

II. Prescription Drugs (utilizing Plan's contracted pharmacy vendor for retail/mail order drugs)

| HDHP Plan | | |
|---|--|----------------|
| <u>BENEFITS and PROVISIONS</u> | IN NETWORK | OUT OF NETWORK |
| Separate Retail Prescription Deductible per Calendar Year | Not Applicable | |
| Annual Out of Pocket Prescription Maximum | Not Applicable | |
| Prescription Drug Card Program up to 30-day supply through participating pharmacies. <i>Note: Non-preferred Brand drugs are not covered under this Plan.</i> | <ul style="list-style-type: none"> • \$15 co-pay per Generic prescription after Deductible, • \$35 co-pay per Brand prescription after Deductible • \$75 co-pay per Specialty prescription after Deductible | |
| Mail Order Drug Benefit up to 90-day supply per prescription. <i>Note: Non-preferred Brand drugs are not covered under this Plan.</i> | <ul style="list-style-type: none"> • \$35 co-pay per Generic prescription after Deductible • \$85 co-pay per Brand prescription after Deductible | |
| Limitation on filling maintenance drugs at a retail pharmacy | A maximum of 3 fills are allowed at retail for a new maintenance drug. After that, the drug must be filled through mail order only. | |
| Specialty Pharmacy up to 30 day supply | Provides injectable and other specialty medications to members with free delivery to patient's home or physician's office. Retail co-pay applies. | |
| Brand when generic is available | Patient must pay the cost difference between the brand and generic drug in addition to your co-pay or co-insurance | |
| Prior Authorizations | Patient may call the pharmacy benefit manager with questions regarding quantity limitations or prior authorizations | |

Contraception and contraceptive counseling - The Butler Health Plan includes coverage for several types of contraceptives. Generic hormonal and emergency oral contraceptives, diaphragms and the Mirena IUD will be covered, up to age 50, at no cost to you as the plan participant. Brand name contraceptives will remain covered, up to age 50, but you will be responsible for the standard copay. For additional information about your contraceptive benefits, including the applicable copay for a medication, please contact Express Scripts toll free at 1-866-275-0044 or online at www.express-scripts.com.