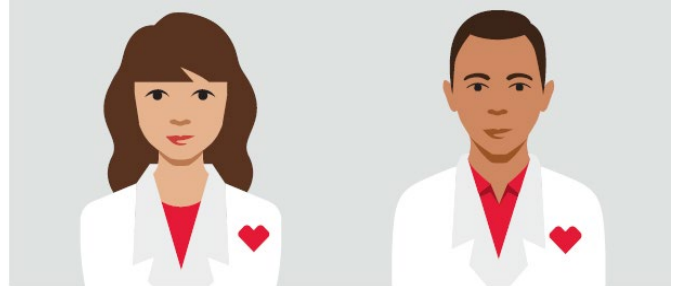


Transitioning Pharmacy Benefits to CVS Caremark®

Introduction and frequently asked questions about your new plan with CVS Caremark®.

Starting January 1, 2022, your pharmacy benefit will be managed by a new pharmacy benefit manager (PBM) – **CVS Caremark**. PBMs are responsible for managing your prescription drug program. They act as a “middleman” between the prescription drug manufacturer and the pharmacy to help negotiate drug costs, process claims and manage mail order prescriptions. While the pharmacy benefit is managed by a separate company, it’s completely integrated with your BCBSTX medical plan. The CVS Caremark goal is to provide safe, easy and cost-effective ways for you to get the medications you need.



Where can I find information?

Where you see references to “**online**” you can access information in two ways:

Starting today!

Online: [This page!](#)

BenefitsConnections Phone: 877-241-9624

Email: benefitsconnections@genlp.com

Beginning December 10!

If you enroll in the medical plan for 2022

Register Online: [Caremark.com](https://www.caremark.com)

Phone: 844-910-3890

Smartphone: CVS Caremark App

Specialty Drug Only: 800-237-2767 [CVSpecialty.com](https://www.cvspecialty.com)

General questions

What is changing with my pharmacy benefits?

CVS Caremark will be your new PBM in 2022, but your cost-share (copays, deductibles, etc.) is not changing. You will receive a new Blue Cross Blue Shield of Texas (BCBSTX) ID card that will also be your prescription ID card. You can register at [Caremark.com](https://www.caremark.com) to print a temporary Rx ID card. Like your current PBM, CVS Caremark offers convenient and cost-effective options to fill your maintenance medications through mail service or at an in-network retail pharmacy. Continue reading to learn more about how this change might affect you.

Will this change affect whether my prescriptions are covered?

The formulary drug list will vary from your current PBM, but there should be minimal impact to plan members. For a list

of medications covered, check the formulary drug list available online. If your maintenance medication is impacted because of a change in the drug’s formulary tier, you will get a letter from CVS Caremark with more information.

Who can I talk to if I have questions about my prescription benefits? Can I find out the cost before January 1?

Go to hr.genesisenergy.com/prescription-drugs/ if you have questions about your prescription benefits during Annual Enrollment. After December 10, once CVS Caremark has received your 2022 enrollment information, you can call CVS Caremark directly with questions and/or register online, which will allow you to price a medication.

What is a formulary?

A formulary, sometimes referred to as a “preferred drug list”:

- Is a list of commonly prescribed medications approved to be covered by the plan.
- Identifies the medications available for certain conditions and organizes them into cost levels, known as drug tiers, like generic, preferred brand and non-preferred brand.
- Lets you know if there are any medication exclusions (i.e., drugs not covered by the plan), or if any require prior authorization (PA), which may affect how medications are covered.

To learn if your medication is covered, check your formulary drug list online.

Why do medication costs change?

CVS Caremark continues to look for ways to lower medication costs. These costs could change for several reasons, including:

- Inflation: the pharmaceutical manufacturer adjusts the price of the drug(s).
- The formulary (preferred drug list) may move the drug to a higher cost level as generics or greater value drugs are available.
- The formulary may change periodically throughout the year or be different from your current formulary.
- Medications may move from covered to excluded.
- You may be required to have a prior authorization (pre-approval for benefit coverage).
- Medications may only be covered in certain quantities or in a specified time period in accordance with U.S. Drug and Food Administration (FDA) standards.

