

"I helped several hundred patients evaluate the best plan for them this year and Coventry's First Health Value Plus was the very best for many of them. I used the Medicare.gov website and put in my pharmacy as their preferred pharmacy to get the correct information. Or so I thought correct information. Yesterday I had many patients that had a \$7 script co-pay with me because Coventry had selected a preferred network of pharmacies that would offer the scripts for \$0 co-pays. This is false advertising and has many of my patients very upset!

-- TN

"This complaint is in regards to First Health Part D Value Plus PDP. Several of our customers signed up for this new prescription plan effective January 1, 2012. During the sign-up process, the Medicare website said absolutely nothing about "preferred" stores where the patients would have to get their medicines. Now, our patients are being charged copays to get their medicines at our store which is supposedly a "non-preferred" status with this Part D plan. Our patients were misled by this plan and the Medicare website. This needs to change immediately. Our customers should be given a chance to sign up with another Part D provider that they can trust."

-- NC

"Patient presented to pharmacy to pick up his normal refills. He was surprised at the amount of his copays. I told him we ran it through his new insurance and that things must have changed with the New Year. He didn't want to pay the copays so we called his insurance company and they informed him that he had to get the meds at one of the large chain pharmacies to realize the lower copays. He left the meds here while he went home to look into it further. He called me back and said there was nothing he could do besides use one of the other pharmacies because he lived on a fixed income and money was tight. The nearest chain pharmacy is 25 miles from his home. I ended up transferring out 10 medications which come up for refills at different times so he'll have a more difficult time coordinating pickup of the meds. He said he's sorry but there is nothing he can do for now because he's locked in for the year.

-- WI

"Since, 1/1/12, we've had Medicare D patients that have come in with their new Coventry Cards. According to Coventry's published information, it is \$0 at their preferred pharmacies. When we process patient claims our copays aren't "preferred pharmacy co-pays", when I fill a generic, it is \$7. Unfortunately, one patient that is affected by this is a home bound patient that we deliver to and is on a limited income. No other pharmacy delivers in this county. We do. So she is in a difficult spot - she can't afford \$7 for something that she can get at Walgreens (we called local competitors and had them test a claim for this patient to find who was Coventry's "preferred provider") for \$0, but she has no way to get her medicine. The local taxi company is going to charge \$22 to pick up her medicine each time she calls for a prescription. I have done everything possible to contact Coventry's enrollment department, but haven't yet been successful. This is certainly a shining example of unfair trade practices brought on by PBMs and how it negatively affects patients.

-- SC

"We do Medicare comparisons as a free service for our patients. Insurance agents in the area have stopped doing them and The Department on Aging has limited hours of service. We had done

comparisons and helped about 30 patients sign up for First Health Value Plus thinking they would have zero copays on generics. Two days before the deadline we discovered that the zero co-pay only applied to large chains and that our patients would have a \$7.00 co-pay. This should be made apparent to patients on the website. In trying to help our patients, we have probably, unknowingly, sent them to the chains where they really didn't want to go."

-- IL

"Long time patient with advice from SHIP joined First Health Part D Value Plus Medicare Part D Plan. Our pharmacy is in-network. Medicare Plan Finder says cost to patient is almost double at local pharmacy vs. Box Store. Plan has "Preferred Network" only open to Box Stores. Patient does not want to leave our store but can't ignore cost difference.

-- ME

"A long time customer of mine presented his new Humana Part D card and got his generic Rx filled for a \$7 co-pay. He said it should be zero co-pay. He said his agent sold him the plan based on zero co-pay for generics. He looked into it and the zero co-pay is only available at Walmart (he was not told this). Now he must go there, instead of the pharmacy of his choice for zero co-pay generics.

