Prescription Drug Program-Your Choice Formulary



This program applies to all medical plans.*

Short-term, 30-, 60-, and 90-day supply available through:

Retail and Independent Pharmacies UPMC Health Plan: 1-888-499-6885

Tier Copayment 1 \$16 Preferred Generics 2 \$40 Preferred Brand 3 \$80 Non-Preferred Medications 4 \$90 Specialty Medications

90-day discounted supply available through:

Mail Order through Express Scripts: 1-877-787-6279 Falk Clinic Pharmacy: 412-623-6222

(Pittsburgh campus office delivery available)

University Pharmacy: 412-383-1850

| Copayment |
|---------------------------------|
| \$32 Preferred Generics |
| \$80 Preferred Brand |
| \$160 Non-Preferred Medications |
| |

Members may obtain a 90-day supply of medication at any participating retail pharmacy, but three copayments will apply. Members may obtain a 90-day supply at a discounted price through mail order, Falk Pharmacy, or the University Pharmacy. For example, at the University Pharmacy members pay \$32 for a 90-day supply of a preferred generic medication, while the cost is \$48 at a retail pharmacy (\$16 x 3). Specialty medication is not available at the discounted price.

Please note that the prescription drug formulary is subject to change periodically based upon the decisions of the UPMC Pharmacy and Therapeutics Committee. Examples include introduction of new medications, changes in tier level (i.e., brand name to generic), etc. For additional information about the prescription drug program, please visit: www.hr.pitt.edu/upmc-pdp.

^{*} Applies to Panther Basic (QHDHP) only after the deductible has been met.