

PPO, Premier CDHP and Basic CDHP Plan

Prescription Drug Tier	Retail (31-Day Supply)	Retail (90-Day Supply)	Express Scripts Mail Order (90-Day Supply)	Accredo Specialty Pharmacy (30-Day Supply)
Preferred Generic	\$5	\$15	\$10	n/a
Non-Preferred Generic	\$20	\$60	\$40	n/a
Preferred Brand Name	\$40	\$120	\$80	n/a
Non-Preferred Brand Name	\$70	\$210	\$140	n/a
Preferred Specialty Drugs	10% of cost up to \$250 maximum	n/a	n/a	10% of cost up to \$250 maximum
	2 grace fills only			
Non-Preferred Specialty Drugs	20% of cost up to \$500 maximum	n/a	n/a	20% of cost up to \$500 maximum
	2 grace fills only			