





New Pharmaceutical Carrier EFFECTIVE July 1, 2022

- Enrollment is automatic with CVS Caremark on July 1, 2022

What to expect

June

- Welcome Kits and ID Cards mailed out June 9th to include guidance on how to prepare member prescriptions with the new provider.
- Employees to update new provider and member ID number(s) with pharmacy of choice.
- Notification to Members Include:
 - Steps to help understand available medication options
 - A list of member's current medications and available medication alternatives
 - Guidance to help members transition to their new CVS Specialty Pharmacy
 - Notification to members who will have a change in covered medications
 - PrudentRx-Copay assistance for specialty medications



- ❖ **Members are not required to use a CVS Pharmacy, may continue to use current pharmacy including Walgreens**
- **Specialty Medications-A prescription drug that is self administered, required special handling, monitoring and is usually high cost.**
- **Prudent Rx (Replaces SaveOn)**
 - **A program that reduces out of pocket costs to \$0 on select specialty medications on our plans designated specialty drug list.**
 - **Members action is required, you will need to apply for a copay card with the manufacturer of employee specialty medication.**
 - **Step 1: You are confirmed eligible with CVS and your member information is on file with Prudent RX**
 - **Step 2: Contact Prudent Rx at 1-800-578-4403 within 5 days of receiving the Prudent Rx letter to register**
Monday-Friday 8AM-8PM (EST)
- ❖ **If member fails to contact Prudent Rx, an advocate will reach out via phone call the member will be responsible for 30% of the cost of the specialty medication.**



CVS Specialty Pharmacy

❖ Your exclusive Specialty Pharmacy

- Assists members in managing specialty prescriptions and refills for specialty conditions such as cancer, rheumatoid arthritis, multiple sclerosis, etc. Complete drug list available <https://www.caremark.com/>
- Assistance with Prior Authorization's and delivery.
- Available for shipment overnight by mail on requested date or available for pick up at a in network pharmacy.



❖ **Grandfathered 90 Days:**

Those who obtained prescriptions that were on the Express Scripts formulary but are not on the CVS formulary employees will need to work with their doctor to obtain another therapeutic alternative and may need a new prior authorization after 90 days. More information can be found @ <https://www.caremark.com/> or call 1-877-744-5313.

*Exclusions may apply

❖ **Mail Order**

- Mail order prescriptions will be transferred to CVS Caremark Mail Service Pharmacy.
 - However, autofill requests will have to be re-elected.
 - <https://www.caremark.com/>
- Mail Order for the first time: A profile will need to be set up with CVS
- <https://www.caremark.com/>



IMPORTANT CONTACT INFORMATION

Customer Service Line 877-744-5313

Specialty RX 800-237-2767

Prudent RX Registration 800-578-4403

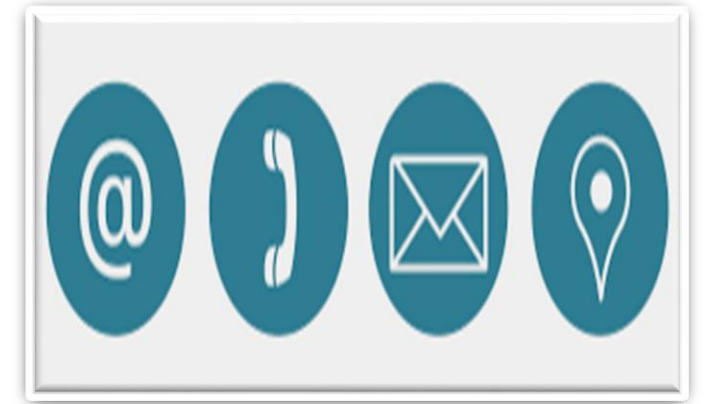
Help Center <https://www.caremark.com>

HR REMINDERS



Agency Contact Information

Update Changes to the Team



- Agency Number
- Agency Name
- New Member Name/Name of Member who needs to be removed
- E-Mail Address
- Mailing Address
- Physical Address
- Office Phone
- Cell Phone
- Fax

❖ GSDRMD.EBB@state.nm.us

Dual Coverage

Administrative Guide

Pages 9 & 10

EMPLOYEE ELIGIBILITY

Employees who are hired as classified, Governor-exempt, probationary, temporary, term or hourly, and scheduled to work a minimum of 20 hours/week and meet the prospective employers' waiting period, are eligible to elect coverage. Elected Officials of the State or Local Public Bodies (LPB) are considered eligible and not required to meet the 20 hours/week work schedule.

Temporary employees whose original term of employment was to be less than six months, but has later been determined to be longer than 6 months, may be eligible for coverage if they are scheduled to work at least 20 hours per week in their extended employment. Employees will be eligible for benefits, as long as the employee has met the required eligibility-waiting period upon the offer of extended employment (the two-pay period wait is not required for State employees).

Dual coverage is not allowed. If both an employee and their spouse/domestic partner are eligible employees, they cannot enroll each other as a spouse/domestic partner, nor can they both cover their children. If both eligible employees seek to enroll their spouse/domestic partner and/or dependents, the enrollment will be rejected, and forms returned for proper election.

- **Dual coverage is not allowed.** More than one employee participating in the Plan cannot cover an eligible dependent. If a dependent is also an employee of the State, the dependent cannot be covered under his or her own coverage and as a dependent under another state employee.

❖ Advise at new hire orientation. Also, stated in the FAQ's in the EBB New Hire Orientation.



Employees Contact Information

New Hire

[Biographical Details](#)

[Contact Information](#)

[Regional](#)

Phone Numbers

- Home 000/000-0000
- Business 000/000-0000

Phone Information				Personalize	Find	View All	First	1 of 1	Last
Phone Type	Telephone	Extension	Preferred						
Home			<input checked="" type="checkbox"/>						

Employees Contact Information

New Hire

Biographical Details

Contact Information

Regional

E-Mails

- Example@Domain.com

E-Mail:

- No extra spaces
- Include the @ symbol
- Accurate Spelling
- Accurate domain



Employees Contact Information

New Hire

Biographical Details

Contact Information

Regional

Address

- Address
 - Complete Address
 - Include County
 - County and City spelled accurately
 - Special characters should not be used (-, #, ~, etc.)
 - Should not exceed 30 characters
 - **Zip Codes should not contain spaces between the zip code and extension**
 - NO - 87532 1804
 - YES - 87532-1804
- https://www.mybenefitsnm.com/documents/SHARE_Introduction_to_Employee_Self-Service12.24.19.pdf



NMS Statewide Employee Search

NMS Statewide Employee Search

NMS Statewide Employee Search

Search Results [Find](#) [View All](#) First 1 of 2 Last

Empl ID
Empl Record 0

Effective Date 02/01/2013 Action
Effective Sequence 0 Reason
HR Status Pay Group/Sal Plan
Payroll Status Full/Part Time Full-Time
Salary Grade 005 Business Unit

Compensation

Comp Rate Code	Compensation Rate	Comp Percent	Change Percent	Compensation Frequency
1				

Contact Details

Primary

Name

Email

Phone

Secondary

Name

Email

Phone

[Save](#) [Return to Search](#) [Notify](#)



Thank You



Resources

- ❖ CVS

- ❖ <https://www.mybenefitsnm.com/BenefitsInformation.html>

- ❖ <https://www.caremark.com/>

- ❖ Update Agency Human Resource Contact Information

- ❖ GSDRMD.EBB@state.nm.us

- ❖ SHARE Introduction to Self Service to Update Employee Contact Information

- ❖ https://www.mybenefitsnm.com/documents/SHARE_Introduction_to_Employee_Self-Service12.24.19.pdf