

**IOWWA**™

The logo for IOWWA features the word "IOWWA" in a bold, teal, sans-serif font. The letter "O" is replaced by a circular graphic. The top half of the circle is a dark teal semi-circle, and the bottom half is a light green semi-circle. Inside the circle, there is a bright yellow sun partially obscured by the teal top, and a white path that curves from the bottom left towards the center of the circle.

**FREEDOM TO FLOURISH**



Department of  
Administrative Services

# Retiree Open Enrollment for 2025 Benefits

October 15 – December 7, 2024

# Open Enrollment for 2025

This is an opportunity to:

- Change your health and/or dental plan
- Add family member(s)
- Remove family member(s)

Important Reminders:

- Applications must be postmarked by December 7, 2024
- Benefit elections are effective January 1, 2025

**Important Note: If you are not making any changes you do not need to do anything. Your current choices will roll over to 2025.**

# What we will cover

- Things to Remember
- Changes
- Retiree Options
- Prescription Coverage
- Resources



# Things to Remember

# Things to Remember

- If you drop your State of Iowa health or dental plans, there is no provision to rejoin the group.
- If you are Medicare eligible and enroll in an outside supplement or advantage plan, you must contact the State of Iowa as your cancellation is not automatically forwarded.
- If your spouse is covered under the State of Iowa's health or dental plans at the time of your death, your spouse can continue coverage.

# Things to Remember

- You may remove a spouse or dependent at any time.
- You can only enroll a family member during a qualified life event or annual Open Enrollment period.
- **If you are becoming Medicare eligible in 2025**, there is no need to do anything during Open Enrollment. You will be sent a packet of information approximately three months prior to turning 65.

# Things to Remember

- **If you or any of your dependents become Medicare eligible when on retiree insurance, you MUST enroll in Medicare Parts A and B, and Medicare becomes the primary payer at the time of eligibility. If you do not enroll in Medicare Parts A or B, you will be responsible for the portion of your health care costs that Medicare would pay.**



# Changes

# Changes

## **Delta Dental**

- Added the Check-Up Plus option
- Diagnostic and preventive services will not count toward your annual benefit maximum

## **MedicareBlue Rx for Iowa plan**

- There is a \$2000 max out of pocket cost for prescriptions covered on their formulary

# Benefit Options

# Retiree Options

- Health Insurance
- Group MedicareBlue Rx for Iowa
- Dental Insurance

# Retiree Health Options

(When No One Covered is Eligible for Medicare)

- Iowa Choice – Single or Family Coverage
- National Choice – Single or Family Coverage

# Retiree Health Options

(When One Individual is Medicare Eligible and Others are not Eligible for Medicare)

- Iowa Choice – Single or Family  
MedicareBlue Rx for reduced premium
- National Choice – Single or Family  
MedicareBlue Rx for reduced premium

# Retiree Health Options

## (When All Covered are Medicare Eligible)

- Iowa Choice – Single or Family  
MedicareBlue Rx for reduced premium
- National Choice – Single or Family  
MedicareBlue Rx for reduced premium
- Group Program F – Single plan only  
Dependent can enroll if Medicare eligible
- Group Program N – Single plan only  
Dependent can enroll if Medicare eligible

# Group Medicare Blue Rx for Iowa

- There is no need to re-enroll if you want to continue with your current coverage
- With Iowa or National Choice:
  - There is a premium reduction for those who are Medicare eligible and sign up for this plan.
  - If you cancel your MedicareBlue Rx, retirees will pay the higher premium rate



# Group Medicare Blue Rx for Iowa

With Group Program F or Group Program N

- You are not required to stay on our Part D plan. There is no premium reduction tied to having both plans.
- 2025 out of pocket costs will be \$2000 for prescriptions on the formulary.

These out-of-pocket limits do not apply to Part B drugs provided by a medical professional in an outpatient hospital setting. Chemotherapy treatments, for example, may fall into this category.

# Dental Insurance

- Family and single plans only
- Can continue dental insurance without health insurance
- Can drop spouse or dependents at any time
- You can only enroll a family member during a qualified life event or annual Open Enrollment.

# Dental Insurance

- **NO benefit changes** for SPOC-covered retirees
- New Check-Up Plus option for all other retirees
  - Diagnostic and preventive services will not count toward the annual benefit max
  - Promotes regular preventive care
  - Save on costs over the long-term

# Check-Up Plus Example

	Benefit without Check-Up Plus	Benefit with Check-Up Plus
Annual Benefit Max	\$1500	\$1500
Exam, cleaning, x-rays	\$250	\$250 (not applied toward annual benefit max)
2 Fillings	\$100	\$100
Total annual benefit max remaining	\$1150	\$1400

# Prescription Coverage on State of Iowa Plans

# Prescriptions. Things to consider

- PA - Prior Authorization
- QL - Quantity Limits
- Exceptions

# Prescriptions. Things to consider

**Prior Authorization (PA)** - Every drug provider has criteria for prior authorization

## **Quantity Limits (QL)**

- A quantity limit is the highest amount of a prescription drug that can be given to you by your pharmacy in a period of time. For example, you might be prescribed a drug that requires you take 2 tablets a day, or 60 tablets per month.

## **Exceptions**

A beneficiary can request a formulary exception if their insurance doesn't cover a drug not on their formulary.





# Iowa Choice and National Choice Prescription Drug Lists

Member Resources | Wellmark | wellmark.com/member

OCIO Delta Dental of Iowa DAS Intranet Homepage | Works... Wellmark Blue Cros... Workday iowadot4... Control Center : Vol... Getting things done Calculator: Add to... Current Home - Wo... Welcome to online... Login to everything All Bookmarks

Wellmark. **LOG IN / REGISTER** SEARCH

## MEMBER RESOURCES

Get more from your plan.

### Things to Know

- COVERAGE & BENEFITS**  
Get answers to questions on claims, costs and more!  
**GET ANSWERS**
- PRESCRIPTION DRUGS**  
Manage your prescriptions by knowing your coverage.  
**LOOK UP**
- HEALTH INSURANCE BASICS**  
Understand basic and common insurance terms.  
**LEARN MORE**

### Things to Do

- GET CARE**  
From simple to complex health conditions, find the right care.  
**FIND OPTIONS**
- MEMBER FORMS**  
Manage requests, reimbursements and authorizations.  
**SEE FORMS**
- MYWELLMARK**  
Check claims, track costs, see what's covered, ask questions.  
**LOG IN**

**DO MORE**  
Find an Agent  
Member Resources  
Important Things to Know  
Tax Information for Members

**COMPANY**  
Newsroom  
Related Sites  
About Us  
Contact Us

**ACCESSIBILITY AND NONDISCRIMINATION**  
Notice of Nondiscrimination | Español | 中文 | Tiếng Việt | Hrvatski | Deutsch | اللغة العربية | 한국어  
हिंदी | Français | Pennsylvanisch Deitsch | ไทย | Tagalog | తెలుగు | Русский | नेपाली | ལྷོ་ཁྱེད་ | Nasarare  
Afaan Oromoo | Українська | Diné

# Iowa Choice and National Choice Blue Rx Value Plus

The screenshot shows a web browser window with the URL [wellmark.com/member/prescription-drugs](https://wellmark.com/member/prescription-drugs). The page title is "Drug lists". The main content area is blue and contains the following text and links:

Also known as a formulary, your drug list will tell you if a drug is covered under your plan, whether it needs special approval to be filled, coverage limits and if a generic option is available — which could save you money.

But first, you will need to know the name of your plan's drug list. Find out in one of these ways:

- Log in and view your [Summary of Benefits & Coverage document](#) 🔒
- Search for your [coverage documents](#) using your Wellmark ID number.
- Call the number on your Wellmark member ID card for assistance.

**View your drug list:**

- [Blue Rx Basic<sup>SM</sup>](#) 🗄
- [Blue Rx Complete<sup>SM</sup>](#) 🗄
- [Blue Rx Essentials<sup>SM</sup> 2023](#) 🗄
- [Blue Rx Preferred<sup>SM</sup>](#) 🗄
- [Blue Rx Value<sup>SM</sup>](#) 🗄
- [Blue Rx Value Plus<sup>SM</sup>](#) 🗄 ←
- [BlueSimplicity<sup>SM</sup> Rx](#) 🗄

[Drug list \(formulary\) changes effective July 1, 2023](#) 📄

[PrudentRx Drug List](#) 📄

**Important to know:**

- Your health plan's drug list is regularly updated as generic drugs become available and changes take place in the pharmaceuticals market, so it's good to check it regularly. For the most up-to-date information, [log in to myWellmark](#) 🔒 or call the number on your ID card.
- Your plan's drug list will also show if it's a [specialty medication](#), if it has any prior authorizations, quantity or age limits, and what [tier](#) 🗣 your drug falls on.

Navigation elements include a "MENU" button on the left, a "LOG IN / REGISTER" button and a search icon on the right, and a vertical "FEEDBACK" button on the far right edge.

# Iowa Choice and National Choice Continue To New Site

Prescriptions, Pharmacy Coverage

wellmark.com/member/prescription-drugs

OCIO Delta Dental of Iowa DAS Intranet Homepage | Works... Wellmark Blue Cros... Workday lowadot4... Control Center : Vol... Getting things done Calculator: Add to... Current Home - Wo... Welcome to online... Login to everything All Bookmarks

Wellmark

LOG IN / REGISTER SEARCH

MEMBER

PRESCRIPTIONS & DRUG LISTS

COVERAGE AND BENEFITS

PRESCRIPTIONS & DRUG LISTS

Specialty Drugs

GET CARE

MYWELLMARK, MEMBER PORTAL

FORMS

ID CARDS

PAY YOUR BILL ONLINE

HEALTH INSURANCE BASICS

PRESCRIPTIONS & DRUG LISTS PHARMACY BENEFITS

**You are now leaving Wellmark.com**

By selecting the continue button you will leave Wellmark's website and go to wellmark.adaptivex.com, operated by Adaptive Rx. Adaptive Rx is an independent company providing pharmacy benefit services on behalf of Wellmark. Adaptive Rx is responsible for the content delivered on its website, including terms of use and privacy policies that govern the site.

CONTINUE TO NEW SITE Cancel

Know if you have pharmacy coverage

If you have prescription drug coverage through Wellmark, this information can help you and your health care provider get the most from your prescription drug coverage. Find out if you have coverage through Wellmark in one of three ways:

- Log in and view your pharmacy coverage in [myWellmark](#).
- Search for your [coverage documents](#) using your Wellmark ID number.
- Call the number on your Wellmark member ID card for assistance.

VIEW YOUR PHARMACY COVERAGE

Log in to myWellmark to [find an in-network pharmacy](#).

FEEDBACK

# Iowa Choice and National Choice

## Blue Rx Value Plus Formulary

**Wellmark**

Drug Name Search

Enter a drug name to begin

By Therapeutic Class

Please select a therapy subclass to continue

A

**ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS**

- ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS
- ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR
- ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS
- AMPHETAMINE MIXTURES
- AMPHETAMINES
- ANALEPTIC COMBINATIONS
- ANALEPTICS
- ANOREXIANT COMBINATIONS
- ANOREXIANTS NON-AMPHETAMINE
- ANTI-OBESITY - GIP & GLP-1 RECEPTOR AGONISTS
- ANTI-OBESITY - GLP-1 RECEPTOR AGONISTS

### Blue Rx Value Plus<sup>SM</sup>

#### Welcome

We cover both brand name drugs and generic drugs. Generic drugs have the same active-ingredient formula as a brand name drug. Generic drugs usually cost less than brand name drugs and are rated by the Food and Drug Administration (FDA) to be as safe and effective as brand name drugs. Members may be required to pay more for a prescription when a brand-name product is dispensed.

#### What is a Formulary?

A formulary is a list of covered drugs which represents the prescription therapies believed to be a necessary part of a quality treatment program. We will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

	Tier Designation		
	Tier 1	Tier 2	Tier 3
Blue Rx Value Plus 3 Tier	Tier 1	Tier 2	Tier 3
Blue Rx Value Plus 2 Tier	Tier 1	Tier 2 and Tier 3 combined	
Blue Rx Value Plus 1 Tier	Tier 1, Tier 2, and Tier 3 combined		

#### Printable Files

To view a version of your Formulary Drug List with a screen reader, please click Printable Formulary below.

The following files require Adobe Acrobat. [Download Adobe Acrobat](#)

- [Printable Formulary](#)
- [Prior Authorization](#)

#### How to Search For Drugs

- Use the alphabetical list to search by the first letter of your medication.
- Search by typing part of the generic (chemical) and brand (trade) names.
- Search by selecting the therapeutic class of the medication you are looking for.

#### How to Request an Exception

Legend

Cookie Settings Last Updated: Oct 2, 2024



# Iowa Choice and National Choice

## Blue Rx Value Plus Formulary

The screenshot shows a web browser window with the URL [wellmarkadaptiverx.com/webSearch/index?key=8F02B26A288102C27BAC82D14C006C6FC54D480F80409B682A96D6A826A242AA](http://wellmarkadaptiverx.com/webSearch/index?key=8F02B26A288102C27BAC82D14C006C6FC54D480F80409B682A96D6A826A242AA). The page features a left-hand navigation menu with categories such as ANALEPTICS, ANOREXIANT COMBINATIONS, ANOREXIANTS NON-AMPHETAMINE, ANTI-OBESITY - GIP & GLP-1 RECEPTOR AGONISTS, and ANTI-OBESITY - GLP-1 RECEPTOR AGONISTS. The main content area includes sections for 'How to Search For Drugs' and 'How to Request an Exception'. The 'How to Search For Drugs' section lists three methods: using an alphabetical list, typing part of the generic and brand names, and selecting the therapeutic class. The 'How to Request an Exception' section explains that users can request exceptions for coverage rules and provides instructions on how to submit a request. Below this is a section for 'Common Drug Exclusions' which lists various categories of excluded drugs. At the bottom of the page, there is a 'Notice of Nondiscrimination' and a list of language options for the site. A 'Legend' button is visible in the bottom right corner. Three grey arrows are overlaid on the image: one points to the 'How to Search For Drugs' section, and two others point to the left-hand navigation menu.



# Prior Authorization

## Blue Rx Value Plus Formulary

The screenshot shows a web browser window with a PDF document open. The document title is "DRUGS THAT REQUIRE A PRIOR AUTHORIZATION". The document content is as follows:

<i>aripiprazole</i>	ADVAIR DISKUS
ABECMA	ADVAIR HFA
ABRILADA (1 PEN)	ADZENYS ER
ABRILADA (2 PEN)	ADZENYS XR-ODT
ABRILADA (2 SYRINGE)	ADZYNMA
ABSTRAL	AFREZZA
ACANYA	AGAMREE
ACIPHEX SPRINKLE	AIMOVIG
ACIPHEX	AIRDUO DIGIHALER
ACTEMRA	AIRDUO RESPICLICK 113/14
ACTEMRA ACTPEN	AIRDUO RESPICLICK 232/14
ACTHAR	AIRDUO RESPICLICK 55/14
ACTHAR GEL	AJOVY
ACZONE	AKLIEF
ADAKVEO	ALDURAZYME
ADALIMUMAB-AACF (2 PEN)	ALKINDI SPRINKLE
ADALIMUMAB-AACF (2 SYRINGE)	ALREX
ADALIMUMAB-AACF(CD/UC/HS STRT)	ALTRENO
ADALIMUMAB-AACF(PS/UV STARTER)	ALVAIZ
ADALIMUMAB-AATY (1 PEN)	ALVESCO
ADALIMUMAB-AATY (2 PEN)	ALYGLO
ADALIMUMAB-AATY (2 SYRINGE)	ALYMSYS
ADALIMUMAB-ADAZ	<i>alyq</i>
ADALIMUMAB-ADB (2 PEN)	<i>ambrisentan</i>
ADALIMUMAB-ADB (2 SYRINGE)	AMITIZA
ADALIMUMAB-ADB(CD/UC/HS STRT)	AMJEVITA
ADALIMUMAB-ADB(PS/UV STARTER)	<i>amphet-dextroamphet 3-bead er</i>
ADALIMUMAB-FKJP (2 PEN)	AMPHETAMINE ER
ADALIMUMAB-FKJP (2 SYRINGE)	<i>amphetamine sulfate</i>
ADALIMUMAB-RYVK (2 SYRINGE)	<i>amphetamine-dextroamphet er</i>
<i>adapalene</i>	AMTAGVI
<i>adapalene-benzoyl peroxide</i>	AMVUTTRA
ADBRY	AMZEEQ
ADCIRCA	<i>anastrozole</i>

The browser interface includes a search bar, navigation icons, and an AI Assistant chat window at the bottom with the text: "Try, 'Create an email summary of this document'"



# Iowa Choice and National Choice

## Blue Rx Value Plus Formulary

**Wellmark**

Drug Name Search

Enter a drug name to begin

By Therapeutic Class

Please select a therapy subclass to continue

A

**ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS**

- ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS
- ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR
- ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS
- AMPHETAMINE MIXTURES
- AMPHETAMINES
- ANALEPTIC COMBINATIONS
- ANALEPTICS
- ANOREXIANT COMBINATIONS
- ANOREXIANTS NON-AMPHETAMINE
- ANTI-OBESITY - GLP-1 RECEPTOR AGONISTS
- ANTI-OBESITY AGENT COMBINATIONS

**Blue Rx Value Plus<sup>SM</sup>**

Welcome

We cover both brand name drugs and generic drugs. Generic drugs have the same active-ingredient formula as a brand name drug. Generic drugs usually cost less than brand name drugs and are rated by the Food and Drug Administration (FDA) to be as safe and effective as brand name drugs. Members may be required to pay more for a prescription when a brand-name product is dispensed.

**What is a Drug List?**

A formulary drug list is a list of drugs covered under your pharmacy benefit and developed to serve as a guide for physicians, pharmacists, healthcare professionals and members in the selection of cost-effective drug therapy. The formulary does not define benefit coverage and limitations. Many members have specific benefit inclusions, exclusions, copayments or a lack of coverage, which are not reflected in the formulary. Members should contact their Plan Sponsor or Wellmark Customer Service at the number on the back of their ID card if they have questions regarding their coverage.

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Blue Rx Value Plus 3 Tier	Tier 1	Tier 2	Tier 3
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Printable Files

Legend

**TIERING**

- T1 - TIER 1
- T2 - TIER 2
- T3 - TIER 3
- SP-NP - SPECIALTY NON-PREFERRED
- SP-P - SPECIALTY PREFERRED
- P&T - NOT COVERED AWAITING P&T REVIEW
- RX-DME - PHARMACY DURABLE MEDICAL EQUIPMENT
- NF - Non-Formulary
- SP-M - SPECIALTY MEDICAL

**EDITS**

- QL - Quantity Limit
- AL - Age Limit
- S - Specialty Drug
- QLV - Quantity Limit (Varies)
- PAV - Prior Authorization Varies
- PA - Prior Authorization
- SBC - Specialty Biosimilars and Specialty Generics
- MN-PA - Medically Necessary Prior Authorization
- PA-QL - Post-Quantity Limit Prior Authorization
- PV - Preventive

Brand Names generic names

Formulary Id: 2472 ver. 1  
Last Updated: Oct 9, 2023

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# Iowa Choice and National Choice

## Blue Rx Value Plus Formulary

**Wellmark**

Drug Name Search

Enter a drug name to begin  
Atorvastatin

- ATORVASTATIN CALCIUM
- atorvastatin calcium
- atorvastatin calcium (bulk)
- atorvastatin calcium-coenzyme q10

Please select a therapy subclass to continue

A

**ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS**

- ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS
- ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR
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### Blue Rx Value Plus<sup>SM</sup>

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#### Printable Files

Legend

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- AL - Age Limit
- S - Specialty Drug
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- PAV - Prior Authorization Varies
- PA - Prior Authorization
- SBG - Specialty Biosimilars and Specialty Generics
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Brand Names *generic names*

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Cookie Privacy - Terms





# Iowa Choice and National Choice Blue Rx Value Plus Formulary

The screenshot displays the Wellmark website interface for the Blue Rx Value Plus Formulary. The main content area is titled "Drug Details" and shows a search for "ANTHYPERLIPIDEMICS > HMG COA REDUCTASE INHIBITORS". A table lists four drug entries, all of which are Tier 1 (T1) and have a Preventive (PV) edit. The table columns are Drug Name, Tier, Edits, Alternatives, and Details. Below the table is a legend explaining the symbols used for tiering, editing, and authorization. On the left side, there is a search bar and a list of therapeutic classes. At the bottom, there is a footer with contact information and a privacy policy link.

**Wellmark**

Drug Name Search  
Enter a drug name to begin  
ATORVASTATIN CALCIUM

By Therapeutic Class  
Please select a therapy subclass to continue  
A  
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS  
ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS  
ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR  
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS  
AMPHETAMINE MIXTURES  
AMPHETAMINES  
ANALEPTIC COMBINATIONS  
ANALEPTICS  
ANOREXIANT COMBINATIONS  
ANOREXIANTS NON-AMPHETAMINE  
ANTI-OBESITY - GLP-1 RECEPTOR AGONISTS  
ANTI-OBESITY AGENT COMBINATIONS

**Drug Details** START OVER

ANTHYPERLIPIDEMICS > HMG COA REDUCTASE INHIBITORS

DRUG NAME	TIER	EDITS	ALTERNATIVES	DETAILS
atorvastatin calcium 10 mg tab	T1	PV Preventive	Find Alternative Drugs	🔍
atorvastatin calcium 20 mg tab	T1	PV Preventive	Find Alternative Drugs	🔍
atorvastatin calcium 40 mg tab	T1	PV Preventive	Find Alternative Drugs	🔍
atorvastatin calcium 80 mg tab	T1	PV Preventive	Find Alternative Drugs	🔍

**Legend**

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- T3 - TIER 3
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**EDITS**

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Brand Names generic names

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Cookiel Privacy - Terms

# Group MedicareBlue Rx for Iowa

<https://www.yourmedicare resolutions.com/>

Medicare prescription drug plan

yourmedicare resolutions.com

Workday The DAS Hub - Reso... Imported From IE Delta Dental of Iowa Welcome | Iowa De... Log into everything DOT Citrix Access G... Retirement insuranc... All Bookmarks

MedicareBlue<sup>SM</sup> Rx (PDP)  
A Medicare Prescription Drug Plan  
Iowa • Minnesota • Montana • Nebraska • North Dakota • South Dakota • Wyoming

Home Compare plans ▾ Enroll ▾ Members ▾ Documents ▾ Part D basics ▾ Employer group plans ▾ Contact us

**Part D coverage from Blue Cross Blue Shield**  
Manage your costs with a prescription drug plan from MedicareBlue Rx

**Explore your Part D coverage options with MedicareBlue Rx**

Original Medicare will help you cover hospital and

- **Pharmacy network:** Fill prescriptions at

Plan Tools

# Group MedicareBlue Rx for Iowa

- Employer group plans
- 2025 Group documents

The screenshot shows a web browser window displaying the MedicareBlue Rx (PDP) website. The browser's address bar shows the URL [yourmedicareolutions.com](https://www.yourmedicareolutions.com). The website header includes the MedicareBlue Rx logo and navigation links for various states: Iowa, Minnesota, Montana, Nebraska, North Dakota, South Dakota, and Wyoming. A search bar is located in the top right corner. The main navigation menu includes links for Home, Compare plans, Enroll, Members, Documents, Part D basics, Employer group plans, and Contact us. The 'Employer group plans' dropdown menu is open, showing options such as Group benefit solutions, Group resources, 2025 Group documents (highlighted), 2024 Group documents, Group coverage tools, Group contact information, Group Communication timeline, and Fraud, waste and abuse. Below the navigation menu, there is a banner for 'Part D coverage from Blue Cross Blue Shield' with the text 'Manage your costs with a prescription drug plan from MedicareBlue Rx'. At the bottom of the page, there is a section titled 'Explore your Part D coverage options with MedicareBlue Rx' and a link to <https://www.yourmedicareolutions.com/EmployerGroupPlans/EmployerGroupDocs2025>.

# Group MedicareBlue Rx for Iowa

## 2025 Group documents

HOME | EMPLOYER GROUP PLANS | 2025 EMPLOYER GROUP DOCUMENTS

### 2025 Group Documents

When you have questions about your benefits, our documents section can help. Explore important plan documents below to learn how to use your benefits, find out what's covered, download forms and more.

**Pre-enrollment documents**

- [Pre-enrollment checklat](#)

View our [Star Rating](#) from Medicare. The Star Rating is updated by Medicare each year.

**Evidence of Coverage (EOC)**

- [4-Tier Evidence of Coverage](#)
- [5-Tier Evidence of Coverage](#)

**Formulary (drug list)**

- [4-Tier Formulary](#)
- [5-Tier Formulary](#)
- [Supplemental drug list](#)

**Pharmacy directory**

Use the [plan pharmacy locator tool](#) to find a pharmacy near you or have a [printed copy](#) mailed to you.

Additional pharmacies can be found in the listings below.

- [Iowa](#)
- [Minnesota](#)
- [Nebraska](#)
- [North Dakota](#)
- [South Dakota](#)

**Automatic payment documents**

Group members that receive a monthly invoice from Group MedicareBlue Rx can sign up for automatic payments.

- [Group plans Electronic funds transfer \(EFT\) form or sign up for EFT online.](#)

# Group MedicareBlue Rx for Iowa

## 2025 Group documents

The screenshot shows a web browser window with the URL [yourmedicareolutions.com/EmployerGroupPlans/EmployerGroupDocs2025](https://yourmedicareolutions.com/EmployerGroupPlans/EmployerGroupDocs2025). The page content is as follows:

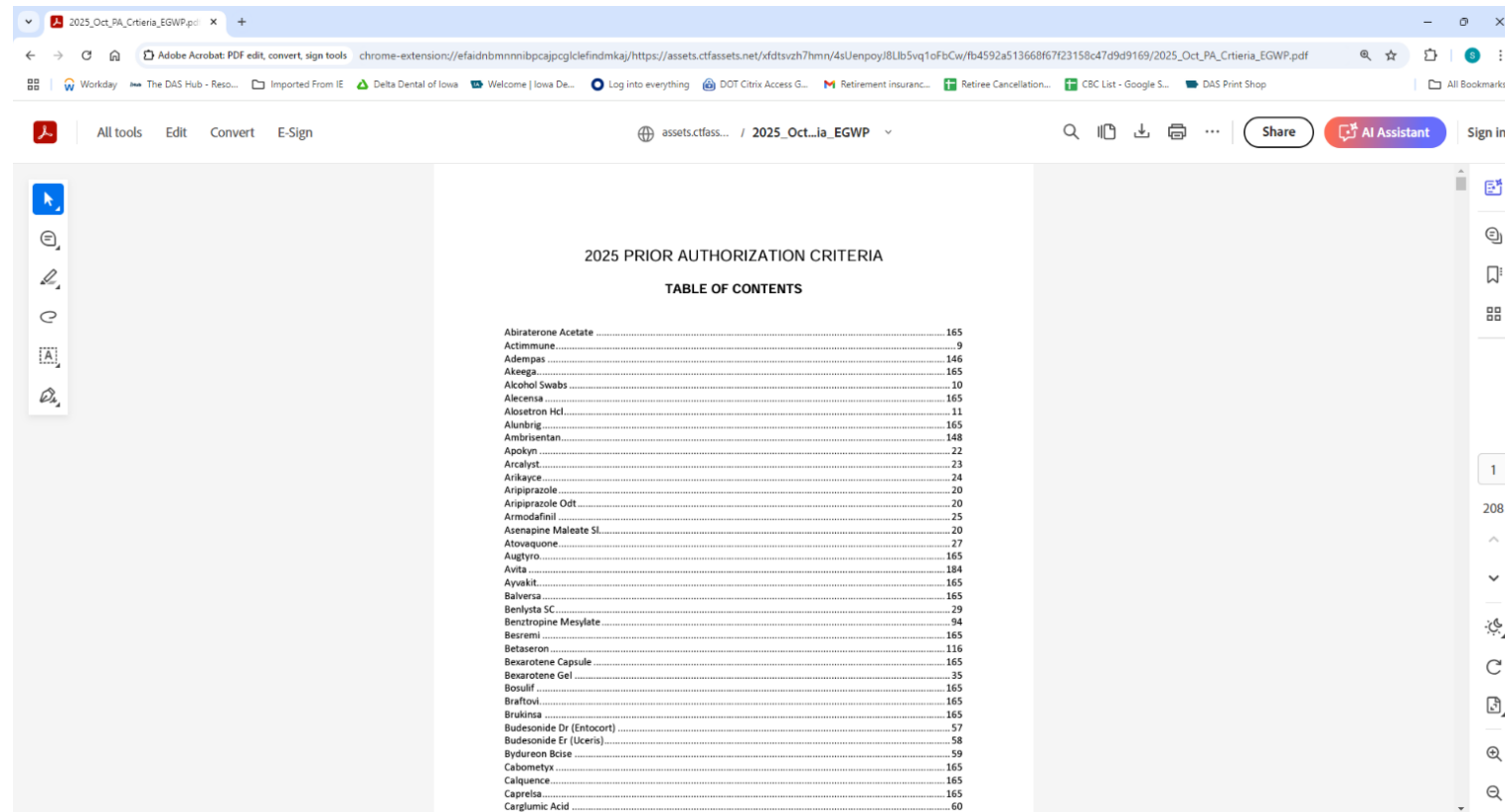
- Automatic payment documents**  
Group members that receive a monthly invoice from Group MedicareBlue Rx can sign up for automatic payments.  
[Group plans Electronic funds transfer \(EFT\) form or sign up for EFT online.](#)
- Drug claim forms**  
[Learn how to use the claim form](#)  
[Part D prescription drug claim form](#)
- Coverage determinations**  
Note: Coverage determinations for 2025 can be submitted starting Nov. 1, 2024.  
[Online coverage decision form](#)  
[Printable coverage decision form](#)
- Coverage redeterminations**  
Note: Coverage determinations for 2025 can be submitted starting Nov. 1, 2024.  
[Online redetermination form](#)  
[Printable redetermination form](#)
- Prior authorization criteria information**  
[4-tier prior authorization criteria](#)  
[5-tier prior authorization criteria](#)
- Hospice exception forms**  
Form to be used by Hospice Provider ONLY to confirm that the member is under hospice care and a medication is unrelated to the terminal illness or related conditions. Complete/review information, sign and date the form. Fax signed forms to Prime Therapeutics at 800-693-6703.  
[Hospice exception form](#)
- Drug policies and programs**  
[Plan transition drug supply policy](#)  
[Medication Therapy Management program Medication List](#)

Arrows in the image point to the 'Automatic payment documents', 'Drug claim forms', and 'Prior authorization criteria information' sections.



