



FREEDOM TO FLOURISH



Department of
Administrative Services

Retiree Open Enrollment for 2027 Benefits

October 15 – December 7, 2026

Open Enrollment for 2027

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, 2026
- Benefit elections are effective January 1, 2027

Important Note: If you are not making any changes, you do not need to do anything. Your current choices will roll over to 2027.

What we will cover

- Things to Remember
- 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 2027**, 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.**

Benefit Options

Retiree Options

- Health Insurance
- Group MedicareBlue Rx for Iowa
- Dental Insurance
- *NEW* Vision 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 Group 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.
- 2027 out of pocket costs will be \$2400 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.

Vision Insurance

You should have received

- Letter
- Application
- Automatic payment form
- Summary of benefits

If you haven't received the packet email stateretirees@das.iowa.gov and request a vision packet

Vision Insurance

To enroll you must fill out the application.

Automatic payments are not required

Summary of benefits was included in the packet but can also be found on the website

Vision Insurance Plans

Single

Retiree and Spouse

Retiree and Children

Family

Vision Insurance Applications

Mailed:

Iowa Department of Administrative Services
Human Resources Enterprise – ATTN: Retiree Services
1305 E Walnut St.
Des Moines, IA 50319

Emailed: stateretirees@das.iowa.gov

Faxed: 515.242.6450

Vision Insurance

Vision benefits through DeltaVision include:

Benefits for contact lenses and Fit & Follow-Up exams

Coverage accepted at 140,000+ providers

In-network material benefits and exams at certain Walmart
Vision Centers

Prescription Coverage on State of Iowa Plans

Prescriptions. Things to consider

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

Quantity Limits (QL)

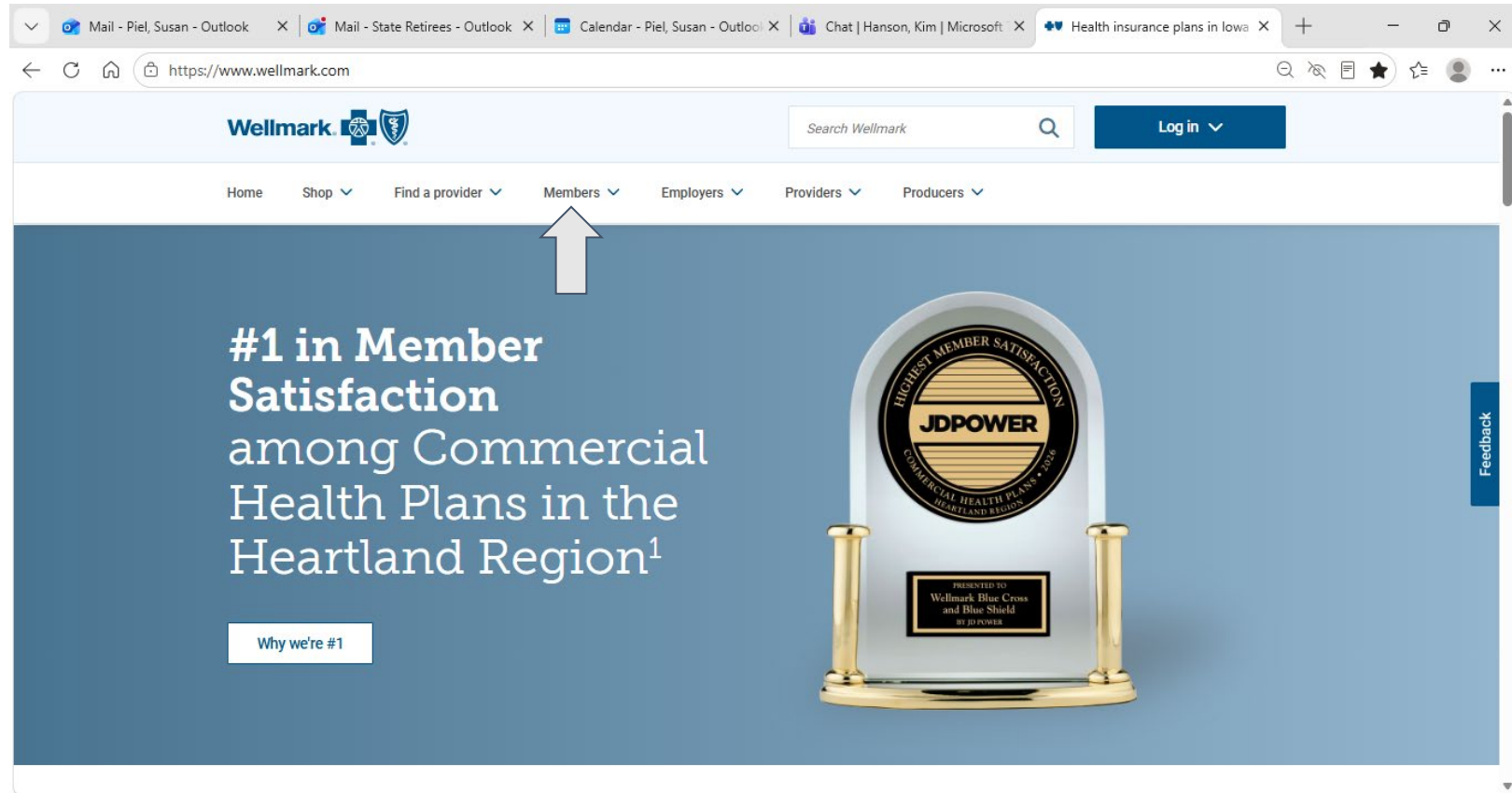
- A quantity limit is the highest amount of a prescription drug that can be given to you by your pharmacy in a period of time. For example, you might be prescribed a drug that requires you take 2 tablets a day, or 60 tablets per month.

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

- www.wellmark.com
- Members



Iowa Choice and National Choice

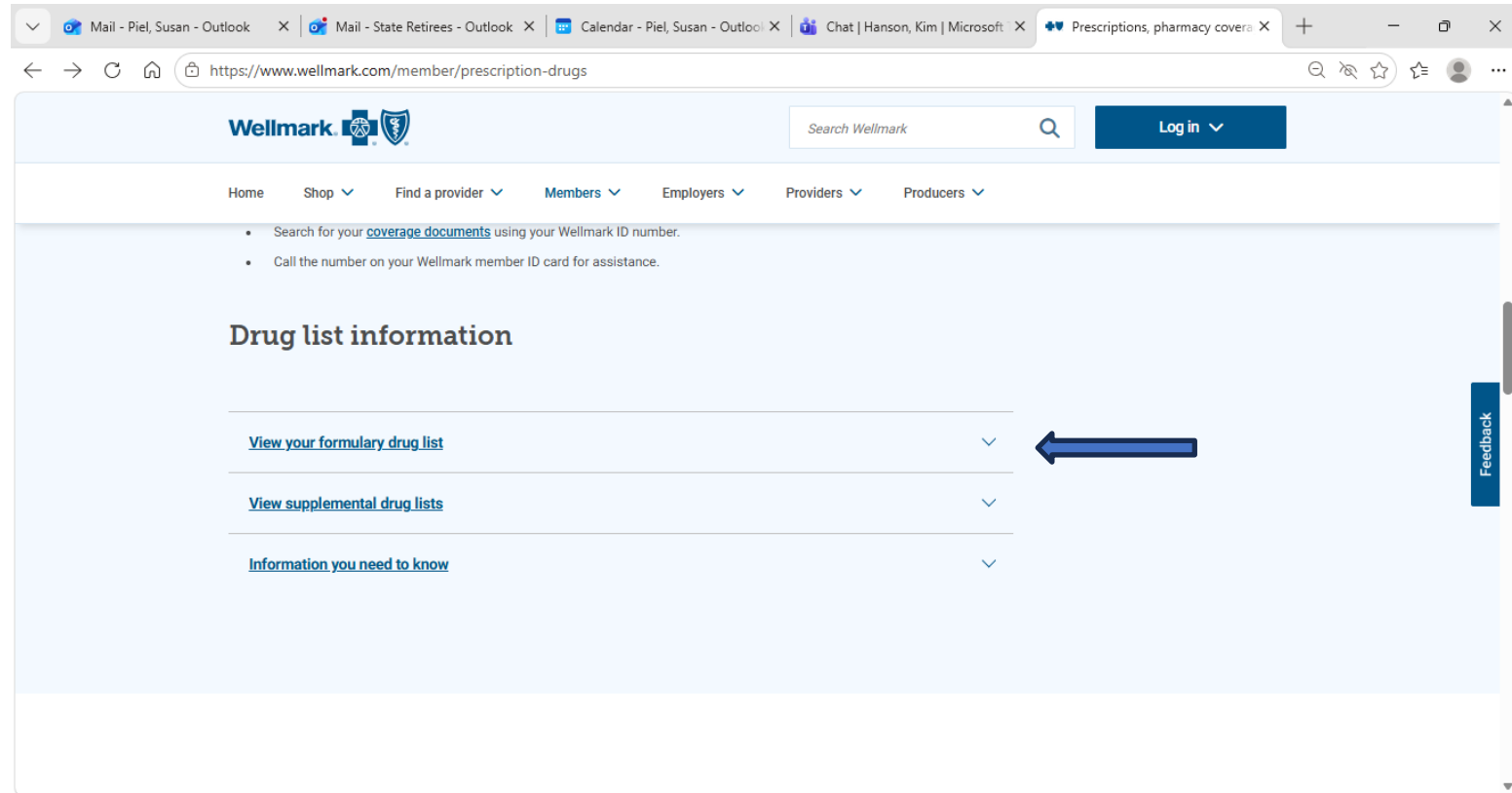
- www.wellmark.com

The screenshot shows a web browser window with the URL <https://www.wellmark.com>. The page features the Wellmark logo and a search bar. The navigation menu includes links for Home, Shop, Find a provider, Members (highlighted with a blue arrow), Employers, Providers, and Producers. The 'Members' section is divided into two columns: 'Members' and 'Medicare Advantage members'. The 'Members' column lists links for Drug lists and pharmacy, Coverage and benefits, Forms, Pay your premium online, ID card, myWellmark benefits, Health insurance basics, and Member blog. The 'Medicare Advantage members' column lists links for Forms and resources, Drug policies and programs, Contact us, and Benefits. A blue arrow points to the 'Drug lists and pharmacy' link. On the right side, there is a 'How can we help?' section with links for Contact us, Go mobile and download our app, and Explore Blue by Wellmark. A vertical 'Feedback' button is located on the far right.

Iowa Choice and National Choice

Prescription Drug Lists

Blue Rx Value Plus



Iowa Choice and National Choice

Prescription Drug Lists

Blue Rx Value Plus

The screenshot shows a web browser window with the URL <https://www.wellmark.com/member/prescription-drugs>. The page features the Wellmark logo and a navigation menu with links: Home, Shop, Find a provider, Members, Employers, Providers, and Producers. A search bar and a 'Log in' button are also present. The main content area is titled 'Drug list information' and includes a section for 'View your formulary drug list'. This section contains a list of five formularies: Blue Rx Complete, Blue Rx Essentials, Blue Rx Preferred, Blue Rx Value, and Blue Rx Value Plus. A large arrow points to the 'Blue Rx Value Plus' link. Below the list, there is a note about changes effective January 1, 2026. At the bottom, there are links for 'View supplemental drug lists' and 'Information you need to know'.

Wellmark

Search Wellmark

Log in

Home Shop Find a provider Members Employers Providers Producers

- Search for your [coverage documents](#) using your Wellmark ID number.
- Call the number on your Wellmark member ID card for assistance.

Drug list information

[View your formulary drug list](#)

- [Blue Rx CompleteSM](#)
- [Blue Rx EssentialsSM](#)
- [Blue Rx PreferredSM](#)
- [Blue Rx ValueSM](#)
- [Blue Rx Value PlusSM](#)

[Drug list \(formulary\) changes effective January 1, 2026](#)

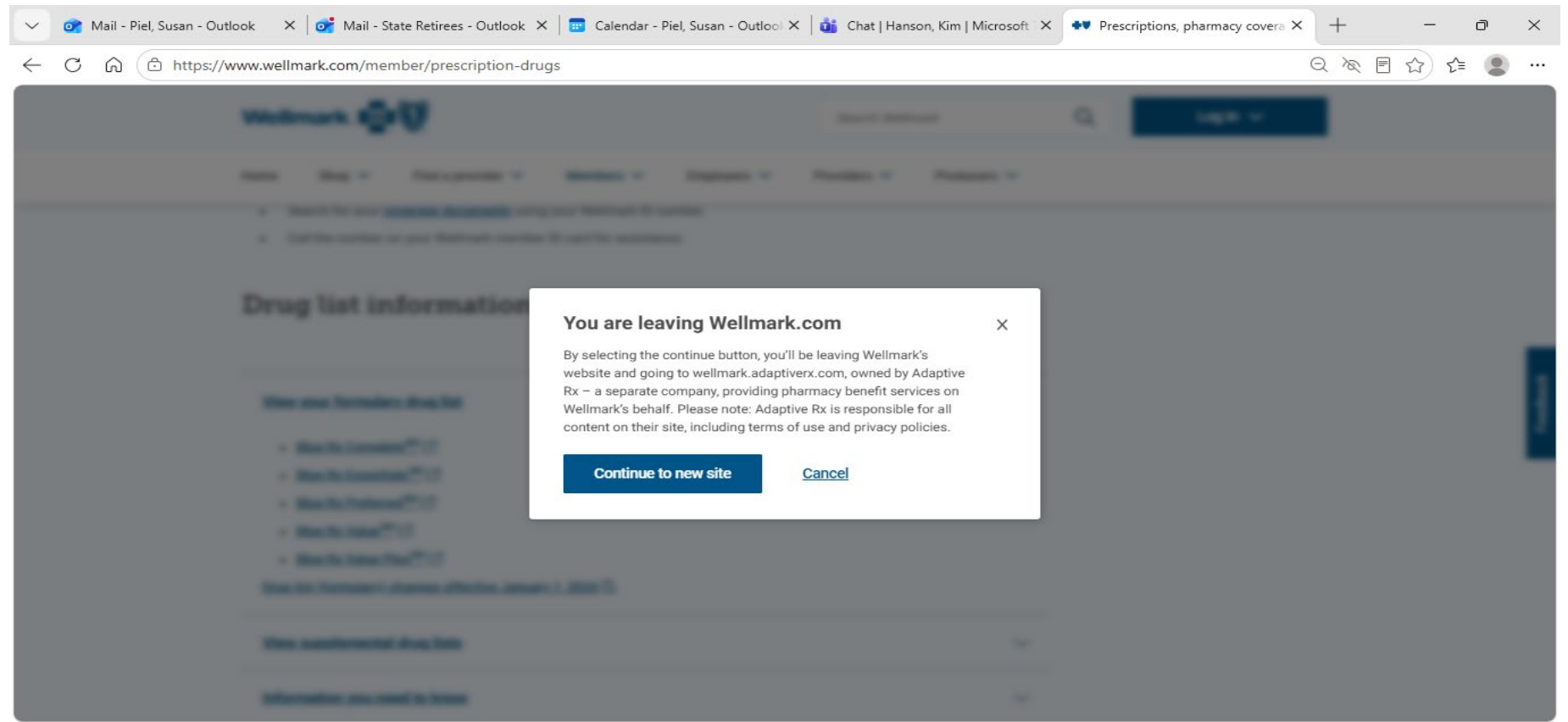
[View supplemental drug lists](#)

[Information you need to know](#)

Feedback

Iowa Choice and National Choice

Continue To New Site



Iowa Choice and National Choice

Blue Rx Value Plus Formulary



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 PlusSM

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

IOWATM
Department of
Administrative Services

Iowa Choice and National Choice

Blue Rx Value Plus Formulary

The screenshot shows a web browser window with the URL `wellmark.adaptiverx.com/webSearch/index?key=8F02B26A288102C27BAC82D14C006C6FC54D480F80409B682A96D6A826A242AA`. The page features a left sidebar with a list of drug categories: ANALEPTICS, ANOREXIANT COMBINATIONS, ANOREXIANTS NON-AMPHETAMINE, ANTI-OBESITY - GIP & GLP-1 RECEPTOR AGONISTS, and ANTI-OBESITY - GLP-1 RECEPTOR AGONISTS. A large arrow points from this sidebar to the main content area. The main content area includes links for [Printable Formulary](#) and [Prior Authorization](#), followed by a section titled **How to Search For Drugs** with three bullet points: using the alphabetical list, typing part of the generic/brand names, and selecting the therapeutic class. Another arrow points from the sidebar to this section. Below is the **How to Request an Exception** section, which explains the process for requesting exceptions and lists three types: coverage not on formulary, waiving restrictions, and higher levels of coverage. A third arrow points from the sidebar to this section. The **Common Drug Exclusions** section follows, listing exclusions such as OTC drugs, cosmetic products, experimental drugs, lost/stolen drugs, and non-FDA approved drugs. At the bottom, there is a **Notice of Nondiscrimination** with links to various languages including Spanish, Chinese, Vietnamese, Croatian, German, Arabic, Korean, Hindi, French, Pennsylvania Dutch, Yiddish, Tagalog, Urdu, Russian, Nepali, Thai, Nasarare, Afaan Oromo, Ukrainian, and Dine. A 'Legend' button is visible in the bottom right corner of the page content.

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

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[Printable Formulary](#)

[Prior Authorization](#)

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- Use the alphabetical list to search by the first letter of your medication.
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How to Request an Exception

Legend

Cookie Settings Last Updated: Sep 2, 2025

Iowa Choice and National Choice

Blue Rx Value Plus Formulary

Prescriptions, pharmacy coverage | Reflex Formulary Drug Search

wellmarkadaptiverx.com/webSearch/index?key=BF02B26A288102C27BAC82D14C006C6FC54D480F80409B682A96D6A826A242AA

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

Wellmark

Drug Name Search

Enter a drug name to begin
NOVO

NOVOEIGHT
NOVOFINE AUTOCOVER PEN NEEDLE
NOVOFINE PEN NEEDLE
NOVOFINE PLUS PEN NEEDLE
NOVOLIN 70/30
NOVOLIN 70/30 FLEXPEN
NOVOLIN 70/30 FLEXPEN RELION
NOVOLIN 70/30 RELION
NOVOLIN N
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ANTI-OBESITY - GLP-1 RECEPTOR AGONISTS

OREXIAN
GONISTS
PTAKE INHIBITOR
GIANIS

Drug Details

START OVER

ANTIDIABETICS > HUMAN INSULIN

DRUG NAME	TIER	EDITS	ALTERNATIVES	DETAILS
NOVOLOG 70/30 FLEXPEN RELION (70-30) 100 UNIT/ML SUSP PEN	T2	PV Preventive	Find Alternative Drugs	Q
NOVOLOG 100 UNIT/ML SOLUTION	T2	PV Preventive	Find Alternative Drugs	Q
NOVOLOG FLEXPEN 100 UNIT/ML SOLN PEN	T2	PV Preventive	Find Alternative Drugs	Q
NOVOLOG FLEXPEN RELION 100 UNIT/ML SOLN PEN	T2	PV Preventive	Find Alternative Drugs	Q
NOVOLOG MIX 70/30 (70-30) 100 UNIT/ML SUSPENSION	T2	PV Preventive	Find Alternative Drugs	Q
NOVOLOG MIX 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN	T2	PV Preventive	Find Alternative Drugs	Q
NOVOLOG MIX 70/30 RELION (70-30) 100 UNIT/ML SUSPENSION	T2	PV Preventive	Find Alternative Drugs	Q
NOVOLOG PENFILL 100 UNIT/ML SOLN CART	T2	PV Preventive	Find Alternative Drugs	Q
NOVOLOG RELION 100 UNIT/ML SOLUTION	T2	PV Preventive	Find Alternative Drugs	Q

Legend

Privacy | Terms

Cookie Settings | Last Updated: Sep 2, 2025

Iowa Choice and National Choice Blue Rx Value Plus Formulary

Prescriptions, pharmacy coverage | RxFormulary Drug Search |

wellmark.adaptiverx.com/webSearch/index?key=8F02B26A288102C278AC82D14C006C6FC54D480F80409B682A96D6A826A242AA

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

Wellmark

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NOVOLOG

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Drug Details

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NOVOLOG FLEXPEN RELION 100 UNIT/ML SOLN PEN	T2	PV Preventive	Find Alternative Drugs	Q
NOVOLOG MIX 70/30 (70-30) 100 UNIT/ML SUSPENSION	T2	PV Preventive	Find Alternative Drugs	Q
NOVOLOG MIX 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN	T2	PV Preventive	Legend	Q

TIERING

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

EDITS

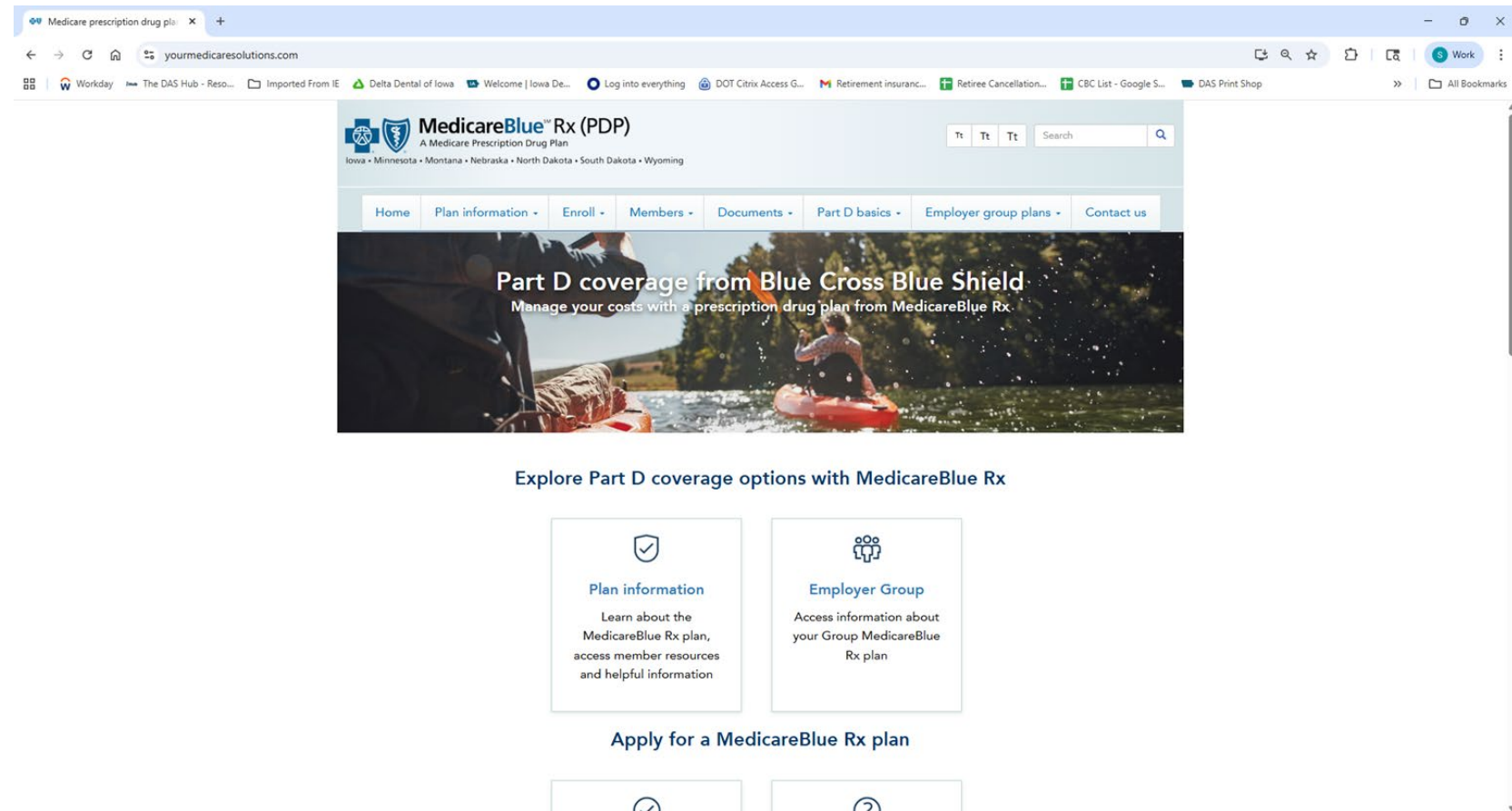
- Q - Quantity Limit
- AL - Age Limit
- S - Specialty Drug
- QLV - Quantity Limit (Varies)
- PA - Prior Authorization
- PA-V - Prior Authorization Varies
- PV - Preventive
- PA - Prior Authorization
- SBC - Specialty Biosimilars and Specialty Generics
- MN-PA - Medically Necessary Prior Authorization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

