

# PHARMACY & LAB PLAN COVERAGE

		Purdue Health Plan	Purdue Health Plan Plus HSA 1	Purdue Health Plan Plus HSA 2
<b>Prescription Drugs: Retail* (30-day supply)</b>				
<b>Generic</b>	Preventive	\$0	\$0	\$0
	Non-preventive	No deductible, actual cost, up to \$10 max	Deductible, then actual cost, up to \$10 max	Deductible, then actual cost, up to \$10 max
<b>Formulary/Preferred Brand Name</b>	Preventive	No deductible, 30%, up to \$100 max	No deductible, 35%, up to \$50 max	No deductible, 35%, up to \$50 max
	Non-preventive	No deductible, 30%, up to \$100 max	Deductible, then 35%, up to \$50 max	Deductible, then 35%, up to \$50 max
<b>Non-Formulary/ Non-Preferred Brand Name</b>	Preventive	No deductible, 40%, up to \$150 max	No deductible, 50%, up to \$75 max	No deductible, 50%, up to \$75 max
	Non-preventive	No deductible, 40%, up to \$150 max	Deductible, then 50%, up to \$75 max	Deductible, then 50%, up to \$75 max
<b>Specialty Rx</b>		No deductible, 50%, up to \$250 max	Deductible, then 55%, up to \$250 max	Deductible, then 55%, up to \$250 max
<b>Prescription Drugs: Mail Order (90-day supply)</b>				
<b>Generic</b>	Preventive	\$0	\$0	\$0
	Non-preventive	No deductible, actual cost, up to \$25 max	Deductible, then actual cost, up to \$20 max	Deductible, then actual cost, up to \$20 max
<b>Formulary/Preferred Brand Name</b>	Preventive	No deductible, 30%, up to \$250 max	No deductible, 35%, up to \$100 max	No deductible, 35%, up to \$100 max
	Non-preventive	No deductible, 30%, up to \$250 max	Deductible, then 35%, up to \$100 max	Deductible, then 35%, up to \$100 max
<b>Non-Formulary/ Non-Preferred Brand Name</b>	Preventive	No deductible, 40%, up to \$350 max	No deductible, 50%, up to \$150 max	No deductible, 50%, up to \$150 max
	Non-preventive	No deductible, 40%, up to \$350 max	Deductible, then 50%, up to \$150 max	Deductible, then 50%, up to \$150 max
<b>Specialty Rx</b>		No deductible, 50%, up to \$250 max	Deductible, then 55%, up to \$250 max	Deductible, then 55%, up to \$250 max
<b>Labs</b>				
<b>Tier 1 Labs, including Center for Healthy Living Lab</b> (In-network, best pricing option)	Preventive	\$0	\$0	\$0
	Non-preventive	\$0	Deductible, then 20%	Deductible, then 25%
<b>Tier 2 Labs</b> (In-network)	Preventive	\$0	\$0	\$0
	Non-preventive	Deductible, then 20%	Deductible, then 20%	Deductible, then 25%
<b>Tier 3 Labs</b> (Out-of-network)		Deductible, then 40%	Deductible, then 40%	Deductible, then 45%

\*90-day supply of prescriptions available at CVS retail pharmacies based on mail-order pricing.