-- PA

"Miller Pharmacy is a pharmacy that is loved by its patients. We do Medicare printouts done specifically to our pharmacy. Our patients, when appropriate, were recommended to the First Health plan. Our patients would be glad to pay \$7 but when after the fact offered free at Walgreens or Walmart on 4, 5, or more Rx's per month, how can they not. Horrible after all the time spent caring for them and I guarantee a decrease in care and concern for the patients. This is not acceptable, especially from a government run program. Our patients deserve the right to stay with us. The fact that zero co-pay info was hidden until patients signed up is wrong and deceptive.

-- WI

"Had a patient come in by the name of PC and he was astounded to find out that his copays were between \$10 and \$17 for his generic medications. He informed us that that he had signed up with the Humana Value plan and that his copays were supposed to be 0 for generic medications. I called Humana and they told me the 0 copays were only for preferred pharmacies including Walmart. We were and "In network" pharmacy but not a 'preferred pharmacy". PC was very upset and never saw that information in any of the information he was given when signing up. Now he is stuck with deciding whether to pay us more or drive 25 miles to the nearest Walmart to get his prescriptions filled.

-- NC

"Had my first customer of 30 years transfer out due to the Medicare Part D plan First Health. One thing that really bothers me is he did not know we were not 'in network' until January 1."

-- OK

“ A long-time customer of mine requested in the fall that I look on Medicare.gov website and try to help him find a part D plan that would save him \$\$ in 2012. I found one through First Health Part D that saved him a combined \$300 for the year. The problem, I failed to see that the prices were based on his use of a "preferred pharmacy", and when he came here January 3 the prices were much higher. He very reluctantly had to choose to go to a preferred pharmacy, the closest of which is about 10 miles away.

-- NC

“I was informed that the BIG chain pharmacies were allowed to form alliances with BIG PBM's for Medicare part D plans this year. When I inquired about getting this contract to service my customers at the same level from Humana and Caremark I was informed that I wasn't allowed to even participate at their level. I have had over 30 patients call and inform me that they love our store but are being FORCED to go to Walmart, Walgreens or Target due to the benefit difference at these stores.”

--NE

“While helping patients research their Medicare Part D plan for 2012 the First Health Value plan stated for retail pharmacies the generic co-pay would be \$0.00. To our surprise after the enrollment period ended we learned that the plans only retail pharmacy where patients could get the zero co-pay for generic was Walmart. I can assure you that the Medicare website said nothing about Walmart being the only preferred retail pharmacy. The Medicare website showed ALL retail pharmacies with the zero co-pays. It seems like a bait and switch tactic.”

-- KY

“I have several patients that have a Medicare Part D plan thru Coventry (First Health) administered by Medco... Apparently I am a non-participating pharmacy. Because of that the co-pays with me are twice as high as the 'preferred' pharmacies...my patients don't want to go somewhere else.”

-- MO

“A retired store owner (pharmacist) signed up for a specific plan that offered zero dollar copays on generics. He said that my pharmacy was a preferred pharmacy when he researched the plans during open enrollment and that he would not be charged a co-pay on generic medications. We processed a generic medication the other day and guess who has a co-pay? I told him that the PBMs are playing this misleading game with Medicare patients. He has only been retired since 2008, so he is well versed in Part-D. I told him to call Medicare and voice a complaint.

--KY

“Medco has a preferred plan called First Health Part D Value Plus (PDP). I have pts I have been servicing for 20 years and now they will go to a big box store, because Medco has them with 0 dollar copays at their stores, but \$7 at mine. It took me 3 1/2 weeks to get an answer from Medco of telling me no, I cannot be a preferred pharmacy, with NO explanation to why not. I am having my Congressman at my store and am going to have a few of my pts come and voice their opinion.”

-- IL

"A patient newly enrolled in First Health Value was told he must go to Walmart or Walgreens for zero generic copayments. He was told he could continue coming to his pharmacy of thirty years but he will pay \$7.00 copayments for generics. There was no warning and in previous years our pharmacy was considered 'in network'. Now, without notice to my pharmacy we are 'out of network'."

