

Zenith Medical Plan Pharmacy Benefit

Your Prescription Benefit Program

Please refer to Zenith's medical plan Summary Plan Description for a full explanation of benefits.

Retail Pharmacy

Your EmpiRx Health prescription benefit provides access to an extensive national pharmacy network, including all chain pharmacies and most independents. Your ID card provides all the information your pharmacist needs to process your prescription through EmpiRx Health.

To locate a participating network pharmacy, log onto the member portal at myempirxhealth.com, the mobile app or call EmpiRx Health Member Services toll-free at **1-877-934-2458/(TDD: 711)**. Retail quantities will be dispensed according to your physician's instructions, as written on the prescription, for up to a maximum of a 90-day supply.

This is a Mandatory Generic Plan. If you choose the brand-name medication when a generic equivalent exists, you will be responsible for the difference in cost between the brand and the generic plus the copay.

This is not a Dispense as Written (DAW) Plan. This means that your pharmacist must dispense the generic equivalent when one is available, regardless of how the prescription is written. If you or your physician request the brand name medication from your pharmacist, you are responsible for the preferred brand copayment and the difference in cost between the brand and the generic drug.

Mail Order Pharmacy

Prescriptions for maintenance medications (medications you take on an ongoing basis, typically used to treat chronic conditions) can be submitted to Prescription Mart, the EmpiRx Health mail order pharmacy. Your plan allows for up to a 90-day supply according to your physician's instructions.

Prescriptions for medications you need to use right away should always be taken to your local pharmacy. If you need support, call 1-800-713-1230.

Specialty Medication Pharmacy

Specialty medications are high-cost biotechnology drugs requiring special distribution, handling, and administration.

These medications are typically designed to treat chronic diseases.

Specialty medications can be filled one (1) time at a retail pharmacy. After, all prescriptions must be obtained through Prescription Mart. Please note, specialty medications are limited to a 30-day supply.

The specialty pharmacy provides personalized attention to help manage your medical condition, including one-on-one counseling with our team of pharmacists and trained medical professionals. This includes support for managing your condition, handling, and taking your medication properly, finding lower-cost options, and more. Because of the sensitive nature of specialty medications, some packages may require a signature.

Online Member Portal and Mobile App

Registration is easy. Along with your ID card, you will need basic member information, a phone number, and an email address. Log onto the member portal at myempirxhealth.com or download the app on Google Play or the App Store to access all your benefits information, plus:

- Find a participating, in-network pharmacy
- Check prescription coverage and costs, including preferred medications and exclusions
- Access additional member materials and forms
- Check the status of a clinical review
- Drug information and utilization history

You can also use the portal to choose where you would like your mail order medications shipped. Shipments will arrive in secure, temperature-controlled packaging (if necessary) and will include everything you need to take your medication.

Frequently Asked Questions

What is a clinical review?

A clinical review of medication requests is typically due to potential side effects, interactions, and/or FDA guidelines. These reviews include quantity management, prior authorization and step-therapy. These safety measures ensure you're getting the appropriate treatment. EmpiRx Health works directly with your physician to obtain the necessary information before your prescription is filled. Once the review is complete, you'll be notified by mail or via the online member portal.

How can I find out if a particular prescription is covered by my benefits?

You can check coverage easily by calling **1-877-934-2458**, or logging onto myempirxhealth.com for details.

How can I find out if generic or lower-cost alternatives may be available to me?

Generic equivalent drugs must meet the same Food & Drug Administration (FDA) standards for purity, strength, and safety as brand name drugs. They also must have the same active ingredients and identical absorption rate within the body as the brand name version. If you wish to take advantage of this savings opportunity, speak with your physician about the use of generics. You may also consult with your pharmacist regarding generic drug options that may be available to you.

Log onto the member portal, myempirxhealth.com, and select "Drug Pricing" to search for your medication and available generics. You can also call **1-877-934-2458** or consult with your physician or pharmacist.

Why does my copayment change from month to month?

Pricing fluctuates based on market cost and may vary by pharmacy. If your copay is based on a percentage, rather than a fixed dollar amount, the cost can be different depending on which pharmacy you use and the pricing of the medication at the time.

What is Direct Member Reimbursement?

Paying out of pocket for a covered medication? Obtain a copy of the Direct Member Reimbursement Form online at myempirxhealth.com. In addition to the form, provide an itemized receipt showing the amount charged, prescription number, medication and date dispensed, manufacturer, dosage form, strength, and quantity. Direct reimbursement is based on your plan benefits and may be significantly lower than the retail price you paid. Always try to use a participating network pharmacy and present your ID card to reduce any unnecessary out-of-pocket expenses.

To learn more, scan the QR code below:

