

2024 Prescription Drug Coverage

Prescription drug coverage is automatically provided under both the Core and Core Plus plans. Please note that prescription drug expenses apply to the annual deductible. This means you will need to satisfy the annual medical deductible (see **Medical Plan Comparison Chart)** before the plans begin to pay for any prescription drug expenses that are not on the carrier's preventive drug list or the Affordable Care Act preventive drug list (see **Table 2 for Drug Lists**). Drug expenses also apply to the out-of-pocket maximum of your chosen medical plan.

You will have access to a network of retail pharmacies and a mail-order drug program through CVS Caremark.

Prescription drug coverage overview

Your cost for a 30-day supply from a network pharmacy, and for a 90-day supply through the mail order program:

Tier of drug	Supply amount	Preventive drugs No deductible applies	All other (non-preventive) drugs Deductible applies
Tier 1: Generic Includes lower cost drugs, primarily generic, although some brand name drugs may be included	30-day supply from a network pharmacy	You pay a \$5 copay*	You pay a \$5 copay after you've met your deductible
	90-day supply from mail order program	You pay a \$12.50 copay*	You pay a \$12.50 copay after you've met your deductible
Tier 2: Preferred Brand Name	30-day supply	You pay 25%* of the cost	You pay 25% of the cost of the drug, up to \$100 per fill after you've met your deductible
Drugs on the carrier's preferred list available at a discounted rate.	from a network pharmacy	of the drug up to \$100.00 per fill	
May include certain generics depending on cost	90-day supply from mail order program	You pay 25%* of the cost of the drug up to \$250.00 per fill	You pay 25% of the cost of the drug, up to \$250 per fill, after you've met your deductible
Tier 3: Non-Preferred Brand Name Higher-cost brand name drugs, as well as select generic drugs	30-day supply from a network pharmacy	You pay 45%* of the cost of the drug up to \$200.00 per fill	You pay 45% of the cost of the drug, up to \$200 per fill after you've met your deductible
	90-day supply from mail order program	You pay 45%* of the cost of the drug up to \$500.00 per fill	You pay 45% of the cost of the drug, up to \$500 per fill, after you've met your deductible

^{*}Cost is waived for preventive drugs on the ACA list.

Note regarding Tier 3: In most cases a lower-cost alternative is available for medications in Tier 3. Check with your doctor or pharmacist and refer to the Preventive and Preferred Drug lists from CVS Caremark.

Note regarding specialty prescriptions: Only the amount you actually pay for your prescriptions will be applied towards your deductible or out-of-pocket maximum when using a third party ("manufacturer") copay card program.

Generic drug requirement

Generic prescription drugs are those that are manufactured and marketed under their chemical names after their original brand name patents have expired. By purchasing a chemically-equivalent generic alternative instead of a brand name medication, you get the drug at a lower price. If you choose to fill a prescription with a brand name medication when a chemically-equivalent generic alternative is available, your cost will be higher. You will pay the generic copayment plus the cost difference between the brand name and the generic medication (even if your

doctor indicates "Dispense as Written"). In addition, the cost difference will not be applied to your annual deductible or out-of-pocket maximum.

Use the mail order program to save on maintenance prescriptions

The mail order program through CVS Caremark offers you a convenient way to save on long-term, maintenance medications. A 90-day supply of your medication(s) will be delivered to your home or other address in private, tamper-resistant and (when necessary) temperature-controlled packaging.

Maintenance Choice Program through CVS Caremark

If your prescription coverage is provided by CVS Caremark and you would prefer to pick up your prescription at a CVS or Target pharmacy, you can still get the savings of the mail order program through the Maintenance Choice Program. This program allows you to obtain a 90-day supply of your maintenance medications at retail CVS or Target pharmacies while paying the reduced mail order rates. **Please note that the Maintenance Choice Program is only available through CVS Caremark or Target pharmacies.**

Penalty for not using mail order or the Maintenance Choice Program

Under the Core and Core Plus plans, if you do not use the mail order program (or the Maintenance Choice Program, if applicable) for long-term maintenance medications, you will pay a higher coinsurance amount. If you refill a 30-day supply of a long-term, maintenance prescription more than two times at a retail pharmacy, your retail pharmacy will dispense your medication, **but you will be charged two times the regular coinsurance/copayment (as applicable).** This higher amount will be applied on each subsequent retail pharmacy refill.

Specialty Drug Copay Program

Only the amount you actually pay for your prescriptions will be applied towards your deductible or out-of-pocket maximum when using a third party ("manufacturer") copay card program. Manufacturer copay card programs are often used to help lower patient copay/coinsurance amounts owed. While not all specialty prescriptions offer assistance, many of the drugs used to treat multiple sclerosis, rheumatoid arthritis, anemia and other chronic conditions qualify for reimbursement through third-party copay assistance programs.

This change does not affect copay assistance programs provided by foundations or financial needs-based copay assistance. The duration of copay programs varies and depends on the parameters outlined by the manufacturer. CVS will provide you with support and resources to help you learn about available copay card programs and the enrollment process.

Please continue to fill your prescriptions as usual. There are no extra steps for you to take. For questions, please call the number on the back of your prescription ID card.

CVS Caremark Advanced Control Specialty Formulary (ACSF) and Quantity Limits Program

If you or a covered dependent require specialty drugs to treat certain serious or complex conditions, this new program can help you manage your prescription--and your costs. It also ensures all dispensing limits adhere to the FSA and manufacturer dosing guidelines.

How it works:

- 1. If there is no generic specialty drug available for your condition, the Advanced Control Specialty Formulary® can help you and your doctor identify preferred brand-name medicines that are clinically appropriate and costeffective.
- 2. If you currently take a name-brand specialty drug, check to see if it is listed as preferred brand-name medication. If not, ask your doctor to consider switching you to a generic or preferred brand name before the end of the 2023 plan year so you can be sure there is no disruption when we start the new year.

You can check the Advanced Control Specialty Formulary list at any time, which can be found here.

CVS Caremark Customer Care (for Aetna, Cigna and Anthem members):

+1-800-378-9280 or visit www.caremark.com

• Kaiser Northern/Southern California: +1-800-464-4000

Kaiser Mid-Atlantic: +1-800-777-7902
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Kaiser Colorado: +1-800-632-9700
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