Brand Names generic names

Cookie Settings | Last Updated: Sep 2, 2025

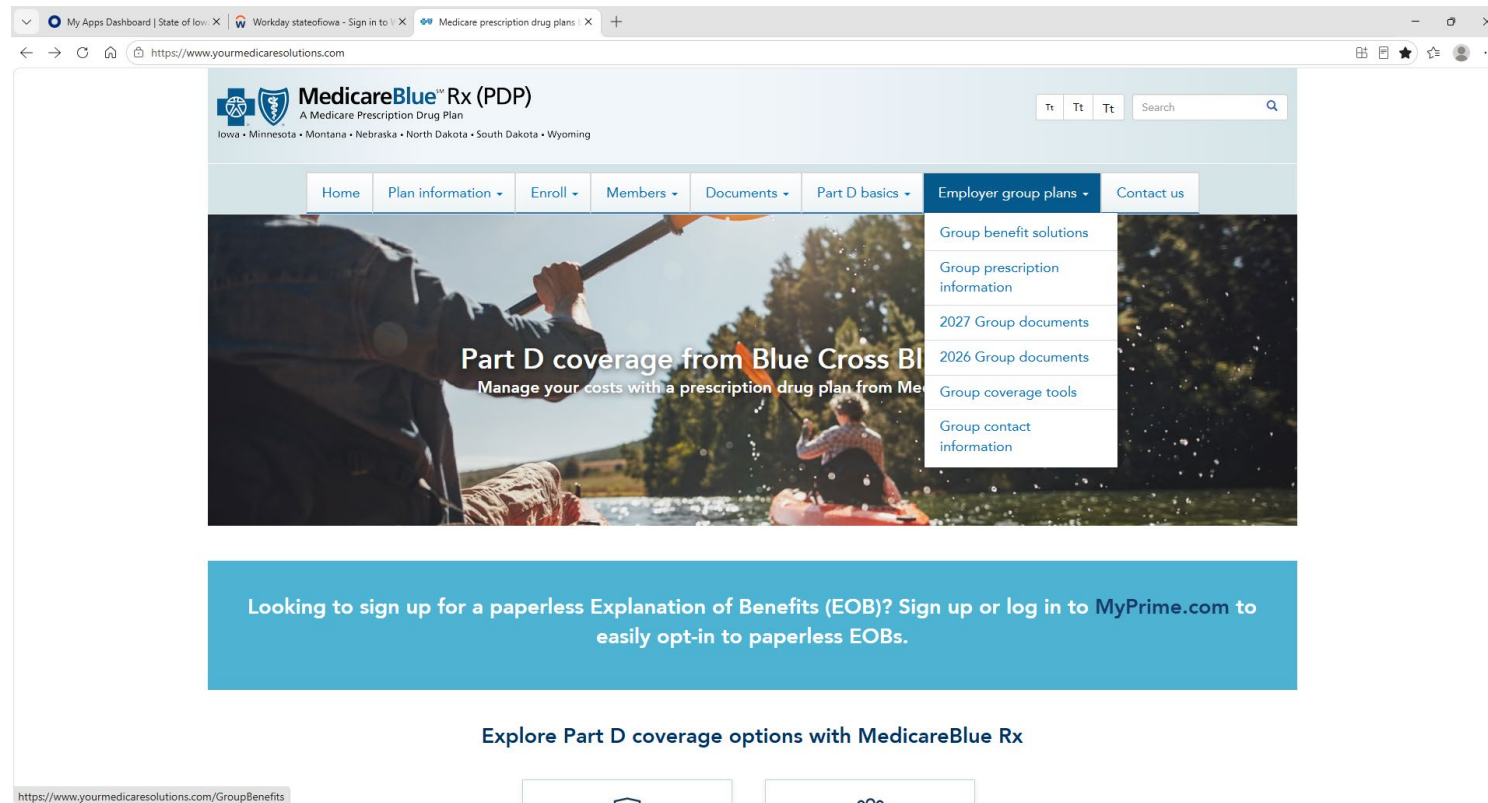
Group MedicareBlue Rx for Iowa

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



Group MedicareBlue Rx for Iowa

- Employer group plans
- 2027 Group documents



Group MedicareBlue Rx for Iowa

2027 Group documents

The screenshot shows a web browser window with the URL <https://www.yourmedicareolutions.com/EmployerGroupPlans/EmployerGroupDocs2027>. The page title is "2027 Group Documents".

Visit our [Member Document Tool](#) to access your plan specific documents

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

Pre-enrollment documents

- [Pre-enrollment checklist](#)
- [Important Plan Document Flyer](#)

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

Formulary (drug list)

- [4-Tier Formulary \(Updated 10/01/2026\)](#)
- [5-Tier Formulary \(Updated 10/01/2026\)](#)

Pharmacy directory

Use the [plan pharmacy locator tool](#) to find a pharmacy near you.

Additional pharmacies can be found in the listings below.

- [Iowa \(Updated 10/01/2026\)](#)
- [Minnesota \(Updated 10/01/2026\)](#)
- [Nebraska \(Updated 10/01/2026\)](#)
- [North Dakota \(Updated 10/01/2026\)](#)
- [South Dakota \(Updated 10/01/2026\)](#)

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](#)

Four arrows point to the following links: 5-Tier Formulary, Iowa (under Pharmacy directory), Group plans Electronic funds transfer (EFT) form or sign up for EFT online, and Learn how to use the claim form.

Group MedicareBlue Rx for Iowa

2027 Group documents

My Apps Dashboard | State of Iowa | Workday stateoflowa - Sign in to | Medicare prescription drug plans

https://www.yourmedicareolutions.com/EmployerGroupPlans/EmployerGroupDocs2027

Drug claim forms

[Learn how to use the claim form](#)

[Part D prescription drug claim form](#)

Coverage determinations

Note: Coverage determinations for 2027 can be submitted starting Nov. 1, 2026.

[Online coverage decision form](#)

[Printable coverage decision form](#)

Coverage redeterminations

Note: Coverage determinations for 2027 can be submitted starting Nov. 1, 2026.

