Understanding prescription medication cost-sharing tiers and exceptions

What can you do if your medication is in a higher cost-sharing tier?

We want to help make sure you can get the medications you need. If your medication is in a higher cost-sharing tier, ask your provider if there is a medication in a lower tier that might work just as well. Call Customer Care and ask for a list of covered medications that treat your condition. This can help your provider find a covered medication that might work for you. If you are unable to find a lower-cost alternative, you can ask for a tier exception.

What is a tier exception?

A tier exception allows a higher-tier medication to be covered at a lower-tier cost with valid medical reasons to support the request. For example, with medications in Tier 3 (non-preferred medications) and Tier 2 (preferred brand medications), you and your provider can ask Humana to make an exception to allow the Tier 3 or Tier 2 medication to be moved to a lower tier so that you pay less for it. Requests are reviewed and approved on a case-by-case basis.

Requesting a tier exception

Your provider must give us the medical reasons for a tier exception you are requesting. (We call this the "supporting statement.") Your provider can fax or mail the statement to us. They can call **800-555-CLIN** (**2546**), Monday – Friday, 8 a.m. – 8 p.m., local time, or fax the request form to **877-486-2621**. For more information, please contact the number on the back of your Humana member ID card.

Prescription medication cost-sharing tiers

Prescription medications are grouped into one of four tiers.

Tier 1 – Generic or preferred generic Essentially the same medications, usually priced differently

Have the same active ingredients as brandname medications and are prescribed for the same reasons. The Food and Drug Administration (FDA) requires generic medications to have the same quality, strength, purity and stability as brandname medications. Your cost for generic medications is usually lower than your cost for brand-name medications.

Tier 2 – Preferred brand

A medication available to you for less than a nonpreferred

Generic or brand-name medications that Humana offers at a lower cost to you than nonpreferred medications.

Tier 3 – Nonpreferred medication A more expensive medication than a preferred

More expensive generic or brand-name prescription medications that Humana offers at a higher cost to you than preferred medications.

Tier 4 - Specialty

Medications for specific uses

Some injectable and other high-cost medications to treat chronic or complex illnesses like rheumatoid arthritis and cancer.



Important

At Humana, it is important you are treated fairly.

Humana Inc. and its subsidiaries comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, ancestry, ethnicity, sex, sexual orientation, gender, gender identity, disability, age, marital status, religion, or language in their programs and activities, including in admission or access to, or treatment or employment in, their programs and activities.

• The following department has been designated to handle inquiries regarding Humana's non-discrimination policies: Discrimination Grievances, P.O. Box 14618, Lexington, KY 40512-4618. If you need help filing a grievance, call the number on your ID card or if you use a TTY, call 711.

Auxiliary aids and services, free of charge, are available to you. Please call the number on your ID card. If you use a TTY, call 711.

Humana provides free auxiliary aids and services, such as qualified sign language interpreters, video remote interpretation, and written information in other formats to people with disabilities when such auxiliary aids and services are necessary to ensure an equal opportunity to participate.

This information is available for free in other languages. Please call our customer service number at 877-320-1235 (TTY: 711). Hours of operation: 8 a.m. – 8 p.m. Eastern time.

Español (Spanish): Llame al número indicado para recibir servicios gratuitos de asistencia lingüística. **877-320-1235 (TTY: 711)**. Horas de operación: 8 a.m. a 8 p.m. hora del este.

繁體中文 (Chinese): 本資訊也有其他語言版本可供免費索取。請致電客戶服務部: 877-320-1235 (聽障專線: 711)。辦公時間: 東部時間上午 8 時至晚上 8 時。

GHHLE7BEN 0822