Frequently Asked Questions Regarding Salesforce.com Benefits

Q1: What are the plan options available through CVS?

<table>
<thead>
<tr>
<th>UHC Choice and Aetna Select</th>
<th>Individual</th>
<th>Family</th>
<th>Integrated with medical carrier?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>N/A</td>
<td>N/A</td>
<td>Yes. Both your medical spend through UHC/Aetna and prescription drug spend will also count towards your MOOP accumulation.</td>
</tr>
<tr>
<td>Maximum Out of Pocket (MOOP)</td>
<td>$2,200</td>
<td>$4,400</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>UHC Choice Plus POS and Aetna Choice POS II PPO</th>
<th>Individual</th>
<th>Family</th>
<th>Integrated with medical carrier?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>N/A</td>
<td>N/A</td>
<td>Yes. Both your medical spend through UHC/Aetna and prescription drug spend will also count towards your MOOP accumulation.</td>
</tr>
<tr>
<td>Maximum Out of Pocket (MOOP)</td>
<td>$2,500</td>
<td>$4,500</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>UHC Choice Plus HDHP-Premium and Aetna Choice Plus II HDHP-Premium</th>
<th>Individual</th>
<th>Family</th>
<th>Integrated with medical carrier?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$1,500</td>
<td>$3,000</td>
<td>No. Your accumulations towards deductible and MOOP will be separate for medical and prescription drug spend.</td>
</tr>
<tr>
<td>Maximum Out of Pocket (MOOP)</td>
<td>$3,000</td>
<td>$6,000</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>UHC Choice Plus HDHP-Standard and Aetna Choice Plus II HDHP-Standard</th>
<th>Individual</th>
<th>Family</th>
<th>Integrated with medical carrier?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$1,750</td>
<td>$3,500</td>
<td>No. Your accumulations towards deductible and MOOP will be separate for medical and prescription drug spend.</td>
</tr>
<tr>
<td>Maximum Out of Pocket (MOOP)</td>
<td>$3,000</td>
<td>$6,000</td>
<td></td>
</tr>
</tbody>
</table>

Q2: What is a deductible and maximum out of pocket (MOOP)?

A: Your deductible is the amount you will need to pay for covered drugs before your insurance plan starts to pay. After meeting your deductible, you will pay the copay.

Maximum out of pocket is the cap on what you will have to pay out of pocket for covered drugs in one plan year. If you meet your maximum out of pocket, you will not be responsible for additional costs of covered drugs for the remainder of the plan year.

Q3: Will my accumulations towards the deductible and maximum out of pocket transfer over to CVS?

A: Your accumulations will transfer from Premera to CVS, but there may be up to a 60-day delay.

1. Actual quantity may vary depending on your plan.
2. Customers in Hawaii only may use a Longs Drugs location.
3. Where allowed by law. In-store pick up is currently not available in Oklahoma. Some states require first-fill prescriptions to be transmitted directly to the dispensing specialty pharmacy. Products are dispensed by CVS Specialty and certain services are only accessed by calling CVS Specialty directly. Certain specialty medication may not qualify. Services are also available at Long’s Drugs locations.

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Q4: What are the copays for my prescription drugs?
A:

<table>
<thead>
<tr>
<th>All Plan Copays</th>
<th>1-month supply</th>
<th>3-month supply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic All (Tier 1)</td>
<td>$10</td>
<td>$20</td>
</tr>
<tr>
<td>Preferred Brand (Tier 2)</td>
<td>$25</td>
<td>$50</td>
</tr>
<tr>
<td>Non-Preferred Brand (Tier 3)</td>
<td>$40</td>
<td>$80</td>
</tr>
</tbody>
</table>

Specialty medications follow the same tier and copay structure.

If you are in one of the high deductible plans (HDHP), you will need to meet your deductible before these copays will apply. Certain preventative medications bypass the deductible so members in HDHP plans can still pay the copay even if they have not yet met their deductible. You can check what your medication will cost using the Check Drug Cost & Coverage Tool linked in Q5.

Q5: How can I find out how much my cost is going to be for a medication?
A: If you are already enrolled in a CVS plan, you can register online at Caremark.com to check your drug cost and coverage. After logging in, under the Plan & Benefits drop-down, select Check Drug Cost and Coverage. You will be prompted to enter in the drug name & strength and the pharmacy you would like to fill at.

