

SPECIAL EDITION

Health Plan is Pleased to Announce Transition to CVS caremark®

ffective July 1, 2021, CVS Caremark will replace Express Scripts as the Health Plan's prescription benefit manager. CVS Caremark provides Health Plan participants and their dependents improved customer service and benefits, including nationwide access to CVS Caremark's network of more than 68,000 retail pharmacies, a convenient mail order option and a number of additional programs designed to support your prescription benefit needs. CVS Caremark's commitment is to provide the Health Plan's participants and dependents with best-in-class service to ensure optimal member experience. CVS Caremark is an industry-leading innovator in supporting overall health management, with unmatched digital engagement to optimize care and outcomes for even the most complex cases.

The CVS Caremark pharmacy network comprises more than just the CVS retail pharmacies; it also includes other major pharmacy chains such as Costco, Longs Drugs, Duane Reade, Happy Harry's, Kroger, Navarro, Publix, Rite Aid, Safeway, Sam's Club, Target, Wal-Mart, Walgreens, Sterling and others, as well as affiliated groups of independent community pharmacies. To locate CVS Caremark network pharmacies near you, visit the pharmacy locator tool at www.Caremark.com.

The transition to CVS Caremark may bring changes in how prescriptions are filled and to which medications are covered. The Health Plan is working with CVS Caremark to minimize disruptions as much as possible. This newsletter provides important information to help ensure a smooth transition for you and your family. Please review it carefully and keep it for your reference. The following topics are discussed further in this newsletter:

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Questions?

If you have questions about the transition, dedicated CVS Caremark representatives are available 24 hours a day/7 days a week at (855) 271-6601.

You can also contact the Health Plan's Participant Services Department at (323) 866-2200, Ext. 401 or toll free at (877) 866-2200, Ext. 401, Monday – Friday, 8:30 a.m. to 5:00 p.m., Pacific Time. **PH**

Six Important Changes to Expect Under **CVS** caremark®

Many aspects of the Health Plan's prescription drug benefit will remain unchanged following the transition to CVS Caremark. Refer to the chart below, titled *Summary of Prescription Drug Benefits*, for more details of the changes effective July 1, 2021. Please note there are additional changes that will occur after the July 1st transition, which are discussed in the article titled *New Prescription Drug Benefits Available September 1, 2021*.

1 Pharmacy Network



Choose from more than 68,000 retail pharmacies in the CVS Caremark network to fill your prescriptions and receive the network discount. To locate a network pharmacy in your area, visit www.Caremark.com, or call CVS Customer Care at (855) 271-6601.

You may also fill prescriptions at a non-network pharmacy. When using a non-network pharmacy, you will not receive the network discount and will need to pay the full cost of the medication. This will also require you to request reimbursement through CVS Caremark.

2 Local pickup of 90-day supplies of long-term maintenance medications



You can pick up 90-day supplies of long-term medications and pay the mail order co-payment at a local CVS, Longs or Navarro pharmacy location. This option will no longer be available through the Smart90/Walgreens program.

UPDATED Summary of Prescription Drug Benefits (effective July 1, 2021)

The chart below summarizes the Health Plan's presription drug benefit under CVS Caremark, effective July 1, 2021. Though co-payments will remain the same, other aspects of your prescription drug benefits will be different. Changes from the current benefits are highlighted.

Co-Payment for	Up to <u>30-day</u> supplies from Participating Retail Pharmacies	Up to <u>90-day</u> supplies from any local CVS Pharmacy or CVS Mail Service ¹
Generic Drugs	\$10	\$25
Brand Name Drugs	\$24	\$60
Lifestyle Drugs ²	Greater of \$40 or 50% of the cost of the medication	Greater of \$60 or 50% of the cost of the medication

1Replaces Express Scripts Mail Order/Smart90 Walgreens Program. Express Scripts Mail Order/Smart90 Walgreens Program remains in effect for prescriptions filled prior to July 1, 2021. Effective July 1, 2021, you can fill prescriptions using CVS Caremark's Maintenance Choice, which allows you to fill 90-day supplies of your long-term medications at any local CVS Pharmacy or through mail. For information on transferring your long-term, or maintenance medications, see Transferring Your Current Prescriptions (Action May Be Required) on page 6.

