

NYBEAS Code: Active, Monthly, COBRA, Retiree, Extended Benefits, Young Adult Option	Year	Type of Drug / Level	COPAYS			Plan Maximum	Formulary	Specialty Pharmacy Program
			Day's Supply Up to 30 Mail & Retail	Day's Supply 31-90 Retail	Day's Supply 31-90 Mail			
<b>Empire Plan</b>  <b>Council 82 - A25, A50, C25, C50, D15, D20</b>	4/1/2010-Present	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Flexible Formulary	Yes
	1/1/2007-3/31/2010	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$30	\$10 \$30 \$60	\$5 \$20 \$55	Unlimited Unlimited Unlimited	Traditional PDL	No
<b>Empire Plan</b>  <b>NYSOPBA (Represented Correction Titles) – A04, C04, D09</b>	4/1/2010-Present	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Flexible Formulary	Yes
	1/1/2010-3/31/2010	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Flexible Formulary	No
	7/1/2009-12/31/2009	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Traditional PDL	No
	1/1/2007-6/30/2009	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$30	\$10 \$30 \$60	\$5 \$20 \$55	Unlimited Unlimited Unlimited	Traditional PDL	No
<b>Empire Plan</b>  <b>NYSOPBA (Law Enforcement Contract Affected Titles) – A24, A48, A64, M02, C48, C63, D13, D14, G86, G89</b>  <b>Note: UUP Lifeguards represented by NYSOPBA (A53, A65, C53, C64, D23) are currently subject to the 1/1/2007 – 3/31/2010 benefit levels.</b>	<b>7/1/2012-Present</b>	<b>Level 1 Level 2 Level 3 (2)</b>	<b>\$5 \$25 \$45</b>	<b>\$10 \$50 \$90</b>	<b>\$5 \$50 \$90</b>	<b>Unlimited Unlimited Unlimited</b>	<b>Enhanced Flexible Formulary</b>	<b>Yes</b>
	4/1/2010-6/30/2012	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Flexible Formulary	Yes
	1/1/2007-3/31/2010	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$30	\$10 \$30 \$60	\$5 \$20 \$55	Unlimited Unlimited Unlimited	Traditional PDL	No
<b>Empire Plan</b>  <b>M/C - A05, A06, A07, A19, A28, A29, A33, A34, A35, A61, A62, C05, C06, C07, C29, C61, D02, D25, L19, G85, G87</b>	10/1/2011-Present	Level 1 Level 2 Level 3 (2)	\$5 \$25 \$45	\$10 \$50 \$90	\$5 \$50 \$90	Unlimited Unlimited Unlimited	Enhanced Flexible Formulary	Yes
	4/1/2010-9/31/2011	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Flexible Formulary	Yes
	1/1/2009-3/31/2010	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Flexible Formulary	No
	7/1/2008-12/31/2008	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Traditional PDL	No
	1/1/2007-6/30/2008	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$30	\$10 \$30 \$60	\$5 \$20 \$55	Unlimited Unlimited Unlimited	Traditional PDL	No



