

PRESCRIPTION DRUG BENEFIT

Plan participants enrolled in TRIP have prescription drug coverage available. All prescription medications are compiled on a preferred list (“formulary list”) maintained by each managed care plan or Medco. Formulary lists categorize drugs in three levels: generic, preferred brand and non-preferred brand. Each level has a different co-payment amount. TCHP has separate minimum and maximum co-payments/coinsurance amounts that apply.

PRESCRIPTION DRUG CO-PAYS FOR ALL MANAGED CARE PLANS

Generic	\$10
Preferred Brand (Formulary Brand)	\$20
Non-Preferred Brand	\$40

PRESCRIPTION DRUG CO-PAYS/COINSURANCE FOR TCHP

	Minimum	Maximum
Generic	\$7	\$50
Preferred Brand (Formulary Brand)	\$14	\$100
Non-Preferred Brand	\$28	\$150

- Annual prescription drug out-of-pocket maximum of \$1,500 applies.
- After meeting the \$1,500 out-of-pocket maximum, prescriptions are covered at 100%.
- Out-of-network claims do not count toward this annual out-of-pocket maximum.
- 20% coinsurance with minimum and maximum co-payments (1-30 day supply).
- Prescription drug benefits are independent of other medical services and are not subject to the medical plan year deductible or the medical out-of-pocket maximums.
- Prescription plan benefits are included in the lifetime maximum.

It is important to note that formulary lists are subject to change any time during the plan year. Certain health plans notify plan participants by mail when a prescribed medication they are currently taking is reclassified. **Plan participants should consult with their physician to determine if a change in prescription is appropriate.**

Coverage for specific drugs may vary depending upon the health plan. To compare formulary lists (preferred drug lists), cost-savings programs and to obtain a list of pharmacies that participate in the various health plan networks, plan participants should visit the website of each health plan.

When the pharmacy dispenses a brand drug for any reason and a generic is available, the plan participant must pay the cost difference between the brand product and the generic product, plus the generic co-payment.

Plan participants who have additional prescription drug coverage, including Medicare, should contact the managed care plan or Medco for Coordination of Benefits (COB) information.