

OEBB Pharmacy Changes October 1, 2009

If you have contacted OEBB regarding the ODS Pharmacy changes, you can expect a phone call from an ODS Pharmacy Customer Service Representative within 2 business days to review your concerns.

Please feel free to call the ODS Pharmacy Customer Service Team at 866-923-0411 if we can provide you with additional support.

The purpose of this communication is to respond to the recent questions we have received related to the OEBB Pharmacy program changes taking effect October 1, 2009.

The majority of questions have been related to

1. the reason for the changes,
2. the level of detail included in the letters pertaining to formulary updates and
3. a general concern for the timing of the notices.

At ODS we take pride in actively managing your pharmacy benefits to ensure the OEBB programs provide quality, comprehensive coverage and remain current with industry standards and the changes occurring in the marketplace.

Reason for Changes:

ODS considers the following when making changes to the pharmacy benefits:

- How safe is the medication
- How effective is the medication
- How cost effective is the medication

ODS has a clinical team who reviews the OEBB formulary and makes recommendations for program changes throughout the benefit year. This approach allows ODS to make changes when the FDA has approved new medications, generic alternatives are available, or changes occur to existing drug profiles (e.g. dosing, patient safety and/or approved uses).

The changes taking effect October 1, 2009 have been initiated in an effort to maintain a comprehensive benefit, provide OEBB members an open formulary and choice, while balancing the use of utilization management strategies to ensure the ongoing stability of OEBB's pharmacy program.

Formulary Updates- Content of Notice:

ODS does not provide alternate medication therapies in our notice of changes, as we respect that the best treatment option can vary from person to person based on the



specific condition being treated and other medications being prescribed. It is important that decisions regarding treatment options be maintained between members and their provider(s).

Members who have received notification that their medication is moving to the non-preferred brand tier may wish to speak with their healthcare provider regarding less costly alternatives.

Timing of Notice:

ODS discussed these changes during the annual open enrollment meetings in August and September. Together with OEBB, we encourage members to attend these meetings when possible to receive information about enhancements and changes taking place for the upcoming plan year.

We also appreciate the importance of direct member communication and regret that we were unable to provide more advance written notice of the changes for this year. ODS is highly committed to customer service and it was our intent to release the letters notifying members of changes no later than September 1st. We found that extra time was necessary to ensure quality reviews for accuracy in the letters being sent and to allow for specific formatting requirements when preparing the letters for mailing. These factors unfortunately delayed the mailings.

Thank you for providing ODS with the opportunity to serve you. We take great pride in this responsibility and we are very sorry for any inconvenience you have experienced.

