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PATRICK GATES
Board Chairman

Your Current HMO Pre-Authorized Services and Prescription Drugs Might Need a Coverage Review/Prior Authorization

The Public Employees' Benefits Program (PEBP) is dedicated to providing you access to the doctors, facilities, and prescription drugs you need to maintain a healthy productive life. There are times when your care and medication must be reviewed to ensure plan rules are followed, while giving you opportunities to switch to equally effective lower cost providers and drugs to save you money.

With the new Premier Exclusive Provider Organization (EPO) Plan, there may be slight changes to the available facilities outside of Nevada. These facilities are generally considered out-of-network except in cases where specific services cannot be provided in Nevada. This means certain out-of-state providers previously approved by Hometown Health HMO may not be available beginning July 1, 2018.

Additionally on the new Premier EPO Plan, PEBP is implementing our current partner, Express Scripts, to manage the prescription benefit. This implementation means the current partner providing prescription benefits through Hometown Health's HMO plan will no longer be available to members on the new Premier EPO Plan starting July. PEBP will be coordinating this transition to ensure Express Scripts will be able to assist you with your prescription drug coverage beginning July 1, 2018.

Medical Services

PEBP will continue to use Hometown Health as our Utilization Management / Case Management partner for our PPO as well as for the new Premier EPO Plan. This means the same people who pre-authorize services on the current HMO plan will be available to pre-authorize services on the Premier EPO Plan next plan year. Because of the changes to providers outside the standard network, there may be situations where your HMO pre-approved out-of-state care must be authorized under a different provider.

To learn whether your current pre-approved care requires a review and recertification, call Hometown Health at 775-982-3232 or 1-888-323-1461.

Prescription Drugs

As part of the transition process, Express Scripts may need to review your current prescription and require your doctor to submit a pre-authorization to continue coverage for the drugs you take today. During this review, your doctor gives Express Scripts details about your prescription and Express Scripts ensures those drugs meet plan requirements. Remember, this process is in place to protect you while taking these drugs and will help keep your costs down!

To learn whether your medicine requires a coverage review and the potential new cost of your medicine:

- Visit <https://www.express-scripts.com/consumer/site/openenrollment?accessCode=NVPBP>
- Select *New Hire Enrollment Information*

- Select *Compare Prescription Medication Costs*
 - After entering your medication information, a Coverage Alert message will appear when a review is required.
- You may also call Express Scripts at 1-855-889-7708.

PEBP does not want you to go without the medical care and medicine you need while a review is in process. If you learn your currently pre-authorized out-of-state medical care through Hometown Health HMO will not continue past June 30, 2018 on the Premier EPO Plan, you may want to review PEBP's Consumer Driven Health Plan that offers national (and global) in-network benefits during our open enrollment period. Open enrollment began May 1st and continues through May 31st 2018.

If you learn that your drug(s) will require a coverage review, please ask your doctor to visit the Express Scripts online portal at www.esrx.com/PA on or after July 1, 2018 to initiate a review. As this process may take some time between your doctor and Express Scripts, it may be helpful to have a 30-day supply of ongoing drugs (where available) to ensure you don't miss any treatments.

To learn whether your current pre-approved care requires a review and recertification, or if you have any additional medical questions, please call Hometown Health at 775-982-3232 or 1-888-323-1461.

For questions on your prescription drug benefit (whether you have selected to participate on the Premier EPO Plan or the Consumer Driven Health Plan), contact Express Scripts at 1-855-889-7708.

Sincerely,

Public Employees' Benefits Program