

Effective January 1, 2025

Changes in prescription drug eligibility for 90dayRx

As part of your insurance benefits, you may have access to the 90dayRx program. This may allow you to get a 90-day supply of your long-term prescription drugs at a lower cost. You can use this benefit with in-network mail and participating retail pharmacies. To use 90dayRx, first check if your pharmacy is in the network by visiting bluecrossmn.com. Then, provide your prescription for a 90-day supply of the eligible drug.

Starting January 1, 2025, some drugs might not be covered by the 90dayRx program. Check the list below. This list is reviewed regularly and may change. Not all plans follow this list, if you have questions or would like current information on drugs excluded from the 90dayRx program, call our Customer Service team at the number on the back of your ID card.

Drug brand names are shown in all capital letters, followed by the generic names in lower case.

Drugs NOT eligible for 90dayRx

DIABETES MEDICATIONS

Oral

RYBELSUS – semaglutide tab 3 mg
RYBELSUS – semaglutide tab 7 mg
RYBELSUS – semaglutide tab 14 mg

Non-insulin Injectables

BYDUREON BCISE – exenatide extended release
susp auto-injector 2 mg/0.85 ml
BYETTA – exenatide soln pen-injector 5 mcg/0.02 ml
BYETTA – exenatide soln pen-injector 10 mcg/0.04 ml
LIRAGLUTIDE - liraglutide soln pen-injector 18 mg/3 ml (6 mg/ml)
MOUNJARO - tirzepatide soln auto-injector 5 mg/0.5 ml
MOUNJARO - tirzepatide soln auto-injector 7.5 mg/0.5 ml
MOUNJARO - tirzepatide soln auto-injector 10 mg/0.5 ml
MOUNJARO - tirzepatide soln auto-injector 12.5 mg/0.5 ml
MOUNJARO - tirzepatide soln auto-injector 15 mg/0.5 ml
OZEMPIC – semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3 ml)
OZEMPIC – semaglutide soln pen-inj 1 mg/dose (4 mg/3 ml)
OZEMPIC - semaglutide soln pen-inj 2 mg/dose (8 mg/3 ml)
TRULICITY - dulaglutide soln pen-injector 0.75 mg/0.5 ml

TRULICITY - dulaglutide soln auto-injector 1.5 mg/0.5 ml
TRULICITY - dulaglutide soln auto-injector 3 mg/0.5 ml
TRULICITY - dulaglutide soln auto-injector 4.5 mg/0.5 ml
VICTOZA – liraglutide soln pen-injector 18 mg/3 ml (6 mg/ml)

WEIGHT MANAGEMENT

SAXENDA – liraglutide (weight mngmt) soln pen-inj 18 mg/3 ml (6 mg/ml)
WEGOVY - semaglutide (weight mngmt) soln auto-injector 1.7 mg/0.75 ml
WEGOVY - semaglutide (weight mngmt) soln auto-injector 2.4 mg/0.75 ml
ZEPBOUND - tirzepatide (weight mngmt) soln auto-injector 2.5 mg/0.5ml
ZEPBOUND - tirzepatide (weight mngmt) soln auto-injector 5 mg/0.5ml
ZEPBOUND - tirzepatide (weight mngmt) soln auto-injector 7.5 mg/0.5ml
ZEPBOUND - tirzepatide (weight mngmt) soln auto-injector 10 mg/0.5ml
ZEPBOUND - tirzepatide (weight mngmt) soln auto-injector 12.5 mg/0.5ml
ZEPBOUND - tirzepatide (weight mngmt) soln auto-injector 15 mg/0.5ml

Notice of Nondiscrimination and Accessibility

At Blue Cross and Blue Shield of Minnesota and Blue Plus, we treat everyone fairly. We don't exclude you, or treat you less favorably, because of your race, skin color, national origin, age, disability status, or sex (including sexual orientation; sex characteristics including intersex traits; pregnancy or related conditions; gender identity; and sex stereotypes). We follow federal civil rights laws and don't discriminate against anyone based on these traits.

If you communicate best in a language other than English, you can request free language assistance services.

If you have a vision, hearing, or speech impairment, we can communicate in a way that works best for you. This may include using sign language interpreters, providing documents in large print or Braille, audio recordings, or other aids at no charge.

Need these services? Call **1-855-903-2583**, TTY **711** or call the number on the back of your member identification card.

Discrimination is against the law.

