

**2021 Pharmacy Benefit for
HMO Wise Saver 3450 HDHP SG**

Retail Copays Generic/Formulary/Non-Formulary	Mail Order Copays Generic/Formulary/Non-Formulary
\$10/\$35/\$60	\$20/\$70/\$180
Prescription drugs are subject to the combined medical pharmacy deductible for this plan.	