

# Your Prescription Benefit Plan

## Copay/Coinsurance Summary

### Wellness HealthSavings CDHP

This chart is a guide to how much you will pay for medications based on:

1. **Length of prescription.** Short-term medications are generally taken for 30 to 90 days. If you are taking a long-term medication, you will pay less by ordering in 90-day supplies. This prescription benefit plan lets you choose to receive your long-term prescriptions at either a CVS/caremark Retail-90 Pharmacy or through the CVS Caremark Mail Service Pharmacy for the same low copay/coinsurance.
2. **Type of medication you are taking.** You will generally pay less for a generic or preferred brand-name medication.

	<b>CVS/caremark Retail Pharmacy Network</b>	<b>CVS Caremark Mail Service Pharmacy or CVS/caremark Retail-90 Pharmacy</b>
	For short-term medications (Up to a 30-day supply)	For long-term medications (Up to a 90-day supply)
<b>Generic Medications</b> Ask your doctor or other prescriber if there is a generic available, as these generally cost less.	<b>20% after deductible is met</b> for a generic prescription	<b>20% after deductible is met</b> for a generic prescription
<b>Preferred Brand-Name Medications</b> If a generic is not available or appropriate, ask your doctor or healthcare provider to prescribe from your plan's preferred drug list.	<b>20% after deductible is met</b> for a preferred brand-name prescription	<b>20% after deductible is met</b> for a preferred brand-name prescription
<b>Non-Preferred Brand-Name Medications</b> You will pay the most for medications not on your plan's preferred drug list.	<b>20% after deductible is met</b> for a non-preferred brand-name prescription	<b>20% after deductible is met</b> for a non-preferred brand-name prescription
<b>Refill Limit</b>	None	None
<b>Specialty Medications</b>	<b>20% after deductible is met</b> for a generic prescription <b>20% after deductible is met</b> for a preferred brand-name prescription <b>20% after deductible is met</b> for a non-preferred brand-name prescription A 30-day supply limit applies to all, and members must obtain specialty medications from a CVS Caremark Specialty Network pharmacy.	
<b>Durable Medical Equipment</b>	<b>20% after deductible is met</b> *** (e.g. ostomy supplies, elastic bandages, peak flow meters, aerochambers)	
<b>Annual Deductible (Combined with medical)</b>	<b>\$1,400</b> Individual, <b>\$2,800</b> Family (Once deductible amount is met, above copays/coinsurance apply)	
<b>Maximum Out-of-Pocket</b>	<b>\$2,300</b> Individual, <b>\$4,600</b> Family (Combined with medical)	