Prescription Drug/ Pharmacy Plan

PRESCRIPTION DRUGS – RETAIL	Hall Health/ Rubenstein Pharmacy*	UMC/UWP and all In-Network Pharmacies*	Other Pharmacies
Up to a 35-day supply The quarterly deductible is waived. • Preventive drugs • Formulary generic drugs • Formulary brand-name drugs • Non-formulary drugs • Oral chemotherapy drugs	See Note below 0% coinsurance $10 copay $25 copay $35 copay 0% coinsurance	See Note Below 0% coinsurance 20% coinsurance 20% coinsurance 40% coinsurance 10% coinsurance	40% coinsurance, based on billed charge
PRESCRIPTION DRUGS – Mail Order	Hall Health/ Rubenstein Pharmacy	UMC/UWP and all In-Network Pharmacies	Other Pharmacies
Certain maintenance drugs up to 90-day supply through Rubenstein. • Formulary generic drugs • Formulary brand-name drugs • Non-formulary drugs	Copay + shipping & handling $10 copay $40 copay $80 copay	Not available	Not available

*Note: When you use an in-network pharmacy, always show your LifeWise ID Card. If you do not show your LifeWise ID Card, you will be charged the full retail cost.

All prescription drug out-of-pocket costs, including the copays and coinsurance detailed above, will apply to the out-of-pocket maximum noted in the medical benefit summary.

For more information on the Mail Order option as well as the required forms please go to: http://www.washington.edu/admin/hr/benefits/insure/gaip/prescriptions.html.

For information on which benefit tier your prescription falls under and a listing of the UMC/ UWP Pharmacies go to: https://student.lifewiseac.com/uw/gaip/pharmacy/pharmacy.aspx

To locate an in-network pharmacy, click on the pharmacy link on the Find A Doctor *page.*

This is not a complete explanation of covered services, exclusions, limitations, reductions or the terms under which the program may be continued in force. This benefit highlight is not a contract. For full coverage provisions, including a description of waiting periods, limitations and exclusions please see the benefit booklet or contact LifeWise Customer Service.