[Online redetermination form](#)

[Printable redetermination form](#)

Prior authorization criteria information

[4-tier prior authorization criteria](#) (Updated 10/01/2026)

[5-tier prior authorization criteria](#) (Updated 10/01/2026)

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 2027](#)

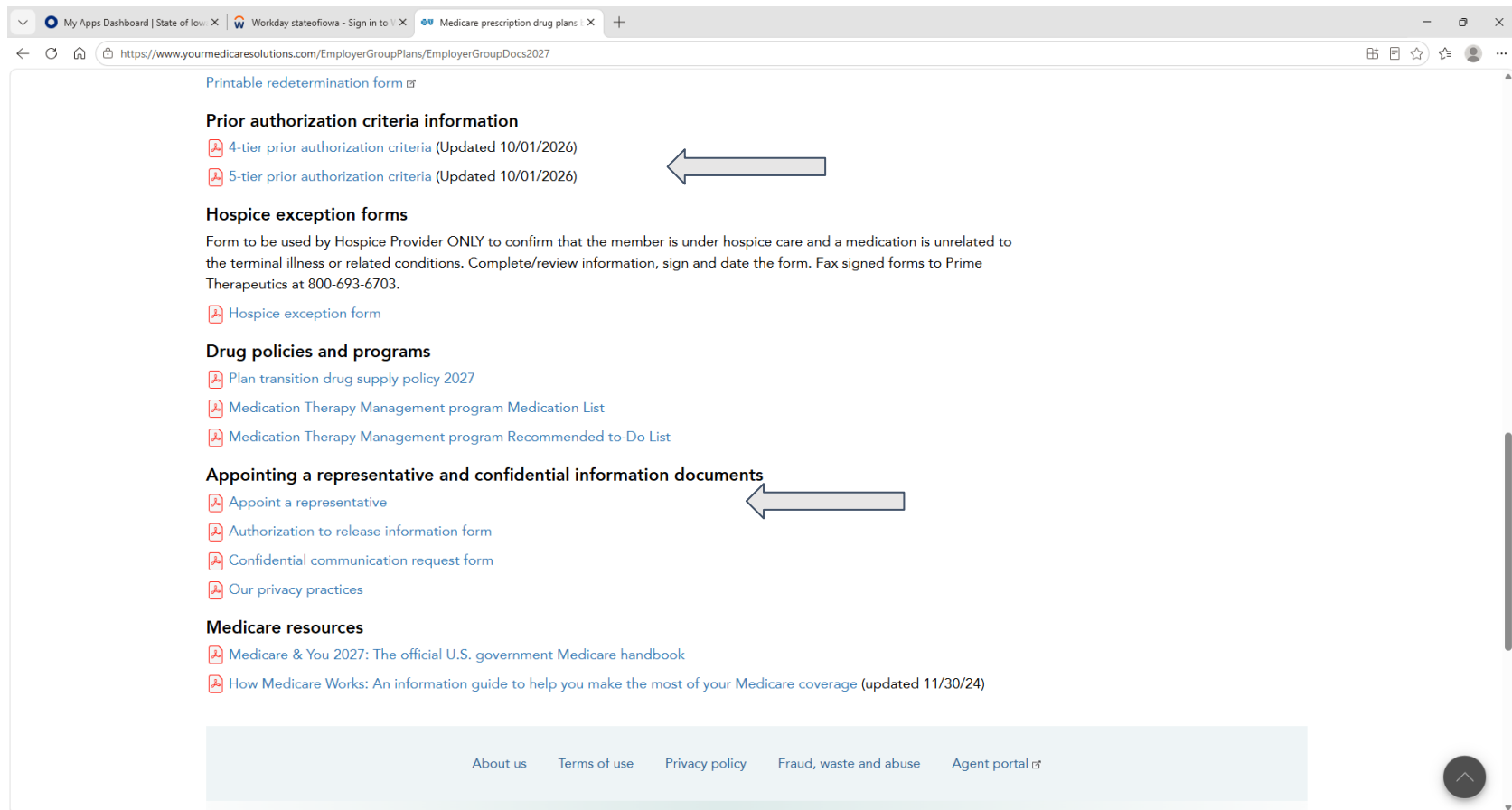
[Medication Therapy Management program Medication List](#)

[Medication Therapy Management program Recommended to-Do List](#)

Appointing a representative and confidential information documents

Group MedicareBlue Rx for Iowa

2027 Group documents



The screenshot shows a web browser window with the URL <https://www.yourmedicareolutions.com/EmployerGroupPlans/EmployerGroupDocs2027>. The page is titled "Printable redetermination form" and contains several sections of documents. Two arrows point to specific links: one to "4-tier prior authorization criteria (Updated 10/01/2026)" and another to "Appoint a representative".

Prior authorization criteria information

- [4-tier prior authorization criteria \(Updated 10/01/2026\)](#)
- [5-tier prior authorization criteria \(Updated 10/01/2026\)](#)

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- [Plan transition drug supply policy 2027](#)
- [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 2027: The official U.S. government Medicare handbook](#)
- [How Medicare Works: An information guide to help you make the most of your Medicare coverage \(updated 11/30/24\)](#)

