

■ Medicare Co-pays

Express Scripts for Aetna Medicare and Paramount Elite

	Retail (30-day supply)	Home Delivery (90-day supply)
Generic	\$7.50 co-pay max.	\$15 co-pay max.
Preferred brand name	25% of cost (min. \$25, max. \$100)	25% of cost (min. \$45, max. \$200)
Specialty medications	25% of cost (min. \$25, max. \$100)	25% of cost (min. \$15, max. \$67 per 30-day supply)
Non-preferred brand name	No coverage	No coverage
Insulin Only		
Preferred brand name	25% of cost (min. \$25, max. \$30)	25% of cost (min. \$45, max. \$60)
Non-preferred brand name	25% of cost (max. \$45)	25% of cost (max. \$115)

PrimeTime

	Retail (30-day supply)	Home Delivery (90-day supply)
Generic	\$7.50 co-pay, max.	\$15 co-pay, max.
Preferred brand name	25% of cost (min. \$25, max. \$100)	25% of cost (min. \$45, max. \$200)
Non-preferred brand name	50% of cost	50% of cost
Insulin Only		
Preferred brand name	\$30 co-pay	\$60 co-pay
Non-preferred brand name	\$45 co-pay	\$115 co-pay

In the event of a conflict between this information and the plan documents, the plan documents prevail.

