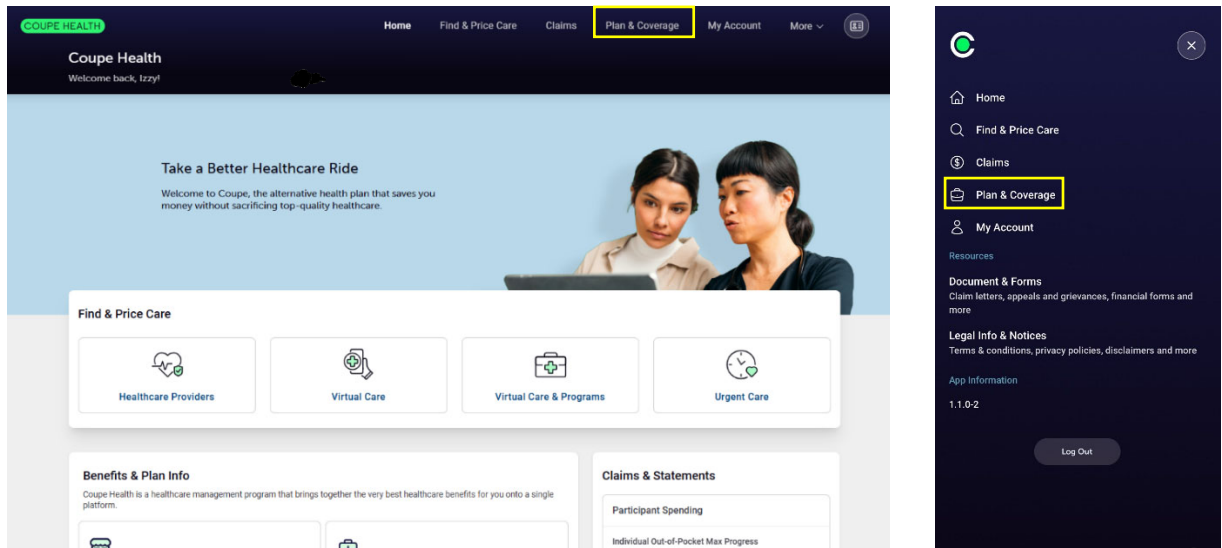
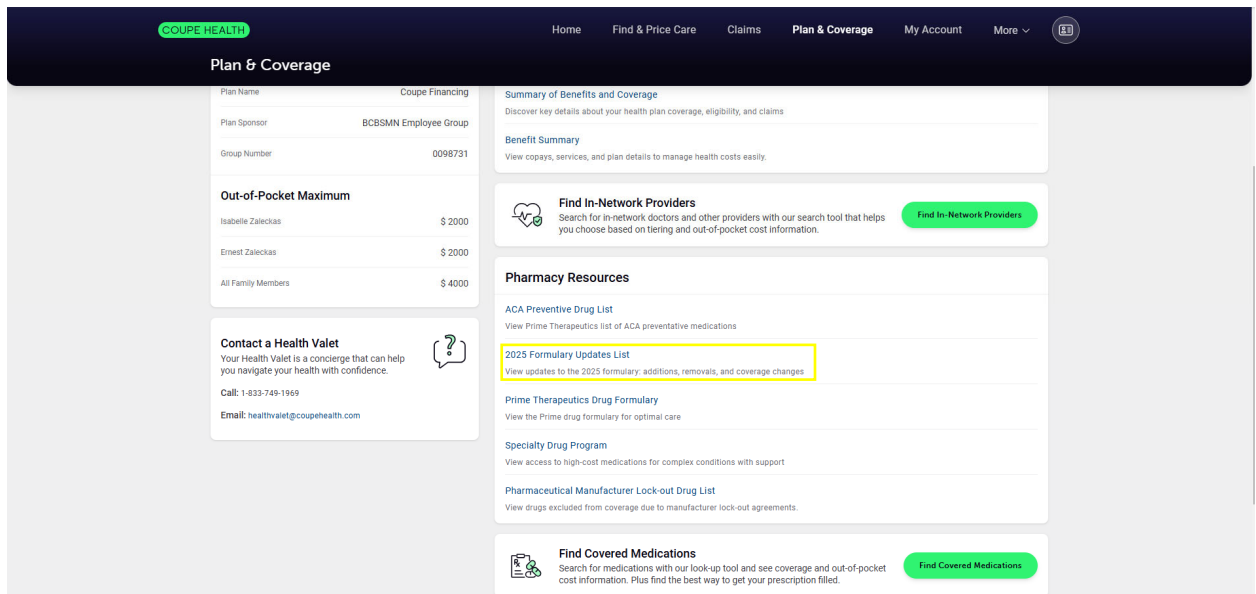


# Determine your drug coverage.

1. Sign in to your Member Portal at [member.coupehealth.com](https://member.coupehealth.com) or log in to the mobile app and select 'Plan & Coverage.'



