

Take a Benefits Break

Grab your favorite warm beverage, and learn how to get the most out of your benefits this year.

Did you know that, every year, Medicare evaluates prescription drug plans and awards a star rating to each, based on performance? This star rating can be used to help you determine which plans excel, based on measured categories, including customer service, overall member satisfaction, and patient safety. Ratings range from 1 to 5 stars, with 5 being the highest score.

The Enhanced, Basic, and Value Medicare Rx Options under the Health Options

Program received a 4.5-star rating for 2024, indicating that the program is highly rated in comparison to other prescription drug plans nationwide.

Continue reading to learn more about the prescription drug benefits and other plan news for the new year.

What's the Difference Between a Biosimilar and a Generic Medication?

If you watch any network television at all, you know from the commercials that new drugs are being introduced all the time to treat a variety of diseases.

Many of these new advertised drugs are considered biological drugs—complex medications made from living organisms to treat serious illnesses, such as cancer, autoimmune disorders, and complex conditions, that are usually injectable or given in an infusion center.

An exact copy cannot be produced from biologic drugs because they are generally made from living sources and require a specialized process to produce. Instead, a brand-name biologic drug can have a biosimilar—usually a lower-cost medication that is highly similar to the original (reference) medication.

An FDA-approved biosimilar has no clinically meaningful difference in safety and effectiveness from the original biologic product. The approval process involves extensive analytical testing, preclinical studies, and clinical trials.

Biosimilars can be made by multiple companies, which may lower their cost—similar to generic drugs. Biosimilars are like generics in some ways but different in others, as shown in the table.

Biosimilars	Generics	
Generally made from living ources	Generally made from chemicals	
lequire a specialized process to roduce	Have a simpler process to copy	
ery similar, but not identical, to riginal biologics	Copy of brand-name drugs	
Isually less expensive than riginal biologics	Usually less expensive than brand-name drugs	
Example: Biosimilar to Humira: Cyltezo and Yuflyma	Example: Generic for Lipitor is atorvastatin	

Biosimilar medications can offer access to important treatments and an opportunity to save money.

TALK TO YOUR DOCTOR. If you take a biologic medication for a serious condition, talk to your doctor about biosimilar medications that may be available to you. It could provide you with more choices and less cost.



Medicare Rx Q&A Corner

Have questions about prescription drug coverage? We have answers, plus helpful tips to get the most out of your Health Options Program benefits.

Is my medication covered?

Consult the formulary to find out. A formulary is a list of covered drugs selected by the plan that represents the prescription therapies believed to be a necessary part of a quality treatment program.

For information about prescription drugs covered through the Enhanced, Basic, and Value Medicare Rx Options, download the abridged and/or comprehensive formulary. You can also use the online Part D Formulary Lookup Tool for your plan. Visit **HOPbenefits.com**, and go to the **Prescription** Drug Coverage page.

How much will my prescription cost?

There is no quick answer for this. The plan deductible, Medicare coverage stage, and medication tier level all factor into what you'll

pay for a medication at a given time. (For details, refer back to the Summer 2023 issue of **HOPNews**).

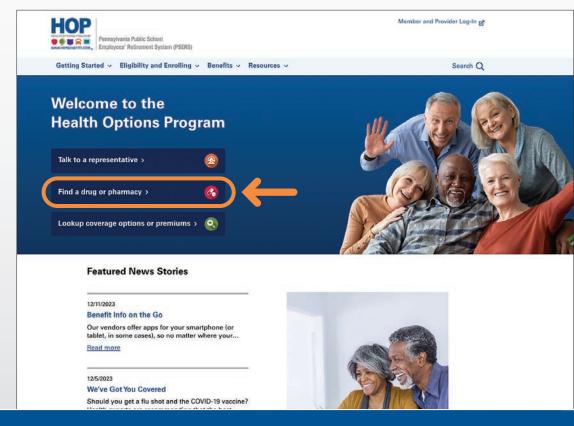
If you are enrolled in a Medicare Rx Option through the Health Options Program, use the Optum Rx drug pricing tool. Visit **HOPbenefits.com**, and select Find a Drug or **Pharmacy** and scroll to the **Pricing & Pharmacy Lookup Tools** section. Select the link for your Medicare Rx Option.

I see the letters "PA" and "ST" after my drug. What do those mean?

If a prior authorization is required for a drug, it will have a "PA" next to the name. PA means you and your doctor will need to get approval from the plan prior to filling the prescription. Otherwise, the medication won't be covered.

If a medication requires step therapy (ST), it means you must first try certain drugs to treat a medical condition before the plan will cover another drug. For example, if drug A and drug B both treat a medical condition, the plan may not cover drug B unless you try drug A first. If drug A does not work for you, the plan will then cover drug B.

The formulary for your Medicare Rx Option will indicate whether these rules apply.



Do I have to use a retail pharmacy?

If you are enrolled in one of the Medicare prescription drug options under the Health Options Program, you can visit a retail pharmacy or use one of these convenient options from Optum Rx for your medication delivery.

