

PRESCRIPTION BENEFIT PLAN SUMMARY



The Trust offers comprehensive pharmacy services. This Benefit Summary highlights prescription benefits available to Employers (Members). A complete description regarding the terms of coverage, exclusions and limitations will be described in the Plan Document. Employers can choose any prescription plan offering with any Medical Plan offering (with the exception of HSA Plans).

PRESCRIPTION PLAN OPTIONS

RX Plan 1 - Available with all Medical Plans except HSA options

Prescription Drugs	Retail	Mail Order
Tier 1-Generic Drugs	\$10 Copay	\$30 Copay
Tier 2-Preferred Brands	\$45 Copay	\$90 Copay
Tier 3-Non-Preferred Brands	\$85 Copay	\$150 Copay
Tier 4-Specialty	Deductible, then 80% coverage	

RX Plan 2 - Available with all Medical Plans except HSA options

Prescription Drugs	Retail	Mail Order
Tier 1-Generic Drugs	\$15 Copay	\$25 Copay
Tier 2-Preferred Brands	\$65 Copay	\$87.50 Copay
Tier 3-Non-Preferred Brands	\$100 Copay	\$162.50 Copay
Tier 4-Specialty	Deductible, then 80% coverage	

RX Plan 3 - Available with all Medical Plans

*HSA compatible when paired with 5000 HSA or 6650 HSA Medical Plans

Prescription Drugs	Retail	Mail Order
Tier 1-Generic Drugs	Deductible, then \$15 Copay	Deductible, then \$45 Copay
Tier 2-Preferred Brands	Deductible, then 80% coverage	Deductible, then 80% coverage
Tier 3-Non-Preferred Brands	Deductible, then 50% coverage	Deductible, then 50% coverage
Tier 4-Specialty	Deductible, then 50% coverage	Deductible, then 50% coverage

Note: Pharmacy and Medical Deductible are combined. All eligible out-of-pocket (OOP) expenses are applied to Medical OOP. Once the medical plan deductible amount is met (either with medical or prescription charges), then the prescription plan will make payment.

All Prescription Programs have cost saving measures in place to ensure that both our Members and our Plan save the most on covered prescriptions. The below is a summary of some of the programs. For more detailed list of programs, please refer to your Summary Plan Document.

- Aetna Home Care Delivery - Mail order will save members significantly for the long-term. Once members get started, they can request refills easily by mail, online, or over the phone.
- Maintenance Medications - All enrollees will be required to use the Aetna Home Delivery Pharmacy or CVS Pharmacies to fill prescriptions for maintenance medications. Enrollees will be permitted to fill prescriptions for maintenance medications up to three (3) times prior to being required to switch to home delivery or CVS Pharmacies. The program includes customer letters that are sent after a customer fills a prescription for maintenance medication at a retail pharmacy.
- Preferred Drug Step Therapy - Save by using Preferred Drugs. Many drug categories have multiple drugs that can treat the same condition. The Plan requires members to fill certain preferred medications over other non-preferred medications unless their physician indicates otherwise. If members fill non-preferred medication without getting prior approval or by having their physician contact Aetna Rx, the enrollee will be responsible for the drug's entire cost.
- Save by using Generics. The Plan has a program in place to automatically fill the enrollee's prescription with the low cost generic alternative to save dollars for the enrollee and the Plan. If an enrollee requests a brand-name medication when a generic equivalent is available, the enrollee will pay the applicable co-payment, plus the difference in cost between the brand and generic medication.
- Dispense as written - If the customer requests brand when a generic equivalent is available, the customer is responsible for paying the brand copay plus the difference between the cost of the brand and the generic amount (up to the cost of the brand name drug).

V6.7.20

This is a self-insured plan administered by Aetna.