy**
600 S Fifth, 58504
(701) 255-1335

- 90 CVS Pharmacy**
2700 State Street, 58503
(701) 223-9323

- 90 Gateway Pharmacy North**
3101 N 11th St, 58503
(701) 224-9521

- 90 Gateway Pharmacy South**
835 S Washington St, 58504
(701) 223-1656

Heritage Pharmacy East
1000 E Rosser Avenue, 58501
(701) 530-6311

Mayo Pharmacy
303 N 4th Street, 58501
(701) 223-2425

- 90 Medicine Shoppe Pharmacy**
1304 East Boulevard Ave,
58501
(701) 224-0175

**Street Alexius
Community Pharmacy**
900 E Broadway Avenue, 58506
(701) 530-6906

White Drug
117 N 5th St, 58501
(701) 224-0175

Bottineau

- 90 Wal-Mart Pharmacy**
912 11th Street East, 58318
(701) 228-5930

Casselton

- 90 Casselton Drug**
622 Front St, 58102
(701) 347-4281

Cavalier

White Drug
201 E Third Ave South, 58220
(701) 265-4744

Devils Lake

Bell Pharmacy
323 Fifth St, 58301
(701) 662-3022

- 90 Clinic Pharmacy**
1101 7th St, 58301
(701) 662-4427

Ramsey Drug Company
413 4th Ave, 58301
(701) 662-3117

Dickinson

- 90 Greene Drug And Gift
Company**
16 W Villard St, 58601
(701) 225-5171

- 90 Medicine Shoppe Pharmacy**
431 West Villard Street, 58601
(701) 227-8265

- 90 ND Pharmacy Inc**
363 15th St W, 58601
(701) 225-4434

White Drug
1681 3rd Ave W, 58601
(701) 225-4421

Enderlin

Enderlin Pharmacy
308 Railway St, 58027
(701) 437-2464

Fargo

- 90 CVS Pharmacy**
2401 13th Ave South, 58103
(701) 232-4872

- 90 CVS Pharmacy**
1321 19th Ave North, 58102
(701) 232-2720

Dakota Clinic Pharmacy
1702 S University Dr, 58103
(701) 364-3367

- 90 Innovis Health**
3000 32nd Avenue SW, 58104
(701) 364-8000

Linson Pharmacy Ltd
3175 25th St S, 58103
(701) 293-6022

- 90 Medical Pharmacy Inc**
100 SO 4th St, 58103
(701) 237-0322

- 90 Medical Pharmacy South**
4151 45th St SO, 58104
(701) 282-8075

Medical Pharmacy West
4101 13th Ave S, 58103
(701) 282-6510

FARGO > MINOT

- 90 Medicine Shoppe**
1605 South University Drive,
58103
(701) 293-3060
- 90 Medicine Shoppe**
2800 N Broadway, 58102
(701) 293-0221
- 90 Metro Drug**
123 N Broadway, 58102
(701) 232-6150
- 90 Northport Drug**
2522 N Broadway, 58102
(612) 374-1653
- 90 Thrifty Drug Ltd**
1521 S University Dr, 58103
(701) 232-8690
- 90 Thrifty Drug Southgate**
1532 32nd Ave S, 58103
(701) 280-1929
- 90 White Drug**
201 South University Drive,
58103
(701) 239-3543
- White Drug**
712 38th St NW, 58102
(701) 893-9217
- White Drug**
708 C 38th St NW, 58102
(701) 893-9050
- White Drug**
1401 33rd St S, 58103
(701) 235-5511
- Fessendon**
Nilles Drug Inc
58 S Main St, 58438
(701) 547-2301
- Glen Ullin**
Glen Ullin Drug Pharmacy
113 S Main St, 58631
(701) 348-3303
- Grafton**
White Drug #65
544 Hill Ave, 58237
(701) 352-1760

- Grand Forks**
- 90 Altru Health System
Retail Pharmacy**
1200 S Columbia Rd, 58206
(701) 780-3444
- 90 CVS Pharmacy**
1950 32nd Ave S, 58201
(701) 746-8643
- 90 Medicap Pharmacy**
1395 S Columbia Rd Ste C,
58201
(701) 746-1800
- Thrifty White Drug**
715 S Washington, 58201
(701) 775-4209
- Walls Express Pharmacy**
1315 Columbia Road S, 58201
(701) 738-8014
- Walls Medicine Center**
708 S Washington St, 58201
(701) 746-0497
- White Drug**
1380 S Columbia Rd, 58201
(701) 746-4455
- Hankinson**
Hankinson Drug
309 S Main Ave, 58041
(701) 242-7414
- Harvey**
- 90 Medicine Shoppe Pharmacy**
722 Lincoln Ave, 58341
(701) 324-2295
- Hettinger**
White Drug
112 S Main St, 58639
(701) 567-2533
- Jamestown**
- 90 Medicine Shoppe Pharmacy**
703 1st Avenue S, 58401
(701) 252-3002
- Walz Pharmacy**
213 1st Ave N, 58401
(701) 252-3181

