

# FRANKLIN & MARSHALL

## Human Resources Memorandum

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**TO:** Franklin & Marshall College Health Plan Participants  
**FROM:** Nancy Eshleman, Director, Human Resources  
**RE:** Health and Prescription Administrative Services Provider for 2010  
**DATE:** October 12, 2009

I am pleased to announce that effective January 1, 2010, **Highmark Blue Shield** will provide administrative services for the College's Group Health and Prescription Drug Plan. Highmark will replace HealthAmerica. Highmark currently provides services to 4.6 million Pennsylvanians, and enjoys top customer service ratings among its health plan members.

The College is making the switch to Highmark after completing a competitive bidding process which included a careful review of financial statements, analysis of provider networks, review of customer service and claims processing standards, and reference checks. The College's Advisory Committee on Fringe Benefits has endorsed this change.

**The benefits available through the Health and Prescription Drug Plan will not change as a result of this change in the administrative services provider.** The College will maintain its High Deductible Health Plan with Health Reimbursement Account, the 107 Plan, and the CCPPO Plan. You will be able to choose the health plan that best meets your needs. However, there will be some changes to administrative procedures, as well as some enhancements, as of January 1. I have noted at the end of this memo some actions you may wish to take prior to January 1.

**Provider Network:** Highmark has an extensive network of participating providers and facilities. Although you may visit any provider, you will receive the highest level of coverage if you, and any covered family members, receive care from providers who participate in the Highmark Blue Shield PPO network.

Highmark participates in the "BlueCard" network – a network of local Blue Cross Blue Shield providers throughout the country. Faculty, professional staff, and retirees traveling or living outside Pennsylvania, including children away at college, will receive coverage at the highest "coordinated-care" level when seeing a BlueCard network provider, even for routine care. Care is also available worldwide through the Blue Cross Blue Shield network.

Highmark contracts with centers of excellence for specialty care, including Hershey Medical Center, Jefferson University Hospitals, Johns Hopkins, the Mayo Clinic, and the University of Pennsylvania Medical Center. Additionally, Highmark offers a 24/7 nurse hotline; you will be able to call Highmark's hotline around-the-clock to speak to a nurse.

**Participating Pharmacies / Mail Order Prescription Drug Program:** Highmark participates with a large number of retail pharmacies. To obtain prescription refills through a retail pharmacy as of January 1, you will simply need to show your Highmark ID card to the pharmacist (you will receive a Highmark ID card closer to January 1).

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Highmark also offers a mail order prescription drug program administered by Medco. Effective January 1, if you obtain prescription medicines through the mail order program, you will obtain your medicines from Medco. In order to fill prescriptions through the mail order program as of January 1, you and your covered dependents will need to obtain a new prescription order from your health care provider for each medicine you will need. You will be able to obtain a 90-day supply of medicine by completing a mail order form and mailing or faxing it, along with your written prescription order, to Medco. Or, you may have your physician fax your prescription order to Medco. Medco mail order forms will be available from Human Resources by January 1 (you should continue to fill your mail order prescriptions through Caremark until January 1).

**Prescription Drug Formulary:** Like HealthAmerica, Highmark maintains a prescription drug “formulary” list. As of January 1, you will generally pay less for your medicines if you use generics or brand name drugs which are included on the Highmark prescription drug formulary. The Highmark prescription drug formulary includes several commonly prescribed medicines that are not currently included on the HealthAmerica drug formulary. However, some common medicines are *not* included on the Highmark formulary (such as Claritin OTC, Crestor, Lunesta, Micardis, Prilosec OTC, Vytorin, and Zyrtec OTC). The Highmark formulary does include alternatives to these often higher-priced drugs.

**Prior Authorization for Some Prescription Medicines:** In an effort to help control costs and provide quality care, the College will continue to require prior authorization before coverage is provided for certain prescription drugs. As of January 1, your physician will need to contact Highmark for authorization for coverage before prescribing certain medicines (including but not limited to Celebrex, Imitrex, Nexium, Prevacid, Prilosec, Singulair, and Zomig). It is likely your physician is already familiar with these procedures.

***To Do:***

- Prior to January 1, you may wish to contact your health care providers to confirm they participate in the Highmark Blue Shield PPO network. If you would like to search for health care providers who participate in the Highmark network, visit [www.highmarkblueshield.com/CHMPRVWeb/provdir/home.do](http://www.highmarkblueshield.com/CHMPRVWeb/provdir/home.do) and follow the links (when asked to “choose a health plan”, select ‘PPOBlue’).
- For those living outside Pennsylvania, you may wish to verify that your health care providers participate with their local Blue Cross Blue Shield plan network.
- If you will need to order maintenance medicines through the mail order program after January 1, be sure to obtain new prescription orders from your health care provider. In lieu of obtaining new written prescriptions, you may ask your health care provider to fax your prescriptions to Medco on or after January 1.
- You may wish to ask your health care provider if your current medicines are listed on the Highmark prescription drug formulary (your health care provider is likely to have access to the Highmark formulary list, and it is available through [www.highmarkblueshield.com](http://www.highmarkblueshield.com)). You are encouraged to discuss with your health care provider whether you can switch to a generic drug, or a brand name drug that *is* included on the Highmark formulary. You are likely to reduce your prescription drug costs if you can use a generic or a “formulary” medicine.
- You are encouraged to ask your health care provider if any of your current medicines require prior authorization through Highmark. If so, your health care provider can request authorization on your behalf as of January 1.

***Detailed information about health and prescription benefits, including participant-paid premiums and co-payments for 2010, will be communicated during the Open Enrollment period which begins in November.***