# Group MedicareBlue Rx for Iowa

## Prior Authorization



2025 PRIOR AUTHORIZATION CRITERIA

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# Group MedicareBlue Rx for Iowa

## 2025 Group documents

Medicare prescription drug plan

yourmedicareolutions.com/EmployerGroupPlans/EmployerGroupDocs2025

Workday The DAS Hub - Reso... Imported From IE Delta Dental of Iowa Welcome | Iowa De... Log into everything DOT Citrix Access G... Retirement Insuranc... Retiree Cancellation... CBC List - Google S... DAS Print Shop

**Hospice exception forms**  
Form to be used by Hospice Provider ONLY to confirm that the member is under hospice care and a medication is unrelated to the terminal illness or related conditions. Complete/review information, sign and date the form. Fax signed forms to Prime Therapeutics at 800-693-6703.  
[Hospice exception form](#)

**Drug policies and programs**  
[Plan transition drug supply policy](#)  
[Medication Therapy Management program Medication List](#)  
[Medication Therapy Management program Recommended to-Do List](#)

**Appointing a representative and confidential information documents**  
[Appoint a representative](#)  
[Authorization to release information form](#)  
[Confidential communication request form](#)  
[Our privacy practices](#)

**Medicare resources**  
[Medicare & You 2025: The official U.S. government Medicare handbook](#)  
[How Medicare Works: An information guide to help you make the most of your Medicare coverage \(updated 11/13/23\)](#)

[About us](#) [Terms of use](#) [Privacy policy](#) [Fraud, waste and abuse](#) [Agent portal](#)

MedicareBlue<sup>SM</sup> Rx (PDP) and Group MedicareBlue<sup>SM</sup> Rx are prescription drug plans with a Medicare contract. Enrollment in MedicareBlue Rx depends on contract renewal and enrollment in Group MedicareBlue Rx depends on renewal of the plan sponsor's contract with Medicare.

Coverage is available to residents of the service area or members of an employer or union group and separately issued by one of the following plans: Wellmark Blue Cross and Blue Shield of Iowa; Blue Cross and Blue Shield of Minnesota; Blue Cross and Blue Shield of Montana, a division of Health Care Service Corporation, a Mutual Legal Reserve Company; Blue Cross and Blue Shield of Nebraska; Blue Cross Blue Shield of North Dakota; Wellmark Blue Cross and Blue Shield of South Dakota; and Blue Cross Blue Shield of Wyoming\*

# Group MedicareBlue Rx for Iowa

## 2025 Five-Tier Group Formulary

2025  
**5-TIER GROUP FORMULARY**  
(List of covered drugs or "Drug List")  
Group MedicareBlue<sup>SM</sup> Rx (PDP)  
Effective January 1, 2025

**Please read:** This document contains information about the drugs we cover in this plan.  
Formulary ID: 25147

This Formulary was updated on 10/01/2024. For more recent information or other questions, please contact Group MedicareBlue Rx customer service.

Enrolled members call 1-877-838-3827, 8 a.m. to 8 p.m., daily, Central and Mountain times (TTY users call 711)  
Visit [YourMedicareSolutions.com/GroupPlans](https://YourMedicareSolutions.com/GroupPlans)



# Group MedicareBlue Rx for Iowa

## 2025 Five-Tier Group Formulary

2025  
**5-TIER GROUP FORMULARY**  
(List of covered drugs or "Drug List")  
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Effective January 1, 2025

Please read: This document contains information about the drugs we cover in this plan.  
Formulary ID: 25147  
This Formulary was updated on 10/01/2024. For more recent information or other questions, please contact Group MedicareBlue Rx customer service.

Find text in document

CTRL F

# Group MedicareBlue Rx for Iowa

## 2025 Five-Tier Group Formulary

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Workday The DAS Hub - Reso... Imported From IE Delta Dental of Iowa Welcome | Iowa De... Log into everything DOT Citrix Access G... Retirement insuranc... Retiree Cancellation... CBC List - Google S... DAS Print Shop All Bookmarks

All tools Edit Convert E-Sign assets.ctfassets.net / 2025\_Oct...y\_5Tier

Share AI Assistant Sign in

<i>gabapentin cap 300 mg</i>	4	
<i>gabapentin cap 400 mg</i>	5	PA, QL (360 mls/30 days)
<i>gabapentin oral soln 250 mg/5ml</i>	5	QL (2 bottles/28 days)
<i>gabapentin tab 2 mg</i>	4	QL (30 tablets/30 days)
<i>gabapentin tab 4 mg, 6 mg, 8 mg, 10 mg, 12 mg</i>	5	QL (30 tablets/30 days)
<i>gabapentin cap 100 mg</i>	2	QL (1080 capsules/30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

