



Preventive Drug Benefit Programs

Promoting Better Health and Cost Savings



Preventive Drug Benefit Programs are made up of prescription drug categories often prescribed for preventive purposes. These programs are designed to help members access treatment by lowering the cost of certain preventive medications. As a result, members may be able to improve adherence, which can help prevent existing health conditions from worsening.

This guide can help answer questions about preventive drug benefit programs, the differences between them, how they work and what benefit plans may apply.

What Preventive Drug Benefit Programs are Available?

Blue Cross and Blue Shield of Montana (BCBSMT) has two Preventive Drug Benefit Programs for members, **High Deductible Health Plan-Health Savings Account (HDHP-HSA)** and **Affordable Care Act (ACA)**. Each program has its own list of preventive drugs. Even though both lists may share some of the same categories and products, the HDHP-HSA and ACA preventive lists are separate and are not interchangeable. Members may have access to both preventive programs, depending on their plan.



These programs help lower the cost of members' preventive medications to allow for improved adherence and better overall health outcomes.

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What is the difference between HDHP-HSA and ACA?

The **HDHP-HSA Preventive Drug Program** is only available for certain HDHPs (HDHP coverage is required in order to contribute toward an HSA). This program offers select preventive drugs at a reduced or no out-of-pocket cost. With an HDHP, members usually must first pay toward their plan deductible before the plan begins to pay for services or medications. The HDHP-HSA preventive benefit program waives the need to meet the deductible first for the listed preventive drugs. Members then pay the applicable cost share (copay or coinsurance) amount. These cost share amounts may vary based on plan benefits.

The **ACA Preventive Drug Program** applies to all eligible benefit plans (HDHP or a non-HDHP HMO or PPO)¹. The program provides coverage of specified preventive drugs without member cost sharing (deductibles, copays or coinsurance). The categories under this program are based on the Affordable Care Act.

	HDHP-HSA Preventive Drug Program	ACA Preventive Drug Program
Eligible Plans	Select HDHPs	Plans under ACA (section 2713) ¹
Available Categories²	<ul style="list-style-type: none"> • Anticoagulants/antiplatelets³ • Asthma/COPD (Respiratory) • Bowel preparation • Breast cancer • Contraceptives • Depression (Selective Serotonin Reuptake Inhibitors, SSRIs) • Diabetes Medications³ • Diabetic supplies³ • Fluoride supplements • High blood pressure • High cholesterol • Osteoporosis • Tobacco cessation • Vaccines 	<ul style="list-style-type: none"> • Aspirin • Bowel preparation • Breast cancer • Contraceptives • Fluoride supplements • Folic acid supplements • HIV pre-exposure prophylaxis (PrEP) • Iron supplements • Single agent statins • Tobacco cessation • Vaccines
Member Cost Sharing	Deductible does not need to be met first. Member costs (copay or coinsurance) may vary, based on plan benefits. Some members may pay as little as \$0.	Deductible does not need to be met first. Member pays \$0 cost share when certain conditions are met under ACA. ⁴



For more information on our Preventive Benefit Drug Programs, please contact your BCBSMT account representative.

1. Eligible benefit plans under the ACA (section 2713) are non-grandfathered group health plans. Insurers offering non-grandfathered group or individual health insurance must provide coverage of specified preventive services without member cost sharing (such as copayments, deductibles or co-insurance). Grandfathered, retiree, Medicare and Medicaid plans are exempt from many or all ACA requirements, depending on the plan.

2. Some plans can choose which HDHP-HSA preventive drug categories may be offered. Drugs and products within the HDHP-HSA preventive category cannot be customized. Preventive categories, drugs and services under the ACA cannot be customized.

3. Some employer group plans may wish to expand coverage from the standard categories and add select preferred brand products or supplies in these preventive drug categories.

4. Examples of conditions are age limits, restrictions and other requirements that may apply.