- Optum[®] Home Delivery. Get a three-month supply of your medication delivered to your home with no additional cost when standard shipping is used. There are also flexible payment options. Go to optumrx.com, or call the number on your member ID card to sign up.
- If you are on the go, use the Optum Rx app to refill a prescription, get an ID card, or check on whether something is covered.
- If you are taking a specialty medication, get it filled online or by phone. Then Optum's specialty pharmacy will deliver it to your door.

Are vaccines covered?

The Medicare Rx Options under the Health Options Program cover most Part D vaccines at no cost, even if you haven't met the annual deductible (if applicable). Examples of covered vaccines are RSV, shingles, tetanus, and travel vaccines. Influenza, COVID-19, pneumonia, and hepatitis B vaccines are covered under Medicare Part B. Call Optum Rx if you have questions about a certain vaccine. Also, review the **Evidence of Coverage** for your medical plan for more information about coverage and any plan limitations. Visit HOPbenefits.com to find a copy of the Evidence of Coverage for your Medicare prescription drug plan.

If you are enrolled in one of the Medicare Supplement plans, check with the insurance company for the Evidence of Coverage for your plan.

What if my local pharmacy closes?

You may have heard in the news about some of the larger retail chains closing certain stores. So far, this has had minimal impact on PSERS members. However, if your pharmacy closes, the closing pharmacy will automatically transfer the prescriptions to another store. You will also receive a letter from Optum Rx that explains the details and next steps. If you have any questions, contact your new pharmacy or the Optum Rx number noted in the letter.

How can I look up the closest pharmacy?

When you use the Optum Rx drug pricing tool, the results page will display retail pharmacies in the local area. This might be helpful if your local retail pharmacy closes or if you move.



Plan Updates

Annual Privacy Notice

Important information regarding the Health Insurance Portability and **Accountability Act of 1996**

The Privacy Rule under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires the Health Options Program to protect the confidentiality of your protected health information (PHI). The Health Options Program will not use or disclose your PHI except as is necessary for treatment, payment, health plan operations, and plan administration, as permitted or required by law, or as otherwise authorized by you. You have certain rights under the Privacy Rule with respect to your PHI, including the right to receive an accounting of certain disclosures of the information and the right to file a complaint with the Health Options Program or with the U.S. Department of Health and Human Services. Your rights with respect to your PHI are explained in greater detail in the Health Options Program's Notice of Privacy Practices. The Notice also describes how the Health Options Program uses and discloses PHI. If you would like to see (or obtain a copy of) the Health Options Program's Notice of Privacy Practices, please call the HOP Administration Unit at 1-800-773-7725 (TTY: 1-800-498-5428). You may also access the Privacy Notice on our website at **HOPbenefits.com**.

Spring 2024 Information Sessions

Individual consultations

To schedule a 30-minute telephone appointment (not a group meeting), call the HOP Administration Unit at 1-800-773-7725, and let the representative know that you want to schedule an individual telephone consultation.

Online webinars

Registration is not required but recommended. Go to the Information Sessions page on HOPbenefits.com for the full schedule, webinar links, and webinar phone numbers. A preview of the schedule is listed below.

Important: The password "PSERS" is required to join the webinar.

Webinar schedule:

- March 19 at 10:00 a.m.
- March 21 at 1:00 p.m.
- March 27 at 9:00 a.m.
- April 9 at 1:00 p.m.
- April 18 at 11:00 a.m.

New Look for HOPbenefits.com

Our website is starting the year off with a brand-new look. We hope you enjoy it and find



it easier to use. The next issue of *HOPNews* will take a more in-depth review of the website. In the meantime, visit HOPbenefits.com today.





HOP Administration Unit P.O. Box 1764 Lancaster, PA 17608-1764

Benefits Tips 2024

Have a Question?

If You Have a Question About	Please Call	Or Go Online
Health Options Program enrollment or eligibility HOP Medical Plan, Value Medical Plan, or HOP Pre-65 Medical Plan benefits or claims	HOP Administration Unit 1-800-PSERS25 (1-800-773-7725) TTY: 1-800-498-5428 From outside the U.S.: +1 717-305-7388 8:00 a.m. to 8:00 p.m. ET, weekdays	HOPbenefits.com
Prescription drugs (retail or mail order) under the Enhanced, Basic, or Value Medicare Rx Option or the HOP Pre-65 Medical Plan	Optum Rx 1-888-239-1301 TTY/TDD: 1-800-498-5428 Available 24/7	HOPbenefits.com
Medicare Advantage or Managed Care plan benefits, claims, or prescription drugs	Please call the plan directly.	
MetLife Dental and EyeMed Vision Option	MetLife 1-855-700-7997 8:00 a.m. to 11:00 p.m. ET, weekdays EyeMed 1-855-663-7444 7:30 a.m. to 11:00 p.m. ET, weekdays 8:00 a.m. to 11:00 p.m. ET, Saturdays 11:00 a.m. to 8:00 p.m. ET, Sundays	Dental and Vision Coverage page on HOPbenefits.com
Premium Assistance	Premium Assistance 1-866-483-5509 8:00 a.m. to 8:00 p.m. ET, weekdays	
Retirement	PSERS 1-888-PSERS4U (1-888-773-7748) 7:30 a.m. to 5:00 p.m. ET, weekdays	psers.pa.gov