

Welcome to your new prescription benefit administered by Aetna. Following is a brief summary of your prescription benefits.

Basic Health

	UVA Pharmacies	CVS Caremark® Mail Service Pharmacy* or CVS Pharmacy®	All Other Participating Retail Pharmacies
Generic Medicines Always ask your doctor if there's a generic option available. It could save you money.	20% (after deductible)	20% (after deductible)	20% (after deductible)
Preferred Brand-Name Medicines If a generic is not available or appropriate, ask your doctor to prescribe from your plan's preferred drug list.	20% (after deductible)	20% (after deductible)	20% (after deductible)
Non-Preferred Brand-Name Medicines Drugs that aren't on your plan's preferred list may cost more.	20% (after deductible)	20% (after deductible)	20% (after deductible)
Specialty Medicines	Generic: 20% (after deductible) Preferred Brand: 20% (after deductible) Non-Preferred Brand: 20% (after deductible) Up to a 30-day supply must be filled through UVA Specialty Pharmacy. Limited Distribution Drugs can also be filled through CVS Specialty®.		
Day Supply	Up to a 90-day supply	Up to a 90-day supply	Up to a 30-day supply**
Maximum Out-of-Pocket (in-network)	\$4,000 for individual coverage / \$8,000 for family coverage (combined with medical)		
Annual Deductible (in-network)	\$2,000 for Employee Only coverage / \$4,000 for Employee + Child(ren), Employee + Spouse, or Family Coverage (combined with medical)		
Please Note: When a generic is av difference between the brand-nam			or any reason, you will pay the

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^{*}Only 31-90 day supplies are available
**After two 30-day fills, if you do not wish to fill your long-term medications in 90-day supplies, you have the option of continuing to fill 30-day supplies by calling the number on the back of your ID card.