

2019 PEHP Pharmacy Options



Requirements

- » **Agencies with 9 subscribers or less:** Can choose one of two Benefits — Benefits C or G.
- » **Agencies with between 10-50 subscribers:** Can choose one of four Benefits — Benefits A, B, C or G. (If Benefit B is selected, rates will be increased by 1.5%).
- » **Agencies with more than 50 subscribers:** Can choose one of the five Benefits available. (If Benefit B is selected, rates will be increased by 1.5%).
- » **Option G:** There will be a 1% decrease to the rate if Option G is selected.
- » **Specialty Drug Rates:** For benefit information regarding specialty drugs on the below pharmacy selections, please refer to the medical benefits grids.

OPTION	A	B	C	D	G
30-Day Pharmacy (Retail only)					
Tier 1	\$10 co-pay	\$10 co-pay	\$15 co-pay	\$10 co-pay	10% of discounted cost, \$7 min./no max.
Tier 2	25% of discounted cost, \$25 min./\$75 max.	\$25 co-pay	\$30 co-pay	25% of discounted cost, \$25 min./no max.	25% of discounted cost, \$40 min./no max.
Tier 3	50% of discounted cost, \$50 min./\$100 max.	\$50 co-pay	\$65 co-pay	50% of discounted cost, \$50 min./no max.	50% of discounted cost, \$70 min./no max.
90-Day Pharmacy (Maintenance only)					
Tier 1	\$20 co-pay	\$20 co-pay	\$30 co-pay	\$20 co-pay	10% of discounted cost, \$17 min./no max.
Tier 2	25% of discounted cost, \$50 min./\$150 max.	\$50 co-pay	\$60 co-pay	25% of discounted cost, \$50 min. / no max.	25% of discounted cost, \$100 min. / no max.
Tier 3	50% of discounted cost, \$100 min./\$200 max.	\$100 co-pay	\$130 co-pay	50% of discounted cost, \$100 min./no max.	50% of discounted cost, \$175 min./no max.