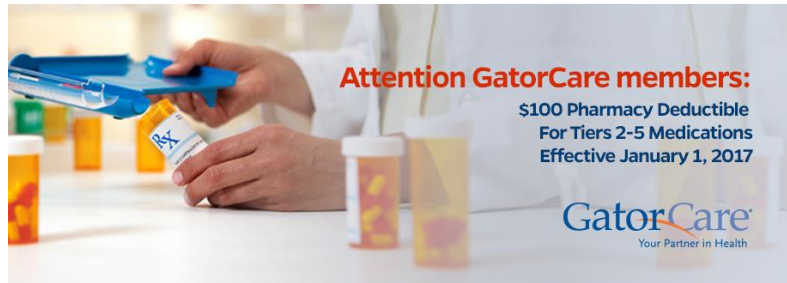


GatorCare Pharmacy Plan Change
For Benefit Plans Prime, Prime Plus, Premium, Premium Out-of-Area,
Healthy Rewards HRA, and Options
Effective 1/1/2017
For GatorGradCare
Effective 8/16/2017



Beginning January 1, 2017, GatorCare members enrolled in the Prime, Prime Plus, Premium, Healthy Rewards HRA, and Options plans and beginning August 16, 2017, members enrolled in GatorGradCare will be required to satisfy a prescription drug deductible for purchases of all Tier 2-5 prescription drugs before the plan's prescription benefits apply. The deductible amount is \$100 per covered person, with a deductible cap of \$400 per family. Each member will pay the deductible plus any applicable coinsurance, up to the cost of the drug. For drugs that cost less than \$100, members will pay the cost of the drug, until the \$100 prescription drug deductible is met. The deductible applies regardless of whether you purchase your prescription from a retail or mail order pharmacy.

Once a member has met the prescription drug deductible the plan pays benefits for the remainder of the calendar year, and members are responsible for only their coinsurance amount.

Members do not pay any deductible for Tier 1 Generic drugs. If members fill only Tier 1 drugs during the plan year, the pharmacy deductible does not apply.

Now is the time to let your doctor know if you prefer a Tier 1 generic prescription. Some drugs may not be available as a Tier 1 Generic, but there may be another option in the same class that does have a Tier 1 Generic version. Regardless of the tier, Generics are always more affordable than their Brand counterparts.

Additional documents explaining the GatorCare Pharmacy Deductible can be found at <http://gatorcare.org/pharmacy>

NOTE: All out-of-pocket costs, including the pharmacy deductible, count towards the medical out-of-pocket maximum.



GatorCare Pharmacy Benefits

In-Network Pharmacy Benefits are administered by Magellan Rx.

Effective 1/1/2017

NEW in 2017: \$100 per Member Pharmacy (Rx) CYD must be satisfied for Rx Tiers 2 – 5; with a deductible cap of \$400 per Family; Rx CYD does not apply to Rx Tier 1 medications.

- Member pays the first \$100 for medications in Tiers 2-5, then co-insurance benefits apply.
- Rx deductible does not apply to Medical CYD, but counts towards the Medical Maximum OOP.
- Member pays the brand copay plus the difference in cost between the brand and generic if a brand product is chosen when a generic equivalent is available.

Prescriptions – up to 34-day retail supply:

Tier 1: Generic	25% coinsurance with \$10 minimum to \$20 maximum (no Rx CYD applies)
Tier 2: Preferred Brands	25% coinsurance with \$25 minimum to \$50 maximum after Rx CYD
Tier 3: Preferred Specialty	25% coinsurance with \$50 minimum to \$100 maximum after Rx CYD
Tier 4: Non-Preferred Brands	40% coinsurance with \$70 minimum to \$240 maximum after Rx CYD
Tier 5: Non-Preferred Specialty	40% coinsurance with \$70 minimum to \$240 maximum after Rx CYD

Prescriptions – 90-day supply retail and mail order Applies to in-network pharmacies only for eligible prescriptions following initial 30/34-day fill.

Tier 1: Generic	25% coinsurance with \$25 minimum to \$50 maximum (no Rx CYD)
Tier 2: Preferred Brands	25% coinsurance with \$62.50 minimum to \$125 maximum after Rx CYD
Tier 3: Preferred Specialty	N/A
Tier 4: Non-Preferred Brands	40% coinsurance with \$175 minimum to \$600 maximum after Rx CYD
Tier 5: Non-Preferred Specialty	N/A