

Pharmacy Benefit Overview



Express Scripts



Access affordable prescription drugs safely and efficiently

- Saves approximately \$32 billion each year
 - Nearly 100 million Americans and thousands of clients served



Drug List: Medications Covered by Your Prescription Plan



Routinely reviewed by an independent panel of physicians and pharmacists to ensure you receive clinically effective care

Preferred medications, including generics and brand-names

Talk with your doctor about moving to preferred generics



Generic Prescriptions

FDA-approved generic medications contain the same active ingredient as brand-name counterparts.





9 out of 10 prescriptions filled in the U.S. are for generic medications



Review your medications regularly with a doctor pharmacist and ask, "Is there a generic for that?"



Use the Express Scripts® mobile app or visit express-scripts.com to find a generic or price a medication



Step Therapy



Helps reduce costs and ensures that you receive a safe and proven-effective medication

First step medications are typically generic and lower-cost brand-name medications

Second step medications are best suited for the
 few patients who don't respond to first step medications



Prior Authorization: Monitors Prescription Medications



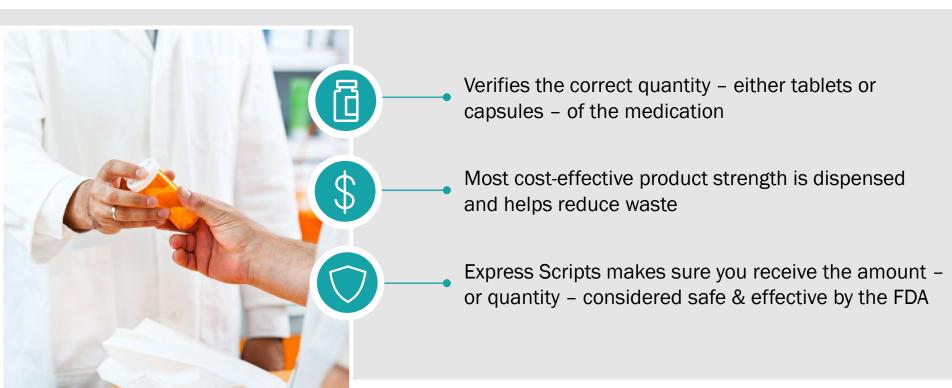
Makes sure your prescription is suitable for the intended use & covered by your prescription plan

Simply means that more information is needed to see if your plan covers the medication

To get the prior authorization started, please contact your doctor's office



Drug Quantity Management



Smarter Pharmacy Consumer



Ask your doctor for a generic or a lower-cost equivalent

Use the most cost-effective pharmacy option and don't be fooled by coupons

Take your medications as prescribed and set reminders to help you stay on track



Resources for You

- Download the Express Scripts® mobile app for free go to your mobile device's app store and search for "Express Scripts."
- Create your digital profile at express-scripts.com or on the Express Scripts® mobile app which helps you connect to:
 - Your digital prescription ID card
 - Lower-cost medication options
 - Nearby, in-network pharmacies
 - Easy medication refills
 - Home delivery with order tracking



Call the customer service number on your ID card – available 24/7 for general support or to talk to a specially trained pharmacist for complex concerns or health conditions.



PHARMACY NETWORK

- Bronson members have access to a broad network of pharmacies across the country. Express Scripts negotiates with retail pharmacies to provide the safest and most affordable retail network.
- Long-term prescriptions are taken over a sustained period of time to treat chronic conditions.
- For cost savings and to help in adherence, you can get a three-month (90-day) supply of your long-term medicine instead of a one-month (30-day) supply. Use Bronson Pharmacies or Express Scripts Home Delivery for your long-term medicines. Specialty and long-term medicines are required to be filled at Bronson Pharmacies to have coverage.
- Talk with an Express Scripts' patient care advocate or pharmacist by phone 24/7/365 by calling (800) 711-0917.

DELIVERED TO YOU FROM EXPRESS SCRIPTS PHARMACY®

- Delivered to your door with FREE standard shipping
- Transfer prescriptions easily online, by phone or via Express Scripts® mobileapp
- Auto-refills and refill reminders available

AT A PREFERRED BRONSON PHARMACY

- At convenient locations near you
- Transfer your prescriptions easily in-store or by phone
- Ask about auto-refills and refill reminders
- www.bronsonhealth.com/services/pharmacy/



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Digital Prescription ID Card

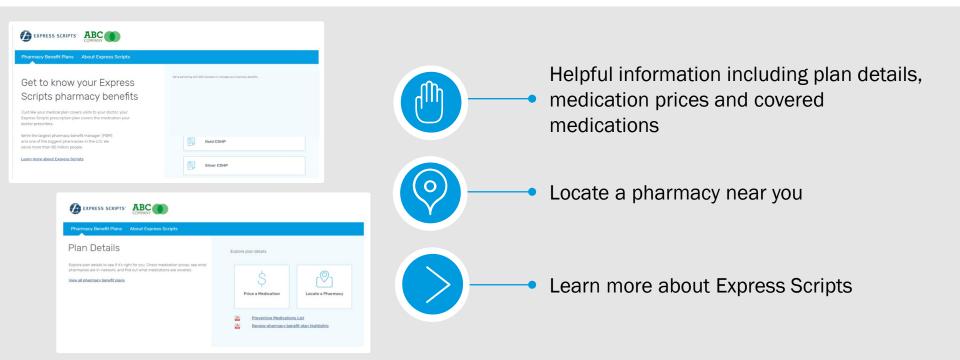




Create your digital profile at express-scripts.com or on the Express Scripts mobile app



express-scripts.com/frontend/open-enrollment/Bronson





Additional Information About Your Plan

	PPO	HDHP *medical claims included
Deductible	• \$25 → <mark>\$75</mark>	\$1700 Individual\$3400 family
Max Out of Pocket	 \$2500 individual → \$3,000 \$5000 family → \$6,000 	\$4500 individual\$9000 family

Copays apply after the Deductible

Medication Type	Bronson Pharmacy	
	1-34 Day Supply	35 to 90 Day Supply
Generic	10%	10%
	Min \$5 → Min \$7	Min \$10 → Min \$15
	Max \$75	<mark>Max \$225</mark>
Preferred Brand	20%	20%
	Min \$10 → Min \$15	Min \$20 → Min \$30
	Max \$125	<mark>Max \$300</mark>
Non-Preferred Brand	30%	30%
	Min \$30 → Min \$40	Min \$60 → Min \$80
	Max \$175	Max \$375

Medication Type	Other Retail Pharmacies *Limit 2 fills*	Express Scripts Home Delivery
	1-34 Days' Supply	Up to 90 Day Supply
Generic	20% Min \$10 → <mark>Min \$15</mark>	10% Min \$15 <mark>→</mark> Min \$30
Preferred Brand	30% Min \$25 → <mark>Min \$30</mark>	20% Min \$30 → <mark>Min \$60</mark>
Non-Preferred Brand	40% Min \$45 → <mark>Min \$50</mark>	30% Min \$70 → Min \$100

Thank You