If you do not already have an account with Caremark.com, you can find out the cost of medications by using one of the below mentioned links to the Check Drug Cost & Coverage tool specific to your plan selection.

- Aetna or UHC HDHP Premium – Single
- Aetna or UHC HDHP Standard – Single
- Aetna or UHC HDHP Premium – Family
- Aetna or UHC HDHP Standard – Family
- Aetna or UHC EPO
- Aetna or UHC PPO

Some drugs are covered at 100% - these include generic and some brand oral contraceptives, all prescribed forms of birth control, and generic maintenance drugs for asthma, diabetes, hyperlipidemia, hypertension and heart disease.

You may also contact Customer Care at 1-844-345-2824.
Q6: I am currently on a specialty medication at Premera. What do I need to know if I want to transition my prescription to CVS Caremark?

A: Specialty medications are specialized products used to treat complex conditions like rheumatoid arthritis, multiple sclerosis, human immunodeficiency virus (HIV), rare genetic disorders, fertility and cancers.

Many specialty medications will require a prior authorization (PA). Use the Check Drug Cost and Coverage Tool (links in Q5) to see if your medication will require a prior authorization. Your prior authorization from Premera will not carry over automatically to CVS Caremark, so a new PA will be required. In addition, you will need to fill your specialty medication through CVS Specialty.

Though we will make every effort to proactively identify members who are on specialty medications and outreach their prescribers to obtain new PAs and new prescriptions through CVS Specialty, it is advised that you let your doctor know that you will need a new PA and a prescription to CVS Caremark for your specialty medication starting April 1st.

Q7: I am currently filling my maintenance (long-term) medications through mail order at Premera. Will that prescription automatically transfer to CVS Caremark mail order?

A: No, mail order prescriptions will not automatically transfer over. Your doctor will need to send a new 3-month prescription to CVS Caremark mail order pharmacy.

Once you receive your prescription insurance card, you can also register and start mail order service at Caremark.com. Under the “Prescriptions” tab, select “Start Mail Service”. Other options are outlined in Q11.

In addition to filling 3-month supplies of your long-term medications at mail order, you can also fill 3-month supplies of these medications at CVS Pharmacy retail locations.

Q8: How do I register at Caremark.com?

A: Go to Caremark.com/startnow. You will then fill in your first name, last name, date of birth, address, ZIP code, gender and ID number found on your prescription benefit card in order to register.

Q9: How can I check that my current pharmacy is in the CVS Caremark® Retail Pharmacy Network?

A: You have access to a network of more than 68,000 pharmacies nationwide, including all major chain pharmacies and 20,000 independent pharmacies and 9,700+ CVS Pharmacy locations (including those inside Target stores).

To see a list of in-network pharmacies closest to you, you can visit Caremark.com, and under the Plan & Benefits tab at the top of the page, click on the Pharmacy Locator tool. Enter an address or zip code and select search filters if needed.

You can also call Customer Care at 1-844-345-2824.

Q10: How do I order prescriptions?

A: Choosing how to fill your prescription depends on whether you are ordering a short-term or long-term medication:

1. Actual quantity may vary depending on your plan.
2. Customers in Hawaii only may use a Longs Drugs location.
3. Where allowed by law. In-store pick up is currently not available in Oklahoma. Puerto Rico requires first-fill prescriptions to be transmitted directly to the dispensing specialty pharmacy. Products are dispensed by CVS Specialty and certain services are only accessed by calling CVS Specialty directly. Certain specialty medication may not qualify. Services are also available at Long’s Drugs locations.

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- **For short-term medications (like an antibiotic),** fill anywhere in our network of more than 68,000 pharmacies nationwide, including chain pharmacies, 20,000 independent pharmacies and 9,700+ CVS Pharmacy® locations (including those inside Target stores).

- **For long-term medications (such as for high blood pressure or diabetes),** get them delivered to your door or pick them up at a CVS retail pharmacy.
  - To sign up for mail service, choose either option below:
    - Register at Caremark.com/startnow and follow the instructions to request a new 90-day prescription.
    - Call Customer Care at 1-844-345-2824.
  - To pick up your 90-day supply at a CVS retail pharmacy, choose either option below:
    - Bring a new prescription to your local CVS Pharmacy location or have your prescriber submit a prescription to the CVS Pharmacy of your choice.
    - Call Customer Care at 1-844-345-2824.

