

Outlined below are some questions and answers to help you better navigate your pharmacy benefit offered to you by Capital Rx, your prescription benefit provider. For additional questions, please contact your dedicated Customer Care team at 1-844-532-2779. We are available 24 hours a day, 7 days a week to answer any questions you may have about your prescription benefit plan.

Who is Capital Rx?

Answer: Capital Rx is a next generation pharmacy benefit manager, overseeing prescription benefit plans on behalf of employers, unions, and you - our members. We work hard every day to ensure your prescription plan is cost effective while never losing sight of our ultimate mission: your health. Check out our video to learn more about who we are!

What is a Pharmacy Benefit Manager (PBM)?

Answer: A pharmacy benefit manager (PBM) processes prescription drug claims on behalf of you and your plan sponsor (usually your employer, union, etc.). To provide this service, we contract and negotiate with retail pharmacies and pharmaceutical manufacturers to provide the right balance of drug access and cost-effectiveness.

Can I still fill my prescriptions at my preferred pharmacy with Capital Rx?

Answer: Capital Rx maintains a national network of more than 60,000 pharmacies, including all national chains and most independent pharmacies. However, with some prescription benefit plans, certain pharmacies may be excluded from the network. To confirm the network status of your preferred pharmacy, please log in to our member portal and click on Nearby Pharmacies to find a pharmacy near you. Once you arrive at the pharmacy, don't forget to show the pharmacist your ID card to ensure you only pay the out-of-pocket cost associated with your prescription benefit plan. For any additional questions, please contact Capital Rx at **1-844-532-2779**.

Is my current (or new) prescription covered by Capital Rx?

Answer: Your coverage for each prescription drug is outlined on our formulary (i.e., preferred drug list). Although most prescription benefit plans use one of our normal formularies, some plan sponsors require customization to best serve the needs of their membership. To confirm the coverage status of a medication - including if a prior authorization, step therapy, or quantity limit applies - please consult the formulary specific to your prescription benefit plan by logging into our member portal to learn more about copays and coverage information.



How do I know what my out-of-pocket cost (i.e., copay or coinsurance) will be with Capital Rx?

Answer: You can easily view expected medication cost by logging into the <u>member portal</u> and click the best price icon. Enter the name of the medication in the drug name field. Define specific options using the drop downs for type, form, dosage, and quantity. Click on the find lowest price icon. A list of local pharmacies will be provided along with the expected cost for the specified medication.

How do I request reimbursement for my pharmacy claim if it did not process through my pharmacy benefit?

Answer: If for any reason you were unable to apply your prescription benefit to fill a prescription, you can make a request for reimbursement by completing our Direct Member Reimbursement (DMR) form and mailing it to the below address, along with the original receipt from the pharmacy (please make a copy for your own records). It is important that you provide us with as much detail as possible so that we can process your claim appropriately for reimbursement. Depending on your plan's elections, you may be reimbursed directly for covered prescriptions. Blank DMR forms are available by visiting our website or by logging into the member portal.

Capital Rx, Inc.

Attn: Claims Department 9450 SW Gemini Dr., Suite 87234 Beaverton, OR 97008

Is mail order delivery right for me? If so, how do I enroll?

Answer: If you have a prescription for a maintenance medication (i.e., long-term conditions like arthritis, asthma, diabetes, high blood pressure or high cholesterol), mail order delivery may be a great solution for you. You will find mail order provides greater savings on most prescription benefit plans and saves time typically spent traveling and waiting at a retail pharmacy.

Getting started with Optum Home Delivery:

Please reach out to your prescriber and update your mail order pharmacy provider to Optum Home Delivery.

Online: Go to the Capital Rx <u>member portal</u> to register or log in. Select 'Home Delivery' to confirm your profile settings.

Phone: Call 1-844-532-2779 and follow the prompts for 'medications delivered to your home' or ask your doctor to send an electronic prescription to Optum Home Delivery. A coordinator will reach out to get you set up.

Choose one of the following options to request refills of current prescriptions or to send new prescriptions to Optum Home Delivery

E-prescribe(preferred): Have your prescriber electronically send your prescription to Optum Home Delivery.

Fax: Have your prescriber fax your prescription to Optum Home Delivery. Faxed prescriptions may only be sent by a doctor's office and must include patient information.

Online (Refills Only): Log in to the Capital Rx member portal to place an order for available refills.

Mail: Mail your paper prescription to Optum Home Delivery at 6800 W. 115th St., Suite 600, Overland Park, KS. 66211-9838.



How do I check the order status of my mail order and/or Specialty medications?

Answer: You can check your order status by logging into the Capital Rx <u>member portal</u> and selecting 'Home Delivery' or 'Specialty Pharmacy'. Select 'Order Status'. If you prefer, you can check your order status by calling Capital Rx Customer Care at **1-844-532-2779**.

How do I fill my Specialty medication?

