



Out of Network Pharmacies

Network Health Insurance Corporation has arranged with in-network pharmacies to provide prescription drugs to plan members. Prescription benefits are only available at contracted, in-network pharmacies. Eligible beneficiaries must use in-network pharmacies to access their prescription drug benefit. The network of pharmacies extends nationally, so plan members can continue to get prescriptions filled outside of our service area. The types of pharmacies included in our network include retail, mail order, long-term care, I/T/U (Indian Health Service/Tribal/Urban Indian Health Program), and home infusion.

Covered drugs may be filled at an out-of-network pharmacy in limited circumstances when you cannot reasonably be expected to obtain covered Part D drugs at an in-network pharmacy. Such access and use of out-of-network pharmacies must not be routine. The following examples are exceptions under non-routine circumstances when we may cover Part D prescriptions filled at an out-of-network pharmacy:

- Members traveling outside of our service area who need a covered Part D drug and cannot reasonably access an in-network pharmacy.
- Members cannot obtain a covered Part D drug in a timely manner within our service area because there is no in-network pharmacy within a reasonable driving distance that provides 24-hour-a-day/7-day-per-week service.
- A member must fill a prescription in a timely manner and that particular drug is not regularly stocked at accessible in-network retail or mail-order pharmacies.
- A member received a covered Part D drug dispensed by an out-of-network institution-based pharmacy while they were a patient in an emergency department, provider-based clinic, outpatient surgery, or other outpatient setting.
- During any Federal disaster declaration or other public health emergency declaration in which you are evacuated or otherwise displaced from your place of residence and cannot reasonably be expected to obtain covered Part D drugs at an in-network pharmacy.

In these situations, **check first with Customer Service** to see if there is an in-network pharmacy nearby. If you must use an out-of-network pharmacy, you will pay the full cost (rather than your normal cost-share) when you fill your prescription. You can request reimbursement of our share of the cost.

You may submit a claim form along with your receipt for reimbursement, however you may pay more for the drug because the out-of-network pharmacy's price is higher than what an in-network pharmacy would have charged. Members may only request reimbursement on a prescription filled at an out-of-network pharmacy up to three times per calendar year.



To obtain additional network pharmacy information, please refer to your Evidence of Coverage, Chapter 5, Section 2. To locate a participating pharmacy or request a claim form, contact Customer Service at 1-800-316-3107, 24 hours a day/7 days a week. TTY users should call 1-800-899-2114, 24 hours a day/7 days a week. Or, you can visit our website at <http://www.NPPDrugPlans.com>.