



EXPRESS SCRIPTS®



PRESCRIPTION DRUG PROGRAM AT A GLANCE

FOR UT CONNECT PARTICIPANTS EFFECTIVE SEPTEMBER 1, 2022

Annual Deductible	\$200 per individual per plan year	
Out of Pocket Maximum (OOP)	\$8,700/individual, \$17,400/family combined with medical	
Copayment	Retail Pharmacy Copayment (up to 30 day supply)	Home Delivery/Walgreens/UT Pharmacy (90 Day Supply)
Generic Medication	\$10.00	\$20.00
Preferred Brand Name Medication	\$35.00	\$87.50
Non-Preferred Brand Name Medication	\$60.00	\$150.00

- Prescription Medications** Coverage administered by Express Scripts, Inc. You can get a 90-day supply of maintenance medication at Walgreens or a UT pharmacy for the same copayment as home delivery. Savings and convenience!
- Specialty Medications** Accredo, an Express Scripts specialty pharmacy, and UT specialty pharmacies are the exclusive providers of specialty medications.
- Your Copayment** UT CONNECT has a three-level copayment structure on prescription medications. Under this structure, members pay the lowest copayment for generic medications, a mid-level copayment for brand name medications on the preferred list, and a higher copayment for brand-name medications that are not on the preferred list.
- Deductible** Each plan year (September – August), each covered individual must pay the first \$200 in Medication costs. After the \$200 annual deductible is reached, members are responsible for the copayments listed above. However, if a Brand Name medication is requested when there is a Generic alternative, the member must pay the difference between the cost of the Brand Name medication and the Generic medication plus the applicable Generic copayment.
- Out of Pocket Maximum (OOP)** Your annual OOP max is shared with your medical plan for a total of \$8,700/individual, \$17,400/family. The annual OOP max is based on the combined accumulation of medical and prescription medication deductibles, copayments and coinsurance.
- Excluded** Participants are responsible for the full cost of medications used in the treatment of excluded services under the UT CONNECT plan. The non-preferred copayment will not apply.

Express Scripts Member Services for UT CONNECT participants

1-800-818-0155
Available 24 hours/day, 7 days a week
<https://www.express-scripts.com/UT>

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