



## GARDEN GROVE UNIFIED SCHOOL DISTRICT

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### 2017 ANTHEM BLUE CROSS (CACARE) LARGE GROUP PRESCRIPTION INFORMATION

If you anticipate the need to refill a prescription, please review [Anthem's HMO prescription formulary list](#) available on the GGUSD website: [ggusd.us](http://ggusd.us) (Departments/Insurance/Links).

If either of the following codes appear in the Notes column for the medication needed, advise your doctor at your earliest convenience to allow the doctor opportunity to submit the Prior Authorization form to Anthem in advance of the need for a refill:

PA = PRIOR AUTHORIZATION REQUIRED: This is the process of obtaining approval of benefits before certain prescriptions may be filled.

ST = STEP THERAPY REQUIRED. You may need to use one medication before benefits for the use of another medication can be authorized.

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Anthem Blue Cross Prescription Inquiries: 1-800-700-2541

Call this number if you have any questions regarding whether a drug is on the prescription drug formulary, or whether it needs to be approved.

If Anthem does not approve a request for a drug, you or your doctor can appeal the decision by calling this number.

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#### Prior Authorization

Some drugs need to be reviewed before they are covered by your plan. This review helps make sure they are safe and affordable for you.

Why do some drugs need review and approval?

Most prescriptions are filled right away when you take them to the pharmacy. But, some drugs need to be reviewed by your health plan before they're covered. This process is called prior authorization. It focuses on drugs that may have:

- Risk of side effects.
- Risk of harmful effects when taken with other drugs.
- Potential for incorrect use or abuse.
- Better options that may cost you less and/or may work better.
- Rules for use with certain health conditions.

How do I get approval?

If your drug needs approval, your pharmacist will receive a message on the pharmacy's computer. This tells them that Anthem Blue Cross needs to know a little more about your health. Sometimes, the pharmacist can call Anthem Blue Cross with the information. Then, your prescription is filled. Other times, your doctor calls or faxes Anthem Blue Cross the information.

- If the information meets your plan's guidelines, the claim is approved. Your doctor or pharmacist lets you know the prescription can be filled.
- If more information is needed, Anthem Blue Cross may contact your doctor directly.
- If the request to cover your drug is denied, you and your doctor will receive a letter explaining how to appeal it.