

**INFORMATION ABOUT YOUR PRESCRIPTION DRUG PLAN**

**Auglaize County utilizes MedTrak Services  
to administer its Prescription Drug Plan.**

**Will I receive an ID card?** Prior to your effective date you will receive a new UMR health insurance card. There is a MedTrak logo on this card. Show this card to your pharmacist when you get a prescription filled.

**Where can I fill my prescriptions?**

- **Retail Pharmacies.** To find out which pharmacies participate you can log onto our website and click on Pharmacy locator, or call MedTrak Services.
- **Performance 90 Pharmacies.** These pharmacies are able to fill 90-day supplies of maintenance medications. To find out which pharmacies participate you can log onto our website and click on Pharmacy locator, or call MedTrak Services.
- **Orchard Mail Order Pharmacy.** Mail order can be used to fill 90-day supplies of maintenance medications. The Orchard Registration and Prescription Order Form should be sent with *new* written prescriptions from your doctor. Locate these forms on our website. Once your initial order has been processed, subsequent new prescriptions can be faxed *from your doctor* or you can continue to mail in new written prescriptions you receive. Allow two weeks from receipt for delivery.

<b>Participating Pharmacy:</b>	<b>Retail</b>	<b>Performance 90</b>	<b>Mail Service</b>
<b>Maximum Day Supply Allowed:</b>	30	90	90
<b>Generic Copay:</b>	\$7	\$14	\$14
<b>Formulary Copay:</b>	\$35	\$70	\$70
<b>Non-Formulary Copay:</b>	50% of cost	50% of cost	50% of cost
<b>Specialty Medication Copay:</b>	50% of cost (maximum 30 day supply allowed)		

<b>Annual Rx Only Out-of-Pocket Maximum</b>	In-Network: \$2,500 per individual or \$5,000 per family beginning every January 1 <sup>st</sup> .
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**Is my drug a Formulary or non-Formulary drug?** Please refer to the **National Preferred Formulary**, which can be found by logging onto our website and clicking on Forms and Downloads. If you are using a drug that is not listed as a Formulary Drug, you may pay a higher copay than is listed above. If you are using a drug that is listed as an Excluded Drug, you will need to consult your Doctor immediately to see if an alternative Formulary medication is covered under the Benefit. Please ask your doctor to prescribe a Formulary Drug whenever possible.

**Will I pay more if I choose to fill a Brand drug when a Generic equivalent is available?** Yes. If you have a Brand prescription filled when a Generic equivalent is available, you will pay the Brand Copay, plus the difference in cost between the Brand and the Generic drug. This Plan encourages the use of Generic drugs because in most cases Generics are just as effective as Brands and much less expensive. Please ask your physician and your pharmacist to prescribe and dispense Generic drugs whenever possible.

**How can I find out more about drug alternatives and cost savings?** This Plan utilizes MedTrak's **ScriptCHOICE Program**. The program consists of sending ScriptCHOICE letters to plan members taking high costing Brand medications and explaining the benefits of less expensive alternative drugs. During the year, if you receive a ScriptCHOICE letter, please take it to your doctor to see if one of the preferred, alternative medications might be right for you. Switching to these preferred drugs will save you and the Plan money! eScriptCHOICE also allows you to view and price drug alternatives on our website. See website and registration information below.

**What is Step Therapy?** Step Therapy is a program designed for members who take medication on a regular basis to control their condition to offer the best medication at the lowest possible cost. With Step Therapy, members who are taking a Step-Two medication are provided a less expensive Step-One alternative, which has been clinically proven to be safe and effective in treating the condition. For more information, go to our website and find more info on Step Therapy under Member Forms.

**Does MedTrak have a website?** Our website address is [www.medtrakservices.com](http://www.medtrakservices.com). Register using the MedTrak information on your ID card. Our website includes the ability to search for participating pharmacies, research drug alternatives, and print a history of your prescription claims. (Please note that due to the HIPAA law, members 18 years of age and older must each register separately.) Please call MedTrak for any assistance in this process.

This is practical information regarding your Prescription Benefit Plan. For a more detailed description of your Health Plan, please refer to your Summary Plan Description (SPD) provided to you by your employer and/or the Medical Benefits provider.

**If you have any questions please call MedTrak Services at 1-800-771-4648.**