Frequently Asked Questions

For Members

Understanding My Benefits

Who is Liviniti?

Liviniti was selected by Office of Group Benefits (OGB) to manage your pharmacy benefits. As a pharmacy benefit manager (PBM), we work to help keep your costs low while you get the prescription medicines you need.

Who can help me with questions about my pharmacy benefits or prescriptions?

The Liviniti service team is here around the clock to answer questions and provide the support you need. Call (833) 925-2770 or send us an email: support@liviniti.com.

Filling Prescriptions

How can I find out more about a specific medication?

Your Member Portal and Mobile App are the go-to locations for information about your medications. Use "Medication Search" and enter the drug's name to find:

- Information about the available strengths
- Formulary tier
- Whether the drug is considered a specialty medication
- Whether it's available over the counter
- The route/method the drug is administered
- Programs or pre-approvals needed under your pharmacy benefit plan

What is a specialty drug?

Specialty medications are biologic drugs used to treat complex, ongoing conditions. They generally cost more and you may have a higher out-of-pocket cost for specialty drugs. You can determine if a medication is considered a specialty drug in the Medication Search tool.

Getting the Right Medication at the Best Price

What is a Prior Authorization (PA)?

Sometimes, when a patient is prescribed a specific medication for a complex condition, a prior authorization is required. When multiple medications can treat the same condition Liviniti will work with your doctor to ensure a cost-effective drug is selected. Prior authorization helps:

- Ensure that the prescribed medication is approved by the FDA to treat your condition.
- Determine if another drug should be tried first, before a more costly drug.

Once the PA is submitted by your doctor via ePA at liviniti.promptpa.com, Liviniti quickly evaluates the information and will determine if it is approved under your pharmacy plan. If a drug is denied for coverage, you and your doctor have the option to appeal the decision.

What is the Prior Authorization (PA) Appeal Form?

To file an appeal for denied coverage of a specific drug, your prescriber will need to complete the PA Appeal Form and submit it to Liviniti with clinical documentation. The PA Appeal Form is located on the Member Center.

How do I find out if a Prior Authorization is required for my medication?

Liviniti wants to make it easy for you to know which drugs require PA approval. You can look up this information using the Medication Search capability in your Member Portal and also on the Your Company Page. Visit Liviniti.com/members to reach these tools. If a prior authorization is required, you will notice "PA" under the column labeled "Coverage Restrictions."

Self-Service Tools

Does Liviniti have a mobile app or a member portal?

Yes. Making sure that you can find the information you need to manage your prescriptions and your pharmacy benefits is important. We have a variety of digital tools to make it easy.
Visit the Member Center at Liviniti.com/members to:

- Login to the Member Portal or Your Company Page
- Download the **Member Welcome Guide** for an overview of the features of the Member Portal
- Download the **Mobile App Flyer** for an overview of the capabilities and features of the Mobile App, including QR codes that you can use to easily find the Liviniti App in the App Store that you use.

How is the Preferred Drug List/Formulary structured?

The Core Formulary includes FDA-approved generic (Tier 1), brand preferred (Tier 2) drugs and brand non-preferred (Tier 3) within select therapeutic categories.
Tier changes: Liviniti compiles formulary tier changes 120 days prior to the effective date. Liviniti's formulary team identifies impacted members and prepares letter communications. Members affected by negative formulary tier changes receive these letters in the mail approximately 60 days in advance of the negative tier changes.

How does the claims reimbursement process work?

Liviniti simplifies claim reimbursement with two easy ways to file your form. Visit the Member Center at liviniti.com/members and select:

1. "Submit a Manual Claim Form for Reimburement" to submit a manual claim.
2. "Submit an Online Claim Form for Reimburement" for an online claim.

Once you've made your selection, complete the form with your information and follow the submission instructions.

Questions? Contact Us

We're here 24/7/365 to support plan members

- Call us: 833-925-2770
- Send a fax: (318) 214-4190
- Send an email: support@liviniti.com
- Visit: liviniti.com