

Claim forms are available from the Customer Service Center.

Please note: It is important that once you receive your CHIP I.D. card, you have it with you when you have your prescription filled at a participating pharmacy. If you don't have your card with you, you will be required to pay the pharmacist the entire cost of the drug and then file a claim. You will be reimbursed as if you had gone to a nonparticipating pharmacy (see the following paragraph).



If you go to a nonparticipating pharmacy

If you have your prescription filled at a nonparticipating pharmacy, you must pay the pharmacist the entire cost of the prescription, then file a claim with Blue Cross and Blue Shield of Nebraska (with the itemized statement attached). Reimbursement for prescriptions filled at a nonparticipating pharmacy will be the cost of the drug minus the applicable out-of-pocket amount and a 25% penalty. Claim forms are available from our Customer Service Center.

If you have questions

If you have questions about your prescription benefits, call the Customer Service Center in Omaha at (402) 343-3574 or toll-free 1-877-348-4304. You can also e-mail us at www.bcbsne.com/contactus.

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Rx Nebraska Pharmacy Locator Number

Keep this wallet card with you for easy reference whenever you need to find a participating pharmacy.

Pharmacy Locator Number
1-877-800-0746



Nebraska Comprehensive Health Insurance Pool (CHIP)

A Guide to Your CHIP Prescription Drug Benefits



Administered by Blue Cross and Blue Shield of Nebraska, an independent licensee of the Blue Cross and Blue Shield Association.



Most of us from time to time need to get a prescription filled. If you do so on a regular basis, you know how expensive it can be. Having to file claims and wait for reimbursement can be a hassle, too.

That's why we developed the three-tier CHIP Prescription Drug Plan. Here's how it works:

Your benefits are based on Blue Cross and Blue Shield of Nebraska's **Drug Formulary**, a listing of medications divided into three tiers. The copay you pay for each 30-day supply of your covered prescription drug depends on what tier your medication is in.

Tier 1	Generic drugs	\$10 copay
Tier 2	Formulary brand name drugs	20% coinsurance \$35 min/\$50 max
Tier 3	Non-formulary drugs	50% coinsurance \$50 min/\$75 max

Please note: Drugs are subject to the deductible and coinsurance under the \$2,000 High Deductible Health Plan.

The drug formulary is revised on a regular basis. Our website provides you with the most up-to-date version: www.bcbsne.com/Members/DrugFormulary/Default.aspx

Getting your prescription filled

Take your prescription and your CHIP I.D. card to a participating pharmacy. You'll pay the pharmacist the applicable copay amount, as shown in the chart. That's all there is to it.

Please note: Whenever appropriate, generic drugs will be used to fill your prescriptions. If you prefer a brand name drug, you will be responsible for the difference in cost plus the applicable copay amount.

Here's what is covered under your CHIP plan

- Drugs requiring a prescription, (except those items listed in the next section). Certain drugs may be subject to quantity maximums as determined by Blue Cross and Blue Shield of Nebraska.
- Injectables.
- Ostomy supplies.
- Insulin and other diabetic supplies, including needles, syringes, test strips and lancets.
- Prescription vitamins (including pre-natal).
- AIDS drugs.
- Anti-rejection medications.
- Compound medications containing at least one FDA-approved prescription ingredient (restrictions may apply).
- Amevive, Raptiva and Xolair.**
- IVIG drugs.**
- Synagis.**
- Migraine medications.***

** With prior authorization.

*** Quantity limits apply.

These drugs are not covered under your CHIP plan

- Over-the-counter medications.
- Home medical equipment or devices of any type.
- General anesthetic.
- Diet or appetite suppressants.
- Dietary supplements.
- Prescription drugs purchased in a foreign country (except in medical emergencies while traveling).
- Medications, services or drugs that are not cost effective compared to established alternatives.
- Experimental/investigational drugs.
- Fertility medications.
- Topical Minoxidil (Rogaine).
- Cosmetic alteration drugs.
- Smoking deterrents (i.e. gum and patches).

- Contraceptive medications
- Erectile dysfunction agents
- Growth hormones
- Acne medication
- Nail fungus medication

How to locate pharmacies

- The pharmacy network for the plan is called the Rx Nebraska Pharmacy Network.
- Call the Participating Pharmacy Locator number toll-free at **1-877-800-0746**.
- A representative will ask you for the city, state or zip code to locate participating pharmacies in that area.
- You'll be given the names, addresses and phone numbers of participating pharmacies in the area. Or, you may ask whether a particular pharmacy is in the network.
- The Participating Pharmacy Locator toll-free number is available 24 hours a day, seven days a week.

You can also find participating pharmacies anywhere in the U.S. by accessing our online directory at: www.bcbsne.com/FindProvider/default.asp

Before your card arrives

Between the time you enroll in the plan and the time you receive your CHIP I.D. card, you may find you need to get a prescription filled. Prescription benefits are available to you, but you'll need to pay the participating pharmacist the full amount, then file a claim (with the itemized statement attached). You will be reimbursed, minus your plan's applicable copay/coinsurance amount. Please indicate on the claim form that you haven't received your I.D. card yet.