



Because Life.™

Welcome to an improved specialty medication experience



Highmark's Specialty Medication Management Program replaces one-size-fits-all care with a more personal approach. Our program connects you with the most appropriate pharmacy to meet your unique needs.

What is the value of Highmark's Specialty Medication Management Program?

This program ensures that you have access to the most clinically appropriate drug at the lowest price. Another advantage is to make sure that the prescribed medication is covered and meets Highmark's high clinical standards.

How do I know who will be filling my medication?

You'll receive a letter providing more details. Next, your new specialty pharmacy will call **within one week of the date you're due to fill your prescription**. You can ask questions and schedule your delivery at that time.

Do I need to do anything now?

No. If you don't hear from your new pharmacy within a week of your refill date, call Member Service at the number on the back of your ID card. You can also call if you have any questions about your specialty medication.



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Free Market Health, a separate healthcare technology company, provides end-to-end specialty drug process optimization for health plan members.

Benefits and/or benefit administration may be provided by or through the following entities, which are independent licensees of the Blue Cross Blue Shield Association:

Central and Southeastern PA: Highmark Inc. d/b/a Highmark Blue Shield, Highmark Benefits Group Inc., Highmark Health Insurance Company, Highmark Choice Company or Highmark Senior Health Company.

Your plan may not cover all your health care expenses. Read your plan materials carefully to determine which health care services are covered. For more information, call the number on the back of your member ID card or, if not a member, call 866-459-4418.

Northeastern NY: Highmark Western and Northeastern New York Inc. d/b/a Highmark Blue Shield.

All references to "Highmark" in this document are references to the Highmark company that is providing the member's health benefits or health benefit administration and/or to one or more of its affiliated Blue companies.

The Claims Administrator/Insurer complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al número en la parte posterior de su tarjeta de identificación (TTY: 711).

请注意：如果您说中文，可向您提供免费语言协助服务。请拨打您的身份证背面的号码（TTY：711）。