²Erectile dysfunction drugs, proton pump inhibitors, and sleep aids are covered under the Lifestyle Drug tier. In certain cases, these drugs require a coverage review. For more information, see Lifestyle Drugs on page 70 of the March 2020 Health Plan Summary Plan Description, available at dgaplans.org/Health-Plan-Booklet.

Mail Order Pharmacy

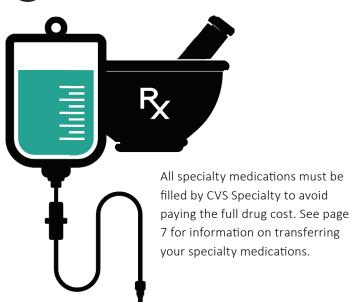


All mail order prescriptions can be filled by mail through CVS Caremark Mail Service. See page 7 for information on transferring your current prescriptions.

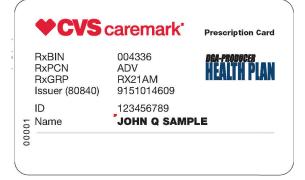
4 Appeals Procedures

Your claim will be processed in accordance with the Health Plan's claims procedures. If your prescription/pre-authorization for a prescription is denied, CVS Caremark will perform the first level appeal and second level appeal. If both appeals are denied by CVS Caremark, you can then submit an appeal to the Health Plan for further consideration. The Health Plan will not consider an appeal unless it has already gone through both levels of appeal with CVS Caremark.

5 Specialty Drug Pharmacy



New Prescription Drug Coverage Card(s)



Visit Caremark.com for easy refills, timesaving tools and more.

Present this prescription card to fill your prescription at any participating retail pharmacy.

Customer Care Representative: 1-855-271-6601 Pharmacy Help Desk for Pharmacists: 1-800-364-6331

Submit paper claims to:

CVS Caremark Claims Department

PO Box 52136

Phoenix, AZ 85072-2136

21AM-ID-0321

In mid-June, CVS Caremark will mail Welcome Kits to all covered Health Plan participants. This kit will include important information about your prescription drug coverage, including new prescription drug cards for you and your covered dependents.

Be sure to discard your previous coverage card and replace it with the CVS Caremark coverage card when you receive it.

Your new coverage card will include your new prescription drug coverage ID number, which you can then use to register for CVS digital tools. (See Managing Your CVS Caremark Prescriptions With CVS Caremark's Digital Tools on page 8 for more information.)
Registered users of the CVS Caremark mobile apps can access a digital version of their prescrip-

CVS caremark

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Registered users of the CVS Caremark and CVS

Specialty mobile apps can access their digital prescription ID card directly on their smartphone.

(Details on page 8.)

tion coverage card on their smartphone as needed. PH

What to Watch for in May and June



You should begin receiving materials from CVS Caremark over the next couple of weeks. These materials will vary depending on your circumstances. You should also be aware of the following key dates:



MAY/JUNE

- CVS Caremark customer care phone lines will open on May 10, 2021. Dedicated customer service representatives are available to address any questions you have. CVS Caremark's customer care service number is (855) 271-6601.
- ▶ CVS Caremark will send personalized letters to participants in the following two groups to guide you through the transition:
 - ♦ Participants currently on specialty medications and who will be impacted by the transition; and
 - Participants who have filled a prescription at a non-CVS Caremark-network pharmacy during the past year.



JUNE

- ▶ Receive your ID Cards and Welcome Kit (mid-to late June).
- Register at www.Caremark.com to review your plan and cost information, plus access tools to help you stay on track with your medications.
- Review medications with your provider, and if you have any prior authorizations, have your provider renew them with CVS Caremark.
- ▶ Fill any maintenance prescriptions running out before the end of the month with Express Scripts. That way, you'll have enough medication to last into the summer and can refill with CVS Caremark at the next refill.



