

5-Tier Plan (HDHP Only)



The BCBSRI formulary (drug list) covers a wide range of commonly prescribed medications. The chart below shows how the drugs are divided into four “tiers”.

Your Prescription Drug Coverage

You can find the BCBSRI formulary by signing on to your BCBSRI.com member home page and following these steps:

1. Scroll down and click on “**Go to My Pharmacy Benefits Manager**”
2. Click “**Forms**” on the main bar at the top of the screen
3. Click on “**Plan Documents**” from the drop down menu
4. Scroll down to “Large Group 4 Tier Formulary and click on “**Download PDF**”

Extended Supply Network

The Extended Supply Network (ESN) allows 90 day fills at retail pharmacies.

| Service | Copayment per 30-day supply | Mail order 90-day supply | Retail 90-day supply |
|---|-----------------------------|--------------------------|------------------------|
| Tier 1 <ul style="list-style-type: none"> ▪ Low-cost generics | \$10 after deductible | \$25 after deductible | \$30 after deductible |
| Tier 2 <ul style="list-style-type: none"> ▪ Higher-cost generics ▪ Preferred brand name drugs | \$35 after deductible | \$87.50 after deductible | \$105 after deductible |
| Tier 3 <ul style="list-style-type: none"> ▪ Highest cost generics ▪ Non-preferred brand name drugs | \$70 after deductible | \$210 after deductible | \$210 after deductible |
| Tier 4 <ul style="list-style-type: none"> ▪ Specialty drugs | \$150 after deductible | Not Covered | Not Covered |
| Tier 5 <ul style="list-style-type: none"> ▪ Non-preferred specialty drugs | \$300 after deductible | Not Covered | Not Covered |

This is a summary of your pharmacy benefits. It is not a contract. For details about your coverage, including any limitations or exclusions not noted here, please refer to your subscriber agreement or call the number located on the back of your BCBSRI ID card. If you have questions about receiving medical care, please call your doctor.



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