



Step-by-Step Guide

This guide provides basic instructions for utilizing the Member Pricing Tool (Drug Pricing).

Physician

Find Physician

What is the Member Pricing Tool?

The Member Pricing Tool allows you to compare the price of your medications at nearby pharmacies. The results are presented in real-time and are based on your unique member benefits. Results may vary by pharmacy used, as well as drug dispensed, including strength, quantity, manufacturer, and days supply.

Output: Out

The pricing tool is accessed through the Member Portal on www.proactrx.com. You will be instructed to register for an account if you haven't already signed up.

STEP 1 | • • • • • • • • • •

Visit www.proactrx.com. After signing in to an existing account, select the *Drug Pricing* button.

	Benefits Mail	Order Pharmacy	Login & Security						
	S Drug Pri Check Drug local pharm	cing Pricing at your acies.	Formulary Lookup Find coverage for your medication.		Pharmacy Finde Locate in-network pharmacies nearby.	r			
	Relationship	Name	Member ID						
	Cardholder	Your Name	00000000000	Oclaims History	🖬 Print Temporary ID Card				
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© ProAct, Inc. 2018 Headquarters ProAct, Inc. 6333 Route 298 - Suite 210 PROCACC	FIT MANAGEMENT Benefits Mail C Benefits / Drug Result	rder Pharmacy Pricing s may vary by pha	Login & Security	Corporate Overvi	Resources Contact Us Corporate Over	View Diamonica Mail Order	My Account nd days supply.	Careers	Logout

2. After you have selected a product and Dosage, select one or more pharmacies with Find Pharmacies

** We have already suggested some pharmacies you have filled at previously.

STEP 2 | • • • • • • • • • •

Click on the *Product Search* button under **Drug** in the left hand column.

STEP 3 | • • • • • • • • • •

HARMACY BENEFIT MANAGEMENT

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Type the name of your drug in the box under Product Name. A list of suggested drugs will populate upon entering the first few letters of a product name. Make your selection from the list and click the Submit button.

STEP 4 | • • • • • • • • • • •

The preliminary search results will appear as a list. Review the list for the desired drug and dosage.

If your desired drug is listed under the Formulary Tier column as "Non-Formulary Brand Premium: Excluded from Coverage", click the Find Generic Alternatives button.

STEP 5 •••••

A refined list of drugs will populate. Choose the Formulary Generic option by clicking the blue Select button.

PHARMACY BENEFIT M	ANAGEMENT					
	Benefits	Mail Order Pharma	cy Login & Security			
	Benefits	Drug Pricing / Pro	duct Search	아이는 아이는 아이는 아이는 것이 같아.	이 말을 가 같다. 것이 것이	
Product Name * Diovan Submit						
© ProAct, Inc. 2018 Headquarters ProAct, Inc. 6333 Route 298 - Suite 210 Fact Surgeyee, NY 13057					Resources Contact Us Corporate Overview Find In Network Pharmacies	
	AGEMENT			<u>Corpor</u>	te Overview Contact Us Mai	il Order My Account Careers Logor
	Benefit	s Mail Order Pharmac	v Login & Security			
	Benefit Benefit	Mail Order Pharmac	Login & Security			
roduct Name *	Benefit Benefit	Mail Order Pharmad	y Login & Security Juct Search	Prior Auth	Required Formulary Tier	Generic Alternatives
roduct Name *	Benefit Benefit	Is Mail Order Pharmac Is / Drug_Pricing / Proc Product Name DIOVAN 40 MG Tablet	y Login & Security duct Search Generic Name VALSARTAN TAB 40 MG	Prior Auth	Required Formulary Tier Non-Formulary Brand Premium: Evoluted for	Generic Alternatives
roduct Name * Diovan Submit	Benefit	Mail Order Pharmack A Drug Pricing / Proc Product Name DIOVAN 40 MG Tablet DIOVAN 80 MG Tablet	yy Login & Security uuct Search Generic Name VALSARTAN TAB 40 MG VALSARTAN TAB 80 MG	Prior Auth	Required Formulary Tier Non-Formulary Brand Premium: Excluded fro Non-Formulary Brand Premium: Excluded fro	Generic Alternatives Find Generic Alternatives Set om Coverage Find Generic Alternatives Set
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Non-Formulary Brand Premium: Excluded from Coverage

Find Generic Alternatives

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Resources



STEP 6 | • • • • • • • • •

After you have selected a formulary drug and dosage, you will be required to indicate which pharmacies you would like to compare. Start by clicking the *Find Pharmacies* button.

STEP 7 | • • • • • • • • • •

Fill in the fields to locate pharmacies within your preferred radius and zip code. Optionally, you may provide the name of a specific pharmacy to search for within the chosen radius. Continue by clicking the *Find Pharmacies* button.