**Q11:** I have a refill on a medication I obtained through a retail pharmacy other than CVS Pharmacy. Do I need to go to a CVS Pharmacy to have it filled or can I continue filling it at the existing pharmacy?

**A:** Your refill information will be maintained by the retail pharmacy in which you originally filled the prescription as long as the pharmacy is in the CVS Caremark retail network. You may refill that prescription at the same pharmacy or choose to have it transferred to another pharmacy in our network of more than 68,000 pharmacies nationwide, including chain pharmacies, 20,000 independent pharmacies and 9,700 CVS Pharmacy locations (including those inside Target stores). Regardless of which pharmacy you choose to refill your prescription, you will need to present your new prescription ID card to help ensure that your prescription will be covered under your plan.

**Q12:** How do I start using CVS Caremark Mail Service Pharmacy?

**A:** You can get started with mail service by doing one of the following:

1. **Phone:** Call Customer Care at 1-844-345-2824.

2. **Online:** Visit Caremark.com and log in. Under the Prescriptions tab, click on Start Mail Service and Request a New Prescription. Follow the prompts. Once we have your information, we will contact your doctor for a 90-day prescription of your current medicine.

3. **Fax:** Prescriber can return a mail service order form, available for download at Caremark.com and Print Plan Forms on the upper right of the page, and fax to 1-800-378-0323.

4. **Mail:** Fill out and return a mail service order form, available for download at Caremark.com and Print Plan Forms on the upper right of the page.

**Q13:** What kinds of medications can I fill through the CVS Caremark Mail Service Pharmacy?

**A:** Mail service is a convenient way to have 90-day supplies of your long-term medications (e.g., those used to treat conditions like high blood pressure, diabetes, asthma, etc.) shipped to you at no added cost. Mail service can save you both time and money—you don’t have to worry about

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TDD: 1-800-863-5488
making a trip to the pharmacy every 30 days, and 90-day supplies typically cost less than three 30-day supplies. 90-day\(^1\) supplies can also be filled at your local CVS Pharmacy\(^2\) store. These 90-day fills at retail come with the same cost benefits as mail service. You pay the mail service copay, instead of three 30-day copays, resulting in savings equivalent to one 30-day fill each time you fill your long-term medication.

Q14: How long does it take to receive my medications that I order through the CVS Caremark Mail Service?
A: For new prescriptions, it can take up to 10 days from the day you submit your order for delivery of your medication. Refills are usually delivered within seven days of placing your order. Although CVS Caremark processes the orders within a day or two, the exact delivery day depends on the U.S. Postal Service.

Q15: What is a specialty medication and where can I fill my prescription?
A: Specialty medications are specialized products used to treat complex conditions like rheumatoid arthritis, multiple sclerosis, human immunodeficiency virus (HIV), rare genetic disorders, fertility and cancers. Many, but not all, are injectable, but increasingly new specialty medications are oral treatments.

You may get your first specialty fill at any network retail pharmacy that can obtain the medication. All refills of your specialty medication must be filled by CVS Specialty or CVS Pharmacy\(^3\) since they provide additional support to help you understand complex medical conditions and the medications used to treat them. Often, specialty medications have unique administration and storage requirements. Specially trained pharmacists and nurses at CVS Specialty can help ensure you get the greatest benefit from these medications. Filling your specialty medications through our pharmacies is one of the best ways to learn about these complex treatments.

You can contact CVS Specialty Customer Care at 1-866-846-3095 for help with your specialty prescriptions.

Q16: Can I refill specialty prescriptions online?
A: Yes, you can create an account on CVSSpecialty.com by entering your information or a CVS Specialty prescription number. Please note that this is separate from the Caremark.com login. On CVSSpecialty.com, you can refill specialty medication orders, track shipments, pay bills, manage payment options, and send secure messages to your CVS Specialty care team, and more.

In addition, you can download the CVS Specialty mobile application by searching for “CVS Specialty” in your Apple or Android app store. The app will have a teal background. With the app, you can access many of the same functionalities as CVSSpecialty.com.

Q17: Can I use manufacturer copay assistance programs to pay for my medication?
A: Yes. Some specialty medications may qualify for third-party copayment assistance programs that could lower your out of-pocket costs for those products. These are often called copay coupon cards and provided by the drug manufacturer.

