Benefit highlights: mail order

When to Use

The most efficient way to fill prescriptions that you take for long-term or chronic conditions is through the Mail Order Service.

Days Supply

Through the Mail Order Service, you can purchase up to a 90-day supply of most prescription medications. There may be limitations on some prescriptions, such as controlled medications, subject to state and federal dispensing limitations.

Co-payment

Different co-payments may apply for certain medications.

For brand-name medications:

For medications that are on your plan's preferred drug list: Your co-payment is 40.00% of the medication's total cost. Your plan includes a maximum co-payment of $300.00.

For medications that are not on your plan's preferred drug list:

Not covered

For generic medications: Your co-payment is $20.00.

Additional Discounts

In some instances, additional discounts may be available to further reduce the cost of some prescription drugs. Eligible discounts will be reflected in your cost. Additional discounts may vary at time of purchase.

Out-Of-Pocket

Your out-of-pocket expense is the maximum amount you will pay before your plan sponsor reduces your co-payments. For an individual, the out-of-pocket maximum for prescriptions filled at retail or mail order pharmacies is $2000.00 every year.

If applicable to your plan the following applies to your Out-of-Pocket based on percentage:

- If you order a brand-name medication that has a generic equivalent, the difference in cost between the brand-name medication and generic medication will not apply.

Drug Specific Cap

Your plan includes a drug specific cap for Fertility Drugs.

For an individual, the drug specific maximum allowable benefit for prescriptions filled at retail or mail order pharmacies is $2000.00 for a lifetime maximum.

After you reached the drug specific maximum allowable benefit your co-payment will change.

Benefit highlights: retail

When to Use

The most efficient way to use your retail pharmacy benefit is to present your member I.D.

card at a participating retail pharmacy. Your retail plan should be used for medications required on a short-term basis. When you have a prescription filled at a participating pharmacy, present your member I.D. card to the pharmacist, who will use an automated system to verify your coverage and prescription cost.
For medications you take on a long-term basis, your benefit limits the number of times you can fill a 30-day supply at a participating retail pharmacy before you need to make a decision about where you will continue to get your long-term medications. Remember, with your benefit, you can get a 90-day supply of your medications through home delivery.

Use the "My Decision Center," found within the Prescription & Benefits section of the home page, to decide where you will fill your long-term medications. If you do not make a decision before your retail pharmacy fill limit, your copayment will increase.

Days Supply

At retail pharmacies, you may purchase up to a 30-day supply of most prescription medications. There may be limitations on some prescriptions, such as controlled medications, subject to state and federal dispensing limitations.

Co-payment

Different co-payments may apply for certain medications.

For brand-name medications:

For medications that are on your plan's preferred drug list:

Your co-payment is 40.00% of the medication's total cost. Your plan includes a maximum co-payment of $150.00.

For medications that are not on your plan's preferred drug list:

Not covered

For generic medications:

Your co-payment is $10.00.

Additional Discounts

In some instances, additional discounts may be available to further reduce the cost of some prescription drugs. Eligible discounts will be reflected in your cost. Additional discounts may vary at time of purchase.

Out-Of-Pocket

Your out-of-pocket expense is the maximum amount you will pay before your plan sponsor reduces your co-payments.
For an individual, the out-of-pocket maximum for prescriptions filled at retail or mail order pharmacies is $2000.00 every year.

If applicable to your plan the following applies to your Out-of-Pocket based on percentage:

- If you order a brand-name medication that has a generic equivalent, the difference in cost between the brand-name medication and generic medication will not apply.

Drug Specific Cap

Your plan includes a drug specific cap for Fertility Drugs.

For an individual, the drug specific maximum allowable benefit for prescriptions filled at retail or mail order pharmacies is $2000.00 for a lifetime maximum.

After you reached the drug specific maximum allowable benefit your co-payment will change.

Benefit highlights: Specialty Pharmacies

Specialty Pharmacies

Some prescription drugs are called "specialty medications". Specialty medications usually have to be stored or handled in special ways and you may not be able to get them from most pharmacies. People take specialty medications for complex, chronic health conditions like Multiple Sclerosis or Rheumatoid Arthritis. If you're taking a specialty medication, there are services available for you through our specialty pharmacy at no additional charge:

You can **order refills and check the status of your specialty medication orders**

- **anytime online.** (See Prescription & benefits at left.)
- You have access to our **complete specialty pharmacy inventory** with medications that may not be readily available at other pharmacies.
- Your specialty medications are delivered directly to you or your doctor, as allowed by applicable law.
- You receive the **supplies you need** to administer your medications.
- Our clinically based **care management programs -** which include consultation with your doctor - help you get the most benefit from the medications that your doctor has prescribed for you.
- Our highly trained **Patient Care Advocates work closely with you,** your physician and your health plan, obtaining prior authorizations, coordinating billing and even contracting you when it's time to refill your prescription.