	SEMENT		Corpor	ate Overview	Contact Us	<u>Mail Order</u>	<u>My Account</u>	<u>Careers Logout</u>
	Benefits	Mail Order Pharma	cy Login & Security					
	Benefits	Drug Pricing			말과 않는 것	in de la		
Drug		Results may vary by	y pharmacy used, as well as drug dispensed, inclu	uding strength,	quantity, ma	nufacturer, ar	nd days supply	
VALSARTAN TAB 320MG Product Search		Drug Name	Pharmacy	Day: Sup	s ply Qty	Ye	ou ay A	dditional Info
Pharmacy		VALSARTAN TAB	PROACT. Save with Mail Order 90-day r	efills 90	90	N	/A Pleas	e contact ProAct at
WEGMANS FOOD MARKETS, INC.		520MG	delivered right to your home!		Upda	Update		-077-055-5545
WALMART PHARMACY 10-2166		VALSARTAN TAB	WEGMANS FOOD MARKETS, INC.	30	30	N	/A Pleas	e contact ProAct at
RITE AID #10741		320MG					1	-877-635-9545
Find Pharmacies		VALSARTAN TAB 320MG	WALMART PHARMACY 10-2166	30	30	Ν	/A Pleas	e contact ProAct at -877-635-9545
Physician Find Physician		VALSARTAN TAB 320MG	RITE AID #10741	30	30	N	/A Pleas	e contact ProAct at -877-635-9545

PROACT	MANAGEMENT			Corporate Overview	Contact Us	Mail Order	My Account	<u>Careers</u>	Logout
	Benefits	Mail Order Pharmacy	Login & Security						
	Benefits	/ Drug Pricing / Pharma	cy Search			12-22			
Radius * 1 mile Zip Code *	F C	Please fill in the fields to the Dptionally, you can provide	e left to locate pharmacies within the select the name of a specific pharmacy to search	ed radius of a zip code. for within that radius.					
Pharmacy Name									



STEP 8 | • • • • • • • • • • •

Check the boxes for each pharmacy in which you would like to receive drug pricing. Advance by clicking the blue *Use Selected Pharmacies for Drug Pricing* button.



STEP 9 | • • • • • • • • • •

The cost of your drug and dosage will be listed for each selected pharmacy under the **You Pay** column.

Note: The Member Pricing Tool defaults to 30 days supply and quantity of 30.

	GEMENT		Corporate Ove	<u>erview C</u>	ontact Us	Mail Order M	My Account Careers Logout
	Benefits	Mail Order Pharmacy	Login & Security				
	Benefits /	Drug Pricing				Seller P	
Drug		Results may vary by	pharmacy used, as well as drug dispensed, including strength, quantity,	, manufactu	rer, and day	vs supply.	
VALSARTAN TAB 320MG Product Search		Drug Name	Pharmacy	Days Supply	Qty	You Pay	Additional Info
Pharmacy		VALSARTAN TAB 320MG	PROACT: Save with Mail Order 90-day refills delivered right	90	90	N/A	Please contact ProAct at 1-877- 635-9545
WALMART PHARMACY 10-5242			to your home!		Update		
PRICE CHOPPER PHARMACY		VALSARTAN TAB	WALMART PHARMACY 10-5242	30	30	5.00	
WEGMANS FOOD MARKETS, INC.		320MG					
RITE AID PHARMACY 10737		VALSARTAN TAB	PRICE CHOPPER PHARMACY	30	30	5.00	
CVS PHARMACY #		320MG					
RITE AID #10736		VALSARTAN TAB 320MG	WEGMANS FOOD MARKETS, INC.	30	30	5.00	1
Find Pharmacies		VALSARTAN TAB 320MG	RITE AID PHARMACY 10737	30	30	5.00	
Physician		VALSARTAN TAB 320MG	CVS PHARMACY #	30	30	5.00	
Find Physician		VALSARTAN TAB 320MG	RITE AID #10736	30	30	5.00	

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STEP 10 | • • • • • • • • • •

To change the **Total Quantity** and **Days Supply**, simply type the desired numbers in the corresponding boxes and click the *Find Pricing* button. Pricing will be updated in the **You Pay** column.

Benef	ts Mail Order Pharmacy	/ Login & Security				
Benefi	ts / Drug Pricing					
Drug	Results may vary by p	ply.				
Product Search	Drug Name	Drug Name Pharmacy		Qty	You Pay	Additional Info
Pharmacy	VALSARTAN TAB 320MG	PROACT. Save with Mail Order 90-day refills delivered right to	90	90.0	N/A	Please contact ProAct at 1-877 635-9545
WALMART PHARMACY 10-5242		your home!		opuale		
PRICE CHOPPER PHARMACY	VALSARTAN TAB	WALMART PHARMACY 10-5242		90	13.61	
WEGMANS FOOD MARKETS, INC.	320MG					
RITE AID PHARMACY 10737	VALSARTAN TAB	PRICE CHOPPER PHARMACY	90	90	13.61	
CVS PHARMACY #	VAL SADTAN TAD	WECHANG FOOD MADKETS INC	00	00	12.61	
RITE AID #10736	320MG	WEGMANS FOOD WARKETS, INC.	90	90	13.01	
Find Pharmacles	VALSARTAN TAB 320MG	RITE AID PHARMACY 10737	90	90	13.61	
Physician JOHN MICHAELS	VALSARTAN TAB 320MG	CVS PHARMACY #	90	90	13.61	
Find Physician	VALSARTAN TAB 320MG	RITE AID #10736	90	90	13.61	
Total Quantity * 90 Days Supply * 90 Find Pricing *						

Questions?

The ProAct Help Desk is available to serve you 24 hours a day, 7 days a week. Our knowledgeable customer service representatives can assist you with the Member Pricing Tool and *much more*.