-- NC

"Our pharmacy offers assistance for help with selecting a Medicare Part D Plan for people who need help. We have received four complaints as of Jan. 4 2012 stating that we have given false information to our customers regarding the First Health Part D Value Plus Plan after filling scripts on their new plan they were charged \$7 co-pays on generics that the plan search reflected a \$0. When performing the plan search for these patients we did not receive any information stating co-pays would be more at a non preferred pharmacy or we would have provided that information. We have copies of these plan searches for each of these patients. We have customers that have been coming here for over 10 years and are forced to use another pharmacy to get the \$0 co-pays. This is very misleading."

-- WV

"I have had 3 different patients who signed up for First Health (Medco) part D based on information given on the CMS site for plan search. These patients entered our Pharmacy and the medication lists they are currently taking. The response was that they would have \$0.00 copay on generics. The reality was when we filled their first prescriptions, their copays for generics was \$7.00. When they called Medco, they were told those copays only applied at "select preferred" pharmacies such as Walgreens, Walmart, Sams and Costco. They feel this was very deceptive."

-- TN

"One of my patients on Tikosyn, a medication where the patient can't miss a single dose, moves to a "restrictive" plan for 2012 but did not about know it during enrollment. His copay is so high at our pharmacy for Tikosyn that he cannot afford it when he needs his refill in 2012 so he has to find a "preferred" pharmacy that is also registered to get Tikosyn. He finds a Walgreens 30 miles from here that is both "preferred" and can get Tikosyn, however, they don't have his strength in stock and Tikosyn does not normally come overnight from a distributor but rather gets drop-shipped so takes a few days. Now he is trying to get the hospital system (Barnes Jewish) to send him a couple of pills so that he doesn't miss a dose waiting for Walgreens to get the medication. The patient has to drive 30 extra miles each month to get his Tikosyn."

-- AR

"As a service to our customers we provided information you (CMS medicare.gov website plan finder) gave us to help them choose a plan to fit their needs. Now everything that they signed and everything you printed is false. It is false advertising and you are taking advantage of older people who have trouble understanding all the rules and regulations that are forced upon them year after year. To make matters worse you have made our pharmacy and others look like liars and like we are only out to get their money when in truth we were only trying to help them save money."

--MO

"Our longtime customer was signed up by an insurance agent from a seminar at a local grocery store. She had the agent check if we were in the network before signing but was not explained the difference between preferred & non-preferred providers and did not understand until she got final member packet in mail. She is very upset about leaving us."

-- AR

"We have a little lady 96 years young; who has been our customer for 40 years. Does not take very much medicine but has very limited means. We deliver all prescriptions to her home and have for all of the forty (40) years!! She will now be forced to go to Walgreen to save the \$7.00 prescription co-pay! She has out lived her children and does not drive; nor would you want her to drive. She feels somewhat betrayed by the system and us."

-- TN

"My issue is with the First Health Part D Plan because when I signed people up on this plan it just state 0.00 copay for Network pharmacy and it listed my pharmacy as a network pharmacy. So they chose the plan because his pharmacy was listed. I have already lost 5 customers and the customers are upset because chose the plan thinking my pharmacy was in the network, or they would have chosen something else if they had known the difference."

--AL

"I have had customers enroll with Coventry's Part D plan who expected \$0 copays only to pay \$7-\$21. One customer had a senior agency run her meds in medicare's database, and we were listed. Now she is told \$0 copays would only apply at Wal-Mart, Walgreens, Sam's, or Target.

--MO

"We have a customer that signed up on First Health Part-D value plus thinking she could come to our pharmacy and get zero copays on all generics. She called Medicare on 1/11/12 to complain and was told she couldn't file a complaint because her pharmacy should have informed her that there were select pharmacies on that plan."

--AR

"Patients signing up with Part D plans and find out after the fact that their copays are cheaper through a Preferred Pharmacy (usually, Walmart, Walgreens). I can't compete because cost savings to patient can be significant. Every patient I have asked would prefer to stay at my pharmacy, but some have switched due to cost savings. There are at least 4 different plans in my region that have this type of preferential pricing. I am not allowed to sign up with these providers as a preferred pharmacy. Not a fair ball game, particularly dealing with a federally funded program."

