Johns Hopkins University Pharmacy Benefit Plan Design

Formulary: Liberty

Customer Care: 1-844-306-4674



Please see below for Johns Hopkins University plan design offerings. For questions about what plan you are in, please contact Capital Rx at 1-844-306-4674.

			HDHP			
Plan Detail		Ве	enefit	Detail		tail
Deductible: (Individual/Family)		\$1,750/\$3,500		Your pharmacy deductible is compour medical plan.		ple is combined with
Annual Out of Pocket Max (Individual/Family)		\$3,500/\$7,000			Your maximum out of pocket is combined w your medical plan.	
		Retail & In-Hou	se Copays (1-30 Days)	•		
		% A	mount		\$ Max Cop	ay Amount
Tier 1 (Generic)		N/A		\$10		
Tier 2 (Preferred Brands)		20%		N/A		
Tier 3 (Non-Preferred Brands)		25% N/A				
		Specialty (Copay (1-30 Days)			
		% Amount		\$ Max Copay Amount		
Specialty Drugs (Generic)		N/A		\$10		
Specialty Drugs (Preferred Brand)		20%		N/A		
Specialty Drugs (Non-Preferred Brand)		25%		N/A		
		Mail	Order Copay	-		
		1-3	0 Days		31-90) Days
		% Amount	\$ Max Copay Amount	% A	mount	\$ Max Copay Amount
Tier 1 (Generic)		N/A	\$10	N/A		\$25
Tier 2 (Preferred Brands)		20%	N/A	20%		N/A
Tier 3 (Non-Preferred Brands)		25%	N/A	25%		N/A
	1	Prepackaged Drugs (% A	mount or \$ Max Copay A	mount)		
		1-30 Days	31-60 Days		61-999 Days	
Tier 1 (Generic)	\$10		\$20		\$30	
Tier 2 (Preferred Brands)	20%		20%		20%	
Tier 3 (Non-Preferred Brands)	25%		25%		25%	

- Migraine preventative medications are included at tier copay and bypass the deductible if applicable.
- Vaccines are to be covered at \$0 copay for all plans and bypass deductible if applicable.
- Select Healthcare Administered medications are covered and will adjudicate at Tier determined by the plan.
- Members can fill specialty medications through Johns Hopkins pharmacies or though Optum Specialty Pharmacy.
- ACA preventative drugs are free for all plans.

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Johns Hopkins University - Inclusions and Exclusions					
ACA Preventative Categories					
Inclusions					
ACA Breast Cancer Prevention ACA HIV PrEP	ACA Medical Contraceptives ACA OTC Contraceptives	ACA Prescription Contraceptives ACA Preventive Medications (Rx and OTC)	ACA Tobacco Cessation ACA Vaccines		

Preventative Therapeutic Categories Inclusions				

General Therapeutic Categories				
Inclusions		Exclusions		
Acne ADHD Anabolic Steroids Anaphylactic Kits Fertility non-oral and oral Narcolepsy Sexual Dysfunction - Hypoactive Sexual Desire Disorder Sexual Dysfunction non-oral and	Spacers Syringes other than insulin Tobacco Cessation OTC and Rx Vaccines (Vaccines be covered at \$0 copay) Vitamins: Multivitamins (requires a prescription) Vitamins: Prenatal Vitamins (requires a prescription) Weight Loss	Abortifacients Allergen Extracts non-oral and oral Cell and Gene Therapy Cosmetic Durable Medical Equipment (DME)	Immune Serums IV Injectables Nutrition OTC Other Blood Products	

Special Therapeutic Categories Inclusions				
Compounds (OTC)	Glucagon	Injectables	Ketone Strips	
Continuous Glucose Monitors	Glucometers	Insulin	Lancets & Lancing Devices	
Contraceptives	Hemophilia Agents	Insulin Pumps & Supplies	Test Strips	