

\$0 Generic Copay Program and 10% Generic Copay Program

Beginning January 1, 2020, Active members (Full-time and Adjunct) and Retirees under 65 enrolled in the PSC-CUNY Welfare Fund Prescription Plan will have no copay when filling a prescription for a generic drug included in the Welfare Fund's [CVS \\$0 Generic Copay Formulary](#) and when the prescription is filled at a CVS pharmacy or through the CVS Mail program. Generic drugs purchased outside of a CVS pharmacy are not included in the program.

How does the \$0 Generic Copay Program work?

Here are examples of prescription fills to clarify the service eligible for the benefit:

Example: A member who fills a prescription for a generic drug listed on the \$0 generic copay formulary at CVS or CVS mail facility would not pay a copay.

Example: A member who fills a prescription for a generic drug listed on the \$0 generic copay formulary at a retail pharmacy other than CVS will not have a reduced copay, and the claim will be processed according to the Welfare Fund Prescription Plan's current tiered copay schedule. This means most members using non-CVS pharmacies will continue to pay a 20% copay.

Members should be aware that the \$0 generic copay formulary list may not include the medications they are taking, but they will be able to take advantage of the 10% Generic Copay Program.

10% Generic Copay Program

Generic drugs on the [Welfare Fund Drug List](#) that are not included in the \$0 Generic Copay Formulary are reduced from 20% to 10% when the prescription is filled at CVS or CVS mail **until the Welfare Fund's costs reach the Tier 1 limit** (when the Fund has paid \$10,000 in annual drug expenses).

When the member reaches the **Tier 1** limit the copay will increase to the **Tier 2** copay of 50% until the **Tier 2** limit is reached (when the Fund has paid \$15,000 in annual drug expenses).

At that point the member's copay will move up to the **Tier 3** copay of 80%.

Importantly, when the member reaches the **Tier 1** limit they should then be eligible to apply for copay reimbursement under the new [High-Cost Rx Program](#).

Therefore, members who anticipate their drug costs may exceed the annual Tier 1 limit (\$10,000 in the Welfare Fund's drug expenses) should SAVE ALL CVS PRESCRIPTION DRUG RECEIPTS! Receipts for all CVS prescription purchases will be required for High-Cost Rx Program reimbursement claims.