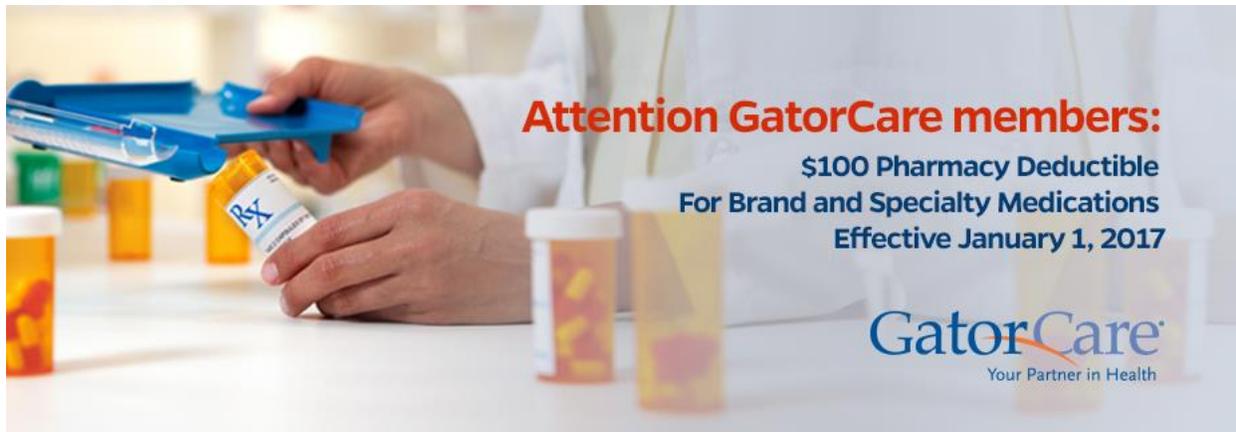


## GatorCare Pharmacy Plan Change For all Benefit Plans Effective 1/1/2017 and After



Beginning January 1, 2017, GatorCare members will be required to satisfy a prescription drug deductible for purchases of all Tier 2-5 prescription drugs before the plan's prescriptions benefits apply. The deductible amount is \$100 per covered person. Each member will pay the deductible plus any applicable coinsurance, up to the cost of the drug. For drugs that cost less than \$100, members will pay the cost of the drug, until the \$100 prescription drug deductible is met. The deductible applies regardless of whether you purchase your prescription from a retail or mail order pharmacy.

Once a member has met the prescription drug deductible the plan pays benefits for the remainder of the calendar year, and members are responsible for only their coinsurance amount.

**Keep in mind that members will still have access to GatorCare's discounted pharmacy rates and can avoid paying the deductible by using Tier 1 Generic drugs. If a member fills only Tier 1 drugs during the plan year, the pharmacy deductible does not apply.**

Now is the time to let your doctor know if you prefer a Tier 1 generic prescription. Some drugs may not be available as a Tier 1 Generic, but there may be another option in the same class that does have a Tier 1 Generic version. Regardless of the tier, Generics are always more affordable than their Brand counterparts.

Additional documents explaining the GatorCare Pharmacy Deductible can be found at <http://gatorcare.org/pharmacy>

**NOTE:** All out-of-pocket costs, including the pharmacy deductible, count towards the medical out-of-pocket maximum.

GatorCare Pharmacy Benefits

In-Network Pharmacy Benefits are administered by Magellan Rx.

Effective 1/1/2017

**NEW in 2017: \$100 Pharmacy (Rx) CYD must be satisfied for Rx Tiers 2 – 5; Rx CYD is waived for Tier 1 medications.**

- Member pays the first \$100 for medications in Tiers 2-5, then co-insurance benefits apply.
- Rx deductible does not apply to Medical CYD, but counts towards the Medical Maximum OOP.
- Member pays the brand copay plus the difference in cost between the brand and generic if a brand product is chosen when a generic equivalent is available.

**Prescriptions – up to 34-day retail supply:**

Tier 1: Generic	25% coinsurance with \$10 minimum to \$20 maximum (no Rx CYD applies)
Tier 2: Preferred Brands	25% coinsurance with \$25 minimum to \$50 maximum <b>after Rx CYD</b>
Tier 3: Preferred Specialty	25% coinsurance with \$50 minimum to \$100 maximum <b>after Rx CYD</b>
Tier 4: Non-Preferred Brands	40% coinsurance with \$70 minimum to \$240 maximum <b>after Rx CYD</b>
Tier 5: Non-Preferred Specialty	40% coinsurance with \$70 minimum to \$240 maximum <b>after Rx CYD</b>

**Prescriptions – 90-day supply retail and mail order**

**Applies to in-network pharmacies only for eligible prescriptions following initial 30/34-day fill.**

Tier 1: Generic	25% coinsurance with \$25 minimum to \$50 maximum (no Rx CYD)
Tier 2: Preferred Brands	25% coinsurance with \$62.50 minimum to \$125 maximum <b>after Rx CYD</b>
Tier 3: Preferred Specialty	N/A
Tier 4: Non-Preferred Brands	40% coinsurance with \$175 minimum to \$600 maximum <b>after Rx CYD</b>
Tier 5: Non-Preferred Specialty	N/A