



U.A. Local No. 393 Health and Welfare Plan  
P.O. Box 2460  
San Jose, CA 95109

## Important Information About Your Pharmacy Benefit

### FREQUENTLY ASKED QUESTIONS AFTER GO LIVE

Pharmacy states I do not have coverage, do I? If you are trying to fill a prescription with Rx date 7/1/21 or after, please ensure the pharmacy is utilizing your new ID card received from Navitus.

If you currently have an on line application established to order refills, such as Costco Mail Order, please ensure your profile is updated as of 7/1/21 with your new processing information with Navitus. The processing information, to include your member id, is on your new ID card.

I didn't receive my Navitus ID card, how do I obtain one? Contact Navitus Customer Care 24/7 at **1.844.268.9789** to assist with ordering a new ID card. You may also download the mobile app to obtain your ID card processing information.

Pharmacy states my prescription is not covered? The Navitus formulary is available on the member portal or mobile app which you can share with your physician to determine a covered alternative. Your physician may also call into Navitus Customer Care 24/7 at **1.844.268.9789** to discuss options.

My pharmacy is having difficultly processing my prescription, what should I do? Please ask your pharmacy to contact Navitus Customer Care and they will assist the pharmacy with any processing issues they may be having. Navitus Customer Care phone # is **1.844.268.9789**.

Navitus is stating I do not have coverage, what should I do? Contact Benesys, Plan Administrator, at **408.588.3751**. Benesys will then work with Navitus to update eligibility accordingly.

I've been told I need prior authorization before I can fill my prescription. How do I get a prior authorization? Please work with your physician to submit the appropriate documentation to Navitus for review and determination of coverage. Your physician can submit a Prior Authorization Form to Navitus via U.S. Mail or fax, or they can contact Navitus call

center at **1.844.268.9789** to speak to a Prior Authorization Specialist. The request processes as quickly as possible once all required information is together.

If the submitted form contains complete information, it will be compared to the criteria for use.

If the submitted form does not have all of the needed information, the physician will be contacted to provide the information. If the physician does not respond within a designated time frame, the request will be denied.