**Prescription Benefits administered by OptumRX**

If you have questions or concerns, call the number on the back of your ID Card.

**Copayment per Prescription Order or Refill**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Retail Network Pharmacy**  For up to a 31 day supply | **Home Delivery Network Pharmacy** For up to a 90 day supply | **Retail Non-Network Pharmacy**  For up to a 31 day supply |
| Tier 1 | $10 | $25 | $10 |
| Tier 2 | $45 | $112.50 | $45 |
| Tier 3 | $75 | $187.50 | $75 |