

HealthSelectSM Prescription Drug Program Overview

Plan Year 2027

For HealthSelect of Texas[®] and
Consumer Directed HealthSelectSM Participants



**A PDF of this presentation is available at
www.HealthSelectRx.com**

When It Comes to Pharmacy Care, Your Choice Matters.

COMPREHENSIVE PHARMACY CARE



Express Scripts Broad Retail Pharmacy Network

Retail Pharmacies for
SHORT-TERM
Medication Needs



National network of over 60,000 retail pharmacies.



Extended Days' Supply Retail Pharmacies or Express Scripts Home Delivery

Options for
LONG-TERM
Maintenance Medication Needs



Up to a 90-day supply at an EDS pharmacy or Express Scripts home delivery pharmacy.



Specialty Pharmacy

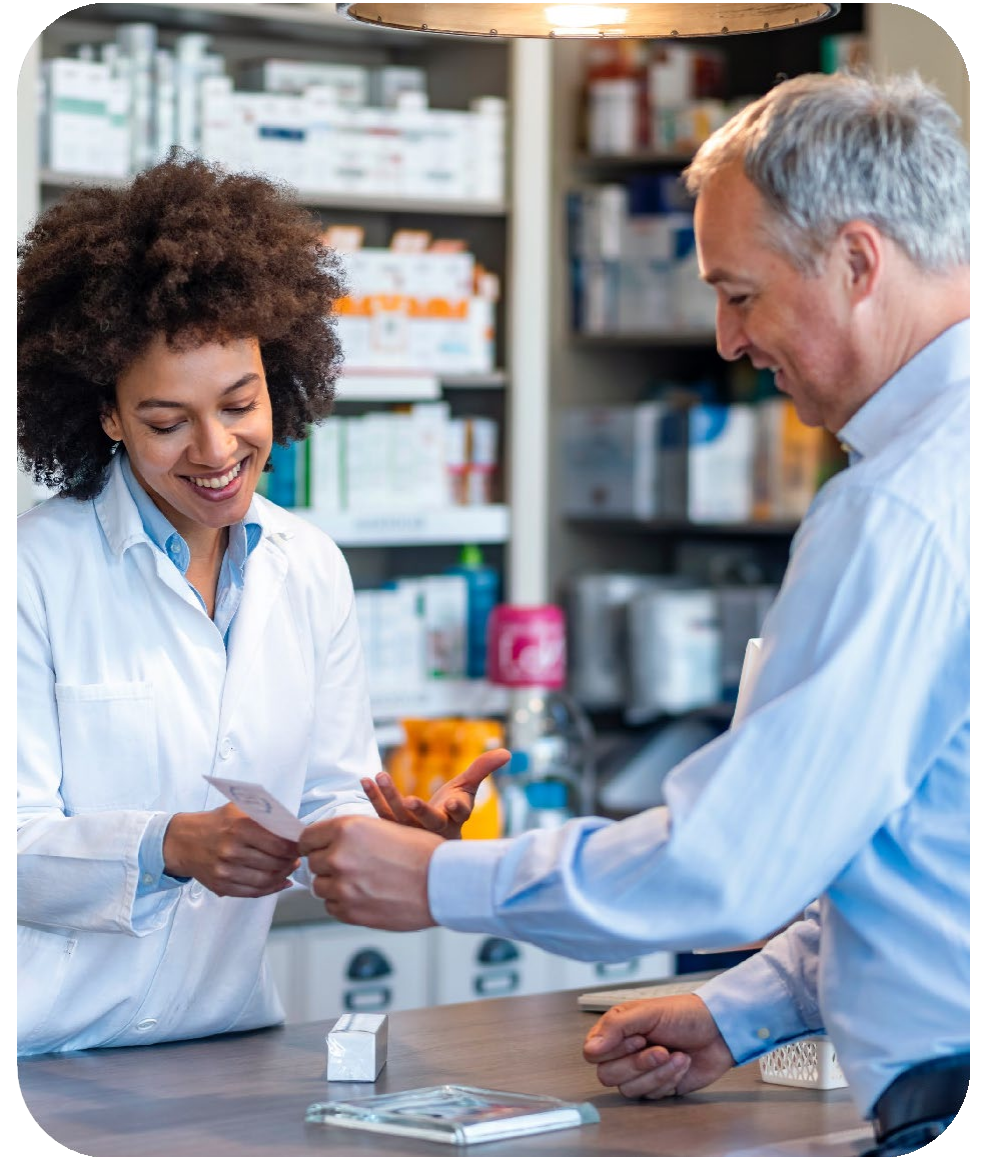
Retail or Mail Order for
SPECIALTY
Medication Needs



Personalized care from our specialty pharmacy, Accredo, to treat chronic, complex conditions.