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			Day's Supply Up to 30 Mail & Retail	Day's Supply 31-90 Retail	Day's Supply 31-90 Mail				
<b>Empire Plan</b>  <b>PIA State Police - A11, C11, D08</b>	4/1/2010-Present	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	Yes	
		Level 2	\$15	\$30	\$20	Unlimited			
		Level 3 (2)	\$40	\$70	\$65	Unlimited			
	1/1/2009-3/31/2010	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	No	
		Level 2	\$15	\$30	\$20	Unlimited			
		Level 3 (2)	\$40	\$70	\$65	Unlimited			
	1/1/2007-12/31/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No	
		Preferred Brand	\$15	\$30	\$20	Unlimited			
		Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited			
<b>Empire Plan</b>  <b>PBA State Police Troopers - A09,C09, D07</b>	4/1/2010-Present	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	Yes	
		Level 2	\$15	\$30	\$20	Unlimited			
		Level 3 (2)	\$40	\$70	\$65	Unlimited			
	1/1/2009-3/31/2010	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	No	
		Level 2	\$15	\$30	\$20	Unlimited			
		Level 3 (2)	\$40	\$70	\$65	Unlimited			
	1/1/2007-12/31/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No	
		Preferred Brand	\$15	\$30	\$20	Unlimited			
		Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited			
<b>Empire Plan</b>  <b>PBA State Police Supervisors - A10, C10, D22</b>	4/1/2010-Present	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	Yes	
		Level 2	\$15	\$30	\$20	Unlimited			
		Level 3 (2)	\$40	\$70	\$65	Unlimited			
	1/1/2009-3/31/2010	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	No	
		Level 2	\$15	\$30	\$20	Unlimited			
		Level 3 (2)	\$40	\$70	\$65	Unlimited			
	1/1/2007-12/31/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No	
		Preferred Brand	\$15	\$30	\$20	Unlimited			
		Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited			
<b>Empire Plan</b>  <b>PEF - A02, A22, A60, C02, C60, D03, D26, G84, G88</b>	12/1/2011-Present	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes	
		Level 2	\$25	\$50	\$50	Unlimited			
		Level 3 (2)	\$45	\$90	\$90	Unlimited			
	10/1/2011-11/30/11	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes	
		Level 2	\$15	\$30	\$20	Unlimited			
		Level 3 (2)	\$40	\$70	\$65	Unlimited			
	4/1/2010-9/31/2011	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	Yes	
		Level 2	\$15	\$30	\$20	Unlimited			
		Level 3 (2)	\$40	\$70	\$65	Unlimited			
	1/1/2009-3/31/2010	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	No	
		Level 2	\$15	\$30	\$20	Unlimited			
		Level 3 (2)	\$40	\$70	\$65	Unlimited			
				<b>COPAYS</b>					

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<b>Empire Plan</b>  PEF – Cont'd. A02, A22, A60, C02, C60, D03, D26, G84, G88	7/1/2008-12/31/2008	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Traditional PDL	No		
	1/1/2007-6/30/2008	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$30	\$10 \$30 \$60	\$5 \$20 \$55	Unlimited Unlimited Unlimited	Traditional PDL	No		
	4/1/2010-Present	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Flexible Formulary	Yes		
			1/1/2009-3/31/2010	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Flexible Formulary	No
			7/1/2008-12/31/2008	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Traditional PDL	No
	1/1/2007-6/30/2008	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$30	\$10 \$30 \$60	\$5 \$20 \$55	Unlimited Unlimited Unlimited	Traditional PDL	No		
<b>Empire Plan</b>  DC-37 - A12, A40,C12,C40, D05, D06	4/1/2010-Present	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Flexible Formulary	Yes		
	1/1/2009-3/31/2010	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Flexible Formulary	No		
			7/1/2008-12/31/2008	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$40	\$10 \$30 \$70	\$5 \$20 \$65	Unlimited Unlimited Unlimited	Traditional PDL	No
			1/1/2007-6/30/2008	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$30	\$10 \$30 \$60	\$5 \$20 \$55	Unlimited Unlimited Unlimited	Traditional PDL	No
				<b>COPAYS</b>						

