



Prescription Benefits At-A-Glance
Stark County Schools Plan Participants
Caremark Prescription benefit Program

	RETAIL PHARMACY	MAIL SERVICE PHARMACY
When To Use Your Benefit	For immediate medicine needs or short-term medicines	For maintenance or long-term medicines
Cost To You:	20%*	20%*
Days Supply Limit:	34-day supply	90-day supply
Caremark Customer Care:	1-888-202-1654 Or Www.caremark.com	1-888-202-1654 Or Www.caremark.com

***GENERIC DRUGS, WHERE AVAILABLE, WILL BE SUBSTITUTED FOR BRAND NAME DRUGS.**

FAILURE TO FOLLOW THESE PROVISION WILL RESULT IN THE EMPLOYEE PAYING 100% OF THE DRUG COST.

When talking to your doctor, remember the following:

For new maintenance or long-term medicines, ask your doctor to write **two prescriptions:**

- one for up to a **34-day supply** to be filled immediately at a Caremark participating retail pharmacy.
- the other for up to a **90-day supply** (plus refills if appropriate) to be sent to the Caremark Mail Service Program

Visit www.caremark.com to:

- Order prescription refills
- Check order status
- View prescription history
- Verify drug payment and coverage
- View a list of Caremark participating pharmacies
- Access to trusted healthcare web sites and healthcare information
- Obtain detailed drug information

Your privacy is important to us. All our employees are trained regarding the appropriate way to handle your private health information.