

HEALTH & WELFARE FUND

AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES - AFL-CIO
1606 WALNUT STREET, 5th FLOOR, PHILADELPHIA, PA 19103-5482 (215) 546-9880 FAX (215) 545-7052
WWW.DC47AFSCME.ORG TOLL FREE 1-866-613-2213



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PRESCRIPTION BENEFIT INFORMATION

Our Prescription benefit provider is BeneCard (PBF)

THE PLAN DESIGN CONSISTS OF:

Three-tier co-pay:

- \$10 for generic drugs
- \$25 for brand name drugs that are in BeneCard's formulary
- \$40 for brand name drugs that are not in BeneCard's formulary
- Availability of mail order service at same three-tier co-pay
- Availability of contraceptive drugs
- 30-day supply through pharmacy
- 100-day supply through mail order for maintenance medication or at your local Rite Aid
- Mandatory generic drugs ***
- Step Therapy Program

WHAT IS COVERED?

Prescription drugs (legend drugs), including those that require compounding

All questions can be directed to the Health and Welfare Fund at 215-893-3774, 3775 or 3776.

*** Should you desire to purchase the brand name drug instead of the generic, you will be responsible to pay the full cost difference between the brand and the generic drug, plus your appropriate co-pay.