If we failed to provide services or discriminated in another way based on your race, skin color, national origin, age, disability status, or sex, (including sexual orientation; sex characteristics including intersex traits; pregnancy or related conditions; gender identity; and sex stereotypes), you can file a complaint by contacting our Nondiscrimination Civil Rights Coordinator:

Email: Civil.Rights.Coord@bluecrossmn.com
Telephone: 1-800-509-5312
Mail: Blue Cross and Blue Shield of Minnesota
ATTN: Civil Rights Coordinator P3-2
PO Box 64560, Eagan, MN 55164-0560

Nondiscrimination complaint forms are available on our website at bluecrossmn.com/NDL, or from the Nondiscrimination Civil Rights Coordinator.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services

- electronically through the Office for Civil Rights complaint portal: ocrportal.hhs.gov/ocr/portal/lobby.jsf
- by mail at: U.S. Department of Health and Human Services,
200 Independence Avenue SW, Room 509F, HHH Building, Washington, D.C. 20201
- or by phone at: 1-800-368-1019, 1-800-537-7697 (TDD)

Civil rights complaint forms are available at hhs.gov/ocr/office/file/index.html.

ENGLISH ATTENTION: If you speak a language other than English, language services are available free of charge. If you have a vision, hearing, or speech impairment, we can communicate in a way that works best for you. This may include using sign language interpreters, providing documents in large print or Braille, audio recordings, or other aids at no charge. Call 1-855-903-2583 (TTY 711).	廣東話 (Cantonese – Traditional Chinese) 請注意：如果您說 廣東話 您可要求免費語言協助服務。如果您有視力、聽力或言語障礙，我們會以最適合您的方式與您溝通。這可能包括使用手語傳譯員、免費提供大字體或點字文件、錄音或其他輔助工具。請致電 1-855-903-2583 聽障熱線 (TTY 711)。
ESPAÑOL (Spanish) ATENCIÓN: Si habla Español, puede solicitar servicios gratuitos de asistencia lingüística. Si tiene una deficiencia visual, auditiva o del habla, podemos comunicarnos de la manera que le resulte mejor a usted. Esto puede incluir el uso de intérpretes de lengua de señas, el suministro de documentos en letra grande o braille, grabaciones de audio u otras ayudas sin cargo. Llame al 1-855-903-2583 (TTY 711).	عربية (Arabic) إني أكتب أستعاني من إعاقة بصرية أو سمعية أعوذ قيةط، يمكننا التواصل معك بالطريقة التي استبذك.وقد يشمل ذلك استخدام مترجمين للغة الإشفورة، أ ت ير المستندات بحروف أو بطريقة برايل، أو تسجيلات صوتية، أو غيرها من الوسائل المساعدة من صد. لى على الرقم 1-855-903-2583 (لهاتف النصي 7 1 1)
