

Medicare Part D Medication Transition Policy (Member Summary)

Stanford Health Care Advantage's (SHC) medication transition policy will provide transitional medications to:

- New enrollees to Stanford Health Care Advantage as of January 1st following the Annual Enrollment Period;
- Newly eligible Medicare beneficiaries from other coverage;
- Individuals who switch from one plan to another after the beginning of a contract year;
- Current enrollees affected by negative formulary changes across contract years; and
- Enrollees residing in long-term care (LTC) facilities.

The transition policy provides a one-time temporary 30-day fill at the retail setting (unless the enrollee presents a prescription written for less than 30 days in which case we will allow multiple fills to provide up to a total of 30 days of medication) anytime during the first 90 days as a member of our plan, beginning on your effective date of coverage.

Thirty (30) days will allow you and/or SHC sufficient time to work with the prescriber to either switch to a therapeutically equivalent medication on the SHC Formulary or complete an exception request to maintain the coverage of the non-formulary drug based upon medical necessity reasons.

If you reside in a LTC facility, you will receive a one time temporary fill of at least 31 day supply (unless your prescription is written for less than 31 day supply) consistent with the dispensing increment (unless the enrollee presents with a prescription written for less), with refills provided if needed during the first 90 days as a member of our plan. In addition, after 90 days have passed, we will cover a 31-day emergency supply of non-formulary Part D drugs (unless your prescription is written for less than 31 day supply) while an exception or prior authorization is being processed.

We will send you and the prescriber a written notice within three business days of the transition fill, indicating:

- An explanation of the temporary nature of the transition supply you have received.
- Instructions for working with us and your prescriber to identify therapeutic alternatives that are on our formulary.
- An explanation of your right to request a formulary exception.

- Description of the procedures for requesting a formulary exception.

For more information

Please see your Evidence of Coverage to learn more about our transition policy and drugs not covered by Medicare Part D.

You can also call Member Services at 1-855-996-8422 (TTY 711), 8am to 8pm, Pacific Standard Time, 7 days a week (except Thanksgiving and Christmas) from October 1 to February 14, Monday through Friday (except holidays) from February 15 to September 30.

If you have general questions about Medicare prescription drug coverage, please call Medicare at **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day/7 days a week. TTY users should call **1-877-486-2048**. Or visit www.medicare.gov.

Stanford Health Care Advantage is an HMO plan with a Medicare contract. Enrollment in Stanford Health Care Advantage depends on contract renewal.

Discrimination is Against the Law. Stanford Health Care Advantage cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo. Stanford Health Care Advantage 遵守適用的聯邦民權法律規定，不因種族、膚色、民族血統、年齡、殘障或性別而歧視任何人。

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-855-996-8422 (TTY: 711). ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-996-8422 (TTY: 711). 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-855-996-8422 (TTY : 711)。