Answer: Please reach out to your prescriber and update your specialty pharmacy provider to Optum Specialty Pharmacy. For additional specialty pharmacy questions, please call your dedicated Customer Care team at **1-844-532-2779**.

Online: Go to the Capital Rx <u>member portal</u> to register or log in. Select 'Specialty Pharmacy'. Fill out the New Patient Form, and we will take it from there.

Phone: Call Capital Rx Customer Care and follow the prompts for 'specialty pharmacy' or ask your doctor to send an electronic prescription to Optum Specialty Pharmacy.

A patient care coordinator may reach out for more information to finalize your account or set up your first order. We will also contact your provider for an up-to-date prescription, if needed.

If your prescription needs a prior authorization, your prescriber may need to take extra steps to submit your prescription. To read more about prior authorizations, visit https://cap-rx.com/members/ or call Capital Rx Customer Care.

What if I need to fill a prescription and don't have my physical ID card at the pharmacy?

Answer: You can provide the pharmacy with your member ID and the following information. This should be all they need to process the claim.

RxBIN: 610852 RxPCN: CHM RxGroup: JD35

If the pharmacy is still unable to process, you can have them contact Capital Rx at **1-844-532-2779** or download a temporary pharmacy ID card on the website or mobile app.

How do I replace a lost ID card?

Answer: To request a replacement ID card, please call Capital Rx 1-844-532-2779.

What retail pharmacies are considered in-network with Capital Rx?

Answer: You can locate an in-network pharmacy by logging into our <u>member portal</u>. Select Member Login to register. Use the pharmacy locator search tool to view local options. You can also call your dedicated Customer Care team at **1-844-532-2779** for support.



What if I need to change retail pharmacies but I have an existing prescription?

Answer: Once you locate an in-network retail pharmacy, you can work with the new pharmacy to transfer your existing prescription. Contact the retail pharmacy you wish to change to and be prepared with the following information:

- Name and phone number of your previous pharmacy
- Prescription name and number from your medication label
- Capital Rx processing information

Please note: Prescriptions that are expired, have zero refills remaining or are for controlled substances are not eligible for transfer. Please work with your prescriber to request a replacement prescription to be sent to your new retail pharmacy.

What is a Prior Authorization (PA)?

Answer: A prior authorization (PA) is a feature of your prescription benefit plan that requires you and your physician to obtain approval before the prescribed medication can be dispensed by a retail or mail order pharmacy. This requirement exists to prevent inappropriate prescribing of certain medications and to ensure the lowest cost alternative is used (barring medical necessity). To submit a prior authorization (if required) please have your prescriber complete the prior authorization request form and fax it (along with any additional documentation required) to 1-833-434-0563. Your prescriber can download a blank form by visiting our website. Most prior authorization reviews are completed within two business days provided that a complete prior authorization request form and all required documentation are correctly submitted. Our clinical team will notify you in advance of any declinations and assist in expediting your patient to a preferred alternative therapy. Prior authorization request forms can also be sent via mail to the below address:

Capital Rx, Inc.

Attn: Prior Authorization Department 9450 SW Gemini Dr., Suite 87234 Beaverton, OR 97008

For additional prior authorization questions, please call your dedicated Customer Care team at 1-844-532-2779 or the Prior Authorization department at 1-888-952-2779.

What is a Step Therapy (ST)?

Answer: A step therapy (ST) is a feature of your prescription benefit plan that requires you try another medication (usually a generic) before being prescribed the medication designated with step therapy (usually a brand). This requirement exists to prevent inappropriate prescribing of certain medications and to ensure the lowest cost alternative is used. If your physician prescribes, or wants to prescribe, a medication designated with step therapy, please have them call our Customer Care team 1-844-532-2779.



What is a Quantity Limit (QL)?

Answer: A quantity limit (QL) is a feature of your prescription benefit plan that only allows you to receive up to a maximum dosage or quantity for certain medications (e.g., opioids). Quantity limit requirements exist to ensure safe and effective doses are prescribed and to prevent waste, fraud, and abuse. If you and your physician require a dose or quantity beyond what the quantity limit allows, please submit a prior authorization, including medical justification for the larger dose or quantity.

How do I authorize a family member or care giver to manage my pharmacy benefits?

Answer: A Personal Health Information Disclosure form is available to allow members to manage and access your pharmacy benefits. You can complete this form digitally by visiting our website and scroll to locate the Personal Health Information Disclosure Form link. If you prefer, you can download the form and mail it back to the address below. To download a blank form, open the form with the click here button. At the top, left hand corner of the screen select options and Download PDF.

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What formulary has Kent County selected and where can I find what medications are on it?

Answer: Kent County has selected the Capital Rx Freedom Formulary. This list of drugs is covered by your pharmacy prescription benefit, however, there are some drugs on this list that display as covered on the formulary but may not be covered if your plan does not include coverage of certain categories. If you have any questions regarding your specific coverage, please call your dedicated Customer Care team **1-844-532-2779**.