



# BALL STATE UNIVERSITY

Prescription Coverage	High Deductible Wellness					
<b>Deductible</b>	No Deductible					
<b>Out-of-Pocket Maximum (OOPM)</b>	Individual = \$1,725 EE+CH/Family = \$3,450 (2X the Individual)					
	Retail (30-day supply)			Mail-Order (90-day supply)		
	%	Min.	Max.	%	Min.	Max.
<b>Generic</b>	20%	\$7	\$25	20%	\$15	\$65
<b>Preferred Brand</b>	40%	\$35	None	40%	\$70	\$110
<b>Non-Preferred Brand</b>	50%	\$60	None	50%	\$120	\$160
<b>Specialty</b>	-----	\$110	-----	-----	\$110	-----

EE+CH = Employee Plus Child(ren)

The coinsurance, minimums, and maximums listed above for each plan represent the employee's/member's share of the cost. Please note that for maintenance medications (medications that you fill on a regular, continuing basis), after the 3<sup>rd</sup> fill at retail, the claim will be denied. To maximize your savings please make sure you are filling your maintenance medications through our pharmacy benefit manager, currently CVS Caremark. Go to [www.caremark.com](http://www.caremark.com) to register your account and find out more information about mail-order.

In-Network retail coinsurance will now apply toward meeting your prescription OOPM. Previously, only mail order coinsurance applied. Please remember that Walgreens continues to be OUT-OF-NETWORK for Ball State University.