

## WBG—2015 Pharmacy Benefit Plan Design

Plan Design Feature	USA Networks	Non USA Networks
Annual Deductible	\$0	<p>Drugs purchased outside the USA Networks are covered under your medical plan. 80% after medical deductible.</p>
Annual Out-of-Pocket Maximum <sub>1</sub>	<p>Actives:</p> <ul style="list-style-type: none"> <li>- Individual: \$1000</li> <li>- Family:\$2000</li> </ul> <p>Retirees:</p> <ul style="list-style-type: none"> <li>- Individual: \$1200</li> <li>- Family:\$2400</li> </ul>	
Automatic Substitution of Generic-Equivalent Drugs for Patent-Expired Brand Drugs	Yes	
<p>Dispense As Written (DAW) Rules*:</p> <ul style="list-style-type: none"> <li>▪ DAW 1: Member pays difference between brand and generic drug equivalent price + brand cost share, if prescriber writes “DAW” on Rx, unless medical evidence documented by prescriber</li> <li>▪ DAW 2: Member asks pharmacist to dispense brand drug when generic equivalent available, member pays difference between brand and generic drug + Brand cost share</li> </ul>	Yes; DAW 1 and 2	
<b>Retail-30 Network</b>		
Maximum Days Supply	30	
Generic Copay/Coinsurance	10%; Max.: \$25	
Formulary Brand Copay/Coinsurance	25%; Max.: \$70	
Non-Formulary Brand Copay/Coinsurance	40%; Max.: \$120	

\* DAW1 and DAW2 to be implemented effective from April 01, 2015

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<b>Retail-90 and Mail Order</b>		
Maximum Days' Supply	90	
Mandatory Mail Order or Retail-90 for Maintenance Drugs	Yes, after 2-fill at Retail	
Generic Copay/Coinsurance	10 %; Max.: \$60	
Formulary Brand Copay/Coinsurance	25%; Max.: \$175	
Non-Formulary Brand Copay/Coinsurance	40%; Max.: \$300	
<b>Specialty/Biotech Drugs</b>		
Maximum Retail Fills Before Required Use of PBM's Specialty Pharmacy	1	
Maximum Days' Supply	30 – 90 days based on PBM Specialty Pharmacy's clinical oversight.	
Generic Copay/Coinsurance	5%; Max.: \$50 (30 days) 5%; Max.: \$75 (90 days)	
Formulary Brand Copay/Coinsurance	25%; Max.: \$100 (30 days) 25%; Max.: \$150 (90 days)	
Non-Formulary Brand	40%; Max.: \$150 (30 days) 40%; Max.: \$225 (90 days)	

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Other Plan Design Features		
Formulary Brand Diabetic Supplies	0% coinsurance on diabetic supplies based on prescription from treating doctor; limit 1 blood-sugar meter per 12 months	
Infertility Treatment (includes oral and injectable drugs)	\$10,000 per Lifetime - (Pharmacy plan only)	
Smoking-Cessation Products	Lifetime limit not permitted under ACA; OTC products require prescription	
Clinical/Utilization Management Programs		
Prior Authorizations	Yes	
Step Therapy	Yes— Expand to other non-Specialty and Specialty drug classes	