JULY

Effective July 1, 2021,



will be the Health Plan's prescription drug benefit manager. Start filling your medications at a CVS Caremark network pharmacy.



How to Contact CVS Caremark

Important phone numbers and webpages where you can find additional information or assistance throughout the transition to CVS Caremark

Important CVS Caremark Phone Numbers and Websites

PHONE NUMBERS

CVS Caremark Customer Care Service (855) 271-6601 24 hours a day/7 days a week



CVS Specialty (800) 237-2767 6:30 a.m. to 8:00 p.m. Central Time,

Monday through Friday

DIGITAL TOOLS

CVS Caremark www.Caremark.com

www.CVSspecialty.com **CVS Specialty**

-List of specialty drugs -CVSspeciality.com/druglist



CVS Mail Service www.Caremark.com/MailService

Transfer long-term medications to www.Caremark.com/MoveMyMeds in-store pickup at any CVS retail pharmacy

Find a network pharmacy www.Caremark.com

List of covered/excluded medications www.Caremark.com/portal/asset/Advanced_Control_Formulary.pdf

Check drug cost tool www.Caremark.com

Receive a new OneTouch blood glucose meter at no cost*

*Certain restrictions apply. A new OneTouch meter will be provided at no cost to all benefit eligible participants and their covered dependents who meet the coverage requirements.

www.Caremark.com/ManagingDiabetes

Transferring Your Prescriptions

(Action May Be Required)

his article details special requirements and considerations you should be aware of in regards to transferring your current prescriptions to CVS Caremark. You are encouraged to review the following information carefully as it may require you to obtain a new prescription or take action before certain medications are covered.

All prescriptions with refills remaining will be automatically transferred to CVS Caremark

All prescriptions for covered medications with refills remaining will be automatically transferred to CVS Caremark before the July 1 transition date with NO ACTION REQUIRED ON YOUR PART. However, under certain circumstances you may need to take action to ensure continuous access to your prescriptions after the transfer. Review the categories to the right for additional details about when action may be required.

After July 1, to refill an existing prescription, you can call any local CVS Pharmacy or log on to www. Caremark.com to request a refill at a CVS Caremark network pharmacy.



Medications that will no longer be covered

- ☐ The transition to CVS Caremark may impact a small number of previously covered medications, as they will no longer be covered under the Health Plan (or may require prior authorization, if applicable).
- □ Check for medications that will be excluded or will require prior authorization under the CVS Caremark formulary at www.Caremark.com/ portal/asset/Advanced_Control_ Formulary.pdf.
- ☐ Currently covered medications that will be excluded under the CVS Caremark formulary will be covered through the end of the 90-day grace period (ending September 30, 2021).
- You will need to work with your doctor to choose a new medication that is covered or pay the full cost of the excluded medication beginning October 1, 2021.
- □ CVS Caremark will contact affected participants by mail and/or phone in late July to discuss alternative medications ahead of the October 1 expiration of the 90-day grace period.







Prescriptions filled by mail order

- Mail order prescriptions with open refills will be automatically transferred to CVS Caremark prior to the July 1st transition. However, for your security, payment information will not be included. To avoid disruption, you can call CVS Caremark at (855) 271-6601 or log on to www.Caremark.com after receiving your Welcome Kit to provide your payment information.
- You will need to contact CVS Caremark to arrange your first mail order delivery and enroll in automatic refills.
- Beginning July 1, 2021, you must fill your mail order prescriptions at a local CVS Pharmacy or through CVS Caremark's mail order program.

