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T R I C A R E°

P.O. Box 52056 Phoenix, AZ 85072-2056

February 17, 2025
2025062308 - 1
John Q. Public
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Any City, MO 55555-4444



IMPORTANT NOTICE: A Change to your Prescription Drug Coverage

Dear TRICARE Beneficiary:

On April 2, 2025, **Methocarbamol 1,000 mg tablet**, a prescription medication(s) you're taking, will no longer be covered by TRICARE in the same way it has in the past. Your doctor will be required to submit a prior authorization (PA) on or after April 2, 2025, or you will have to pay 100% of the cost of the medication(s).

If you are no longer taking the above medication, then you don't need to do anything at this time.

If you are taking this medication, what should you do?

- 1. Review the enclosed information called "Options for You and Your Doctor to Consider."

 This document provides a list of medications that are no longer preferred and associated cost information.
- 2. Discuss this information with your doctor to see which of the following options is best for you:
 - Switch your prescription to a preferred alternative medication, which will cost you less.
 - Talk to your doctor about requesting a PA. If the criteria requirements have been met, your PA may be approved.
 - Continue filling your current prescription without a PA and pay 100% of the cost of the medication.

Why the change?

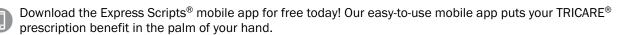
The Defense Health Agency regularly reviews medications and has determined your medication now requires a PA. A PA is a routine process that ensures requested medications are safe, cost effective, and medically required.

Who should you contact if you have questions?

If you have any questions about your pharmacy benefit or you need help, please visit <u>express-scripts.com/TRICARE</u> or call 877.363.1303.

Sincerely,

Express Scripts



Follow us on social media! Add MilitaryRx on <u>Facebook</u> and <u>Twitter</u> for health tips, plan info and updates about your pharmacy benefit.

Express Scripts administers your TRICARE prescription benefit.

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Options for You and Your Doctor to Consider

On April 2, 2025, your doctor will be required to submit a prior authorization (PA) for **Methocarbamol 1,000 mg tablet**. Any PA approval your medication currently has will no longer apply. Without a new PA, you will pay 100% of the medication cost. If the PA is approved, you will pay the applicable cost. Carefully read the information below to understand your options.

Switch to a preferred medication.

| | Military Treatment Facility | Home Delivery | Retail Network Pharmacy |
|--|--------------------------------------|---------------|-------------------------|
| | Your Cost (up to a 90-day supply) | | |
| Generic Preferred Medications: • Methocarbamol 500mg, 750mg tablet | \$0 | \$13 | \$48 |

Continue taking your current medication if new PA is approved.

| Your Cost | | | |
|--|---|--|--|
| (up to a 90-day supply) | <u>Your Cost</u> (up to a 90-day supply) | | |
| Non-Preferred Medication(s) \$0 \$12 (PA Required): | 29 | | |
| Methocarbamol 1,000mg tablet Note: May not be available. Contact your Military | R | | |
| Treatment Facility to verify they carry the medication. 100% of the medication approv | without an | | |

How to Contact your Military Treatment Facility's Pharmacy

Visit <u>Tricare.mil/FindDoctor/mtf</u> and type in your ZIP Code or Facility/Installation Name. After clicking on the name, the pharmacy's information, including phone number and hours of operation, will be displayed on the far right side of the web page.

Prior Authorization

Prior authorization (PA) is a routine review process to ensure that the requested medication is safe, cost effective, and medically required. Without an approved PA, you will pay the full cost of the drug through Home Delivery and at retail network pharmacies. The drug may not be available at the Military Treatment Facility. The PA remains valid until it expires or a change is made to its criteria requirements by the Department of Defense (DoD) Pharmacy and Therapeutics (P&T) Committee.

More Information

For drugs that require a PA, ask your doctor to submit the request(s) electronically through a simple process called Electronic Prior Authorization (ePA). The doctor's office can learn more about ePA at providerportal.surescripts.net/ProviderPortal/dod or covermymeds.com/epa/express-scripts or by calling the Express Scripts doctor line at 866.684.4488 for assistance.

More Information

For more information on TRICARE-covered medications, any restrictions, and to find forms for PA and medical necessity, visit express-scripts.com/tricareformulary.



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