Information About Your Plan – Important Reminders

- + If you are taking insulin, regardless of the tier, you will never pay more than \$25 for a 30-day supply.
- + If your doctor prescribes less than a full month's supply of certain drugs, you will pay a daily cost-sharing rate based on the actual number of days' supply of the drug you receive.
- + You may receive up to a 90-day supply of certain maintenance drugs (medications taken on a long-term basis) through an EDS pharmacy or by mail through Express Scripts® Pharmacy. There is no charge for standard shipping.
- + Not all drugs are available at a 90-day supply, and not all retail pharmacies offer a 90-day supply. You can find which pharmacies can dispense a 90-day supply by using the Find A Pharmacy tool on your plan website.



Information About Your Plan – The Formulary

Why formularies change:

- + The Food and Drug Administration approves a new medication or existing medication as part of treatment for a new disease category.
- + A brand-name medication loses its patent and generic versions become available.
- + A medication has been withdrawn from the market for safety reasons.
- + A medication becomes available without a prescription (over-the-counter drugs are not typically covered under prescription drug plans).

Learning about formulary changes:

- + You can contact Express Scripts Customer Service for more information regarding formularies and changes.
- + Negative formulary changes only occur in July and January each year. Participants affected by negative changes will be notified in advance.



A formulary is a list of specific drugs covered by the plan and their costs. It is available on the plan website.

Costs for HealthSelect of Texas Participants

Retail, EDS or Home Delivery

Member Services: 800-935-7189

Tier	Prescription drug type	Your costs			
		Retail Network		Extended Day Supply (EDS) Network or Mail Order	
		Retail 30-day supply Non-Maintenance	Retail 30-day supply Maintenance	31- to 60-day supply	61- to 90-day supply
1	Annual per-person deductible: \$50 Resets Jan. 1 every year				
	Generic Most generic drugs	\$10 copay	\$10 copay	\$20 copay	\$30 copay
	Preferred Brand Many common brand-name drugs, called preferred brands	\$35 copay	\$45 copay	\$70 copay	\$105 copay
3	Non-preferred Drug Non-preferred brand-name or generic drugs	\$60 copay	\$75 copay	\$120 copay	\$180 copay

Costs for Consumer Directed HealthSelect Participants Retail, EDS, or Home Delivery

Member Services: 800-935-7189

Prescription Drug Type	Your Costs	
	In Network	Out of Network
Combined Prescription Drug and Medical Deductible Resets Jan. 1 every year	\$2,100 individual \$4,200 family	\$4,200 individual \$8,400 family
Your costs after deductible <ul style="list-style-type: none"> All tiers At any pharmacy, for any amount of medication 	20% coinsurance	40% coinsurance

Accredo Specialty Pharmacy

Health care that goes
beyond the prescription



Accredo Member Services: 800-455-8340



Personalized patient care for a wide range of complex and chronic conditions



Specialty clinicians are your guide



An easy route for getting your medication



Navigate insurance and financial assistance

Prior authorization: Monitors prescription medications

Before your doctor sends a prescription, check the Price a Medication tool or the Preferred Drug List on the website to see if the medication requires prior authorization.



Simply means that **more information is needed to see if your plan covers the medication.**

This is also called coverage review



Makes sure your prescription is suitable for the intended use and covered by your plan



Can be tracked online through your personal account, viewing where your medication is in the process, and other details

Step Therapy

Helps reduce costs and ensures you receive a safe and proven-effective medication.

+ **First-step medications** are typically generic and lower-cost brand-name medications.

+ **Second-step medications** are best suited for the few patients who don't respond to first-step medications.

You can check the **Price a Medication** tool on the website to find the most affordable pricing.



Long-term (maintenance) medications

Choose your way to save with a 3-month supply:

Express Scripts Pharmacy

- + Delivered straight to your door with FREE standard shipping
- + Transfer prescriptions easily online, by phone or via Express Scripts mobile app
- + Auto-refills and refill reminders available
- + Talk with a pharmacist by phone 24/7

EDS Network Pharmacy

- + Go to a convenient location near you
- + Transfer your prescription easily in-store, by phone or online
- + Ask about auto refills and refill reminders
- + Find your nearest participating pharmacy at [express-scripts.com](https://www.express-scripts.com)

Get Started: Log in or register at [express-scripts.com/90day](https://www.express-scripts.com/90day) or call the Member Services number on your ID card

Vaccinations: Protect yourself conveniently and cost-effectively



Use the online Price a Medication tool to see which vaccines might be covered for you.



Covered by your prescription plan—search **express-scripts.com** to find a participating pharmacy



Ask your doctor which vaccines are right for you and to learn more



Present your HealthSelect Prescription Drug Program ID card to the pharmacist

Resources right within reach

Get anywhere, anytime access to your pharmacy benefits with an online account at express-scripts.com

- + **Can't-lose-it digital ID card**
 - + Keep it on you 24/7. Download it to your phone, print a copy or do both.
- + **Money-Saving Recommendations**
 - + Don't pay more than you have to. Use our live dashboard to get the right medication, supply and pharmacy for you.
- + **Rx and claims history**
 - + Review your past interactions all in one place.
- + **Coverage review updates**
 - + Before a doctor prescribes a medication, find out if it needs coverage review, and check the status of an in-progress review.

