

2026 SCAN Transition Policy Statement

As a new or continuing member to our plan, you may be taking drugs that are not on our Part D formulary or on our Part D formulary but have prior authorization, step therapy and/or quantity limits. In these instances, you should talk to your doctor about the appropriate alternative therapies available on our formulary. If there are no appropriate alternative therapies on our formulary, you or your doctor can request an exception and ask the plan to cover the drug or remove restrictions from the drug. While you are talking with your doctor to determine the course of action, we may cover up to a 30-day transition supply of Part D drugs that are not on our formulary or on our formulary but have prior authorization, step therapy and/or quantity limits during your first 90 days of coverage.

If you are a resident of a long-term care facility, we may cover up to a 31-day transition supply during the first 90 days of coverage. After the first 90 days, we may also provide a 31-day emergency supply unless you have a prescription written for fewer days.

If you are a member with a level of care change, we may cover a 31-day transition supply if you are moving from home or a hospital stay to a long-term care facility. We may cover a 30-day transition supply if you are moving from a long-term care facility or a hospital stay to home.

If you have any questions about our transition policy or need help asking for a formulary exception, please call our Member Services.