2. Scroll down to the Pharmacy Resources section and select 'Prime Therapeutics Drug Formulary.'



- The drug list will open in a new window. To search for your drug, press <Ctrl+F> and enter your drug name in the search box provided. Once you click 'Enter' the page will automatically scroll to your drug and you will be able to view the tier of the drug. In this example, "Lipitor" was searched and the middle column shows it is a "Tier 1" drug.

KeyRx Drug Formulary, January 2025

Drug Name	Drug Tier	Requirements/Limits
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent) (Lipitor)	1	QL (45 tablets/30 days)
atorvastatin calcium tab 80 mg (base equivalent) (Lipitor)	1	QL (30 tablets/30 days)

- Return to your Coupe member portal and select 'Benefit Summary.' This will open a document in a new tab.

COUPE HEALTH

Home Find & Price Care Claims Plan & Coverage My Account More

### Plan & Coverage

Plan Name: Coupe Financing  
Plan Sponsor: BCBSMN Employee Group  
Group Number: 0098731

Out-of-Pocket Maximum  
Isabelle Zaleckas: \$ 2000  
Ernest Zaleckas: \$ 2000  
All Family Members: \$ 4000

Contact a Health Valet  
Your Health Valet is a concierge that can help you navigate your health with confidence.  
Call: 1-833-749-1969  
Email: healthvalet@coupehealth.com

Summary of Benefits and Coverage  
Discover key details about your health plan coverage, eligibility, and claims

**Benefit Summary**  
View copays, services, and plan details to manage health costs easily

Find In-Network Providers  
Search for in-network doctors and other providers with our search tool that helps you choose based on tiering and out-of-pocket cost information.

Pharmacy Resources  
ACA Preventive Drug List  
2025 Formulary Updates List  
Prime Therapeutics Drug Formulary  
Specialty Drug Program  
Pharmaceutical Manufacturer Lock-out Drug List

Find Covered Medications  
Search for medications with our look-up tool and see coverage and out-of-pocket cost information. Plus find the best way to get your prescription filled.

5. Scroll to the bottom of the document for the Prescription Drug Tiering chart. Your drug tier corresponds to the amount you will pay. Because the drug in this example is Tier 1, a 30-day retail supply will cost \$5, mail order will cost \$15, and a 90-day retail supply will cost \$15.

Prescription Drugs**			
	30-day retail	Mail Order	90-day Retail
• Tier 1 (Generic Drugs)	\$5	\$15	\$15
• Tier 2 (Non-Preferred Generic)	\$25	\$75	\$75
• Tier 3 (Preferred Brand)	\$15	\$45	\$45
• Tier 4 (Non-Preferred Brand)	\$25	\$75	\$75
• Specialty Drugs – mail order only, 30-day supply maximum**		\$30	

\*This plan uses the Aware@BlueCard® PPO Network and there is no coverage when services are received out-of-network. Your cost of the service is based on which tier provider you utilize. \*\*The Pharmacy Network through Prime Therapeutics is the Essential Pharmacy Network (E). There is no drug coverage at out-of-network pharmacies. The Formulary (Drug List) is KeyRx and there is no coverage for drugs that are not on the KeyRx formulary.

\*A Drug that is on your Formulary may not be covered due to exclusions on your Summary Plan Description. Additionally, some drugs may require a Prior Authorization. Please contact your pharmacy to verify coverage.

6. Additional drug lists can be found under the Pharmacy Resources Section.

The screenshot shows the COUPE HEALTH website interface. The top navigation bar includes links for Home, Find & Price Care, Claims, Plan & Coverage, My Account, and More. The main content area is titled "Plan & Coverage" and displays details for the BCBSMN Employee Group plan, including the Group Number 0098731. A section titled "Out-of-Pocket Maximum" lists amounts for Isabelle Zaleckas (\$2000), Ernest Zaleckas (\$2000), and All Family Members (\$4000). Below this is a "Contact a Health Valet" section with a phone number (1-833-749-1969) and email (healthvalet@coupehealth.com). The right-hand side of the page features a "Summary of Benefits and Coverage" section, a "Benefit Summary" section, and a "Find In-Network Providers" section. The "Pharmacy Resources" section is highlighted with a yellow box and includes links to the ACA Preventive Drug List, 2025 Formulary Updates List, Prime Therapeutics Drug Formulary, Specialty Drug Program, and Pharmaceutical Manufacturer Lock-out Drug List. At the bottom of this section is a "Find Covered Medications" section.

## Still have **questions?**

Contact your Health Valet by calling the number on the back of your member ID card.

Monday - Friday 8 a.m. - 8 p.m. Central