

## The Three-Tier Prescription Drug Benefit

### How does this benefit work?

The three-tier prescription drug benefit places all covered medications into one of three levels or tiers. Each tier is assigned a copayment, the amount you pay when you fill a prescription, which is determined by your health plan.

### Tier 1 – Preferred Generic (on the FORMULARY)

**Tier 1 is primarily made up of generic drugs.** These drugs contain the same active ingredients as their brand-name counterparts. **Tier 1 may also include brand-name drugs that the plan has determined to be more effective, less costly or to have fewer side effects than similar medications.** For the lowest out-of-pocket expense, you should always consider Tier 1 medications if you and your doctor decide they are right for your treatment.

### Tier 2 – Preferred Brand (on the FORMULARY)

**Tier 2 is primarily made up of brand-name drugs for which generic equivalents are not available.** These drugs have been selected by the plan based on review of the relative safety, effectiveness and cost of the many brand-name drugs on the market. **Tier 2 may also include generic drugs that the plan has determined to be more costly than their brand name alternatives.**

### Tier 3 – Non-Preferred (NON-FORMULARY)

**Tier 3 is made up of drugs that the plan has not included in Tier 1 or Tier 2.** Sometimes there are alternatives available in Tier 1 or Tier 2 that may be appropriate to treat your condition. If you are currently taking a medication in Tier 3, ask your doctor whether there are Tier 1 or Tier 2 alternatives that may be right for your treatment.

**Compounded medications:** Medications with one or more ingredients that are prepared “on-site” by a pharmacist, are classified at the Tier 3 level.

Please Note: Certain controlled substances and other prescribed medications may be subject to dispensing limitations, exclusions or restrictions as required by state and federal law or benefit plan design. Please contact UHC Member Services if you have any additional questions.

**COPAYMENT:** A fixed dollar amount you pay per prescription. There are different copayments for each of the three tiers. Each copayment covers up to a 30-day supply for each prescription or refill, except where limited by the plan. If your physician prescribes less than a 30-day supply of a medication, each copayment covers the amount prescribed.