

Here's an overview of your CVS Caremark benefits.

CDH

Your annual deductible is \$1,350 for an individual or \$2,700 for a family. **Until this deductible amount is met, you will pay 100% for your prescriptions.** If you have any questions about your prescription plan or costs, call us at 1-888-797-8890. We can help anytime after your plan starts. For TDD assistance, please call 1-800-863-5488.

	Short-Term Medicines CVS Caremark Retail Pharmacy Network (Up to a 30-day supply)	Long-Term Medicines CVS Caremark Mail Service Pharmacy or CVS Pharmacy Locations (Up to a 90-day supply)
Generic Medicines Always ask your doctor if there's a generic option available. It could save you money.	\$5 for a generic medicine before refill limit (after deductible)	\$20 for a generic medicine after refill limit (after deductible)
Preferred Brand-Name Medicines If a generic is not available or appropriate, ask your doctor to prescribe from your plan's preferred drug list.	10% (\$15 min) for a preferred brand-name medicine before refill limit (after deductible)	10% (\$35 minimum) for a preferred brand-name medicine after refill limit (after deductible)
Non-Preferred Brand-Name Medicines Drugs that aren't on your plan's preferred list will cost more.	10% (\$30 min) for a non-preferred brand-name medicine before refill limit (after deductible)	10% (\$70 minimum) for a non-preferred brand-name medicine after refill limit (after deductible)
Refill Limit	One initial fill plus one refill for long-term medications	
Annual Deductible	\$1,350 per individual / \$2,700 per family (includes medical) (In-Network)	
Maximum Out-of-Pocket	\$2,600 per individual / \$5,200 per family (includes medical) (In-Network)	
Maximum Allowable Benefit	\$7,500 Lifetime Maximum on Fertility Drugs	

Please Note: When a generic is available, but the pharmacy dispenses the brand-name medication for any reason other than doctor or other prescriber indicates "dispense as written," you will pay the difference between the brand-name medication and the generic plus the brand copayment.

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Copayment, copay or coinsurance means the amount a plan member is required to pay for a prescription in accordance with a Plan which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan. Your feedback is important as it helps us improve our service. Please contact us with any questions or concerns at 1-888-797-8890. Your privacy is important to us. Our employees are trained regarding the appropriate way to handle private health information.