

Enhanced MEHIP (Municipal Employees Health Insurance Plan)

SCHEDULE OF BENEFITS: PRESCRIPTION DRUGS

Participating Pharmacy:

Retail Pharmacy:

\$ 5 per prescription – Tier 1 Generic Drugs

\$20 per prescription – Tier 2 Listed Brand Name Drugs

\$35 per prescription – Tier 3 Non-Listed Brand Name Drugs

Mail Order (Maintenance Drugs): (1.5 times Retail Co-payment for a 3-month supply)

\$ 7.50 per prescription – Tier 1 Generic Drugs

\$30.00 per prescription – Tier 2 Listed Brand Name Drugs

\$52.50 per prescription – Tier 3 Non-Listed Brand Name Drugs

Annual Unlimited Maximum

- NOTE:
1. Mandatory Generic substitution for new prescriptions will apply.
 2. Step Therapy will apply. What this means is that coverage of a requested medication is approved only if you tried certain other medications first and they did not work, or if you have specific medical conditions that preclude you from trying alternatives. Medications that you are taking prior to enrollment in the Enhanced MEHIP plan will not be subject to step therapy.
 3. Maintenance medications will have a limit of 2 times refill at a retail pharmacy then must be refilled through Mail Order.
 4. No OTC Substitution.
 5. Claims will be submitted electronically for payment.

Non-Participating Pharmacy:

Prescriptions filled at a Non-Participating Pharmacy will be subject to deductible and coinsurance. Claims will need to be filed timely in order for the member to receive reimbursement. The member may be responsible for amounts above the maximum allowable amount determined for the prescription. The HMO/EPO benefit option does not have an out of network component for pharmacy.