አማርኛ (Amharic) ትኩረት ይሰጥ:- አማርኛ ቋንቋ የሚናገሩ ከሆነ፣ ነጻ የቋንቋ እገዛ አገልግሎቶችን መጠየቅ ይችላሉ። የማየት፣ የመስማት ወይም የመናገር ችግር ካለብዎት እጅስዎ በተሻለ በሚሠራው መንገድ መግባባት እንችላለን። ይህ ደግሞ የምልክት ቋንቋ አስተርጓሚዎችን መጠቀም፣ በትላልቅ ህትመቶች ወይም በብሬይል የተጻፉ ሰነዶችን፣ የድምፅ ቅጂዎችን ወይም ሌሎች መርጃዎችን ያለ ክፍያ ማቅረብን ይጨምራል። 1-855-903-2583 (TTY 711) ላይ ይደውሉ።	FRANÇAIS (French) ATTENTION : Si vous parlez Français, vous pouvez demander des services d’assistance linguistique gratuits. Si vous avez une déficience visuelle, auditive ou vocale, nous pouvons communiquer de la manière qui vous convient le mieux. Il peut s’agir d’interprètes en langue des signes, de documents en gros caractères ou en braille, d’enregistrements audio ou d’autres aides gratuites. Composez le 1-855-903-2583 (ATS 711).
LUS HMOOB (Hmong) LUS CEEV TSHWJ XEEB: Yog hais tias koj hais Lus Hmoob, koj tuaj yeem thov cov kev pab cuam uas pab hom lus tau dawb. Yog hais tias koj qhov muag tsis pom kev zoo, tsis hnov lus, los sis hais tsis tau lus, peb tuaj yeem sib txuas lus hauv ib txoj hau kev uas ua hauj lwm tau zoo tshaj plaws rau koj. Qhov no tej zaum yuav muaj xam nrog kev siv cov neeg txhais lus piav tes, kev muab cov ntaub ntawv luam tawm ua tus ntawv loj los sis Ua Ntawv Su Rau Cov Neeg Tsis Pom Kev Siv Tau (Braille), kev kaw ua suab lus, los sis lwm yam kev pab yam tsis tau them nqi. Hu rau 1-855-903-2583 (TTY 711).	SOOMALI (Somali) XASUUSIN: Haddii aad ku hadasho Soomali, waxaad codsan kartaa adeegyada caawimaadda luqada oo bilaash ah. Haddii aad laxaad la’aan kataahy aragga, maqalka, ama hadalka, waxaanu kugula xidhiidhi karnaa habka adiga kuugu habboon. Tan waxaa ka mid ah in aan isticmaalno turjumaanada luuqada dhegoolaha, in la bixiyo waraaqo ku qoran xarfaha waaweyn ama qoraalka indhoolayaasha, in la sameeyo cajalado la duubay, ama in la helo waxyaabo kale oo caawimaad ah oo bilaash ah. Wac 1-855-903-2583 (TTY 711).
ខ្មែរ (Khmer) វិជ្ជាជំនាញ៖ បសិទ្ធិបេក្ខនិស្សិត ៧៨ ឆ្នាំ; វិជ្ជា < ចំណេះ ស្រី ស្រី? ជំនួយបកប្រែ, ៧៨ ឆ្នាំ យកកត់ត្រាចែក, បសិទ្ធិបេក្ខ អ្នកមេសាសនា ៨ ប្រាំមិនឮ ឬនិយមន័យ Q នៃ យោង < ច , Q, ស៊ីយ S កំណត់ ឬ មួយអ្នក V មេសាសនា ៧៨ ឆ្នាំ នៃ Z ន , បសិទ្ធិ [7 ពេល] បំផុតស, Z បំផុត ។ ឬ, Q, ស៊ីយ S កំណត់ នៃ ៖ < ច Z ន ដូច ឬ អ្នកបកប្រែ, ៧៨ ឆ្នាំ ។ វិជ្ជា ឯក ៨ វិជ្ជា នៃ Q ៖ ពុំមែន វិជ្ជា ឬ អ្នក Y ៨ ឬ ។ វិជ្ជា ឯក ៨ ឬ ។ ឬ ជំនួយ នៃ យោង W ក នៃ យកកត់ត្រាចែក ឬ វិជ្ជា ៧៨ ឆ្នាំ នៃ ៧៨ ឆ្នាំ ។ 1-855-903-2583 (TTY 711) ។	한국어 (Korean) 주의: 한국어를 사용하시는 경우 귀하는 무료 언어 지원 서비스를 요청하실 수 있습니다. 시각 장애, 청각 장애 또는 언어 장애가 있는 경우 저희는 귀하에게 가장 적합한 방법으로 연락을 드릴 수 있습니다. 여기에는 수화통역사 이용, 대형 활자 또는 점자로 작성된 문서 제공, 음성 녹음 또는 기타 무료 지원이 포함될 수 있습니다. 1-855-903-2583 (TTY 711)번으로 전화하십시오.

