MIDWEST OPERATING ENGINEERS
FRINGE BENEFIT FUNDS

Midwest Operating Engineers

PRESCRIPTION DRUG PROGRAM

We are proudly partnered with CVS Caremark to meet the prescription needs of you and your family.

CVS caremark™

We've Got You Covered

The Prescription Drug Program provides coverage to active Local 150 members, non-Medicare retirees, and their dependents enrolled in a Midwest Operating Engineers Health Plan.

Short-Term Medication

- Fill up to two 30-day supplies at an in-network pharmacy (e.g. CVS, Jewel-Osco, Walgreens)
- For the third and ongoing refills, make sure you switch to a long-term medication pharmacy and fill for a 90-day supply—otherwise, you'll pay 100% of the cost with no reimbursement
- To find an in-network pharmacy, create an account at www.caremark.com

Long-Term Medication

- Must be filled at a CVS, Costco, Kroger, or through CVS Caremark Mail Service
- Prescriptions must be filled for a 90-day supply
- To learn more about your pharmacy benefits, please call CVS Caremark Customer Service at 833-252-6642

Billing Information

Always Show Your MOE Vendor Card at the pharmacy

Rx Bin**: 004336** Rx Group**: RX24EB** PCN**: ADV**

Claims Assistance

If a pharmacy does not process your prescriptions through the insurance, contact us immediately! Most prescriptions can be reprocessed within 7 days of pickup for a possible refund — no refunds after 7 days.

MOE Pharmacy Benefit Department

708-387-8331

local150.org/moe/prescription-drug-program

* Eligibility rules apply

Pharmacy Benefit Management Summary

Key strategies used to manage prescription drug program coverage, including formulary design, utilization controls, penalties, and copay tiers.

CVS Caremark Formulary

The Basic Control formulary is a comprehensive guide of covered medications, organized by therapeutic category. This list can be viewed on our website.

Utilization Management

Some medications require a Prior Authorization, step therapy, or have quantity limits.

Your provider may submit a request to CVS Caremark using one of the following methods:

- **Electronically:** CoverMyMeds or SureScripts
- **Phone:** 800-294-5979

Dispense As Written (DAW) Penalty

Generic drugs are required when available. If a brand is chosen without medical necessity, you pay the brand copay plus the cost difference.

Each time you pick up your medication, you are responsible for a copay. If the medication costs less than your copay, you only pay the lower price.

Plan	Tier	In-Network Retail Pharmacy	In-Network Retail Pharmacy or Mail Service
Marketplace Plan A, Platinum PPO, Gold PPO, Silver PPO, EPO, OHC Plan, Non-Marketplace Plans, RWP	Generic (Tier 1)	$5	$15
	Preferred Brand (Tier 2)	$10	$30
	Non-Preferred Brand (Tier 3)	$25	$45
	Specialty (Tier 4[1])	$100	$300[2]
Bronze PPO	Generic (Tier 1)	$20	$50
	Preferred Brand (Tier 2)	$40	$100
	Non-Preferred Brand (Tier 3)	$55	$115
	Specialty (Tier 4[1])	$100	$300[2]

[1]Specialty medications in the PrudentRx program may be $0 out-of-pocket with enrollment in manufacturer copay assistance. Without enrollment into PrudentRx, a 30% coinsurance applies.
[2]Specialty drugs are limited to a 30-day supply. The 90-day copay applies only when packaging requires it.

If you are Medicare-primary and eligible under the Retiree Welfare Plan (RWP), your prescription drug coverage is provided through SilverScript. To learn more, visit our website and select Medicare-Eligible Retirees.

CVS Caremark Customer Service

833-252-6642

caremark.com