If my new PBM is CVS Caremark, does that mean I can only fill prescriptions at CVS Pharmacy?

No, you are not limited to filling prescriptions at a CVS Pharmacy. You will have access to the CVS Caremark mail service pharmacy and thousands of retail pharmacies in the CVS Caremark national network, including all large national chains like CVS Pharmacy, Walgreens, Albertson’s, Kroger, Wal-Mart and many local pharmacies as well. To see a complete list of network pharmacies in your area, go online to [Caremark.com](https://www.caremark.com), use the CVS Caremark app or call Customer Care at 844-910-3890.

Will there be new member ID cards?

Your new Blue Cross and Blue Shield of Texas (BCBSTX) medical card will also be your prescription ID card. You will get a new BCBSTX ID card before January 1. Give your new ID card to your pharmacist when filling a prescription at a retail pharmacy. Once you have your member ID card, you can register online at [Caremark.com](https://www.caremark.com) or on the CVS Caremark app.

What if I don’t receive my BCBSTX ID card in time to pick up a prescription for myself or a family member?

You may print a temporary ID card by logging into your Caremark.com profile. Additionally, your new ID card is available by downloading the CVS Caremark mobile app on your smartphone or mobile handheld device.

How do I maximize my pharmacy benefits?

The following tips will help to maximize your pharmacy benefits:

- Use generic drugs whenever possible.
- If you are taking a non-preferred, brand-name drug that is not on the formulary drug list, ask your doctor if a preferred, brand name or a generic drug would be right for you.
- Use the home delivery program to fill long-term, maintenance medications. Long-term medications are prescribed drugs that you take regularly to treat ongoing conditions like diabetes, high blood pressure and asthma. You can usually save time and money by using the CVS Caremark mail service program to fill your long-term medications.
- Use in-network (or participating) retail pharmacies to fill prescriptions for your short-term medications. For example, your doctor might prescribe a 10-day medication for an infection. You should always get these types of medications from an in-network retail pharmacy.

I currently have refills on my medication(s) at a retail pharmacy. Will they be available in 2022?

Yes, you will simply need to present your new ID card to the pharmacist after January 1 to obtain existing, retail refills. Please make sure you bring your card with you for the first time or have a paper or electronic copy of the card with you.

Can I fill my 90-day refills at a retail pharmacy?

The plan requires a 90-day refill after three (3) 30-day refills for long-term maintenance medications. You may obtain a

90-day supply from any in-network retail pharmacy, or you will have the choice to opt out of mandatory 90-day refills by calling CVS Caremark. However, by opting out you will not save money as you would by filling a 90-day supply.

Does the plan cover durable medical equipment (DME)?

Yes.

How are diabetes medications and supplies covered?

Diabetes medication and supplies are covered by CVS Caremark and processed according to your plan election. Starting January 1, you can use the following resources to learn more:

- Call Customer Care at 844-910-3890
- Use the CVS Caremark App
- Visit [Caremark.com](https://www.caremark.com)

How can I obtain a blood glucose meter through the pharmacy benefits?

Through CVS Caremark Diabetic Meter Program, you can receive a new One Touch blood glucose meter at no cost.

- Beginning January 1, visit [Caremark.com/ManagingDiabetes](https://www.caremark.com/ManagingDiabetes) and click on *Request a Meter Now* to get started, or
- Call the CVS Caremark Member Services at Diabetic Meter Team at 800-588-4456.

How can I calculate my out-of-pocket cost for a preferred or a non-preferred drug?

There is a tool **online** at [Caremark.com](https://www.caremark.com) called "Price a Medication" that will help you calculate the estimated cost of a prescribed medication. To use this tool, you must register online and be enrolled in the medical plan for 2022. If enrolled, you can register online as early as December 10.