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

Group MedicareBlue Rx for Iowa

2027 Group documents

Medicare prescription drug plan x +

yourmedicare.com/EmployerGroupPlans/EmployerGroupDocs2026

HOME / EMPLOYER GROUP PLANS / 2026 EMPLOYER GROUP DOCUMENTS

2026 Group Documents

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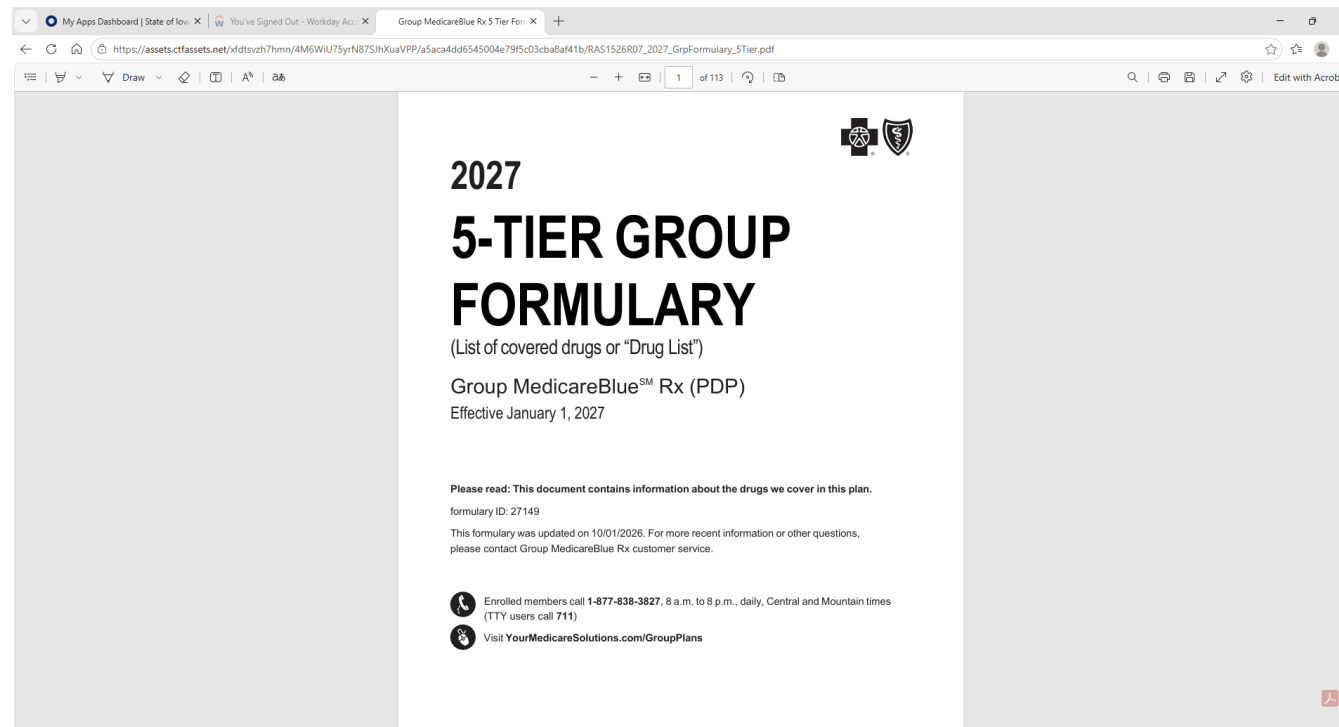
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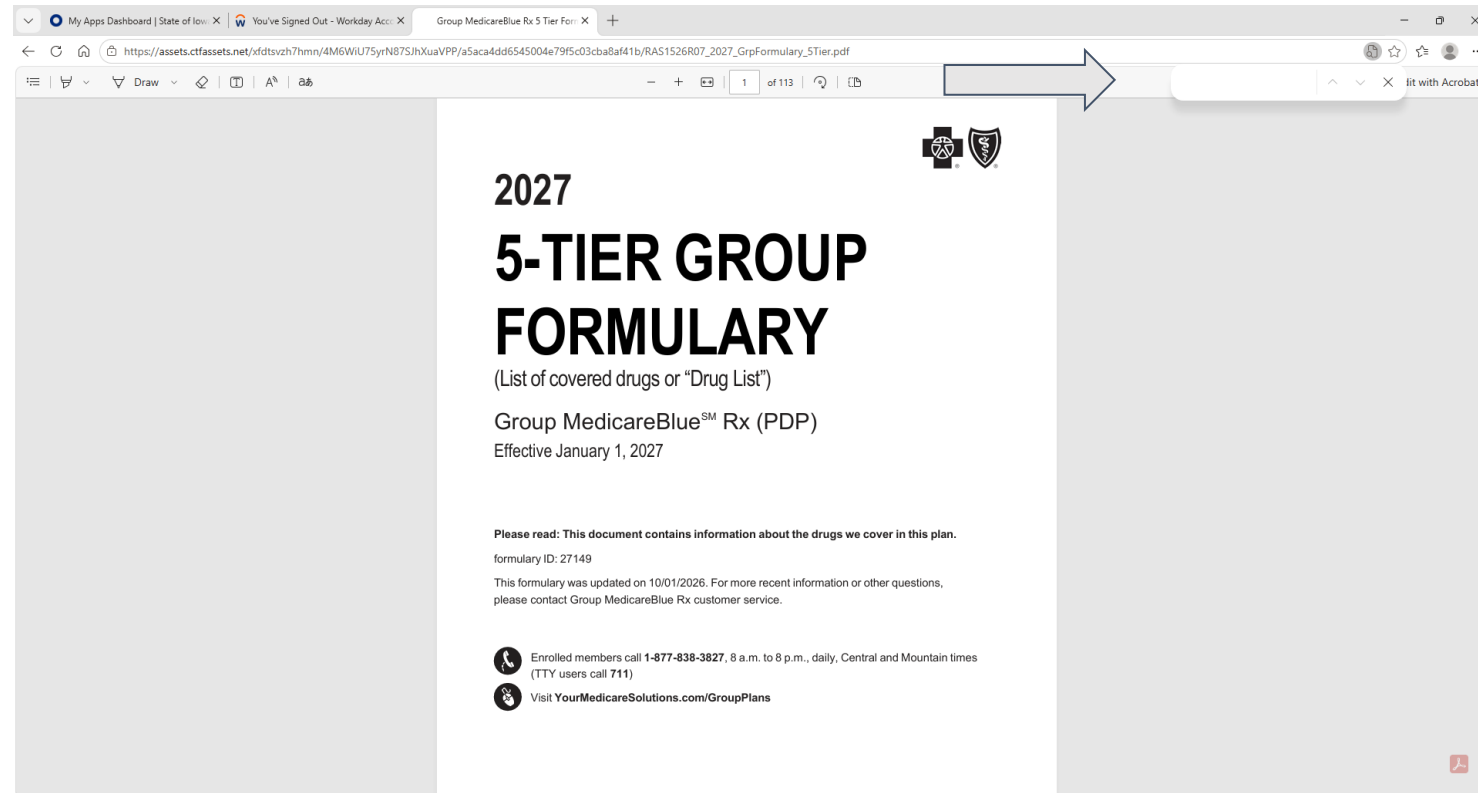
Group MedicareBlue Rx for Iowa

