



**Newark Board of Education: \$0/\$20 Plan**  
 Local 32 – Active/ Self Pay Retiree /Overage Dependent/COBRA  
 Building Trade- Active/ Self Pay Retiree Overage Dependent/COBRA  
 Local 3-Active/ Self Pay Retiree Overage Dependent/COBRA  
 Local 617 Active/ Self Pay Retiree Overage Dependent/COBRA  
 NTU Active/ Self Pay Retiree Overage Dependent/COBRA  
 CASA Active/Self Pay Retiree/Overage Dependent/COBRA  
 NTA Active/ Self Pay Retiree Overage Dependent/COBRA  
 Unaffiliated Active/ Self Pay Retiree Overage Dependent/COBRA

**Effective Date:** 01-01-2020  
 New Jersey

**PRESCRIPTION PLAN DESIGN & BENEFITS  
 PROVIDED BY AETNA HEALTH INC.**

<b>PRESCRIPTION DRUG BENEFITS</b>		<b>IN-NETWORK</b>
<b>Pharmacy Plan Type</b>		Aetna Standard Opt-Out Plan
<b>Payment Limit</b>		\$1,580 Individual \$3,160 Family
<b>Generic Drugs</b>		
	<b>Retail</b>	\$0 copay
	<b>Mail Order</b>	\$0 copay
<b>Preferred Brand-Name Drugs</b>		
	<b>Retail</b>	\$20 copay
	<b>Mail Order</b>	\$20 copay
<b>Non-Preferred Brand-Name Drugs</b>		
	<b>Retail</b>	\$20 copay
	<b>Mail Order</b>	\$20 copay
<b>Pharmacy Day Supply and Requirements</b>		
	<b>Retail</b>	Up to a 34-day supply from Aetna National Network For a 34-90 day supply you will be responsible for the Mail Order Drug copay.
	<b>Mail Order</b>	A 34-90-day supply from CVS Caremark® Mail Service Pharmacy
	<b>Specialty</b>	Up to a 30-day supply Aetna Standard Opt-Out Specialty Drug List

**Plan Includes:** Diabetic supplies and Contraceptive drugs and devices obtainable from a pharmacy. Contraceptives covered up to a 6 month supply. Contraceptive copay strategy applies. Performance Enhancing Drugs limited to 6 tablets per month. Oral and injectable fertility drugs included (physician charges for injections are not covered under RX, medical coverage is limited). A limited list of over-the-counter medications are covered when filled with a prescription. Oral chemotherapy drugs covered 100%  
 Aetna Standard Opt-Out Pre-certification for Specialty Drugs  
 Seasonal Vaccinations covered 100% in-network  
 Preventive Vaccinations covered 100% in-network  
 Affordable Care Act mandated female contraceptives and preventive medications covered 100% in-network.

<b>GENERAL PROVISIONS</b>	
<b>Dependents Eligibility</b>	Spouse, children from birth to the end of the calendar year in which you turn age 26, regardless of student status.

**Exclusions and Limitations**

Health benefits and health insurance plans are offered and/or underwritten by Aetna Health Inc. Each insurer has sole financial responsibility for its own products.

This material is for information only. Health benefits plans contain exclusions and limitations.



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Not all health services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change.

Aetna, or its affiliate(s) receives rebates from drug manufacturers that may be taken into account in determining Aetna's Preferred Drug List. Rebates may reduce the amount a member pays the pharmacy for covered prescriptions. Aetna Rx Home Delivery and Aetna Specialty Pharmacy refer to Aetna Rx Home Delivery, LLC and Aetna Specialty Pharmacy, LLC, respectively. Aetna Rx Home Delivery and Aetna Specialty Pharmacy are licensed pharmacy subsidiaries of Aetna Inc. that operate through mail order. The charges that Aetna negotiates with Aetna Rx Home Delivery and Aetna Specialty Pharmacy may be higher than the cost they pay for the drugs and the cost of the mail order pharmacy services they provide. For these purposes, the pharmacies' cost of purchasing drugs takes into account discounts, credits and other amounts that they may receive from wholesalers, manufacturers, suppliers and distributors.

In case of emergency, call 911 or your local emergency hotline, or go directly to an emergency care facility.

If you require language assistance, please call the Member Services number located on your ID card, and you will be connected with the language line if needed; or you may dial direct at 1-888-982-3862 (140 languages are available. You must ask for an interpreter). TDD 1-800-628-3323 (hearing impaired only).

Si requiere la asistencia de un representante que hable su idioma, por favor llame al número de Servicios al Miembro que aparece en su tarjeta de identificación y se le comunicará con la línea de idiomas si es necesario; de lo contrario, puede llamar directamente al 1-888-982-3862 (140 idiomas disponibles. Debe pedir un intérprete). TDD-1-800-628-3323 (sólo para las personas con impedimentos auditivos).

Plan features and availability may vary by location and group size.

For more information about Aetna plans, refer to [www.aetna.com](http://www.aetna.com). While this material is believed to be accurate as of the production date, it is subject to change.

Aetna and MinuteClinic, LLC (which either operates or provides certain management support services to MinuteClinic-branded walk-in clinics) are both within the CVS Health family.

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