

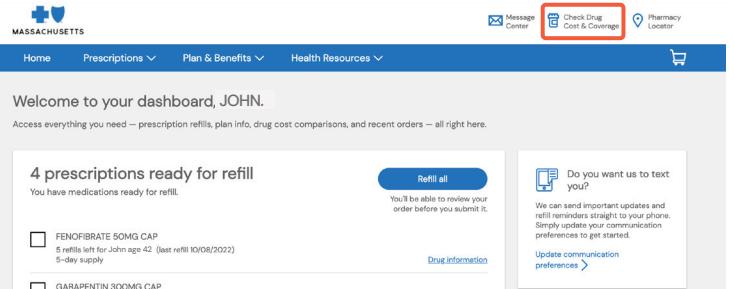
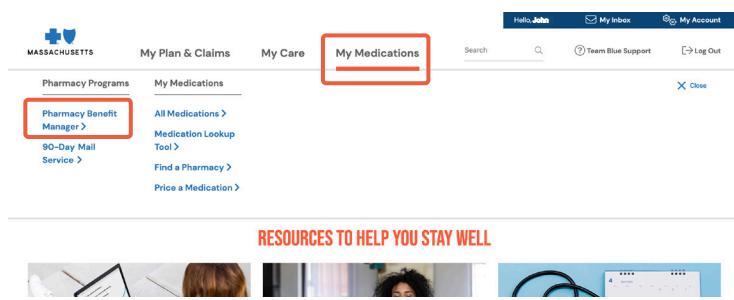
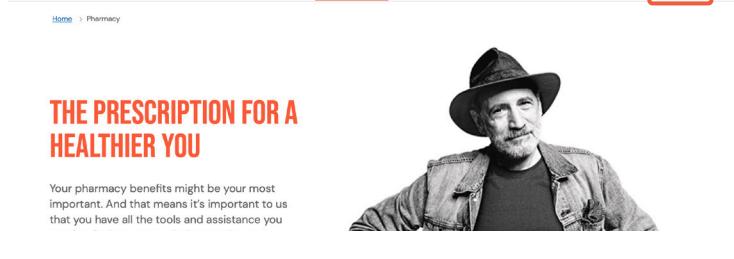


MASSACHUSETTS

# FIND THE COST OF YOUR MEDICATION

With the Check Drug Cost & Coverage tool, you can see the price of your medication before you go to the pharmacy.

Here's how to use the Check Drug Cost & Coverage tool:



1

Sign in to MyBlue at [bluecrossma.org](http://bluecrossma.org), or open the MyBlue app.

2

Select **Pharmacy Benefit Manager** from the **My Medications** drop-down menu.

3

Select **Check Drug Cost & Coverage** at the top right of the page.

## Check Drug Cost and Coverage

Drug search

Enter at least 3 letters of the drug's name.  
Enter Drug Name...

Patient  
JOHN SAMPLE - 01/01/1980

Primary Pharmacy  
CVS Pharmacy 01910  
260 N Main St  
Manchester, CT 06042  
(860) 646-4510  
[Change my pharmacy](#)

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Enter the medication name in the search box.

## Check Drug Cost and Coverage

Drug search

Enter at least 3 letters of the drug's name.  
Trulicity

Trulicity (brand)  
Trulicity (generic)  
Cedur Simplicity 2u (brand)  
Empliciti (brand)  
Cedur Simplicity Inserter (brand)

5

Select the medication name from the drop-down menu, then click **Search**.

### Trulicity (brand)

#### Select form and strength

Form (i.e. tablet) and strength (i.e. 30mg)

Select form and strength  
Inj 75/5  
Inj 15/5  
Inj 30/5  
**Inj 4.5/5**  
Pen 1.5/5  
Pen 3/5  
Pen 4.5/5

Primary Pharmacy  
CVS Pharmacy 01910  
260 N Main St  
Manchester, CT 06042  
(860) 646-4510  
[Change my pharmacy](#)

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Select the medication form and strength from the drop-down menu.

## Check Drug Cost and Coverage

Drug search

Trulicity (brand) Inj 4.5/5

[New Search](#)

#### View pricing

Form (i.e. tablet) and strength (i.e. 30mg)

Inj 4.5/5

Standard Dosage

7

Click the **View Pricing** button.

## Questions?

If you have any questions, call Team Blue at the Member Service number on the front of your member ID card.

Blue Cross Blue Shield of Massachusetts complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

ATTENTION: If you don't speak English, language assistance services, free of charge, are available to you. Call Member Service at the number on your ID card (TTY: 711).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al número de Servicio al Cliente que figura en su tarjeta de identificación (TTY: 711).

ATENÇÃO: Se fala português, são-lhe disponibilizados gratuitamente serviços de assistência de idiomas. Telefone para os Serviços aos Membros, através do número no seu cartão ID (TTY: 711).