

# Plan Summary

This chart explains what your plan covers and what your share of prescription costs will be. You can also find it on our website.

## University of New Mexico

Here's what you need to know about how and where to fill prescriptions to ensure they are covered under your plan. Visit **Caremark.com** for more up-to-date, personalized information about your plan.

	<b>Short-Term Medications</b> Fill at any pharmacy in your plan's network; Cost for up to a 30-day supply	<b>Long-Term Medications</b> Fill at any pharmacy in your plan's network; Cost for up to a 90-day supply
<b>Generic Medications</b> Best option to help you save money	<b>\$10</b> for one 30-day supply	<b>\$20</b> for one 90-day supply
<b>Preferred Brand-Name Medications</b> Best option when a generic isn't available	<b>25% (\$35 min / \$70 max)</b> for one 30-day supply	<b>25% (\$87.50 min / \$175 max)</b> for one 90-day supply
<b>Non-Preferred Brand-Name Medications</b> Highest cost option	<b>25% (\$55 min / \$110 max)</b> for one 30-day supply	<b>25% (\$137.50 min / \$275 max)</b> for one 90-day supply
<b>Diabetic Supplies &amp; Medications</b>	Select Diabetic Supplies & Medications are covered at a <b>\$0</b> copay. Log into Caremark.com or call us at 1-877-745-4394 for more details.	
<b>Specialty Medications*</b>	<b>20% (\$250 max)</b> for a 30-day supply of specialty medicines	
<b>Maximum Out-of-Pocket</b>	\$3,000 per individual / \$6,000 per family (combined with medical)  \$1,250 for individual coverage (combined with medical) <b>applies to specialty medications only</b>	

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.

22AQ-WKL2-NEW\_2023\_RETAIL90\_AD\_MOOP-0425

\* Your plan includes the PrudentRx solution for certain eligible specialty medications. If you are participating in the PrudentRx program, you will have a final out-of-pocket responsibility of \$0 for medications on the PrudentRx Program Drug List. If you opt-out of participating in the program, you will be responsible for the full amount of the 30% co-insurance on specialty medications. Note: only the amount you pay out of pocket will be reflected in your annual deductible and/or maximum out of pocket.

## Register today at Caremark.com/StartNow

**Oklahoma:** Some Oklahoma residents may not be eligible to participate in the Maintenance Choice and/or Exclusive Specialty program. If you have questions about your eligibility, please contact Customer Care at the number on your member ID card. Specialty pharmacy delivery options are available where allowed by law. In-store pickup is currently not available in Oklahoma. Puerto Rico requires first-fill prescriptions to be transmitted directly to the dispensing specialty pharmacy. Products are dispensed by the applicable specialty pharmacy and certain services are only accessed by calling the pharmacy directly. Certain specialty medications may not qualify. Products that qualify as preventive services may be available at a lower cost share or no cost share, depending upon your plan, and may change from time to time. Please check your plan benefit materials should you have any questions about your coverage. Certain drug options identified above may be subject to additional prior authorizations or other plan design restrictions. Please consult your plan for further information. This information is not a substitute for medical advice or treatment. CVS Caremark assumes no liability whatsoever for the information provided or for any diagnosis or treatment made as a result of this information. Members acknowledge that by directing their prescribers, or their agents, to send prescriptions to CVS Caremark they are also providing express consent for CVS Caremark to provide prescription services to those members for those prescriptions. Members acknowledge that by directing their prescribers, or their agents, to send prescriptions to the applicable specialty pharmacy, they may also be providing express consent to utilize any affiliated pharmacies to process their prescriptions. Plan Member Rights and Responsibilities can be found at Caremark.com.

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