



Quality health plans & benefits  
Healthier living  
Financial well-being  
Intelligent solutions

## Choose generic drugs and save

### **You will pay less when you choose generic drugs**

Taking a generic is an easy way to reduce your out-of-pocket costs. They are safe, effective and often cost less than their brand-name counterparts. Your plan requires you to use a generic drug, when one is available, in order to get the best coverage.

### **Your pharmacy will usually fill your prescription with a generic, if one is available**

Most times, your doctor will let you take a generic version of a drug. For that reason, your pharmacist will usually substitute a generic for the brand-name drug. This helps you save money every time you fill a prescription.

### **You can still get the brand-name version of your drug if you want, but you may pay more**

You and your doctor may still decide that you want to get the brand-name version of a drug. If so, your doctor will write “DAW” on your prescription. This stands for “Dispense as written.” In this case, your pharmacist will only fill your prescription with the brand-name drug.

Please know that if a generic is available, and you choose to get the brand instead, you’ll pay the difference in cost between the brand and the generic, plus the applicable brand copay for your plan. This could result in a significant increase in your out-of-pocket expenses. The out-of-pocket cost difference between the generic and brand may not be applied to the deductible. If you want to try a generic version, please talk to your doctor about changing your prescription. If you cannot tolerate the generic or have had an adverse reaction, talk to your doctors about requesting an exception.

### **Generic drugs are as safe as brand-name drugs**

While you may pay less with generics, you won’t lose out on quality. Food and Drug Administration (FDA)-approved generic drugs have met the same rigid standards as the innovator (brand-name) drug in<sup>1</sup>:

- Dosage
- Safety
- Strength
- Quality
- The way it works
- The way it is taken
- The way it should be used

## Check what you'll pay with a few clicks

### Use our Price-A-Drug<sup>SM</sup> tool to:

- Compare the costs of generic and brand-name drugs
- Estimate the cost of a drug from your local pharmacy vs. our mail-order pharmacy
- See how much you can save

Log in to your member website at [www.aetna.com](http://www.aetna.com) to estimate drug costs.

## Learn more now! Get details about your coverage and find out more about generics.

Log in to [www.aetna.com](http://www.aetna.com), your secure member website. You can also call the toll-free number on your member ID card.

<sup>1</sup>Available at [www.fda.gov/Drugs/ResourcesForYou/Consumers/QuestionsAnswers/ucm100100.htm](http://www.fda.gov/Drugs/ResourcesForYou/Consumers/QuestionsAnswers/ucm100100.htm). Accessed January 2017.

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This material is for information only and is not an offer or invitation to contract. An application must be completed to obtain coverage. Not all 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. Health benefits and health insurance plans contain exclusions and limitations.

The drugs on the Preferred Drug List and Formulary Exclusions, Precertification, Quantity Limits and Step-Therapy lists are subject to change. The precertification, quantity limits and step-therapy drug coverage review programs are not available in all service areas. For example, precertification and step-therapy programs do not apply to fully insured members in Indiana. Step therapy does not apply to fully insured members in New Jersey. However, these programs are available to self-insured plans. In Texas, precertification is known as "pre-service utilization review." It is not "verification" as defined by Texas law. Aetna's Preferred Drug List is subject to change. Drugs on the Precertification, Step-Therapy and Quantity Limits lists are subject to change.

Please be aware that we have a responsibility to ensure the safety of our members. Safety edits are a type of drug coverage review that helps us to do so. Safety edits apply to a limited list of drugs with the highest potential for abuse and harm. Safety edits make sure that the prescribed drug will be used within the guidelines set by the Food and Drug Administration and current medical findings. They also check that a prescribed drug matches up with the appropriate diagnosis and/or safe quantity. Safety edits are required for all commercial books of business, in all states, even when the plan sponsor elects an option to waive precertification. Aetna receives rebates from drug manufacturers that may be taken into account in determining Aetna's Preferred Drug List. Rebates do not reduce the amount a member pays the pharmacy for covered prescriptions. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to [www.aetna.com](http://www.aetna.com).

**Policy forms issued in OK include:** HMO OK COC-5 09/07; HMO/OK GA-3 11/01, HMO OK POS RIDER 08/07, GR-23 and/or GR-29/GR-29N.

[www.aetna.com](http://www.aetna.com)