

# Non-Medicare Prescription Plan Maintenance Medication Program

Effective July 1, 2024

THE MAINTENANCE MEDICATION PROGRAM SAVES YOU MONEY!

## GENERIC DRUG SAVINGS

First 30-Day Fill	Second 30-Day Fill	Third 30-Day Fill	Total Member Cost	<b>SAVE \$10.00 EVERY 90 DAYS!</b>
\$10.00	\$10.00	\$10.00	\$30.00	
First 90-Day Fill			Total Member Cost	
\$10.00 x 2			<b>\$20.00</b>	

## PREFERRED BRAND NAME SAVINGS

First 30-Day Fill	Second 30-Day Fill	Third 30-Day Fill	Total Member Cost	<b>SAVE \$32.00 EVERY 90 DAYS!</b>
\$32.00	\$32.00	\$32.00	\$96.00	
First 90-Day Fill			Total Member Cost	
\$32.00 x 2			<b>\$64.00</b>	

## NON-PREFERRED BRAND NAME SAVINGS

First 30-Day Fill	Second 30-Day Fill	Third 30-Day Fill	Total Member Cost	<b>SAVE \$60.00 EVERY 90 DAYS!</b>
\$60.00	\$60.00	\$60.00	\$180.00	
First 90-Day Fill			Total Member Cost	
\$60.00 x 2			<b>\$120.00</b>	

## WHAT IF ELIGIBLE MAINTENANCE MEDICATIONS ARE NOT FILLED FOR A 90-DAY SUPPLY?

A copay penalty will be applied beginning with the fourth 30-day fill on eligible maintenance medications that are not filled for a 90-day supply. **The member must pay the 90-day copay for that medication.**

## GENERIC DRUG COPAY PENALTY

First 30-Day Fill	Second 30-Day Fill	Third 30-Day Fill	Fourth 30-Day Fill* (Copay Penalty Applied)	<b>PAID \$20.00 MORE IN COPAYS!</b>
\$10.00	\$10.00	\$10.00	<b>\$20.00</b>	

## PREFERRED BRAND NAME COPAY PENALTY

First 30-Day Fill	Second 30-Day Fill	Third 30-Day Fill	Fourth 30-Day Fill* (Copay Penalty Applied)	<b>PAID \$64.00 MORE IN COPAYS!</b>
\$32.00	\$32.00	\$32.00	<b>\$64.00</b>	

## NON-PREFERRED BRAND NAME SAVINGS COPAY PENALTY

First 30-Day Fill	Second 30-Day Fill	Third 30-Day Fill	Fourth 30-Day Fill* (Copay Penalty Applied)	<b>PAID \$120.00 MORE IN COPAYS!</b>
\$60.00	\$60.00	\$60.00	<b>\$120.00</b>	

Last Update September 16, 2024

\*The penalty does not occur until a 30-day prescription is filled the fourth time.