90-day prescriptions previously filled through Smart90/Walgreens

- ☐ For refills after July 1, 2021, you will need to have your 90-day prescription transferred to a local CVS Pharmacy or submit a new prescription through CVS Caremark's mail order service.
- ☐ You can transfer your 90-day prescription to a local CVS Caremark network pharmacy in the following two ways:
 - Ask your local CVS to contact your current Walgreens, Duane Reade or Happy Harry's pharmacy and have the prescription transferred by phone (not allowed for compound or controlled substances), or
 - Request that your doctor send a new 90-day prescription to your preferred CVS Pharmacy.
- When the prescription has been transferred, you can continue to fill it through any local CVS Pharmacy at the standard mail order co-payment.

Prescriptions for specialty medications

- Check for medications considered specialty at www.CVSspecialty.com/ druglist.
- □ Although your specialty prescriptions with Accredo will automatically be transferred to CVS Specialty, you will be contacted by mail and/or phone prior to July 1, 2021 to complete your account setup. If you are on a specialty medication and do not receive a phone call by June 30, please contact CVS Specialty at (800) 237-2767, Monday through Friday, 6:30 a.m. to 8:00 p.m., Central Time.
- Alternatively, you can ask your doctor to submit a new prescription for your specialty medication to CVS Specialty.
- Beginning July 1, 2021 prescriptions for specialty medications must be filled through CVS Specialty. PH

Managing Your **VS** Caremark Prescriptions With CVS Caremark's **Digital Tools**

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he transition to CVS Caremark will provide you access to a collection of digital tools, designed to help you manage your prescription medications anytime and anywhere. The CVS Caremark and CVS Specialty mobile apps along with their websites www.Caremark.com and www. CVSspecialty.com will provide essential tools for managing your prescription drug benefits, including refills and ordering, order tracking, locating network pharmacies, managing costs and more. You are encouraged to register and explore them after receiving your Welcome Kit to see how they might save you time and money.

The CVS Caremark and CVS Specialty mobile apps are available for download for Apple devices in the Apple App Store and for Android devices in the Google Play Store under Apps.

Caremark.com and CVS Caremark mobile app

Not to be confused with the CVS retail website and mobile app (www.cvs.com and CVS Pharmacy), www.Caremark.com and the CVS Caremark mobile app provide full access for covered Health Plan participants to manage your prescriptions at your convenience. Covered Health Plan participants may register for www.Caremark.com and the CVS Caremark mobile app after receiving your Welcome Kit in the mail, to enjoy a robust suite of features, including:

- Easy Refill makes ordering refills as simple as scanning the label on your existing prescription (CVS Caremark mobile app only)
- See remaining refills and orders in progress
- Check order status and tracking
- Submit new mail order prescriptions
- Locate network pharmacies
- View your prescription benefit ID card
- Look up a list of your current prescriptions
- Check for drug interactions
- Look for additional prescription drug options to review with your doctor
- Check drug costs and savings
- Identify unknown pills; and
- Much more.



CVS specialty.com and CVS Specialty mobile app

The CVS Specialty website and mobile app are exclusively for participants who take specialty medications. For a list of specialty medications effective July 1, 2021, go to www. CVSspecialty.com/druglist. The CVS Specialty mobile app and www.CVSspecialty.com offer the same prescription management features as the CVS Caremark website and mobile app, except the services available through the CVS Specialty mobile app and www.CVSspecialty.com pertain only to specialty medications. These services include:

- Refilling specialty medication orders;
- Tracking specialty medication order status; and
- Making payments on your specialty medications.

In addition, the CVS Specialty website and mobile app offer useful features especially tailored for participants on specialty medications, including:

- The choice to pick up your specialty prescriptions at any CVS Pharmacy or have them delivered to a separate desired location; and
- A secure messaging feature for communicating with your CareTeam. Each CVS Specialty participant is paired with their own CareTeam, led by a pharmacist and a nurse



who are specially trained in your condition. CareTeam members are available for personalized support 24 hours a day/7 days a week/365 days a year for any number of issues, including teaching you how to effectively take your medication, managing side effects, checking your dosage and medication schedules, reminding you when it's time to refill, and more.

Already have the CVS Pharmacy app?