--WI

"The Medicare.gov website indicated that the First Health Part D Value Plus plan would be least expensive for 19 of my customers. It indicated they would have \$0 copay for Tier 1 generics and \$0 deductible. My pharmacy was indicated as a participating pharmacy; however, it was not evident that I was not a preferred pharmacy. These patients now have co-pays and I risk losing all of the prescriptions for 19 customers. Located in a town of only 700 people, this is critical to my business. My customers are upset. I have tried on numerous occasions to get resolution with First Health, to no avail."

--AR

"I helped several of our customers sign up on First Health Part D Value Plus. I called the company before signing the customers up, gave specific drug names and asked for copay amounts. I did this for 7 people. In every instance, the company told me it would be a \$0 copay. I asked the copay amount twice to be extra sure. It was never mentioned that it was only that amount at certain pharmacies. When the customer came in to get their drugs on Jan.2, their copay for each generic I had asked about was \$7. When I called the company to ask why the larger copays, I was told that I should have asked the "right questions" to find out if we were a preferred pharmacy. I explained that the person I spoke to (and also one of the customers called and asked about specific drugs) never once mentioned that the copays that had been quoted were only at Walmart, Walgreens, Target, or Sams. I explained that we are 20 miles from a Walmart and 40 miles from the other choices. In many instances, we deliver to them because our patients are elderly. I told her the website information was deceptive and she again said I should have asked the right questions. I finally hung up on her & called Medicare. I finally spoke to a supervisor to make a complaint. She told me because the information was available, although not clearly visible, I couldn't lodge a complaint. One of the customers called to sign up over the phone and was never told about the preferred list. The woman at First Health said when a customer calls to enroll that they were not liable to offer the information about the copays, but our customer who signed up on the phone asked specific questions about copay amounts and was never told they were only at specific pharmacies. I think this is deceptive advertising. The representative at First Health said that beneficiaries were merely calling to enroll and should have asked the "right questions" about different copays at different places. I asked how do they know what questions to ask and the rep responded that "they should be more aware of their needs". These people are our customers and we feel responsible for them. Especially when we help them to try to save them money and it ends up costing them much more when they come into the pharmacy. Most of those involved have been our customers for 40 years so you can see why I'm upset and think we were deceived.

--AR

"I have a patient that enrolled in Med-D thru Medicare website. He selected plan for First Health since it showed being able to get 90days at my pharmacy for \$0 copay. However, the first of year he received notice that to get 90days for \$0 he would have to drive 23 miles to a Walgreens!"

--WV

"On a daily basis we have long-time patients are now finding they were misled by First Health into believing they would have \$0.00 copay at all pharmacies. We are in a small rural community and people do not have ready access (nor do they want to change to a chain) to one of the "preferred pharmacies". Our patients are losing easy access to their meds."

--MO

“Long time friend and Medicare D patient presented to the pharmacy with prescriptions to fill Jan 2012. Copays for generic meds were \$7. She questioned the price since she was told generics were \$0 on her new plan. We investigated and discovered we were a non-preferred pharmacy. There is currently no preferred pharmacy in our county. She was told she must drive 20 miles to another town in a different to either Walgreens or Walmart for a preferred pharmacy. She apologetically transferred her prescriptions to the chain in the next county, stating she was being forced to based on her reduced copays. She was assisted in enrolling in the plan by her Insurance Agent who stated she was unaware of the limited group and it was not stated clearly online.”

--MO

“I had two patients ask if we were considered preferred on the Coventry network before they signed up on their part d plan for 2012. After the plan began we ran their insurance to find that we are part of the network, but the patient could only get their \$0 copay at specific "preferred" chains. The language used in the literature confused the patients and caused them to join a plan that put them at a disadvantage when shopping at our store. Now they are forced to fill their rxs at another pharmacy to get the savings they were counting on when they joined this plan.”

--OK