



SCOTT & WHITE HEALTH PLAN

Prescription Drug Benefit Summary Scott and White Health Plan

Note:

- *Leaflet is provided to members if they have a drug benefit*
- *Specific leaflet will vary depending on what drug benefit package is chosen by the employer group*

The Scott and White Health Plan uses a formulary (a list of drugs) that has been selected by a committee of Scott and White Physicians and Pharmacists. These medications are selected based on research that shows their safety and effectiveness. Since there can be many different brands of similar prescription medicines, the formulary is used to select the medication that proves to be the most cost effective in treating an illness.

COPAYMENT:

Formulary Generic Drugs	1 st tier \$5.00-10.00
Formulary Brand Name Drugs	2 nd tier \$20.00 or \$25.00
Non-Preferred Formulary Drugs	3 rd tier \$50 or 50% whichever is less
Non-Formulary Drugs	4 th tier \$50 or 50% whichever is greater

The Scott & White Health Plan will only cover the cost of the generic medications when they are available. If a brand name drug is dispensed when there is a generic available, the member will pay the non-formulary (50%) copayment.

QUANTITY LIMITATIONS: (per prescription or refill per prescription)

Up to a 30 to 34-day supply per prescription or refill prescription per copayment

Common exceptions (varies from employer group to employer group):

- Oral contraceptives - up to a 90-day supply for 2-3 copayments
- Chronic conditions (if drug is listed **on the SWHP Maintenance Drug List**) up to 90-day supply per prescription or refill per 2-3 copayment(s)
- insulin and diabetic supply limitations may be specifically designated

FOR NEW PRESCRIPTIONS:

(This refers to new medications. This does not necessarily apply to new written prescriptions of a continuing medication)

- Take your prescription to a Scott and White Health Plan Pharmacy or a participating network pharmacy of your choice or mail your prescription to Scott and White Health Plan Express Pharmacy for mail order service.
- After Hours/Emergency: For prescriptions received during evening or weekend hours that must be started immediately, please call the appropriate network or Scott and White Health Plan emergency number for instructions (See Directory Section of the Notebook).
- Medications requiring prior authorization will not be filled until the prior authorization form is submitted and reviewed. Please allow up to 2 business days for a review.

TRANSFER PRESCRIPTIONS:

- Call or take your label to the Scott & White Health Plan Pharmacy and give the prescription label information to the staff. The pharmacist will complete the transfer for you. Please allow 24 hours for transfer prescriptions.