



EXPRESS SCRIPTS®

2024-25
TRS-ActiveCare

HEALTH BENEFITS



Understanding your Pharmacy Benefits





EXPRESS SCRIPTS®



YOUR PHARMACY BENEFIT MANAGER (PBM) FOR TRS-ACTIVECARE PARTICIPANTS



• The leading PBM, putting medicine in reach of more than 100 Million people

• Providing TRS-ActiveCare access to:

- 60k+ retail pharmacies across the United States
- Convenient Home Delivery services from Express Scripts Pharmacy
- Simple Member Web and Mobile Apps
- Accredo Specialty Pharmacy
- Specialized pharmacists, nurses, and other clinicians in 20+ condition-specific Therapeutic Resource Centers

EXPRESS SCRIPTS MAINTENANCE MEDICATION PHARMACY NETWORK



Home delivery

Maintenance medications
right to the participant's door from
Express Scripts® Pharmacy



All in-network pharmacies*

provide easy access
to 90-day supplies



Maintenance Medication Network

For long-term prescriptions
(also referred to as maintenance
medication). Long-term
prescriptions are taken on a regular
basis for a long period of time to
treat chronic conditions.

GET PARTICIPANTS STARTED:

To choose a three-month supply, participants should log in or register at express-scripts.com/90day.
Participants can also call the Member Services number on the back of their member ID card 844-367-6108.

EXPRESS SCRIPTS MAINTENANCE MEDICATION PHARMACY NETWORK



Participants choose how to save with a 3-month supply:



Express Scripts® Pharmacy

- Delivered to participant's with FREE standard shipping for maintenance medications
- Transfer prescriptions easily online, by phone, or via Express Scripts® mobile app
- Auto-refills and refill reminders available
- Speak with a pharmacist by phone 24/7



Participating Pharmacy

- Go to a convenient, nearby location
- Transfer prescriptions easily in-store, by phone, or online
- Ask about auto refills and refill reminders
- Find nearest participating pharmacy at **express-scripts.com/trsactivecare**

GET PARTICIPANTS STARTED:

To choose a three-month supply, participants should log in or register at express-scripts.com/90day. Participants can also call the ESI Member Services number on the back of their participant ID card 844-367-6108.

PHARMACIST EDUCATION

ENABLING BETTER PARTICIPANT CHOICES AT THE POINT-OF-CARE



Participants with 90-day benefit fills maintenance Rx for 31 days

90-day edit applied at POS with message to pharmacist that participant has 90-day supply benefit. Edit triggers on fills 2 and 3 only.

Pharmacist consults with participant

Pharmacist lets participant know they can save time and money by switching to a 90-day supply

Participant chooses desired fill amount: 90-day or 31-day

Pharmacist action

Based on participant consultation, pharmacist either fills 90-day supply, contacting prescriber as needed

OR

simply overrides the edit at POS and fills 31-day supply

Point-of-care, pharmacist-led participant education dramatically increases 31-to-90 day conversions of maintenance Rxs

CLIENT RESULTS	90-day Conversion %
Without 90-day benefit reminder	3%
After 90-day benefit reminder edit went live	25%

ACCREDITO, A SPECIALTY PHARMACY



Personalized patient care for a wide range of complex and chronic conditions.



Specialty
clinicians guide
patients



An easy route for
getting patients'
specialty
medications



Helps patients
navigate insurance
and financial
assistance

ACCREDITO, A SPECIALTY PHARMACY



- Accredo provides specialized patient care for patients with chronic conditions. Benefits include:
 - Individualized counseling and education
 - Proactive monitoring of patients' specialty medications
 - Coordination with your doctors
- Accredo offers ongoing support from pharmacists and nurses with specialized training and expertise
- Patients who use Accredo receive better patient care and have healthier outcomes
- Express Scripts' SaveonSP program provides copay assistance for certain specialty medications dispensed through Accredo
- Accredo member service: **800-596-7701**

accredo®

... is an Express Scripts specialty pharmacy that provides personalized care to individuals with chronic and complex health conditions

SaveOnSP – Specialty Copay Assistance



Copay assistance for select specialty medications offered through SaveOnSP



Discuss specialty medication with Accredo to see if it qualifies for SaveOnSP



Review online resources for list of covered drugs and SaveOnSP plan benefits



Contact SaveOnSP at 800-683-1074 to enroll

Plan Comparison – Prescription Drug Benefit



Benefit	TRS-ActiveCare Primary		TRS-ActiveCare Primary+	
	Individual	Family	Individual	Family
Deductible	\$2,500	\$5,000	\$200 per Individual Brand Drug only (Rx Only)	
Out-of-Pocket Max	\$8,050	\$16,100	\$6,900	\$13,800
	Retail 31 / 90 Day	Home Delivery - 90 Day	Retail 31 / 90 Day	Home Delivery - 90 Day
Generic	\$15 / \$45*	\$45*	\$15 / \$45	\$45
Preferred Brand*** (Max)	30% After Deductible	30% After Deductible	25% (max \$100) / (max \$265) After Deductible	25% (max \$265) After Deductible
Non-Preferred Brand***	50% After Deductible	50% After Deductible	50% After Deductible	50% After Deductible
	Accredo 31 Day		Accredo 31 Day	
Specialty Medication	30% - After Deductible		30% - After Deductible	

*Select preventative generic medications will be \$0

***If patient or prescriber request brand only on a prescription where a generic is available, participant will be responsible for the cost difference plus generic copay. This amount may exceed the maximum for preferred brand. Penalties do not apply towards the maximum out of pocket.

Plan Comparison – Prescription Drug Benefit



Benefit	TRS-ActiveCare HD		TRS-ActiveCare 2	
	Individual	Family	Individual	Family
Deductible	\$3,200	\$6,400	\$200 per Individual Brand Drug only (Rx Only)	
Out-of-Pocket Max	\$8,050	\$16,100	\$7,900	\$15,800
	Retail 31 / 90 Day	Home Delivery - 90 Day	Retail 31 / 90 Day	Home Delivery - 90 Day
Generic	20% After Deductible*	20% After Deductible*	\$20 / \$45	\$45
Preferred Brand*** (Min - max)	25% After Deductible	25% After Deductible	25% (\$40-\$80) / (\$105-\$210) After Deductible	25% (\$105-\$210) After Deductible
Non-Preferred Brand*** (Min - max)	50% After Deductible	50% After Deductible	50% (\$100-\$200) / (\$215-\$430) After Deductible	50% (\$215-\$430) After Deductible
	Accredo 31 Day		Accredo 31 Day	
Specialty Medication (Min - max)	20% - After Deductible		30% - After Deductible (\$200-\$900)	

*Select preventative generics medication will be \$0 prior to meeting the deductible

***If patient or prescriber request brand only on a prescription where a generic is available, participant will be responsible for the cost difference plus generic copay. This amount may exceed the maximum for preferred brand. Penalties do not apply towards the maximum out of pocket.