

Deptford Township Board of Education

Prescription Coverage Selections - Schools Health Insurance Fund/Express Scripts

Prescription Benefits	NJ Educators Health Plan/GSP	Rx Retail \$10/\$20/\$30 (PPO \$10 Plan) & (PPO \$20/\$40 Plan)
Retail Copays (Up to 30 day Supply)		
Generic	\$5 Copay	\$10 Copay
Brand Name Drug (Generic Alternative <u>Not</u> Available)	\$10 Copay	\$20 Copay (Preferred Brand)
Brand Name Drug (Generic Alternative Available)	Member Pays the Difference**	\$30 Copay (Non-Preferred Brand)
Mail Order (Up to 90 day Supply)		
Generic	\$10 Copay	\$10 Copay
Brand Name Drug (Generic Alternative <u>Not</u> Available)	\$20 Copay	\$20 Copay (Preferred Brand)
Brand Name Drug (Generic Alternative Available)	Member Pays the Difference**	\$30 Copay (Non-Preferred Brand)
Additional Features		
*Step Therapy	Applies	Not Applicable
**Mandatory Generic	Applies	Not Applicable
***Mail Order for Specialty Medications	Applies	Applies
****Closed Formulary	Applies	Applies

*Step Therapy- Where more than one medication in a certain drug class has been shown to be clinically effective but a varying costs, Step Therapy requires a trial with the lower cost medication before approval of the higher cost medication, where clinically appropriate.

**Mandatory Generics- The pharmacist must dispense the generic equivalent medication when one is available. If the member fills the brand name drug instead, they will be responsible for the brand copay plus the difference in cost between the generic and brand name drug.

***Accredo is the specialty pharmacy for Express Scripts. Specialty pharmaceuticals typically require special handling and patient monitoring.

****Closed Formulary - Certain medications are excluded from the covered drug list. A great majority of brand-name medications and generic medications are included in the formulary. All conditions with excluded medications have covered clinically equivalent medications. Please note, the formulary updates throughout the year, and for the most up to date version please refer to the Express Scripts website: <https://www.express-scripts.com/>

This overview is being provided as a convenient reference tool and is not a complete overview of the benefits being offered through your medical, prescription, dental, and vision programs. Some plan limitations may apply. Please refer to the plan documents provided by your carriers for detailed plan information. If there is any discrepancy between the descriptions of the program elements in this overview and the official plan documents, the language of the official plan documents shall prevail as accurate.