

HOYA Vision Care

651 East Corporate Drive
Lewisville, TX 75057

>00001 00001 001 P50708

PM 7873 GROUP

JOHN Q SAMPLE
9501 E. Shea Blvd
SCOTTSDALE, AZ 85260



Your Prescription Card.
Your guide for savings.

00001

Dear Plan Member,

Welcome to your new prescription benefits. Attached is your Prescription Card. Be sure to take it to your pharmacy when you get a prescription filled for the first time. Use the ID number on the card to register at www.caremark.com, where you can order refills, check drug cost and coverage, print a claim form and more.

Your plan sponsor chose CVS/caremark to manage your prescription care and associated costs. We offer you these tips to help you save money on your prescriptions:

- 1. Ask for generics first.** Generic drugs can cost up to 80 percent less than brand-name drugs.
- 2. Remember the preferred drug list.** If a generic drug isn't available, ask your doctor to prescribe a drug on your plan's preferred drug list, if appropriate. You will pay more for a brand-name medication not on the preferred list.
- 3. Order 90-day supplies of long-term medications** to save money. Choose to receive your long-term prescriptions at a CVS/caremark Retail-90 Pharmacy or from the CVS/caremark Mail Service Pharmacy for the same low copay.
- 4. Fill short-term prescriptions at a network pharmacy.** You will generally pay more for short-term (30 days or fewer) prescriptions that are filled outside the CVS/caremark Retail Pharmacy Network.

See the other side of this letter for a summary of your prescription benefits. If you have questions about your plan coverage, please call Customer Care toll-free at 1-866-818-6911 [after your benefits begin](#). We're here to help you.

Research shows that individuals on average can save 30 to 80 percent by using generics. Source: Generic Pharmaceutical Association.



Your Prescription Benefit Plan Copay Overview

HSA Plan

	CVS/caremark Retail Pharmacy Network For short-term medications (Up to a 30-day supply)	CVS/caremark Retail-90 Pharmacy or CVS/caremark Mail Service Pharmacy For long-term medications (Up to a 90-day supply)
Generic Medications Ask your doctor or other prescriber if there is a generic available, as these generally cost less.	In Network: 20% (\$150 max) for a generic prescription Out of Network: 50% after deductible for a generic prescription	20% (\$300 max) for a generic prescription
Preferred Brand-Name Medications If a generic is not available or appropriate, ask your doctor or healthcare provider to prescribe from your plan's preferred drug list.	In Network: 20% (\$150 max) after deductible for a preferred brand-name prescription Out of Network: 50% after deductible for a preferred brand-name prescription	20% (\$300 max) after deductible for a preferred brand-name prescription
Non-Preferred Brand-Name Medications You will pay the most for medications not on your plan's preferred drug list.	In Network: 20% (\$150 max) after deductible for a non-preferred brand-name prescription Out of Network: 50% after deductible for a non-preferred brand-name prescription	20% (\$300 max) after deductible for a non-preferred brand-name prescription
Specialty Medications	\$95 for a 30-day supply of Specialty Medications at retail	
Annual Deductible	\$1,300 per individual / \$3,000 per family (combined with medical)	
Maximum Out-of-Pocket	\$3,500 per individual / \$6,850 per family (combined with medical)	

Where to fill your prescription

Choosing where to fill your prescription depends on whether you are ordering a short-term or long-term medication:

Short-term medications are generally taken for a limited amount of time and have a limited amount of refills, such as an antibiotic. You can fill prescriptions for these medications at any pharmacy in the CVS/caremark retail network.

- Choose from more than 68,000 network pharmacies nationwide, including independent pharmacies, chain pharmacies and 9,600 CVS/pharmacy locations.
- Find a participating pharmacy at www.caremark.com

Tip: To avoid filling out claims paperwork, bring your Prescription Card with you when you pick up your prescription, and use a pharmacy in the CVS/caremark retail network.

Long-term medications are taken regularly for chronic conditions, such as high blood pressure, asthma, diabetes or high cholesterol. You will generally save money by using mail service for these prescriptions.

Choose one of the following easy ways to start using the CVS/caremark Retail-90 program:

1. Bring your prescription to a CVS/caremark Retail-90 Pharmacy
2. Fill out and send in a mail service order form – use the one included in this welcome kit or print one at www.caremark.com
3. Visit www.caremark.com/mailservice
4. Call Customer Care at 1-866-818-6911

Customer Care

If you have questions about your prescriptions or benefits, you can contact Customer Care 24 hours a day, seven days a week. You can either e-mail customerservice@caremark.com or call toll-free at 1-866-818-6911 after your benefits begin. For TDD assistance, please call toll-free 1-800-863-5488.

Copayment, copay or coinsurance means the amount a plan member is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

Your feedback is important as it helps us improve our service. Please contact us with any questions or concerns at 1-866-818-6911.

Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.

Important Information For Mail Service Pharmacy Users

CVS/caremark is your new mail service prescription provider.

Starting January 1, 2017, CVS/caremark will become your new provider instead of Express Scripts. Feel free to register at www.caremark.com or call Customer Care toll-free at 1-866-818-6911 for more information after January 1, 2017.

Existing refills with Express Scripts

CVS/caremark will not have access to your mail service refill information until January 1, 2017. To avoid any delay in processing during this transition, we recommend you choose one of the following:

1. Ask your doctor or other prescriber to write a new prescription for up to a 90-day supply, plus refills when appropriate. Mail this prescription to CVS/caremark using the enclosed mail service order form.
2. Send your refill request after January 1, 2017.

Ordering a new prescription through mail service

Ask your doctor or other prescriber to write two prescriptions: one for immediate short-term use to be filled at a local network pharmacy, and one for a 90-day supply plus refills to be filled through CVS/caremark Mail Service Pharmacy. You can send in a mail order form (found at www.caremark.com), visit www.caremark.com/mailemailservice, or call Customer Care at 1-866-818-6911.

How to order refills from CVS/caremark in the future:

Once you have received your first prescription from CVS/caremark Mail Service Pharmacy, you can choose one of the following ways to request a refill:

1. **Online:** Log on to www.caremark.com and register if you haven't already done so. Then click on "Refill a Prescription".
2. **Mail:** Simply complete the enclosed mail service order form or find one online at www.caremark.com.
3. **Phone:** Call Customer Care toll-free at 1-866-818-6911.

Medications that cannot be transferred

Controlled substances and compound medication cannot be transferred to CVS/caremark Mail Service Pharmacy. If you have existing refills for these types of medications, ask your doctor or other prescriber for a new prescription and mail it to CVS/caremark.

Other questions about CVS/caremark Mail Service Pharmacy?

Visit www.caremark.com to learn more about mail service, order refills, check drug cost and coverage, print a claim form and more.



CVS/caremark™ Prescription Card

RxBIN 004336 **HOYA**Wellness™
RxPCN ADV
RxGRP RX7873
Issuer (80840) 9151014609

 ID **123456789 01**
NAME **JOHN Q SAMPLE**

00001

Present this Prescription Card to fill your prescription at any participating retail pharmacy.

For more information, visit www.caremark.com or call a Customer Care representative toll-free at 1-866-818-6911.

Pharmacy Help Desk for Pharmacists: 1-800-364-6331

Submit paper claims to:
CVS/caremark Claims Department
P.O. Box 52136, Phoenix, AZ 85072-2136

7873-ID50-1016

 **Register**

at [Caremark.com/startnow](https://www.caremark.com/startnow) to take
full advantage of your prescription plan.

Please remove sticker before use. 6527-34755a