



UCare's Transition Program

Transition process in the retail setting

The following process applies to:

- Members who have been a member for less than 90 days.
- Members affected by certain formulary changes from one contract year to the next.

The temporary supply of non-formulary Part D drugs will be for at least 30 days (unless the prescription is written for less than 30 days). This includes Part D drugs that are on the formulary, but require prior authorization or step therapy.

Transition process in a long-term care (LTC) setting

The following process applies to:

- Members who have been a member for less than 90 days.
- Members affected by certain formulary changes from one contract year to the next who live in a LTC facility.

The temporary supply of non-formulary Part D drugs will be for at least 31 days (unless the prescription is written for less than 31 days). This includes Part D drugs that are on the formulary, but require prior authorization or step therapy.

In a LTC setting, UCare will honor multiple fills of non-formulary Part D drugs as necessary during the entire 90-day transition period. This includes Part D drugs that are on the formulary but require prior authorization or step therapy.

Emergency supply for members in the LTC setting

UCare will cover an emergency supply of non-formulary Part D drugs for LTC facility residents as part of their transition process.

During the first 90 days after a member's enrollment, the member will receive a transition supply. However, to the extent that a member in a LTC setting is outside his or her 90-day transition period, UCare will still provide an emergency supply of non-formulary Part D drugs while an exception is being

processed. This includes Part D drugs that are on the formulary, but require prior authorization or step therapy.

These emergency supplies of non-formulary Part D drugs will be for at least 31 days of medication (unless the prescription is written for less than 31 days). This includes Part D drugs that are on the formulary, but require prior authorization or step therapy.

Level of care changes

The following process applies to members who experience level of care changes.

If a member is admitted or discharged from a LTC facility, the member can refill prescriptions even if it's not time to refill them yet. This will prevent a gap in care.

Transition extension

When a member's exception request or appeal has not been processed by the end of the minimum transition period, UCare will extend the transition period on a case-by-case basis.

Requests for transition extensions can be made by contacting UCare Customer Services.

The extended transition period will end when (whichever occurs first):

- The member switches to an appropriate formulary drug, or
- The exception request or appeal is decided.

UCare's MSHO is a coordinated care plan with a Medicare Advantage contract and a contract with the Minnesota Medicaid program.

Attention. If you want free help translating this information, call UCare at 612-676-3200 or toll free at 1-800-203-7225.

ملاحظة: إذا أردت مساعدة مجانية في ترجمة هذه المعلومات، فاتصل على الرقم الموجود أعلاه.

កំណត់សំគាល់ បើអ្នកចង់បានជំនួយបកប្រែព័ត៌មាននេះដោយមិនគិតថ្លៃ សូមទូរស័ព្ទ ទៅលេខនៅខាងលើ។

Pažnja. Ako vam je potrebna besplatna pomoć za prevod ove informacije, nazovite gornji broj.

Ceeb toom. Yog koj xav tau kev pab txhais cov xov no dawb, thov hu rau tus xov tooj saud.

ໂປຼດຊາບ. ຖ້າຫາກທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປຂໍ້ຄວາມດັ່ງກ່າວນີ້ຟຣີ, ຈົ່ງ ໂທລະຕາມເລກໂທລະສັບຢູ່ຂ້າງເທິງນີ້.

Hubaddhu. Yoo akka odeeffannoon kun sii hiikamu gargaarsa tolaa feeta ta'e, lakkoofsa armaa olii bilbili.

Внимание. Если вам нужна бесплатная помощь в переводе этой информации, позвоните по указанному выше телефону.

Ogow. Haddii aad dooneyso in lagaa kaalmeeyo tarjama dda macluumaadkani oo lacag la'aan ah, wac lambarka kore.

Atención. Si desea recibir asistencia gratuita para traducir esta información, llame al número que aparece más arriba.

Chú Ý. Nếu quý vị cần dịch thông tin này miễn phí, xin gọi số nêu trên.

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This information is available in other forms to people with disabilities by calling: 612-676-3200 (voice) or toll free at 1-800-203-7225 (voice), 612-676-6810 (TTY) or toll free at 1-800-688-2534 (TTY); or through the Minnesota Relay at 711 or toll free direct access at 1-800-627-3529 (TTY, Voice, ASCII, Hearing Carry Over), or 1-877-627-3848 (speech to speech relay service).

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For enrollees age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to see your primary care provider prior to the referral.