

What you pay for a prescription from an in-network pharmacy

	Up to 34-day supply	90-day supply
Specific preventive medications mandated by federal law are covered 100 percent. Age and gender limits apply.	No cost to you	No cost to you
Tier 1 Generics.	\$10 copayment	\$30 copayment
Tier 2 Most brand drugs with no generic equivalent or therapeutic alternative.	20% coinsurance \$40 minimum - \$80 maximum	20% coinsurance \$120 minimum - \$240 maximum
Tier 3 Brand-name drugs for which there's a more cost-effective generic alternative or preferred brand name drug.	20% coinsurance \$60 minimum - \$100 maximum	20% coinsurance \$180 minimum - \$300 maximum

The amount you pay for brand-name medications can vary because coinsurance is based on the price of the drug when it is filled. A drug may switch from one tier to another. Up to a 90-day supply of insulin may be obtained for the same amount as a 34-day supply from an in-network provider.

Money-saving features of this plan

Prior authorization	To ensure compliance with FDA-approved safe prescribing guidelines, certain drugs require prior authorization before MESSA will cover them. Your doctor must submit documentation to support the need for the prescription. Typically, drugs requiring prior authorization are associated with dangerous side effects, harmful when combined with other drugs, often misused or abused, or prescribed when less expensive drugs might work better.
Step therapy	Drugs subject to step therapy require previous treatment with one or more preferred drugs before coverage is approved. This ensures all clinically sound and cost-effective treatment options are tried before more expensive drugs are prescribed.
Quantity limits	A quantity limit program limits the amount of medication that will be covered. Medications are limited based on FDA guidelines for appropriate and safe use.
What's not covered?	Several drugs and drug categories are excluded from coverage. For example: <ul style="list-style-type: none"> – Brand-name drugs that have generic equivalents. – Over-the-counter medications. – Lifestyle drugs (drugs for erectile dysfunction and weight loss). – Drugs used to treat heartburn and acid reflux (except select generic versions). – Drugs that treat coughs and colds, including most antihistamines. – Prenatal vitamins.

This is a brief overview of the Essentials by MESSA plan. For additional information, including eligibility, limitations and exclusions, please contact MESSA at 800.336.0013.