2027 Five-Tier Group Formulary



Group MedicareBlue Rx for Iowa

2027 Five-Tier Group Formulary



Group MedicareBlue Rx for Iowa

2027 Five-Tier Group Formulary

2027

Drug Name	Drug Tier	Requirements/Limits
DIACOMIT - stiripentol packet 500 mg*	5	PA, QL (3 boxes/30 days)
diazepam rectal gel delivery system 2.5 mg, 10 mg, 20 mg	4	QL (5 twin pack(s)/30 days)
DILANTIN - phenytoin sodium extended cap 30 mg	4	
divalproex sodium cap delayed release sprinkle 125 mg	2	
divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg	2	
divalproex sodium tab er 24 hr 250 mg, 500 mg	2	
EPIDIOLEX - cannabidiol soln 100 mg/ml*	5	PA
epitol - carbamazepine tab 200 mg	2	
eslicarbazepine acetate tab 200 mg, 400 mg	4	QL (30 tablets/30 days)
eslicarbazepine acetate tab 600 mg, 800 mg	4	QL (60 tablets/30 days)
ethosuximide cap 250 mg	3	
ethosuximide soln 250 mg/5ml	4	
felbamate susp 600 mg/5ml	4	
felbamate tab 400 mg, 600 mg	4	
FINTEPLA - fenfluramine hcl oral soln 2.2 mg/ml	5	PA, QL (360 mls/30 days)
gabapentin cap 100 mg	2	QL (1080 capsules/30 days)
gabapentin cap 300 mg	2	QL (360 capsules/30 days)
gabapentin cap 400 mg	2	QL (270 capsules/30 days)
gabapentin oral soln 250 mg/5ml	3	QL (2160 mls/30 days)
gabapentin tab 600 mg	2	QL (180 tablets/30 days)
gabapentin tab 800 mg	2	QL (135 tablets/30 days)
lacosamide oral solution 10 mg/ml	4	QL (1200 mls/30 days)
lacosamide tab 50 mg	4	QL (240 tablets/30 days)
lacosamide tab 100 mg	4	QL (120 tablets/30 days)
lacosamide tab 150 mg, 200 mg	4	QL (60 tablets/30 days)
lamotrigine tab chewable dispersible 5 mg, 25 mg	3	
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 300 mg	4	
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg	2	
levetiracetam oral soln 100 mg/ml	2	
levetiracetam tab er 24hr 500 mg, 750 mg	3	
levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg	2	
methsuximide cap 300 mg	4	
NAYZILAM - midazolam nasal spray soln 5 mg/0.1 ml	4	PA, QL (10 bottles/30 days)
oxcarbazepine susp 300 mg/5ml (60 mg/ml)	4	
oxcarbazepine tab 150 mg, 300 mg, 600 mg	3	
nerampanel susp 0.5 mg/ml	4	QL (2 bottles/28 days)

Group MedicareBlue Rx for Iowa

2027 Five-Tier Group Formulary

My Apps Dashboard State of Iowa You've Signed Out - Workday Account Group MedicareBlue Rx 5 Tier Formulary		
https://assets.ctfassets.net/xfdtsvzh7hmn/4M6WU75yrN875JhXuaVPP/a5aca4dd6545004e79f5c03cba8af41b/RAS1526R07_2027_GrpFormulary_5Tier.pdf		
93 of 113		
Gabapentin 8/12		
lit with Acrobat		
fluocinonide acetate cream 0.01%, 0.025%.....	53	
fluocinonide acetate oil 0.01% (body oil), 0.01% (scalp oil).....	53	
fluocinonide acetate oint 0.025%.....	53	
fluocinonide acetate soln 0.01%.....	53	
fluocinonide cream 0.05%.....	53	
fluocinonide emulsified base cream 0.05%.....	53	
fluocinonide gel 0.05%.....	53	
fluocinonide oint 0.05%.....	54	
fluocinonide soln 0.05%.....	54	
fluorometholone ophth susp 0.1%.....	77	
FLUOROURACIL.....	54	
fluorouracil cream 5%.....	54	
fluorouracil soln 5%.....	54	
FLUOXETINE DR.....	19	
fluoxetine hcl cap 10 mg.....	19	
fluoxetine hcl cap 20 mg.....	19	
fluoxetine hcl cap 40 mg.....	19	
fluoxetine hcl solution 20 mg/5ml.....	20	
fluphenazine decanoate inj 25 mg/ml.....	33	
FLUPHENAZINE HCL.....	33	
fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg.....	33	
FLUPHENAZINE HYDROCHLORIDE.....	33	
flurbiprofen sodium ophth soln 0.03%.....	77	
FLUTICASON FURATE/VILANTEROL.....	79	
FLUTICASON PROPIONATE/.....	79	
SALMETEROL.....	79	
fluticasone propionate cream 0.05%.....	54	
fluticasone propionate nasal susp 50 mcg/act.....	79	
fluticasone propionate oint 0.005%.....	54	
fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act.....	79	
fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent).....	46	
fluvoxamine maleate tab 100 mg.....	20	
fluvoxamine maleate tab 25 mg, 50 mg.....	20	
fosamprenavir calcium tab 700 mg (base equiv).....	36	
fosfomycin tromethamine powd pack 3 gm (base equivalent).....	13	
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg.....	46	
fosinopril sodium tab 10 mg, 20 mg, 40 mg.....	46	
FOTIVDA.....	25	
FULPHILA.....	44	
furosemide inj 10 mg/ml.....	46	
furosemide oral soln 10 mg/ml.....	47	
furosemide oral soln 8 mg/ml.....	47	
furosemide tab 20 mg, 40 mg, 80 mg.....	47	
FYLNETRA.....	44	
G.....		
gabapentin cap 100 mg.....	16	
gabapentin cap 300 mg.....	16	
gabapentin cap 400 mg.....	16	
gabapentin oral soln 250 mg/5ml.....	16	
gabapentin tab 600 mg.....	16	
gabapentin tab 800 mg.....	16	
GALANTAMINE HYDROBROMIDE.....	18	
galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg.....	18	
galantamine hydrobromide tab 4 mg, 8 mg, 12 mg.....	18	
galbraia - norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg.....	62	
gallifrey - norethindrone acetate tab 5 mg.....	62	
GAMMAGARD LIQUID.....	71	
GAMMAGARD LIQUID ERC.....	71	
GAMUNEK-C.....	71	
GARDASIL 9.....	71	
GAUZE PADS 2" X 2".....	40	
gavilyte-c - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm.....	57	
gavilyte-g - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm.....	57	
gavilyte-n/flavor pack - peg 3350-kcl-sod bicarb-nacl for soln 420 gm.....	57	
GAVRETO.....	25	
gefirinib tab 250 mg.....	25	
gentamicin sulfate cream 0.1%.....	47	
gentamicin sulfate inj 40 mg/ml.....	13	
gentamicin sulfate oint 0.1%.....	54	
gentamicin sulfate ophth soln 0.3%.....	77	
GENVOYA.....	36	

Resources

Resources - Wellmark Applications

Your 2026 Health Plan	Your 2027 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 2027.

Resources - Group MedicareBlue Rx

Your 2026 Health Plan	Your 2027 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 2027.

Resources - Applications

- DAS 2027 Retiree Open Enrollment webpage at:
<https://das.iowa.gov/retiree-open-enrollment>
- Email stateretirees@das.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 2027.

Resources - Contacts

- **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, or visit the website at www.shiip.iowa.gov.

Resources - More Contacts

- **Department of Administrative Services – Human Resources Enterprise**
stateretirees@das.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@das.iowa.gov or
susan.piel@das.iowa.gov

Fax: 515-242-6450



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