

Employees Retirement System of Texas

2024 Consumer Directed HealthSelectSM Prescription Drug Plan

Prescription Drug Benefits at a Glance

Your Prescription Benefit Program	In Network			
	Retail pharmacy Network (1 to 30 day supply)		Extended Days' Supply (EDS) Retail Pharmacy or Express Scripts Mail Service For long-term medications (Up to a 90-day supply)	
Where	You can use your prescription benefit at more than 60,000 HealthSelect participating pharmacies, including more than 24,000 independent community pharmacies. To locate a participating retail pharmacy in your area, go to www.HealthSelectRx.com and use the Find a Pharmacy tool or call a customer care representative toll-free at (800) 935-7189, (TTY: 711).		To locate an EDS retail pharmacy in your area, go to www.HealthSelectRx.com and use the Find a Pharmacy tool, or call a customer care representative toll-free at (800) 935-7189, (TTY: 711).	
Tier 1	20% coinsurance after the in-network annual deductible is met.		20% coinsurance after the in-network annual deductible is met.	
Tier 2*	20% coinsurance after the in-network annual deductible is met.		20% coinsurance after the in-network annual deductible is met.	
Tier 3*	20% coinsurance after the in-network annual deductible is met.		20% coinsurance after the in-network annual deductible is met.	
Out of Network	40% coinsurance after out-of-network annual deductible is met.			
Annual Deductible**	In-Network		Out of Network	
	Individual	Family	Individual	Family
	\$2,100	\$4,200	\$4,200	\$8,400
Web Services	Visit www.HealthSelectRx.com to locate a network pharmacy; estimate the cost of your medications; and find out more about your prescription benefits.			
Customer Care	Visit www.HealthSelectRx.com or call toll-free (800) 935-7189, (TTY: 711).			

* Tier 2 and Tier 3: If a generic is available and you choose to buy the brand-name medication, you will pay the generic copay plus the cost difference between the brand-name and the generic medication.