If you already have the CVS Pharmacy app—the CVS retail mobile app that features in-store deals and rewards, photo print ordering, access to your weekly local CVS ads, and more—after July 1, 2021, you may notice the pharmacy section of your CVS Pharmacy app has changed. That's because, once you become eligible for Health Plan benefits, CVS may automatically unlock additional pharmacy features on the app to enable some of the functions available in the full CVS Caremark mobile app.

To ensure access to all the features you need to manage your prescriptions, be sure to register for CVS Caremark and/or CVS Specialty websites and mobile apps when you receive your Welcome Kit in the mail. **PH**

How To Fill Prescriptions If You Are Covered By Both WGA and DGA Health Plans

Just like your medical benefits, when you have prescription drug coverage with more than one insurer, your prescription drug costs are coordinated between your health plans.

f you have prescription drug coverage with both the Directors Guild of America - Producer Health Plan and the Writer's Guild of America - Industry Health Fund, your two plans will have different prescription drug managers, effective July 1. Despite this, the Health Plan will continue to coordinate prescription benefits with the WGA Health Fund, to ensure each plan pays its share of costs and you maximize the benefits of both plans to decrease your out-of-pocket responsibility.

Below are step-by-step instructions for submitting your prescriptions so that your prescription drug costs are processed by both plans. The steps below apply to all participants who have prescription drug coverage with more than one insurer.

Prescriptions at CVS Caremark Network Pharmacies

- Determine which plan is considered primary, secondary, tertiary, etc. The Health Plan's coordination of benefits rules can be found on page 46 of the March 2020 Health Plan Summary Plan Description available at www. dgaplans.org/Health-Plan-Booklet. Note that other plans might have different coordination of benefits rules.
- 2. At the pharmacy, present all applicable prescription drug coverage cards to the pharmacist, informing the pharmacist which is primary, secondary, tertiary, etc.
- 3. The pharmacist should process your prescription in the order based on the coverage hierarchy.



4. If the pharmacist has difficulties processing your prescription according to the coordination of benefits hierarchy, have them contact the CVS Pharmacy Help Desk for Pharmacists, using the number on the back of your DGA Health Plan prescription drug coverage card.

Prescriptions at Non-Network Pharmacies

If you fill a prescription at a non-CVS-network pharmacy, you will pay the full cost of the medication and subsequently will need to file a prescription claim for reimbursement of any covered costs. To ensure your claim is processed properly according to the coordination of benefits order, follow the steps below:

- Determine which plan is considered primary, secondary, tertiary, etc. The Health Plan's coordination of benefits rules can be found on page 46 of the March 2020 Health Plan Summary Plan Description available at www. dgaplans.org/Health-Plan-Booklet. Note that other plans might have different coordination of benefits rules.
- Complete a CVS Caremark
 Prescription Reimbursement
 Claim Form. Provide the appropriate coordination of benefits information in the Other Insurance
 Information section (pictured at right).
- 3. Return your completed prescription claim form to CVS Caremark.

Coordination of I Are any of these medi- for an on-the-job injur	cines being take	
ls the medicine covere group insurance?		
If YES, is other coverage PRIMARY MEDICARE PART D	je: □SECONDAF	
If other coverage is PRIMARY, include the Explanation of Benefits (EOB) with this form.		
Name of Insurance Co	mpany:	

Please keep in mind that not all health plans offer coordination of benefits or might have different coordination of benefits rules. If you have coverage other than the DGA Health Plan, check with your insurer for more information. **PH**

New Prescription Drug Benefits Available September 1, 2021

A sneak peek at three new programs coming to your prescription drug benefits under CVS Caremark

he transition to CVS Caremark will bring three new programs that promise to enhance your prescription drug benefits through additional savings and care management support. The programs described below will be available to covered Health Plan participants under the prescription drug benefit on September 1, 2021. Additional details about these programs will be available in the Summer 2021 issue of the Spotlight on Benefits newsletter.

