



Monthly Mix

Continuing your care and prescriptions

March 2026

Welcome to our new Rich's benefits education series.

Each **Monthly Mix** will highlight helpful information and resources to support your understanding of your benefits and how to make the most of them.



» Continuing your care & prescriptions

Beginning this year, Collective Health serves as the plan administrator for our Highmark Blue Cross Blue Shield (BCBS) health plans and should be your first point of contact for questions or support rather than Highmark. Call the Collective Health Member Advocate Team for help with:



Translation support is available as needed.

- Confirming whether your current provider is 'in-network' with Highmark BCBS, or get help finding a new one.
- New or ongoing prescription needs and management.
- Continuing care for ongoing, serious or complex conditions.
- An upcoming procedure (such as surgery).

Benefit buzzwords made simple: 'In-network' provider



These are doctors, hospitals and clinics that work directly with Highmark BCBS, and allow you to get the most value from your Rich's medical plan.

MEET YOUR COLLECTIVE HEALTH CARE NAVIGATION TEAM

The Care Navigation team can help you manage ongoing or chronic care by coordinating appointments and treatments, explaining coverage, and connecting you with resources (including prescription support) so you can continue to manage your healthcare with confidence.

Want to explore 'in-network' Highmark BCBS providers on your own using the Collective Health portal?

FOLLOW THESE STEPS:

- Register or log in at my.collectivehealth.com
- Select the "Get care" tab at the top of the page.
- Search for doctors, specialists, hospitals, and urgent care near you.



Collective Health also partners closely with, Express Scripts® by Evernorth (ESI), our pharmacy benefits manager, to support you and your pharmacy needs. They can help you:

- Confirm coverage of a specific medication.
- Navigate new or existing prior authorizations.
- Understand step therapy and what's involved.

Prescription updates effective April 1; see the back of this sheet for more details.

Key information about prescriptions

STARTING APRIL 1, THINGS YOU NEED TO KNOW

After your initial prescription fill in 2026, you may have received a letter from ESI. This could have been for one of three reasons:

- 1 Your prescription is no longer on the formulary.
- 2 Your prescription requires prior authorization that will need to be resubmitted.
- 3 Your prescription requires step therapy, meaning your provider will need to submit additional information.

These requirements were temporarily delayed for the first three months of 2026 to give you time to coordinate with your providers and manage your prescriptions.

Beginning April 1, the prescription transition period ends, and all plan updates will take effect, so it's important to work with your providers now to ensure your prescriptions continue without interruption.

» Medication lists change regularly for all health plans



As new drugs become available or clinical guidelines change, medications on the formulary may be added, removed or updated throughout the year. Your doctor can help determine whether an alternative medication will be appropriate for your treatment.

You can find the current medication list on [the Evernorth website](#) by scanning the QR code.

Benefit buzzwords made simple: 'Formulary'



A formulary is the list of prescription drugs your health plan covers. Medications on the formulary are chosen because they are safe, effective and provide good value, so you typically pay less for them through your Rich's pharmacy benefit.

If you receive a request for prior authorization...

Some medications will require approval before they are covered by your Rich's prescription plan, effective April 1.

If your letter says prior authorization is required:

- Your doctor will need to provide additional information to ESI.
- ESI will review the request and confirm if the medication is covered by your prescription plan.

If you don't have approval, your prescription will not be covered.

If your current medication is no longer covered...

If your medication is not available on your plan's current medication list, your letter will explain which alternative medications may be available. You will need to talk to your provider about which alternative will work best for you.

If step therapy is required...

This means you will be asked to try a covered alternative medication that costs less than your current medication. If you receive this letter, please share it with your doctor, and they can prescribe an alternative medication, if appropriate.



ACCREDITED

SPECIALTY MEDICATION

These are medications used to treat complex or chronic conditions and may require special handling or clinical support.

Specialty medications are managed through Accredo Specialty Pharmacy by Evernorth which provides:

- Specialty pharmacists and nurses, available 24/7.
- Free shipping.
- Refill reminders and shipment dates.
- Help navigating insurance and financial assistance.

You can find out more at [MyRichsBenefits.com](#) by scanning the QR code.



HAVE ANY QUESTIONS?

CONTACT THE COLLECTIVE HEALTH MEMBER ADVOCATE TEAM.

Visit [www.my.collectivehealth.com](#), scan the QR Code or call: 1-855-242-5559