



PRESCRIPTION BENEFITS



BALANCED CHOICE AND CHOICE PLANS

Prescription coverage for the Balanced Choice and Choice plans is provided by Humana Pharmacy Solutions. Therefore, you do not need a separate prescription card; you simply use your health plan ID card when filling prescriptions.

Under both plans, you pay a specified copayment for prescription drugs. The amount of the copay depends on whether the prescription is for Tier 1, Tier 2, Tier 3 or Tier 4 medications. Review the Prescription Plan Comparison Chart on page 15 for the copay amounts.

The plans require use of generic drugs if available. If an employee/eligible dependent chooses to purchase a brand name drug, and an equivalent generic is available, they must pay the difference in cost between the brand name and generic equivalent, plus the applicable copayment, regardless of who is requesting the brand name medication. If the physician writes on the prescription “dispense as written,” the drug will be dispensed as such. However, the employee/eligible dependent will still be required to pay the difference in cost between the brand name drug and the generic equivalent, plus any applicable copayment.

The plan’s mail order benefit is provided by Humana Pharmacy Solutions. If you take “maintenance” medications for an ongoing medical condition, such as high blood pressure or diabetes, you can

save money by having your doctor write a 90-day prescription instead of the regular 30-day prescription. You can also receive certain 90-day generic medications from the Metro Employee Wellness Center, however, they must be prescribed by the Wellness Center physician. For more about the mail order program, go to www.humana.com.

MANAGED CHOICE (HIGH DEDUCTIBLE HEALTH PLAN)

The Managed Choice Plan covers prescriptions just like other types of medical expenses. Humana Pharmacy Solutions provides this coverage and you will use your health plan ID card when filling prescriptions.

Under this plan, you must pay for prescriptions out-of-pocket (or with HRA/FSA funds) until you satisfy your annual deductible. Then the plan pays a percentage of the cost of each prescription – 80% at in-network pharmacies and 60% at non-network pharmacies. If you reach your annual out-of-pocket expense limit, the plan pays 100% of the cost of prescriptions for the rest of the year. Please note that the Managed Choice plan is not considered credible coverage under Medicare.

You can reduce your medical expenses by using in-network doctors and hospitals or by participating in the Vitals SmartShopper program. To find out if your doctor is in-network, call your doctor’s office or go online to www.humana.com and look under “Humana Choice Care Network PPO.”

IMPORTANT REMINDER

You may obtain certain generic medications with the \$5 copay by visiting a Metro Employee Wellness Center:

400 S. 1st St. & 6127 Airport Hotels Blvd.

Monday - Friday, 7:00 am - 7:00 pm

Downtown

Saturday, 8:00 am - 4:00 pm

Fern Valley

Saturday, 8:00 am – 12:00 pm



PRESCRIPTION PLAN COMPARISON

	Managed Choice HDHP		Balanced Choice PPO		Choice PPO	
Retail (30 days)	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Tier 1 Generic	80% ²	60% ²	\$20 copay	Not covered	\$20 copay	Not covered
Tier 2 Brand name	80% ²	60% ²	\$35 copay ¹	Not covered	\$35 copay ¹	Not covered
Tier 3 Non-formulary	80% ²	60% ²	\$60 copay ¹	Not covered	\$60 copay ¹	Not covered
Tier 4 Specialty	80% ²	60% ²	25% to \$100 max ¹	Not covered	25% to \$100 max ¹	Not covered
Mail Order (90 days)						
All Tiers	80% ²	60% ²	2x retail copay	Not covered	2x retail copay	Not covered
Metro Employee Wellness Center						
Tier 1 Generic		\$0		\$0		\$0

¹Member pays applicable copays plus difference when a generic is available. ²After annual deductible.

SMARTSHOPPER

EARN CASH REWARDS AND LOWER HEALTH CARE COSTS

SmartShopper is a free service that gives you the resources to shop responsibly for medical services and rewards you with a CASH BONUS for making cost-effective choices.

Here's how it works:

- Your doctor recommends a medical procedure or test.
- Call SmartShopper at 866-285-7340, Monday - Thursday, 8:30am - 8:00pm or Friday, 8:30am - 5:00 pm, or access the website at www.smartshopper.com at least 24 hours prior to your appointment. SmartShopper will give you information on cost effective options in your area for your service. Have your insurance card available for verification or to login.
- Call your doctor to schedule the service at the location of your choice.
- If you use a cost-effective location, an incentive check will be mailed to your home after the claim has been paid.

No hassles. No forms. No restrictions on which in-network doctors to see. The program is easy and completely confidential.

Examples of medical procedures that qualify for the incentive program include: MRI, CT Scans, Colonoscopy, EKG, Sleep Study, Mammography, Tonsillectomy, Wrist Surgery, Knee Surgery, Disc Surgery, Hysterectomy, Hip Replacement, Vascular Shunt or Bypass, Hernia Repair, and many more.

For a complete listing of diagnostic procedures, outpatient procedures, and inpatient procedures that qualify for the incentive rewards, please visit MyMetro or www.smartshopper.com.

