

**What do I do if I have misplaced my ID card or need additional ID cards?**

If you have misplaced your ID card or need additional ID cards, please contact Pharmacy Benefit Dimensions Member Services Department at (716) 635-7880 or 1-888-878-9172, Monday through Friday between the hours of 8 a.m. and 8 p.m. TTY/TDD users may call (716) 631-3108 or 1-800-432-1110.

**Am I able to get any prescription medication that I want as long as I have a prescription?**

Pharmacy Benefit Dimensions has developed a list of covered prescription drugs (prescription drug formulary) to ensure that you and your family receive the best pharmaceutical care and service to meet your needs. Prescriptions must be filled in accordance with the prescription drug formulary. To obtain a copy of the formulary, please visit our website at [www.pbdrx.com](http://www.pbdrx.com), or contact Member Services to have a copy sent to you.

**Who determines what drugs are included on the formulary?**

Independent Health's Pharmacy and Therapeutics Committee which is comprised of practicing Providers and practicing pharmacists meets quarterly to develop and maintain the most effective formulary for Pharmacy Benefit Dimensions.

**Why use a formulary?**

Use of a drug formulary ensures that health care dollars are used wisely. The cost of each drug on the formulary is balanced with its effectiveness, which means that drugs are not included on the formulary just because they are inexpensive – effectiveness is more important than the price of the drug. If a drug is not capable of achieving the desired effect, then the price of treating an illness or condition increases because other therapies must be used. Likewise, there are expensive medications that have not been proven to be more effective than less costly alternatives. Plan participants benefit when their Providers use the formulary because all drugs included are selected due to their effectiveness and safety.

**What if I am taking a prescription medication now and it is not listed on formulary?**

Because there are thousands of drugs available in the market, not all drugs can be listed on the formulary. Most drugs that are not listed may be obtained, and you will be responsible for your copayment amount based on the tier the drug is in on the formulary. Some drugs require that your Provider obtain prior authorization before the prescription is filled. If your current medications are not listed on the formulary, please contact Member Services to see if your medications can be obtained.

**How can I be sure that my Provider prescribes drugs on the formulary that will be the least costly to me but be consistent with the Providers proposed therapy?**

If your Provider is recommending a prescription drug as part of your treatment, please ask them to review the Pharmacy Benefit Dimensions formulary and prescribe a medication that will be the best clinically and the most cost effective for you.

**What should I do if I get to the pharmacy and my claim is rejected?**

Please have the pharmacist contact our Pharmacy Help Desk at 1-800-993-9898. Our Pharmacy Help Desk is open Monday through Sunday from 7 a.m. to 11 p.m. (EST). Most often these problems can be resolved while you are at the pharmacy. If the problem is not resolved at the pharmacy, please call Member Services.

*Have questions about your benefits? Contact Pharmacy Benefit Dimensions Member Services Department at (716) 635-7880 or 1-888-878-9172, Monday through Friday between the hours of 8 a.m. and 8 p.m. (EST). TTY/TDD users may call (716) 631-3108 or 1-800-432-1110.*