

**2021 Pharmacy Benefit for
HMO Core 3000 SG**

Retail Copays Generic/Formulary/Non-Formulary	Mail Order Copays Generic/Formulary/Non-Formulary
\$30/\$80/\$125	\$60/\$160/\$375
Plan Deductible applies to Formulary and Non-Formulary drugs	