THE PROBLEM
Today's prescription medications are more effective than ever before — but they're also more expensive. The growing need for prescription drugs is putting tremendous financial pressure on many people who do not have prescription drug coverage.

- The cost of drugs is rising faster than any other health care cost.
- Many plans are now excluding or restricting the purchase of prescription drugs.
- Many plans require an annual deductible or cut-off benefits after a $500 annual maximum.

THE SOLUTION
A non-profit prescription drug cooperative designed to provide worthwhile savings to members. Each member pays affordable monthly dues into a non-profit cooperative fund that subsidizes the purchase of prescription drugs for every member. The plan benefits include:

- $20 co-pay for most generic drugs including generic oral contraceptives.
- Subsidized savings on brand name drugs — up to 35%.
- Over 54,000 participating retail pharmacies.
- Walgreens is the designated mail-order service pharmacy.

How the Co-op Works
Benefit Alliance members are eligible to join ActivaScrips — a non-profit membership cooperative established to allow individuals to pool monthly dues to partially subsidize the purchase of their generic prescription drugs. RESTAT is the pharmacy benefits manager for ActivaScrips. This program allows individuals to keep the cost of their prescription drugs at affordable levels. This is not an insurance plan.

Benefit Alliance ActivaScrips Benefits

Generic Prescription Drugs from a Retail Pharmacy
For each 30-day supply of a generic drug you will pay either a co-payment of $20 or 60% of the discounted cost of the prescription (whichever is greater). According to a recent study of the current Benefit Alliance members’ utilization, members would pay a maximum of the $20 co-payment for approximately 75% of the generic drugs prescriptions.

Generic Prescription Drugs from the Mail-Order Pharmacy
For each 90-day supply of a generic drug you will pay either a co-payment of $60 or 60% of the discounted cost of the prescription (whichever is greater).

Brand Name Drugs
When you obtain brand name drugs from any participating retail pharmacy or from the mail-order service pharmacy, you will pay the ActivaScrips discounted price or the pharmacy’s usual & customary price; whichever is less.

MONTHLY FEE
Employee Only $17.73
Employee & Spouse $35.47
Employee & Dependent Child(ren) $26.76
Family $44.34

The Benefit Alliance Plan

Leslie & Associates, Inc.
**Easy to Use**

Upon enrollment you will receive an ActivaScrips Certificate of Membership, which explains your benefits, along with your Benefit Alliance member identification card. You can visit www.RESTAT.com to locate convenient retail pharmacies or call the toll-free number provided with your membership certificate to order from the mail-order pharmacy.

**Participating Retail Pharmacy**

Simply present your Benefit Alliance identification card with the RESTAT logo to any participating pharmacy along with your prescriptions. The pharmacist enters the data and transmits it electronically to RESTAT’s (the pharmacy benefit manager) computer that will calculate the appropriate co-payment for the pharmacist.

**Walgreens Mail-Order Service Pharmacy**

The mail-order service pharmacy may be accessed by using the toll-free 800 number included with your certificate of membership.

**Membership Eligibility**

Acceptance is guaranteed to anyone under the age of 65. All members are automatically eligible for benefits immediately upon the effective date of membership. Members previously enrolled who have terminated or canceled coverage must wait two years before enrolling again.

**Monthly Membership Dues**

The ActivaScrips non-profit prescription drug plan is not an insurance plan. Funding for the prescription drug benefits is derived exclusively from the membership dues paid by the member. Therefore, you should be aware that when you participate in this non-profit prescription drug cooperative, your monthly dues and/or benefits may change at any time without notice. This is the only way ActivaScrips can be certain that money will be available at all times to pay for the benefits provided by your membership in ActivaScrips. The monthly dues are established with the intention that they will not change for a period of one year or longer.

**Limitations (applies to generic drugs only)**

Benefits are not available with respect to the following:

- Non-prescription (non-legend) drugs, injectable drugs, drugs or agents for impotency, anorexiants, cosmetic drugs, investigational or experimental drugs, syringes, disposable needles, therapeutic devices or appliances, support garments, biological sera, blood or blood plasma, oxygen (including administration), immunization agents, drugs administered where dispensed, refills in excess of the number authorized, and drugs dispensed more than one year after the date of prescription. Also not covered are drugs purchased in excess of a 30-day supply at a participating retail pharmacy or in excess of a 90-day supply at the mail-order service pharmacy. Finally, all prescriptions purchased must be obtained from a participating pharmacy in order to be eligible for any subsidy.

**Maximum allowable supply for each prescription filled or refilled:**

*From a participating retail pharmacy:* the lesser of a 30-day supply or 120 unit doses; a 90-day supply may also be purchased from any Walgreens retail pharmacy.

*From the mail-order service pharmacy:* the lesser of a 90-day supply or 360 unit doses.