ကညီကီဂျာ (Karen) ဟ်သးၵ်းဟ်သး- နမ့ၵ်းကတိၤ ကညီကီဂျာ န့ၵ်, နယုကီဂျာၵ်းတိတိတၢ်မၤစၢၤလၢတလၢ်ဘးလဲ သ့န့ၵ်လီၤ. နမ့ၵ်းအိၵ်းတၢ်တလၢတပဲၤလၢ မဲၵ်းတၢ်ထံၵ်, တၢ်န့ၵ်ဟး, မ့တမ့ၢ် တၢ်စးကတိၤတၢ်န့ၵ် ပဆဲးကျဲးဆဲးကီဂျာတၢ်လၢ ကဲဂျကဲထီၵ်လိာ်ထီၵ်အဂ့ၢ်ကတၢ်လၢနဂီၢ်သ့န့ၵ်လီၤ. တၢ်အံၤ ပၵ်ဃBတၢ်ဒီး တၢ်စးၵ်းကါ နီၢ်နီၢ်ကီဂျာကီဂျာအပၤကီဂျာထံတၢ်တဖၣ်, တၢ်ဟ့ၣ်လံာ်လံာ်တဖၣ်လၢ အလံာ်ဖျါဖးဒိၣ်, မ့တမ့ၢ် ပၤမဲၵ်းဘီဂျာၵ်းအလံာ်, တၢ်ကလBတၢ်, မ့တမ့ၢ် တၢ်မၤစၢၤကတၢ်လၢတဖၣ် လၢတလၢ်အဘးၵ်းလဲန့ၵ်လီၤ. ကိးလီတဲစိဆဲး 1-855-903-2583 (TTY 711) တက့ၢ်.	မြန်မာဘာသာ (Burmese) သတိပြုရန်- သင်သည် မြန်မာဘာသာ စကားကို B ဝေဟပါက၊ အခမဲ့ ဘာသာစကား အကူအညီ ဝန်ဆောင်မှုများကို B တောင်းဆိုနိုင်ပါသည်။ သင့်တွင် အမြင်အာရုံ B အကူအညီ B သို့မဟုတ် စကားပြောခြင်း ခံရမှုများမရှိပါက သင့်အတွက် အသင့်လျော်သော ပြန်လည်လေ့လာမှုနှင့် ကျန်းမာရေး B ပံ့ပိုးမှုများ ဆက်သွယ်နိုင်ပါသည်။ ၎င်းတွင် လက်ဟန်ပြဘာသာစကား စကားပြန်များကို B အသံ B ပြောခြင်း၊ စာရွက်စာတမ်းများကို B ပံ့ပိုးမှု B ပံ့ပိုးမှုများ သို့မဟုတ် မျက်မှန်စာဖြင့် ပံ့ပိုးမှုများ ပြောင်း၊ အသံဖမ်းယူမှုများ သို့မဟုတ် အခြားအထောက်အကူများဖြင့် အခမဲ့ပံ့ပိုးမှုများ ပြောင်းတို့ B ပါဝင်ပါသည်။ 1-855-903-2583 (TTY 711) သို့မဟုတ် ဝန်ဆောင်မှု B ပါ။
OROMOO (Oromo) Xiyyeeffannoon haa kennamu:- Oromo Afaan kan dubbatan yoo ta'e, tajaajiloota gargaarsa afaanii bilisaa gaafachuu ni dandeessu. Rakkoo ilaalu, dhaga'u ykn dubbachuu yoo qabaattan, karaa isiniif mijatuun haala isiniif galuun mari'achuu ni dandeenya. Kunis of keessatti kan qabatu, hiiktota afaan mallattoo fayyadamuun maxxansa gurguddaa ykn bireeylii, waraabbiwwan sagalee ykn gargaarsota biroo kaffaltii tokkoo malee gaafachuu dha. 1-855-903-2583 (TTY 711) irratti bilbilaa.	РУССКИЙ (Russian) ВНИМАНИЕ: Если ваш язык — РУССКИЙ, вы можете запросить бесплатные услуги языковой поддержки. Если у вас есть нарушение зрения, слуха или речи, мы можем общаться таким образом, который лучше всего подходит вам. Это может включать бесплатное использование переводчиков на языке жестов, предоставление документов крупным шрифтом или шрифтом Брайля, использование аудиозаписей или других вспомогательных средств. Звоните по телефону 1-855-903-2583 (TTY 711).
ພາສາລາວ (Lao) ເຂົາໃຈໃສ່: ຖ້າທ່ານເວົ້າ ພາສາລາວ, ທ່ານສາມາດຂໍບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໄດ້ໂດຍບໍ່ເສຍຄ່າ. ຖ້າທ່ານມີຄວາມປົກຄອງດ້ານສາຍຕາ, ການໄດ້ຍິນ ຫຼື ການປາກເວົ້າ, ພວກເຮົາສາມາດສ້າງການດ້ວຍວິທີທີ່ເໝາະສົມກັບທ່ານທີ່ສຸດ. ອັນນີ້ອາດຈະລວມເຖິງການໃຊ້ນ້ຳໝາຍພາສາມື, ການຈັດກຽມເອກະສານເປັນໂຕເລັກໃຫຍ່ ຫຼື ອັກສອນນູນ, ການບັນທຶກສຽງ ຫຼື ການຊ່ວຍເຫຼືອດ້ານສື່ອື່ນໆໂດຍບໍ່ເສຍຄ່າໃຊ້ຈ່າຍໃດໆ. ໂທ 1-855-903-2583 (TTY 711).	Tagalog (Tagalog) PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang humingi ng mga libreng serbisyo na tulong sa wika. Kung may kapansanan ka sa paningin, pandinig, o pananalita, maaari tayong mag-usap sa paraan na pinakamabuti para sa iyo. Maaaring kabilang dito ang paggamit ng mga interpreter ng sign language, pagbibigay ng mga dokumento na malalaki ang pagkaprinta o Braille, mga audio recording, o iba pang mga tulong nang walang bayad. Tumawag sa 1-855-903-2583 (TTY 711).
VIETNAMESE (Vietnamese) LƯU Ý: Nếu quý vị nói Vietnamese, quý vị có thể yêu cầu dịch vụ hỗ trợ ngôn ngữ miễn phí. Nếu quý vị bị khiếm thị, khiếm thính hoặc khuyết tật về âm ngữ, chúng tôi có thể giao tiếp theo cách phù hợp nhất với quý vị. Điều này có thể bao gồm việc sử dụng thông dịch viên ngôn ngữ ký hiệu, cung cấp tài liệu dạng bản in cỡ chữ lớn hoặc chữ nổi, bản ghi âm hoặc các phương tiện hỗ trợ khác miễn phí. Xin gọi số 1-855-903-2583 (TTY 711).	简体中文 (Chinese Simplified) 注意：如果您说普通话，则可以免费申请语言协助服务。 如果您有视力、听力或语言障碍，我们可以用最适合您的方式 与您交流。这可能包括免费提供手语翻译、大字体或盲文文件、 录音或其他辅助工具。 请致电 1-855-903-2583（文字电话 711 ）。