

2025 PHARMACY OPTIONS	
PHARMACY NAME	TYPE(S) OF MEDICATION
<p>Walgreens Exclusive Retail Pharmacy</p> <p>*Up to 30-to-90-day supply</p>	<ul style="list-style-type: none"> • Only retail pharmacy you may use to fill generic and/or brand name medications (NOT self-administered specialty medications, provider-administered specialty medications or mail order.) • Diabetic Testing Supplies (test strips, lancets, glucometers, etc.) • Insulin, Antibiotics
<p>FlexAccess Specialty Copay Solution Program</p> <p>1-888-302-3618</p> <p>*Up to 30-day supply only</p>	<ul style="list-style-type: none"> • Select Self-Administered Specialty Medications. These medications require Prior Authorization. • FlexAccess finds the best copay assistance (coupon) discounts for you so your medicines may be cheaper and easier to get. • Select specialty medications may be eligible for \$0-\$35 member cost share. • Users of eligible self-administered medications are automatically enrolled in the FlexAccess Program.
<p>Amazon Pharmacy Home Delivery MedsYourWay</p> <p><u>For Prescribers Only:</u> E-SCRIBE Amazon Pharmacy 001 Phone #: 1-855-745-5725, ext. 3 Fax #: 1-512-884-5981</p> <p>*Up to 90-day supply</p>	<ul style="list-style-type: none"> • Long-Term Medications, i.e., blood pressure, cholesterol medications, etc. • Refer to page 2 for account set up. For assistance on creating your account, call 1-855-965-7539
<p>CVS/CareMark Specialty Pharmacy 1-866-278-5108</p> <p><u>Exception: Medication cannot be supplied by CVS/CareMark Specialty Pharmacy or Physician participating in Buy & Bill Program.</u></p>	<ul style="list-style-type: none"> • Specialty Medications administered in a doctor's office/facility and limited distribution drugs. • Prior Authorization may be required. • Claims are submitted under the medical benefit, Not pharmacy.
<p>My Health Onsite (MHO)*</p> <p>1-888-644-1448</p>	<ul style="list-style-type: none"> • Ask about select generic and brand name medications at low or no cost to you.

*Registered Patients	<ul style="list-style-type: none"> Access www.pascogohealthy.net for a list of covered medications
Elect Rx (District Program Offering) 1-844-353-2879	<ul style="list-style-type: none"> Select brand name medications at low cost. Access www.pascogohealthy.net for a list of covered medications
*Up to 90-day supply	
TrueNorth Meds Insulin Program (District Program Offering) 1-844-681-8783	<ul style="list-style-type: none"> Brand Name Insulin at low cost Contact TrueNorth for your cost
MEMBER COPAY	
Retail at Walgreens Only	\$10 Generic \$35 Preferred Brand \$60 Non-Preferred Brand
Extended Supply Network at Walgreens Only (2.5X Retail Copay)	\$25 Generic \$87.50 Preferred Brand \$150 Non-Preferred Brand
Amazon Home Delivery (2X Retail Copay)	\$20 Generic \$70 Preferred Brand \$120 Non-Preferred Brand
Specialty	\$25 Generic \$50 Preferred Brand \$100 Non-Preferred Brand

1. Set up your Amazon Pharmacy account by:

- Visiting www.amazon.com/floridablueMYW and clicking **Get Started**. Or
- Opening the Amazon app and clicking **Pharmacy** then **Sign Up**. Once registered, you can manage your prescriptions and place orders.

2. Let your doctor/prescriber know they should send new home delivery prescriptions, (**excluding Schedule II Controlled substances**) to Amazon Pharmacy. Here are the details they need:

- E-SCRIBE Amazon Pharmacy 001
- FAX 512-884-5981
- CONTACT US 855-745-5725, ext. 3

For questions about creating your account, call **Amazon Customer Care at 855-965-7539 Monday through Friday 8 a.m. - 10 p.m. ET and Saturday and Sunday 10 a.m. - 8 p.m. ET.**