

DIABETES

CARE MANAGEMENT PROGRAM



Frequently Asked Questions About The Diabetes Care Management Program

WHO IS ELIGIBLE FOR THE DIABETES CARE MANAGEMENT PROGRAM?

The Diabetes Care Management Program is a voluntary “opt-in” program. Participants with diabetes or who receive a diagnosis of diabetes throughout the year are eligible to enroll in the program. Note: This program is available to active employees, retirees, and spouses/domestic partners with diabetes.

CAN I ENROLL IN BOTH THE WELLNESS AND THE DIABETES CARE MANAGEMENT PROGRAM?

Yes. In fact, it is preferred because you will receive assistance, and the incentives, from both programs.

SHOULD I CALL THE DIABETES CARE MANAGEMENT PROGRAM TO ENROLL?

Yes, participants who have received a Diabetes Care Management Program notice or who believe they qualify for the program are encouraged to call 1-877-800-8144 (option 3) about enrollment.

IF MY SPOUSE OR DOMESTIC PARTNER HAS DIABETES, BUT IS NOT IN THE CD PPO HDHP, DO THEY QUALIFY FOR THE DIABETES CARE MANAGEMENT?

No. To enroll in the Diabetes Care Management Program the spouse or domestic partner must be enrolled in the PEBP Consumer Driven PPO High Deductible Health Plan (CD PPO HDHP).

IF I AM DIAGNOSED WITH DIABETES DURING THE YEAR, CAN I ENROLL IN THE DIABETES CARE MANAGEMENT PROGRAM?

Yes. Upon diagnosis of diabetes, participants are immediately eligible for the Diabetes Care Management Program. Call 1-877-800-8144 (option 3) to speak to a member of the Diabetes Care Management team and enroll.

If the *Live Well, Be Well* Prevention Plan becomes aware that PPO primary participants or their covered spouses or domestic partners have recently been diagnosed with diabetes, they will be contacted by a representative from the Diabetes Care Management team.

DO I NEED TO ENROLL IN THE DIABETES CARE MANAGEMENT PROGRAM TO QUALIFY FOR DIABETIC SENSE BENEFITS?

Yes, participants must enroll in the Diabetes Care Management Program to qualify for Diabetic Sense benefits. Diabetic Sense is a diabetic supply program available through PEBP’s Pharmacy Benefits Manager, Catalyst Rx. If the participant coordinates the supplies through the diabetic supply program, the participant is able to receive a free Glucometer (annually). Additionally, 90 days of Diabetic supplies (including blood glucose test strips, lancets, spring-powered device for lancets, syringes, alcohol pads) will be available for a \$50 copayment (per eligible diabetic supply). If the purchase of diabetic supplies is not coordinated through the preferred mail order service, the supplies will be subject to normal plan benefits (e.g., deductible and co-insurance). To enroll in Diabetic Sense, call 1-866-896-7301.

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WHAT ABOUT SYRINGES, TEST STRIPS, INSULIN PUMPS AND PUMP SUPPLIES?

Diabetic supplies such as syringes/needles and test strips should be purchased through the diabetic supply program sponsored by PEBP's Pharmacy Benefits Manager, Catalyst Rx. If the participant coordinates the supplies through the diabetic supply program, the participant is able to receive a free Glucometer (annually). Additionally, 90 days of Diabetic supplies will be available for a \$50 copayment. If the cost of the supply is **less** than \$50, participants will be required to pay the full price, and that amount will be applied to their deductible/co-insurance. If the cost is more than \$50, participants will pay the \$50 copayment.

If the participant does not coordinate his or her diabetic supply needs through this special program and chooses to purchase the supplies through a different program, the supplies will be processed under the regular medical plan and will be subject to the annual deductible requirement and applicable coinsurance.

Insulin pumps are not covered under the prescription drug program. They are covered under the regular medical plan and are subject to the annual deductible and applicable coinsurance. Some insulin pump supplies are eligible under the prescription drug program. Please contact Catalyst Rx for more information at (702) 869-4600 or (800) 799-1012 or online at www.catalystrx.com.

CAN I GET THE MEDICATION THAT MY DOCTOR PRESCRIBES?

The formulary lists the covered preferred name brand drugs. For a complete list of preferred name brand drugs, please refer to the Catalyst Rx website at www.catalystrx.com. You can also contact Catalyst Rx at 800-933-1012 or 702-922-4521.