For complex concerns or health conditions, call the customer service number on your ID card



Scan the QR code to create a digital account today

Create your own account now



Sign up for text alerts so you get immediate account updates.



Get transparent pricing on all your medications.



And so much more!



Get started at [express-scripts.com](https://www.express-scripts.com) or scan the QR code to create your digital account today

www.HealthSelectRx.com



Preview helpful information including plan details, medication prices and covered medications



Locate a pharmacy near you



Learn more about the plan with Express Scripts and how to get started with optional home delivery service.

Member Services: 800-935-7189



HealthSelect of Texas
Prescription Drug Program

CONSUMER DIRECTED
HealthSelect

Welcome HealthSelectSM
of Texas and Consumer Directed
HealthSelectSM Prescription Drug Program
participants

Log In

Pricing a Medication



HealthSelectSM Prescription Drug Plan (PDP)



Benefit Overview

Get a better understanding of how you and your plan work together to cover your medication.

[Review Benefit](#)



Home Delivery

Choose Express Scripts[®] Pharmacy and get a 90-day supply of your maintenance medication delivered with free standard shipping.

[View Home Delivery brochure \(PDF\)](#)

[Home Delivery Order Form](#)



Retail Pharmacies

We also have a large pharmacy network, including Extended Day Supply (EDS) pharmacies. We'll help you find a nearby retail pharmacy.

[Find a Pharmacy](#)



Price a Medication

We'll make it easy to check medication coverage options so you can compare prices and find savings.

[Price a Medication](#)

Member Services: 800-935-7189

Price a Medication

Search for the lowest prices available for your medicine

Medicine Name

Q Example: Lipitor 20 Mg Tablet

Zip code

Get Prices

[Price a Medication](#) >

Atorvastatin Calcium

Generic drug name for Lipitor

[Alternate drug options](#) | [Drug details](#)

You're viewing generic medication. Use this toggle to switch between generic and brand medication.

Generic

Brand

Dosage information

Medicine form	Medicine strength	I take or use	Frequency of use
Tablet	20 Mg	1 each	Daily

[Edit Details](#)

Pricing results for Atorvastatin Calcium 20 Mg Tablet
Showing 11 of 25 pharmacies for 78704

Pharmacy	Coverage	30-day	90-day
Home Delivery Pharmacy	Coverage rules apply	---	\$0.00 Price details
Cvs #01430 2101 S Lamar Blvd Unit B Austin, TX 78704-4921 (512) 383-8522	Coverage rules apply	\$0.00 Price details	\$0.00 Price details
Walgreens #01933 2501 S Lamar Blvd Austin, TX 78704-4730 (512) 443-7534	Coverage rules apply	\$0.00 Price details	\$0.00 Price details

Why has the cost of your medication changed?



Each year deductibles start over on Jan. 1.



You used a pharmacy that isn't in the Express Scripts network.



Drug prices go up and down, just like the prices of gas or a carton of eggs.

There are three possible reasons the cost of your medication changes.



Prescription ID Card



Includes important information



Customer service telephone number



Digital prescription ID card available

HealthSelect!
Prescription Drug Program

EVERNORTH
HEALTH SERVICES

Express Scripts® Pharmacy Benefit Services

RxBIN 003858
RxPCN A4
RxGrp ERSOFTX
Issuer 9151014609
(800) 40
ID CWK000100002
Name JOHN Q SAMPLE

Issued XX/XX/XXXX

Rx Retail Non-Maint:	\$10/\$35/\$60	Deductible:	<u>Individual</u>	<u>Family</u>
Maintenance:	\$10/\$45/\$75		\$50	\$50/person
90-day supply:	\$30/\$105/\$180	Max OOP:	\$8,500	\$17,000

CONSUMER DIRECTED
HealthSelect

EVERNORTH
HEALTH SERVICES

Express Scripts® Pharmacy Benefit Services

RxBIN 003858
RxPCN A4
RxGrp ERSOFTX
Issuer 9151014609
(800) 40
ID CWK000100002
Name JOHN Q SAMPLE

Issued XX/XX/XXXX

	<u>Individual</u>	<u>Family</u>
Coinsurance:	20%	20%
Deductible:	\$2,100	\$4,200
Max Out of Pocket:	\$8,500	\$17,000

Member Services: 800-935-7189

**A PDF of this presentation and
more information are available at
www.HealthSelectRx.com**

**Questions?
Call Express Scripts 24/7
(800) 935-7189**

Thank You