

2010 Prescription Coverage

Pharmacy	Tier	Type of Prescription	Cost
City Employee Pharmacy	1 st Tier	Generic	\$ 8.00 co-pay (30 day supply) \$20.00 co-pay (90 day supply)
	2 nd Tier	Preferred Brand	\$30.00 co-pay (30 day supply) Mail Order \$60.00 co-pay (90 day supply)
	3 rd Tier	Non-Preferred Brand	\$50.00 co-pay (30 day supply) Mail Order \$100.00 co-pay (90 day supply)
Specialty Pharmacy	4 th Tier	Preferred Chronic Injectables and other Specialty Drugs	\$ 100.00 (30 day supply) \$200.00 (90 day supply)
Specialty Pharmacy	5 th Tier	Non-Preferred Chronic Injectables and other Specialty Drugs	\$150.00 (30 day supply) \$300.00 (90 day supply)
Chronic Injectables and Specialty Drugs: \$2,500 out-of-pocket maximum per member, per year.			
		Diabetic Supplies	Covered at 100% (no co-pay) if obtained through the City Employee Pharmacy Program and you are participating in the Diabetes Ten City Challenge or can provide documentation that you are being case managed. (Maximum 90-day supply) If supplies are obtained through a MaxorPlus Retail Network Pharmacy or if you are not participating in the Diabetes Ten City Challenge or cannot provide documentation that you are being case managed, then the regular retail co-pay will apply.
MaxorPlus Retail Network Pharmacies	1 st Tier	Generic	\$20.00 (30 day supply)
	2 nd Tier	Preferred Brand	\$50.00 (30 day supply)
	3 rd Tier	Non-Preferred Brand	\$75.00 (30 day supply)
	4 th Tier	Preferred/Non-Preferred Chronic Injectables	N/A
Maintenance Prescription Fills (For a complete listing of participating pharmacies go to the Preferred Provider Information on the Clinic and Pharmacy information section of the Benefits and Wellness website.)	<p>Plan participants will progressively pay higher co-pays for maintenance prescriptions that are filled at a MaxorPlus Retail Network Pharmacy versus the City Employee Pharmacy.</p> <p style="text-align: center;">Maintenance Rx filled at any MaxorPlus Retail Network Pharmacy:</p> <ul style="list-style-type: none"> • First fill: member pays the normal co-pay • Second fill: member pays double the co-pay • Third and subsequent fills: member pays 100% of the retail cost for a maintenance Rx 		