





## UNION NEGOTIATED AND NON-ALIGNED PLANS PRESCRIPTION PLAN DESIGN - PLAN YEAR 2024 STATE ACTIVE GROUP

| Side-by-Side Rx Comparison   | Aetna Freedom HDHigh**                | Horizon NJ DIRECT HDHigh**            | Aetna Freedom HDLow**                 | Horizon NJ DIRECT HDLow**             |
|--|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Retail: Generic Copayments   | Subject to deductible and coinsurance | Subject to deductible and coinsurance | Subject to deductible and coinsurance | Subject to deductible and coinsurance |
| Retail: Brand Copayments   |                                       |                                       |                                       |                                       |
| Retail: Brand w/Generic available Copayments                       |                                       |                                       |                                       |                                       |
| Mail: Generic Copayments   |                                       |                                       |                                       |                                       |
| Mail: Brand Copayments   |                                       |                                       |                                       |                                       |
| Mail: Brand w/Generic available Copayments                         |                                       |                                       |                                       |                                       |
| Prescription Drug annual Out-of-Pocket Maximum (Individual/Family) |                                       |                                       |                                       |                                       |

**Note:** Retail – 30 day supply. Mail – 90 day supply. Oral contraceptive coverage is available under the medical and prescription plans.

\* **Members hired before July 1, 2019, will be enrolled in Aetna Freedom or Horizon NJ DIRECT. Members hired after July 1, 2019, will be enrolled in Aetna Freedom 2019 or Horizon NJ DIRECT 2019.**

\*\* **HD = High Deductible Health Plan.**

<sup>1</sup> Service areas for the Horizon HMO plan are limited to New Jersey, New Castle County in Delaware, and bordering counties of Pennsylvania and New York.

<sup>2</sup> You pay the cost difference between the brand drug and the generic drug.