PrudentRx: \$0 out-of-pocket cost for specialty medications

The PrudentRx program will decrease the out-of-pocket cost of your specialty medications to \$0 through co-payment assistance. PrudentRx works with drug manufacturers on your behalf to enroll you in manufacturers' co-payment assistance programs if such programs are available for your medications. Additionally, for as long as you are enrolled in the program, PrudentRx will manage your renewals for those co-payment assistance programs. Where such a program is not available or when your eligibility for a manufacturer's assistance program has been exhausted, the out-of-pocket costs for your specialty medications filled through CVS Specialty will remain at \$0 for as long as you remain in the PrudentRx program.

PrudentRx works closely with CVS Specialty to ensure all applicable savings are applied to your specialty medications before they are delivered. Specialty prescriptions filled at any pharmacy other than CVS Specialty will not be eligible for PrudentRx savings, and you will be responsible for the applicable co-payment and/or co-insurance.

Accordant Accordant Care Rare: Multi-disciplinary CVS specialty nurse care management support for complex needs

Participants with rare conditions are proven to benefit from a multi-disciplinary approach to their complex needs. The AccordantCare Rare program provides such support for participants with any of 19 rare or chronic conditions by pairing participants with a case management nurse with deep knowledge of their specific conditions. Through an ongoing relationship with the primary nurse in consultation with the participant's providers and caregivers, additional experts will be brought in as needed to support the participant's care. These experts might include resource specialists to support the participant's transportation, respite care or financial assistance needs and medical directors/advisory boards to provide specialized consultations for complex needs.

AccordantCare Rare enrollees and their caregivers are provided 24/7 telephone access to specialized nurses with whom they can discuss any aspect of their health and wellness, including symptoms they might be experiencing, services they might need or help with navigating the health care system and benefits. Additionally, the dedicated AccordantCare Rare nurse will reach out on at least a quarterly basis to monitor the enrollee's needs.

CVSHealth. Health Advisor: Individualized support that changes with your needs

Managing a chronic condition can be a challenge, especially over time as your life changes. Health Advisor supports you through those changes by making sure you stay on track with all aspects of your healthcare. Health Advisor takes into account your ongoing circumstances to keep you informed of the next best actions you should take, not only in regards to your chronic condition, but for your continued overall health and wellness. Depending on your circumstances, Health Advisor may send you messages—via telephone, direct mail, email, SMS text, prescription bag messages, messages through your provider and/or face-to-face pharmacist consultations—with recommended actions you might take to maintain your health or manage your chronic condition. You and your doctor can then decide what actions, if any, to take. **PH**



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Don't Miss Out On Important Benefits



Remember to update both the DGA Plans & DGA



Directors Guild of America, Inc.
Membership Department
7920 Sunset Blvd.
Los Angeles, CA 90046
(310) 289-2000

DGA-PRODUCER PENSION & HEALTH

DGA-Producer Pension and Health Plans Address Change Department 5055 Wilshire Blvd, Suite 600 Los Angeles, CA 90036 (323) 866-2200, Ext. 407 addresschange@dgaplans.org

The DGA-Producer Pension and Health Plans (the Plans) and the Directors Guild of America (the DGA) are separate entities. Updating your personal and contact information with the DGA does not result in your information being updated at the Plans office. To ensure your pension and health benefits information is mailed to the proper address, please contact the Plans' Address Change Department at (323) 866-2200 or addresschange@dgaplans.org. Alternatively, you can update your address by logging into the "PHP online benefits portal at www.dgaplans.org/myPHP.

Make payments timely to ensure continuous access to your benefits



Although the Health Plan will accept your premium payment up to 30 days after your due date, you and your dependents will not be able to access your health benefits until your payment has been received. Please be aware that a late payment can also increase your out-of-pocket expenses.



If we have not received your premium by the due date, you may encounter disruptions to your coverage (such as the inability to obtain prescriptions at a pharmacy) as coverage is not extended until payment is received.



For more information on paying your premium by phone, check, online or by automatic pension deduction, visit **dgaplans.org/paymypremium**.