

# Your Personal Prescription Benefit Program

## A Convenient Pull-Out Guide

### Standard PPO

	RETAIL PHARMACY	MAIL SERVICE PHARMACY AND 90-DAY AT RETAIL *
	For immediate or short-term medication needs	For maintenance or long-term medication needs
<b>AT A PARTICIPATING NETWORK PHARMACY, YOU WILL PAY:**</b>	<ul style="list-style-type: none"> <li>• <b>\$10</b> for each generic medication</li> <li>• <b>\$40</b> for each brand-name medication on the drug list (preferred brand)</li> <li>• <b>\$90</b> for each brand-name medication <b>not</b> on the drug list (non-preferred brand)</li> </ul>	<ul style="list-style-type: none"> <li>• <b>\$20</b> for each generic medication</li> <li>• <b>\$80</b> for each brand-name medication on the drug list (preferred brand)</li> <li>• <b>\$180</b> for each brand-name medication <b>not</b> on the drug list (non-preferred brand)</li> </ul>
<b>SPECIALTY MEDICATION</b>	<ul style="list-style-type: none"> <li>• <b>\$10</b> generic</li> <li>• <b>\$40</b> preferred brand-name</li> <li>• <b>\$90</b> non-preferred brand-name</li> </ul> <p>A 30-day supply limit applies to all, and members must obtain specialty medications from a CVS Caremark Specialty Network pharmacy.</p>	
<b>DURABLE MEDICAL EQUIPMENT:</b>	<b>20%***</b> (e.g. ostomy supplies, elastic bandages, peak flow meters, aerochambers)	
<b>DAY SUPPLY LIMIT:</b>	Up to a <b>30</b> -day supply	Up to a <b>90</b> -day supply

\* Certain pharmacies participate in a "mail at retail" program that will allow up to a 90-day supply for the mail copay.

\*\* Different cost-share will apply at an out of network pharmacy. You will be asked to pay 100% of cost. If you file a claim for reimbursement, you will still be responsible for the regular copay plus any amount exceeding the maximum allowable plan charge.

\*\*\***CVS Caremark Prescription Card:** Members can fill prescriptions for durable medical equipment at a participating network pharmacy using their CVS Caremark card. Members will pay the applicable coinsurance for their health plan option and this WILL NOT be subject to the MEDICAL (BCBST/Cigna) deductible or applied to the out of pocket maximum.

\*\*\***BCBST or Cigna Card:** Members can purchase durable medical equipment at a participating medical supply vendor using their BCBST or Cigna card. Members will pay the applicable coinsurance for their health plan option and this WILL be subject to the MEDICAL (BCBST/Cigna) deductible and/or applied to the out of pocket maximum.

## Have More Questions?

### Four Easy Ways To Contact CVS Caremark:

**1. Caremark.com**

Caremark.com is a hassle free, round-the-clock way to order refill prescriptions, check order status and get important medication information. Please see the inside front cover for more details.

**2. Automated Phone Service**

Call toll-free **1-877-522-TNRX (8679)** for the CVS Caremark fully automated refill phone service.

**3. Customer Care**

If you need assistance you can contact Customer Care 24 hours a day, seven (7) days a week. You have two easy ways to reach them: by e-mail at [customerservice@caremark.com](mailto:customerservice@caremark.com) or call toll-free at **1-877-522-TNRX (8679)**.

**4. Telecommunications Device (TDD)**

If you have a hearing impairment and need TDD assistance, please call toll-free **1-800-231-4403**.

**When you call or log in, be ready to provide:**

- Your Employee ID number (printed on your Prescription card.)
- Your date of birth
- If you plan to refill your prescription, your VISA®, Discover®, MasterCard® or American Express® number with expiration date or your Bill Me Later® and Electronic Check Processing information (registration is required), if your plan requires a payment

**Need Another Prescription Card?** Additional Prescription Cards can be obtained by calling Customer Care toll-free at **1-877-522-TNRX (8679)**.

If you disagree with the processing of a claim or a benefit decision, our customer care representatives can help. If an issue is not resolved to your satisfaction, you have the right to file an appeal. Contact our customer care representatives toll-free at 1-877-522-TNRX (8679) for assistance.