

Prescription drugs

Type of Rx	SEQA		PPO		HSA [†]
	BSW pharmacy 30-day cost/ 90-day* cost	Contracted pharmacy 30-day* supply only	BSW pharmacy 30-day cost/ 90-day* cost	Contracted pharmacy 30-day* supply only	BSW or contracted pharmacy*
Preferred generic	\$5/\$10	\$12	\$5/\$10	\$12	10% AD
Preferred brand	\$25/\$50	\$50	\$35/\$70	\$50	10% AD
Non-preferred brand and generic	Lesser of \$50/\$100 or 50%	Lesser of \$75 or 50%	Lesser of \$50/\$100 or 50%	Lesser of \$75 or 50% after \$100 individual deductible	10% AD
Specialty ^{††}	\$100	N/A	20% (\$200 max)	N/A	10% AD
Chronic and preventive [^]	\$10/\$20 \$0 diabetic treatment ^{^^}	\$20 \$0 diabetic treatment ^{^^}	\$10/\$20	\$20	10% AD

Note:

- ▶ Fertility drugs are covered at 20% with a maximum \$400 copay and a \$7,500 lifetime maximum pharmacy benefit.
- ▶ Drugs not listed on the formulary may require prior authorization. If authorized, you'll pay the applicable non-preferred or specialty copay.
- ▶ **New!** Member Choice program requires generic medication fills when available; if a brand name medication is requested (when a generic is available), you'll pay the non-preferred member cost share plus the difference in cost between the brand name and generic equivalent drug.

[†] Pharmacy costs between BSW pharmacies and contracted pharmacies cross apply between Tier 1 and Tier 2 and are subject to the Tier 1 deductible and out-of-pocket maximum.

^{††} Specialty is limited to 30 days at BSW pharmacies.

[^] To help make some frequently prescribed preferred drugs for asthma, diabetes and some other chronic conditions more affordable, we've placed a select group on a special chronic and preventive medication list. Find the complete list on [BSWHealthPlan.com/BSWH](https://www.bswhealthplan.com/BSWH).

^{^^} Selected diabetes devices, drugs and insulin.

* Only BSW pharmacies can fill a 90-day supply of a medication. The max day supply through a contracted pharmacy is 30 days. Specialty drugs are only available at BSW pharmacies.