Beginning January 1, 2020, amounts paid by a third-party copayment assistance program for specialty medications will not be credited towards meeting your deductible and maximum out-of-pocket. Only the amount you have truly paid out of pocket will count towards your deductible.

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and maximum out-of-pocket. Please keep in mind that these third-party copayment assistance programs may have a maximum allowable benefit (maximum amount they will pay per year).

Q18: What are compound drugs and are they covered?
A: Compound drugs are prescriptions for which the pharmacist must mix two or more ingredients to prepare a medication specially requested for you by your doctor. Compound drugs that meet certain criteria are covered under your prescription benefit plan; however, they are subject to prior authorization review. If approved, they will be covered under the prescription portion of your plan.

Q19: Are there medications that are not covered by my prescription plan?
A: Yes, some medications are not covered by your prescription plan. These include but are not limited to:

- Products used for cosmetic purposes
- Weight loss medications
- Over-the-counter (OTC) medications
- Certain scar treatments, wound dressings and cleansers, and artificial saliva products
- Drugs that are not approved by the Food and Drug Administration (FDA)
- Auvi-Q
- Rayos

Always verify coverage by using the Check Drug Cost & Coverage tool on Caremark.com or linked in Q5.

Some products are not covered under your prescription plan but may be covered under the medical benefit:

- Insulin pumps and supplies
- Respiratory supplies (spacers, peak flow meters, nebulizers)
- Medical Devices
- Subcutaneous immunotherapy (allergy shots)
- Periodontal products (e.g. Arestin) may be covered under the dental benefit

Always verify coverage by using the Check Drug Cost & Coverage tool on Caremark.com or linked in Q5.

Q20: How do I view my accumulations (i.e. deductible and maximum out of pocket)?
A: You can view your accumulations by logging into Caremark.com and under the Plan & Benefits tab, select Plan Summary. Here, you can see how far you are in meeting your deductible and/or maximum out of pocket.

Q21: Where can I get an overview of my annual prescription spend (e.g. for tax purposes)?
A: You can access your financial summary by logging in to Caremark.com, and under the Prescriptions tab, select Financial Summary. You can select your timeframe (up to 36 months back) to see your prescription drug spend. You can expand each individual fill to see additional information.

Q22: Does CVS Caremark have a mobile app?
A: Yes, there is a Caremark app available in the Apple and Android app stores. Search “CVS Caremark” and the app logo will be a navy blue background. Log in to the app using the same login details as Caremark.com.

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In the mobile app, you can refill prescriptions, view recent orders, check drug cost and coverage, view your ID card, find nearby network pharmacies, view financial summary, and more.

Q23: I lost my prescription ID card. What can I do?
A: You can access your Member ID card on Caremark.com by logging in and under the Plan & Benefits tab, select Print Member ID Card. You can also download and open the CVS Caremark mobile app and select “View ID Card” if you do not have your physical ID card with you when you go to the pharmacy.

To have a new ID card mailed to you, please contact Customer Care at 1-844-345-2824.

Q24: Can I get reimbursed if I paid for a covered prescription out-of-pocket without using my insurance card?
A: Yes, as long as you were covered under the plan at the time your prescription was filled, and the prescription is covered by your plan. To do so online, log in to your Caremark.com account and click Submit Prescription Claim under the Plan & Benefits tab. A paper reimbursement request form is not needed if you use the online claim submission.

Q25: What is the ACA Preventive Drug List?
A: The ACA Preventive Drug List contains medications that are offered at no cost to you as part of the Affordable Care Act (ACA). You will not pay a copay or coinsurance for these drugs. These include vaccines and immunizations, contraceptives for women, and medicines and supplements to prevent certain health conditions. Please reference the following document to see what medications are covered and for whom they are covered: https://www.caremark.com/portal/asset/NoCost_Preventive_List.pdf

Q26: How can I check the status of my refill order?
A: You can check the status of your mail order refill for non-specialty medications by logging in to your account on Caremark.com. Click “My Account” on the top right of the page, then click “Prescription History and Order Status.” You can also call Customer Care at 1-844-345-2824.

Q27: What if I want to speak with a pharmacist?
A: You can speak to a pharmacist 24 hours a day, seven days a week, by calling Customer Care at 1-844-345-2824. The pharmacist may ask you several questions to verify your identity.