- White Drug**
410 10th St SE, 58401
(701) 252-5980
- White Drug**
310 1st Ave S, 58401
(701) 251-1432
- Lamoure**
La Moure Drug Store
100 1st Ave SW, 58458
(701) 883-5339
- Linton**
- 90 Linton Drug Company**
121 Broadway, 58552
(701) 254-5432
- Lisbon**
Lisbon Sheyenne Pharmacy
404 Main St, 5805
(701) 683-4691
- Sheyenne Valley Drug**
407 Main St, 58054
(701) 683-5282
- Maddock**
White Drug
108 Central, 58348
(701) 438-2567
- Mandan**
- 90 Gateway Pharmacy Mandan**
500 Burlington St SE, 58554
(701) 667-1843
- 90 Medicine Shoppe Pharmacy**
403 First Street NW, 58554
(701) 663-1151
- Thrifty White Drug**
511 1st St NW, 58554
(701) 663-5188
- Minot**
**Center For Family
Medicine Pharmacy**
1201 11th Ave SW, 58701
(701) 858-6755
- 90 CVS Pharmacy**
2400 10th St SW, 58701
(701) 852-4068

MINOT > SPECIALTY LISTINGS

Market Pharmacy

1930 S Broadway, 58701
(701) 839-8883

90 Medicine Shoppe Pharmacy

209 11th Avenue SW, 58701
(701) 852-1524

White Drug

1015 S Broadway, 58701
(701) 852-4181

White Drug

1600 2nd Ave SW, 58701
(701) 852-0388

Mohall

White Drug

115 Main St West, 58761
(701) 756-6000

Oakes

Oakes Drug

422 Main Ave, 58474
(701) 742-2118

90 Taras Thrifty White LLC

610 Main Avenue, 58474
(701) 742-3824

Rolette

White Drug

208 Main St, 58366
(701) 246-3600

Rugby

White Drug

107 2nd St SE, 58368
(701) 776-5741

Valley City

Central Avenue Pharmacy

323 Central Ave N, 58072
(701) 845-5280

Valley Drug

239 2nd Ave NW, 58072
(701) 845-1763

White Drug

156 S Central Ave, 58072
(701) 845-1421

Wahpeton

90 Econo Drugs

387 11th St S, 58075
(701) 642-9575

Watford City

90 Jackson Dodds Inc

145 N Main St, 58854
(701) 842-3311

West Fargo

Frontier Health

Mart Pharmacy

3306 Sheyenne Street, 58078
(701) 356-7455

90 The Prescription Shop Inc

1210 Sheyenne St, 58078
(701) 282-4665

White Drug

1100 13th Ave E, 58078
(701) 281-5695

Williston

90 N D Pharmacy Inc

20 26th St E, 58801
(701) 572-4181

90 Service Drug Pharmacy

317 Main, 58801
(701) 572-6721

MAIL ORDER PHARMACY

Prescription Solutions

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

LONG-TERM CARE

In some cases, residents of a long-term care facility may access their prescription drugs through their long-term care pharmacy.

Bismarck

Professional Pharmacy

1016 N 28th St, 58501
(701) 223-6854

Fargo

White Drug

201 South University Drive,
58103
(701) 239-3543

Forman

Forman Drug Inc

330 Main St S, 58032
(701) 724-6222

**INDIAN HEALTH SERVICES/
TRIBAL/URBAN INDIAN
HEALTH PROGRAM (I/T/U)
PHARMACIES**

Native Americans and Alaska Natives have access to Indian Health Service / Tribal / Urban Indian Health Program (I/T/U) Pharmacies through HOP Basic & Enhanced Medicare Rx Plan's pharmacy network.

Ft. Totten

90 Ft Totten IHS Clinic

PO BOX 309, 58335
(701) 766-1600

Ft. Yates

90 Ft Yates IHS Hospital

Pharmacy

1010 N River Rd, 58538
(701) 854-3523

Killdeer

Killdeer Pharmacy Inc.

400 SE Central Avenue, 58640
(701) 764-5093

Newton

90 Ft Berthold IHS

Clinic Pharmacy

Hwy 23 west At IHS Complex,
58763
(701) 627-4701

Trenton

Trenton Comm cln/ Trenton

Indian Service

331 4th Ave East, 58853
(701) 774-8423