Note: The "Price a Medication" tool does not imply a guarantee of coverage, as covered products or categories are subject to individual plan restrictions and/or limitations. This tool displays cost and coverage information for the current calendar year.

What is a preventive medication? How do I know if my drug is considered a preventive medication and how much will it cost?

The Preventive Drug List is a list of medications that are taken regularly to treat chronic conditions like high cholesterol, high blood pressure or asthma, and help to prevent serious complications in the future. If you are

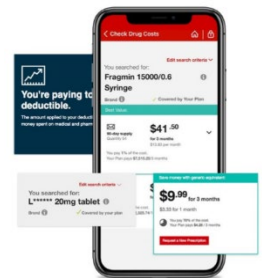
enrolled in the high deductible health plan (HDHP) and fill a prescription for these medications, you bypass the deductible – even if your deductible hasn't been met – and pay your plan's coinsurance*.

The CVS Caremark Preventive Drug List varies slightly from your current PBM's Preventive Drug List. You may see an increase in the cost for certain, but very limited, preventive medications. The new Preventive Drug List can be found online at hr.genesisenergy.com/prescription-drugs/ or after December 10, 2021 at [Caremark.com](https://www.caremark.com)

Does CVS Caremark have an app, and what features does it have?

Yes, CVS Caremark has a secure, mobile app you can download from Apple Store or Google Play. It features:

- Drug pricing
- Easy refills capabilities like refill reminders
- The ability to scan your prescription then pick up at a local pharmacy or receive by mail
- View your order status
- Search for local, in-network pharmacies
- Access your medication lists



Who has access to my prescription information?

CVS Caremark has a strong commitment to your privacy. CVS Caremark has established effective administrative and technical safeguards to help protect the confidentiality of your prescriptions and other information, and to secure this information from unauthorized or improper access, disclosure or use. In addition, CVS Caremark does not sell individually identifiable information, lists of members, or their covered dependents to outside companies for solicitation or marketing purposes.

Does the pharmacy benefit cover vaccines?

Your pharmacy benefit covers many vaccines at your local pharmacy. Check with your pharmacist to see what vaccines are right for you and if they can give you the recommended vaccinations. At the time of service, remember to show your member ID card to the pharmacist. Pharmacists can give the following vaccines now available at in-network pharmacies: flu, COVID-19, tetanus/diphtheria/pertussis, hepatitis, Human Papillomavirus (HPV), meningitis, pneumonia, rabies, shingles/zoster and childhood vaccines.

Home delivery

What is the difference between long-term and short-term drugs?

Long-term drugs are those you take to treat ongoing conditions such as high blood pressure or high cholesterol. These are known as **maintenance medications** and are eligible for mail order if they are not considered a controlled substance. Short-term drugs include antibiotics and other medications that you take for short periods of time. Under your plan, you can fill short-term and long-term prescriptions at any participating retail pharmacy in your network, but you may save money and find home delivery more convenient for long-term prescriptions.

How does CVS Caremark mail service pharmacy work?

With home delivery, you can order up to a 90-day supply of medications you take regularly. For new prescriptions, submit your order online, through the CVS Caremark app or by phone or mail. CVS Caremark will fill your order, ship it to you, and let you know when to expect your delivery.

Please note that expired prescriptions or prescriptions with 0 refills remaining will not transfer. In these cases, you'll need a new prescription from your doctor.

What happens January 1, 2022 if I have an existing mail order prescription?

If you have refills remaining with your current home delivery pharmacy, we will automatically transfer that active prescription on your behalf to CVS Caremark mail service pharmacy.

How do I order prescriptions from CVS Caremark home delivery?

- **Go online.** Visit [Caremark.com](https://www.caremark.com) or the CVS Caremark app
- **By ePrescribe.** Your doctor can send an electronic prescription to CVS Caremark
- **By phone.** Call the Customer Care number on your member ID card
- **By mail.** Call Customer Care to request a mail service form. Then complete and mail it to CVS Caremark with your prescription.

