

MAIL ORDER FORM

PLEASE PRINT CLEARLY. Enclose this form with your prescription(s) and copayment(s).

MEMBER INFORMATION

CARDHOLDER NAME

CARDHOLDER ID # DOB (MO/DAY/YR)

ADDRESS

CITY STATE ZIP

DAYTIME PHONE EVENING PHONE

PATIENT INFORMATION

PATIENT NAME (LAST, FIRST)

DOB (MO/DAY/YR)

IMPORTANT

You will receive generic substitutes whenever possible, unless your physician will not allow a generic substitute or you specify otherwise.

By checking this box, I elect to receive brand drugs for all prescriptions in this order. By making this choice, I understand that I am responsible for the **applicable copay PLUS the difference in cost.**

Please do not send cash.

Check or money order enclosed

Charge to my credit card

CARDHOLDER NAME

CREDIT CARD NUMBER EXPIRATION DATE

CARDHOLDER SIGNATURE

Make checks payable to:

Sav-Rx Pharmacy

P.O. Box 8 Fremont, NE 68026

If mailing address for patient is different than cardholder address, please contact Sav-Rx.

HOW TO USE YOUR SAV-RX CARD

Our network of more than 65,000 pharmacies provides prescription services at convenient locations across the country. In addition to more than 3,000 independent pharmacies, Sav-Rx cards are also accepted at every major chain pharmacy. To locate a network pharmacy near you, call Sav-Rx or you may visit www.savrx.com.

RETAIL PHARMACY

You may present your card at any of over 65,000 retail network pharmacies nationwide to purchase your prescription medication. Your pharmacist may call Sav-Rx with any questions 1-800-228-3108.

MAIL ORDER

You may also order prescription medication from the Sav-Rx Mail Order Pharmacy. The mail order should be used for your long-term maintenance medications. Using the Sav-Rx mail order may offer some cost savings to you. Regular orders are processed within 24 hours of receipt and mailed First-Class for convenient home delivery.

Your doctor may E-scribe new prescriptions to Sav-Rx or call in a new prescription to Sav-Rx at 1-800-228-3108. You may also mail your prescription to Sav-Rx PO Box 8 Fremont, NE 68026. **Please note that your payment is required with every order.** Be sure to reference your Sav-Rx identification number with each prescription. Additional mail order forms are available at www.savrx.com.

Refills may be called in 24 hours a day, 7 days a week to 1-800-228-3108. You may also request a refill online at www.savrx.com or download the Sav-Rx App from the App Store or Google Play.



**PRESCRIPTION DRUG PLAN
ADMINISTERED BY:**



1-800-228-3108

Sav-Rx Prescription Services

FREQUENTLY ASKED QUESTIONS

1. How much do I pay for my prescriptions?

RETAIL PHARMACY (UP TO 30 DAYS SUPPLY)	
Generic	\$15
Formulary	10% (\$50 Minimum, \$100 Maximum)
Non-Formulary	10% (\$100 Minimum, \$200 Maximum)
Brand with Generic	10% (\$100 minimum) + Difference in Cost
SAV-RX MAIL ORDER (UP TO 1-30 DAYS SUPPLY)	
Generic	\$15
Formulary	10% (\$50 Minimum, \$100 Maximum)
Non-Formulary	10% (\$100 Minimum, \$200 Maximum)
Brand with Generic	10% (\$100 Minimum) + Difference in Cost
SAV-RX MAIL ORDER (UP TO 31-90 DAYS SUPPLY)	
Generic	\$30
Formulary	10% (\$100 Minimum, \$200 Maximum)
Non-Formulary	10% (\$200 Minimum, \$400 Maximum)
Brand with Generic	10% (\$200 minimum) + Difference in Cost
SPECIALTY (UP TO 30 DAYS SUPPLY)	
Generic	\$25
Formulary	10% (\$50 Minimum, \$100 Maximum)
Non-Formulary	10% (\$100 Minimum, \$200 Maximum)
Brand with Generic	10% (\$100 minimum) + Difference in Cost
ANNUAL BENEFIT ACCUMULATOR*	
Maximum Out of Pocket	\$2,850 per Individual \$5,700 per Family

*Brand with Generic medications **do not** accumulate toward the maximum out of pocket.

2. How do I get the best value in my pharmacy benefit?

The best way to ensure that you are getting the best value in your pharmacy benefits is to use generics whenever they are available. If you purchase a brand name product that has an equivalent generic available, you will be responsible for paying the difference in cost between the brand and the generic equivalent.

Many brand name drugs do not have a generic equivalent but a generic drug is available within the same therapeutic class and is designed to treat the same condition. It is recommended that whenever you visit with your physician, you discuss the importance of using generics whenever they are available because it will save you money at the pharmacy.

3. What is a formulary?

A formulary is a list of preferred products. The formulary considers treatment options on a therapeutics basis first, then based upon cost effectiveness. Generic medications, when they are available and considered equivalent to their brand counterpart, are always preferred over brand name products. When similar brand name medications are available to treat a condition, the formulary helps physicians and patients consider treatment options in order of cost effectiveness.

Please visit our website at:
www.savrx.com

4. What medications are covered?

Most maintenance medications are covered by your plan. These include, but are not limited to: insulin, diabetic testing supplies, immunizations and more. Please refer to your Summary Plan Description for specific coverage rules.

Certain classes are excluded from coverage such as: devices/appliances, cosmetic, weight loss and drugs used for experimental purposes.

Some medications may require prior approval such as injectables, attention deficit and specialty medications. Some medications may be subject to quantity limits.

Please contact Sav-Rx Prescription Services with any questions regarding your medications.

Note: Certain classes of drugs may be covered at 100% in compliance with Affordable Care Act guidelines.



Call to find out more about your prescription copays, network locations and clinical programs. An agent will be ready to provide you with personalized, professional assistance 24/7.
1-800-228-3108