

PRESCRIPTION DRUG COVERAGE

NOTE CHANGES FOR THE 2010 PLAN YEAR!

The ISU Plan offers a pharmacy program that is administered separately from your medical plan. You will have a separate benefit card that must be used for your prescription purchases but there is not a separate premium that you pay. The cost of the medical and prescription plans is combined into the single medical premium. The prescription plan is administered by Medco (Pharmacy Benefit Manager).

Deductibles	\$0
Out-of-Pocket Maximum EFFECTIVE JANUARY 1, 2010	\$1,500 / single contract / year \$3,000 / spouse/child/family contract / year Separate from applicable medical plan out-of-pocket
30-day supply – Retail Pharmacy For prescription medications used on a short-term basis	\$10 co-pay for generic 30% co-insurance for preferred brand name (\$100.00 maximum co-pay/prescription) – Effective February 1, 2010 50% co-insurance for non-preferred brand name (\$200 maximum co-pay/prescription) – Effective February 1, 2010 Limited coverage for non-participating pharmacies.
90-day Supply – Retail Pharmacy For prescription medications used on a regular basis (for 3 months or more)	\$30 co-pay for generic 30% co-insurance for preferred brand name (\$300.00 maximum co-pay/prescription) – Effective February 1, 2010 50% co-insurance for non-preferred brand name (\$600 maximum co-pay/prescription) – Effective February 1, 2010
90-day Supply – Medco By Mail (Home Delivery) For prescription medications used on a regular basis (for 3 months or more)	\$0 co-pay for generics 25% co-insurance for preferred brand name (\$250 maximum co-pay/prescription) – Effective February 1, 2010 33% co-pay for non-preferred brand name (\$500 maximum co-pay/prescription) – Effective February 1, 2010

Example Brand Drug Designation	Medicine Cost Allowed	Buy	Days Supply	Member Coverage % in 2009	2009 Member Pays	Member Coverage % in 2010	Due to Max Co-pay 2010 Member Pays
Preferred brand	\$533.34	Retail	30	30%	\$160.00	30%	\$100.00
Non-preferred brand	\$533.34	Retail	30	50%	\$266.67	50%	\$200.00
Preferred brand	\$1,600.00	Retail	90	30%	\$375.13	30%	\$300.00
Preferred brand	\$1,600.00	Mail	90	20%	\$250.09	25%	\$250.00
Non-preferred brand	\$1,600.00	Retail	90	50%	\$625.23	50%	\$600.00
Non-preferred brand	\$1,600.00	Mail	90	33%	\$412.65	33%	\$500.00

***Implementing additional clinical programs which adds additional step therapy and/or prior authorization requirements to enhance health and safety through greater medication compliance and adherence to prescribed therapies and avoidance of negative outcomes as a result of incorrect dosing, drug interactions, or treatments prescribed for non approved indications or treatment guidelines. The program targets conditions that are considered Chronic and complex, many of which are treated with Specialty Medications.**