Once I place a home delivery order, how quickly will I get my medication?

New and refill prescriptions orders are delivered by standard U.S. mail and will arrive within 10 days from the date that CVS Caremark receives the completed order.

Can I manage my home delivery prescriptions online?

Yes, you will be able to access your prescriptions and home delivery information online or through the CVS Caremark website or mobile app. You can check order status, place prescription order and set up convenient automatic refills.

How do I pay for my home delivery prescriptions?

You can pay with your Health Savings Account (HSA)/Flexible Spending Accounts (FSA) debit card or credit card. If you currently use a debit/credit card for your home delivery prescriptions, you'll need to contact CVS Caremark with your debit/credit card information, as this information **will not** be transferred by Genesis.

What if I want my prescription delivered to a different address?

You may call CVS Caremark to change the shipping address for a home delivery medication. You can also go online at [Caremark.com](https://www.caremark.com), and elect "Manage my prescriptions." Additionally, you will have the convenience of storing multiple addresses in your profile; this allows you to modify your preferred shipping location for each refill by simply checking a box.

Specialty pharmacy

What is a specialty medication?

Certain prescribed drugs are called “specialty medications.” Specialty medications are used to treat complex, chronic health conditions like multiple sclerosis or rheumatoid arthritis. These medications usually have to be stored or handled in special ways.

What is CVS Specialty®?

CVS Specialty is your new specialty pharmacy. The patient care coordinators and pharmacists are highly trained to understand your specific therapy needs.

Why should I use CVS Specialty?

When CVS Specialty is the provider of your specialty medications, you don’t have to worry about filling specialty medications at any other location, such as a retail pharmacy or your doctor’s office. You’ll also have access to experienced pharmacists and nurses who can provide information about why your medication was prescribed, how it works and how to administer and store it. They’re also able to help you manage any side effects or to answer questions or concerns you may have.

Prior authorization and quantity limits

What is a coverage review or PA?

In limited cases, Genesis uses coverage management programs to help you receive prescription drugs at a reasonable cost. Coverage management programs include prior authorization and quantity limits. CVS Caremark administers each program to determine whether your use of certain medications meets the plan’s conditions of coverage. In some cases, a coverage review may be necessary to determine whether a prescription can be covered under the plan.

* Copayment, copay or coinsurance means the amount a member is required to pay for a prescription in accordance with the Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any paid, by the Plan.

This document contains information on various Genesis Energy and Genesis Alkali benefit plans offered to benefits-eligible employees and their eligible dependents. This document is only meant to provide a summary of these benefits and not a detailed description. If any statements in this document are inconsistent with the provisions of the official plan documents, or with applicable laws or regulations, the official plan documents, laws and regulations will govern and control. For additional details regarding a Genesis’ benefit plan that is subject to ERISA, please consult the summary plan description of the plan. If you have any questions regarding other Genesis benefit plans or programs, please contact the BenefitsConnections team. Genesis Energy reserves the absolute right and discretion to amend, suspend or terminate any benefit plan, at any time, for any reason, in accordance with the terms of the plan. No provision of any benefit plan is to be considered a contract of employment between you and your employer.

Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.

Will my current specialty medication be transferred to CVS Specialty?

After January 1, 2022, you can enroll in CVS Specialty. Register online at CVSspecialty.com or call Specialty at 800-237-2767 to enroll. If you have refills remaining with your specialty prescription, we will automatically transfer it on your behalf to CVS Specialty. If your prescription will expire before January 1, you will need to obtain a new prescription and submit it directly with CVS Specialty after January 1.

Who can I call if I have specialty pharmacy questions?

After January 1, 2022 contact CVS Specialty at 800-237-2767.

How will I receive my specialty medication from CVS Specialty?

They will ship your medication wherever you need it – in safe, temperature-controlled and tested packaging – at no cost to you.