

# 25/50 Percent Integrated Drug Plan With Minimum and Maximum Copayments

Eff. 1/1/06 for Current and New Members  
Enrolled in BlueEdge HSA Plans



Blue Cross and Blue Shield  
of New Mexico

## Your Out-of-Pocket Costs

Your copayment for prescription drugs purchased through this drug plan is **25 percent** of the covered charge for **generic drugs** and **50 percent** of the covered charge for **brand-name drugs, subject to your medical plan deductible and out-of-pocket limit provisions**. If the percentage of the covered charge falls between the minimum/maximum copayment, you will pay the actual percentage amount.

Program	Percentage	Minimum	Maximum
Retail Pharmacy: Up to a 30-day supply or 180 units, whichever is less.			
Generic drug	25%	\$20	\$75
Brand-name drug	50%	\$40	\$125
Mail-Order Plan: Up to a 90-day supply or 540 units, whichever is less.			
Generic drug	25%	\$40	\$150
Brand-name drug	50%	\$80	\$250
Prior-approved enteral nutritional products and special medical foods	50%	N/A – You pay 50%	N/A – You pay 50%

Your copayment will never exceed the maximum copayment listed. In all cases, the covered charge is subject to your medical plan's annual deductible. Copayments are also applied to your medical plan's Preferred Provider out-of-pocket limit. This plan will pay 100 percent of the covered charge for the rest of the calendar year after the medical plan's out-of-pocket limit is met. Be sure to have your prescriptions filled at a participating pharmacy (see the Network Directory) or through the Mail Order Service.

**Coverage is always subject to the limitations of your BlueEdge HSA health care plan.** For some medications, prior approval, generic substitution, or quantity limits may apply. See your BlueEdge Benefit Booklet for details, limitations, and exclusions.

**Minimums and Maximums** — The following is an example of how the minimum and maximum copayment amounts work when you purchase a generic drug through the **Retail Pharmacy Program**:

Minimum = \$20 Maximum = \$75	Retail Cost	25%	Your Cost (after the medical plan deductible is met)
Medication A	\$16	N/A	Since \$16 is less than the minimum copayment of \$20, you pay the actual cost of \$16.
Medication B	\$40	\$10	Since \$10 is less than the minimum copayment of \$20, you pay the minimum copayment of \$20.
Medication C	\$100	\$25	Since \$25 is between the minimum copayment of \$20 and the maximum copayment of \$75, you pay the full 25% (or \$25).
Medication D	\$400	\$100	Since \$100 is greater than the maximum copay of \$75, you pay only the maximum copayment of \$75.

Brand-name drugs are produced by the company that holds the original patent. Once the patent expires, other companies can produce an equivalent drug. These equivalent drugs are called "generic" drugs and are evaluated by the FDA and undergo the same scrutiny as brand-name drugs.

A generic-equivalent drug must have the same active ingredients and be chemically equivalent to the brand-name drug. We limit this benefit to generics rated by the FDA as being equivalent to the brand-name and having the same clinical effects and safety profile as the brand-name drug.