

# **Your Personal Prescription Benefit Program**

## Your TRS-Care Standard Prescription Drug Program Prescription Benefits for Participants Without Medicare

Welcome to your new prescription benefit administered by CVS Caremark. Your prescription benefit is designed to bring you quality pharmacy care that will help you save money. Following is a brief summary of your prescription benefits.

|  | CVS Caremark Retail Pharmacy Network  | CVS Caremark Mail Service Pharmacy or<br>Retail- <i>Plus</i> Network Pharmacy  |
|--|---|--|
|  | For short-term medications<br>(Up to a 31-day supply)   | For long-term medications<br>(Up to a 90-day supply)   |
| Where  | The CVS Caremark Retail Network includes more than 68,000 participating pharmacies nationwide, including independent pharmacies, chain pharmacies, and 9,600 CVS pharmacy locations. To locate a CVS Caremark participating retail network pharmacy in your area, simply click on "Find a Pharmacy" at info.caremark.com/trscarestandard or call a Customer Care representative toll-free at 1-844-345-4577 (option 1). | You have the convenience of getting your long-term medications at one of our Retail- <i>Plus</i> locations for your mail service copay. Or simply mail your original prescription and the mail service order form to CVS Caremark. Your medications will be sent directly to your home, office or a location of your choice. To locate a Retail- <i>Plus</i> pharmacy near you, please go to <b>info.caremark.com/trscarestandard</b> and click on the Retail- <i>Plus</i> Pharmacy locator. |
| Generic Medications Ask your doctor or other prescriber if there is a generic available, as these generally cost less.   | 20% coinsurance for a generic prescription  | 20% coinsurance for a generic prescription   |
| Preferred Brand-Name Medications If a generic is not available or appropriate, ask your doctor or healthcare provider to prescribe from your plan's preferred drug list. | <b>20% coinsurance</b> for a preferred brand-name prescription  | 20% coinsurance for a preferred brand-name prescription  |
| Non-Preferred<br>Brand-Name Medications<br>You will pay the most for<br>medications not on your<br>plan's preferred drug list.   | 20% coinsurance for a non-preferred brand-name prescription   | 20% coinsurance for a non-preferred brand-name prescription  |
| Annual Deductible For medical and prescription expenses  | <b>In-Network</b><br>\$1,500 Individual<br>\$3,000 Family   | <b>Out-of-Network</b><br>\$3,000 Individual<br>\$6,000 Family  |
| Annual Maximum Out-of-Pocket For medical and prescription expenses   | In-Network<br>\$5,650 Individual<br>\$11,300 Family   | In-Network<br>\$11,300 Individual<br>\$22,600 Family   |
| Generic Preventive Drugs   | No cost for certain maintenance medications taken to prevent or treat chronic conditions. Find the generic preventive drug list at info.caremark.com/trscarestandard  |  |
| Web Services   | Register at <b>www.caremark.com</b> to access tools that can help you save money and manage your prescription benefit. To register, have your Prescription Card ready.  |  |
| Customer Care  | Visit www.caremark.com or call toll-free at 1-844-345-4577 (option 1).  |  |

Copayment, copay or coinsurance means the amount a plan participant is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.



## **Use This Plan to Fill Your Long-Term Medications**

This plan offers you choice and savings when it comes to filling long-term prescriptions. Here are two ways to save:

### **CVS Caremark Mail Service Pharmacy:**

- Enjoy convenient home delivery
- · Receive your medications in private, tamper-resistant and (when needed) temperature-controlled packaging
- Copay installment program is available at Caremark mail order pharmacy. The installment program will allow a member to break up the total amount due for their prescription order into three equal monthly payments.
- Talk to a pharmacist by phone

### Retail-Plus Network Pharmacy:

- Pick up your medication at a time that is convenient for you
- Enjoy same-day prescription availability
- Talk with a pharmacist face-to-face

Plus, you can easily order refills and manage your prescriptions anytime at www.caremark.com.

#### To Get Started

The following chart provides detailed steps to help you start enjoying all the benefits of your prescription benefit plan.

| IF YOU WOULD LIKE                              | THEN  |  |
|--|---|--|
| To continue with mail service                  | You don't have to do anything. We'll continue to send your medications to your location of choice.  |  |
| To pick up at CVS pharmacy                     | Please let us know. You can do so quickly and easily. Choose the option that works best for you:  • Visit your local Retail- <i>Plus</i> Pharmacy and talk to the pharmacist  • Call us toll-free using the number on the back of your Prescription Card, and we'll handle the rest |  |
| To sign up for mail service for the first time | You can do so easily online or by phone.  Register or log into www.caremark.com, select "Start a New Prescription," then click on "FastStart®"  Call Customer Care at 1-844-345-4577 (option 1). We'll handle the rest  |  |
| More information                               | Give us a call.  Use the phone number on the back of your Prescription Card to call us toll-free.   |  |

0641-TRS-STANDARDSUM-1018

0641-SML-SUM\_80\_RETAIL\_AD\_MOOP\_PD-1018

