



PO Box 419169  
Kansas City, MO 64141-6169

## Important Pharmacy Benefit Information

<Member\_First\_Name> <Member\_Last\_Name>  
<Member\_Address1>  
<Member\_Address2>  
<Member\_City>, <Member\_State> <Member\_Zip>

Month DD, YYYY

Dear <Member\_First\_Name>,

**Blue Cross and Blue Shield of Kansas City (Blue KC) wants to inform you that starting <Change Code Effective Date>, you will need prior authorization (PA) for the drug(s) listed below.**

A PA is an approval we give your doctor before the drug(s) can be covered. The PA process helps determine if a drug meets coverage requirements. A drug may need PA to make sure it is used to effectively treat conditions.

Drug(s) requiring a PA
<Target Medication1>
<Target Medication2>
<Target Medication3>
<Target Medication4>
<Target Medication5>
<Target Medication6>
<Target Medication7>
<Target Medication8>
<Target Medication9>
<Target Medication10>

### What do you need to do?

Please talk to your doctor as soon as possible. This change does not mean you should stop taking your drug(s). If your doctor wants you to keep taking the drug(s) above, you or your doctor can ask us for a PA. If the PA is approved, you may keep filling your prescription (s) as usual

If the PA is not approved and you fill a prescription after <Change Code Effective Date>, you may have to pay the full cost of the drug(s). The amount you pay will not count toward any deductible or out-of-pocket limit you may have. If you don't take action, coverage for your next refill may be delayed.

**Questions? We'll be here to help.**

If you have questions about this information, please call our Customer Service team at the number listed on your Blue KC member ID card, Monday through Friday, from 8 a.m. to 8 p.m. Central Time.

Thank you, as always, for being a Blue KC member.

Sincerely,

The Blue KC Pharmacy Team



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<Member\_Address1>  
<Member\_Address2>  
<Member\_City>, <Member\_State> <Member\_Zip>

Month DD, YYYY

Dear <Member\_First\_Name>,

**Blue Cross and Blue Shield of Kansas City (Blue KC) wants to inform you that starting <Change Code Effective Date>, the drug(s) below will be added to a step therapy program.**

The drug(s) will be in a step therapy program as a Step 2 drug. This means that you need to try a Step 1 drug(s) below before your current Step 2 drug(s) can be covered.

Step 1 drug(s) usually cost less and may be used for the same conditions as Step 2 drug(s). Here are the Step 1 drug(s) that may work for you:

Step 1 drug(s)	Step 2 drug(s)
<Step 1 medication1>	<Target Medication1>
<Step 1 medication2>	<Target Medication2>
<Step 1 medication3>	<Target Medication3>
<Step 1 medication4>	<Target Medication4>
<Step 1 medication5>	<Target Medication5>
<Step 1 medication6>	<Target Medication6>
<Step 1 medication7>	<Target Medication7>
<Step 1 medication8>	<Target Medication8>
<Step 1 medication9>	<Target Medication9>
<Step 1 medication10>	<Target Medication10>

### What do you need to do?

Please talk to your doctor as soon as possible. This change does not mean you should stop taking your drug(s). If a Step 1 drug will work for you, your doctor will need to write a prescription for the new drug.

If you already tried a Step 1 drug and it didn't work, or your doctor wants you to keep taking your Step 2 drug(s), your doctor will need to ask us for a prior authorization (PA). A prior authorization is an approval we give your doctor before the drug(s) can be covered.

If the PA is approved, you may keep filling your prescription(s) as usual.

If the PA is not approved, you may have to pay the full cost of the drug(s). The amount you pay for the drug(s) will not count toward any deductible or out-of-pocket limit you may have.

**Questions? We'll be here to help.**

If you have questions about this information, please call our Customer Service team at the number listed on your Blue KC member ID card, Monday through Friday, from 8 a.m. to 8 p.m. Central Time.

Thank you, as always, for being a Blue KC member.

Sincerely,

The Blue KC Pharmacy Team



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<Member\_Address1>  
<Member\_Address2>  
<Member\_City>, <Member\_State> <Member\_Zip>

Month DD, YYYY

Dear <Member\_First\_Name>,

**Blue Cross and Blue Shield of Kansas City (Blue KC) wants to inform you that starting <Change Code Effective Date>, you may pay more for the drug(s) below.**

The drug(s) will be moving to a higher tier on the formulary. It is still covered by the plan, but after <Change Code Effective Date>, you may pay a higher copay or coinsurance for the drug(s).

Drug(s) moving to a higher tier
<Target Medication1>
<Target Medication2>
<Target Medication3>
<Target Medication4>
<Target Medication5>
<Target Medication6>
<Target Medication7>
<Target Medication8>
<Target Medication9>
<Target Medication10>

### What do you need to do?

Please talk to your doctor as soon as possible. This change does not mean you should stop taking your drug(s). If a lower-cost drug will work for you, your doctor will need to write a prescription for the new drug(s).

**Questions? We'll be here to help.**

If you have questions about this information, please call our Customer Service team at the number listed on your Blue KC member ID card, Monday through Friday, from 8 a.m. to 8 p.m. Central Time.

Thank you, as always, for being a Blue KC member.

Sincerely,

The Blue KC Pharmacy Team



P.O. Box 419169  
Kansas City, MO 64141-6169

<Name>  
<Address1>  
<Address2>  
<City, State Zipcode>

**Important information about  
your pharmacy benefit starting  
January 1, 2021.**

<Current Month Year>

Dear <Name> ,

Blue Cross and Blue Shield of Kansas City (Blue KC) wants to let you know about a change to your prescription medication coverage.

**Beginning January 1, 2021, you will pay more for the medication below.** Our records show that you recently filled a prescription for the medication listed below. The medication will be moving to a higher-cost tier on our prescription drug list. It will still be covered by your plan, but after January 1, 2021, you will pay a higher copay or coinsurance for the medication.

When there are similar medications available to treat the same condition, higher-cost options are sometimes moved to a higher tier. Here are some alternative, lower-cost medications that may work for you:

Medication moving to a higher tier	Alternative lower-cost medication
<Label Name>	<Alternative>

**What do you need to do?**

Please talk to your doctor as soon as possible. If a lower-cost medication will work for you, your doctor will need to write a prescription for the new medication.

If you have questions about this information, or your pharmacy benefits in general, please call Blue KC at the number listed on your member ID card, Monday through Friday, from 8 a.m. to 8 p.m. Central Time.

Thank you, as always, for being a Blue KC member.

Sincerely,

The Blue KC Pharmacy Team