15

2025

Drug Name	Drug Tier	Requirements/Limits
<i>gabapentin cap 300 mg</i>	2	QL (360 capsules/30 days)
<i>gabapentin cap 400 mg</i>	2	QL (270 capsules/30 days)
<i>gabapentin oral soln 250 mg/5ml</i>	3	QL (2160 mls/30 days)
<i>gabapentin tab 600 mg</i>	2	QL (180 tablets/30 days)
<i>gabapentin tab 800 mg</i>	2	QL (135 tablets/30 days)
<i>lacosamide oral solution 10 mg/ml</i>	4	
<i>lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg</i>	4	
<i>lamotrigine tab chewable dispersible 5 mg, 25 mg</i>	3	
<i>lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 300 mg</i>	4	
<i>lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg</i>	2	
<i>levetiracetam oral soln 100 mg/ml</i>	3	
<i>levetiracetam tab er 24hr 500 mg, 750 mg</i>	3	
<i>levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg</i>	2	
<i>LIBERVANT - diazepam buccal film 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg</i>	5	QL (10 films/30 days)
<i>methsuximide cap 300 mg</i>	4	
<i>NAYZILAM - midazolam nasal spray soln 5 mg/0.1 ml</i>	4	QL (10 bottles/30 days)
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	4	
<i>oxcarbazepine tab 150 mg, 300 mg, 600 mg</i>	3	
<i>phenobarbital elixir 20 mg/5ml#</i>	4	
<i>phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg#</i>	2	
<i>phenylek - phenytoin sodium extended cap 200 mg, 300 mg</i>	2	
<i>phenytoin chew tab 50 mg</i>	3	

# Group MedicareBlue Rx for Iowa

## 2025 Five-Tier Group Formulary

2025

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acamprosate calcium tab delayed release 333 mg	9
acarbose tab 100 mg	38
acarbose tab 25 mg	38
acarbose tab 50 mg	38
accutane - isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg	40
acetabutof hcl cap 200 mg, 400 mg	53
acetaminophen w/ codeine soln 120-12 mg/5ml	7
acetaminophen w/ codeine tab 300-15 mg, 300-30 mg	7
acetaminophen w/ codeine tab 300-60 mg	7
acetazolamide cap er 12hr 500 mg	44
acetazolamide tab 125 mg, 250 mg	45
acetic acid olic soln 2%	78
acetylcysteine inhal soln 10%, 20%	78
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acyclovir cap 200 mg	34
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acyclovir susp 200 mg/5ml	34
acyclovir tab 400 mg, 800 mg	34
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alfavera - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	60
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amantadine hcl cap 100 mg	30
amantadine hcl soln 50 mg/5ml	30
ambisentan tab 5 mg, 10 mg	78
amethia - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	61
amethyst - levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	61
amikacin sulfate inj 500 mg/2ml (250 mg/ml), 1 gm/4ml (250 mg/ml)	10
amiloride & hydrochlorothiazide tab 5-50 mg	45
amloride hcl tab 5 mg	45
amloride hcl tab 100 mg, 400 mg	45
amiodarone hcl tab 200 mg	45

# Resources

# Resources - Wellmark Applications

Your 2025 Health Plan	Your 2025 Retiree Health Care Options			
	Iowa Choice	National Choice	Program F	Program N
Iowa Choice	No action	New application	New application	New application
National Choice	New application	No action	New application	New application
Program F	New application	New application	No action	New application
Program N	New application	New application	New application	No action

**Important Note: If you are not making any changes you do not need to do anything. Your current choices will roll over to 2025.**

# Resources - Group MedicareBlue Rx

Your 2025 Health Plan	Your 2025 Retiree Health Care Options			
	Iowa Choice	National Choice	Program F	Program N
Iowa Choice	No action	No action	New application	New application
National Choice	No action	No action	New application	New application
Program F	New application	New application	No action	No action
Program N	New application	New application	No action	No action

**Important Note: If you are not making any changes you do not need to do anything. Your current choices will roll over to 2025.**

# Resources - Applications

- DAS 2025 Retiree Open Enrollment webpage at:  
<https://das.iowa.gov/retiree-open-enrollment>
- Email [stateretirees@iowa.gov](mailto:stateretirees@iowa.gov)
- State of Iowa Retiree Benefits – 866-895-2464
- Wellmark Customer Service – 800-622-0043

**If you are not making any changes you do not need to do anything. Your current choices will roll over to 2025.**

# Resources - Contacts

## Additional Questions?

- **Wellmark, Blue Cross Blue Shield of Iowa – Customer Service:**  
800-622-0043
- **Senior Health Insurance Information Program (SHIIP)**  
For assistance, call 800-351-4664, email [shiip@iid.iowa.gov](mailto:shiip@iid.iowa.gov),  
or visit the website at [www.shiip.iowa.gov](http://www.shiip.iowa.gov).





# Resources - More Contacts

- **Department of Administrative Services – Human Resources Enterprise**  
[stateretirees@iowa.gov](mailto:stateretirees@iowa.gov) 866-895-2464
- **MedicareBlue Rx – Customer Service**  
877-838-3827

# Where to send applications

Retirees send application to:

**Mail:** Iowa Dept. of Administrative Services  
Human Resources Enterprise  
Hoover Bldg. - Level A  
1305 E Walnut Street  
Des Moines, IA 50319

**Email:** [stateretirees@iowa.gov](mailto:stateretirees@iowa.gov) or  
[susan.piel@iowa.gov](mailto:susan.piel@iowa.gov)

**Fax:** 515-242-6450

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