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<b>Empire Plan</b>  <b>Participating Employers -</b> A23, C29, D01, E02, G01, G03, G04, G05, G06, G07, G08, G09, G10, G11, G13, G15, G16, G17, G19, G20, G21, G23, G24, G25, G27, G77, G78, G80, G85, G87, M04, M11	1/1/12-Present	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$25	\$50	\$50	Unlimited		
		Level 3 (2)	\$45	\$90	\$90	Unlimited		
	10/1/11-12/31/11	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$15	\$30	\$20	Unlimited		
		Level 3 (2)	\$40	\$70	\$65	Unlimited		
	4/1/2010-9/31/11	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	Yes
		Level 2	\$15	\$30	\$20	Unlimited		
		Level 3 (2)	\$40	\$70	\$65	Unlimited		
	1/1/2009-3/31/2010	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	No
		Level 2	\$15	\$30	\$20	Unlimited		
		Level 3 (2)	\$40	\$70	\$65	Unlimited		
7/1/2008-12/31/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No	
	Preferred Brand	\$15	\$30	\$20	Unlimited			
	Non-Preferred Brand (2)	\$40	\$70	\$65	Unlimited			
1/1/2007-6/30/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No	
	Preferred Brand	\$15	\$30	\$20	Unlimited			
	Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited			
<b>Empire Plan</b>  <b>Retirees, Vestees, Dependent Survivors &amp; Preferred List -</b> C31, C32, D10, D11, M07, R01, R02, R03, R04, R14, R15, R16, R17, R18, R19, R20, R21, R22, R23, R24, R51, R53, R54, R65, R69, R71, R73, R74 E01, E11, R05, R06, R07, R08, R09, R10, R11, R13, R25, R27, R55, R56, R57, R58, R59, R61, R75	10/1/2011-Present	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$25	\$50	\$50	Unlimited		
		Level 3 (2)	\$45	\$90	\$90	Unlimited		
	4/1/2010-9/31/11	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	Yes
		Level 2	\$15	\$30	\$20	Unlimited		
		Level 3 (2)	\$40	\$70	\$65	Unlimited		
	1/1/2009-3/31/2010	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	No
		Level 2	\$15	\$30	\$20	Unlimited		
		Level 3 (2)	\$40	\$70	\$65	Unlimited		
	7/1/2008-12/31/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$40	\$70	\$65	Unlimited		
1/1/2007-6/30/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No	
	Preferred Brand	\$15	\$30	\$20	Unlimited			
	Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited			

COPAYS
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<b>Empire Plan</b>  <b>Participating Agency</b> PA7, PC7, PD7, PE7, PF7, PN7, PR7, PS7, PV7	1/1/12-Present	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$25	\$50	\$50	Unlimited		
		Level 3 (2)	\$45	\$90	\$90	Unlimited		
	10/1/11-12/31/11	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$15	\$30	\$20	Unlimited		
		Level 3 (2)	\$40	\$70	\$65	Unlimited		
	4/1/2010-9/31/11	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	Yes
		Level 2	\$15	\$30	\$20	Unlimited		
		Level 3 (2)	\$40	\$70	\$65	Unlimited		
	1/1/2009-3/31/2010	Level 1	\$5	\$10	\$5	Unlimited	Flexible Formulary	No
		Level 2	\$15	\$30	\$20	Unlimited		
		Level 3 (2)	\$40	\$70	\$65	Unlimited		
	1/1/2007-12/31/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited		
<b>Empire Plan</b>  <b>CSEA -</b> A01, A21, A39, A45, C01, C21, C39, C45, D18, D19, G90, G91, M01, M09	10/1/11-Present	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$25	\$50	\$50	Unlimited		
		Level 3 (2)	\$45	\$90	\$90	Unlimited		
	7/1/2008-9/31/11	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$40	\$70	\$65	Unlimited		
	1/1/2007-6/30/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited		
<b>Empire Plan</b>  <b>UCS (DC-37) -</b> A14, A42, C14, C42	12/1/2011-Present	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$25	\$50	\$50	Unlimited		
		Level 3 (2)	\$45	\$90	\$90	Unlimited		
	10/1/2011-11/30/11	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$15	\$30	\$20	Unlimited		
		Level 3 (2)	\$40	\$70	\$65	Unlimited		
	7/1/2008-9/31/2011	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$40	\$70	\$65	Unlimited		
	1/1/2007-6/30/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited		
			<b>COPAYS</b>					

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<b>Empire Plan</b> <b>UCS (Various Union Groups) – A20, A44, A47, C20, C44, C47, D17</b>	12/1/2011-Present	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$25	\$50	\$50	Unlimited		
		Level 3 (2)	\$45	\$90	\$90	Unlimited		
	10/1/2011-11/30/11	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$15	\$30	\$20	Unlimited		
		Level 3 (2)	\$40	\$70	\$65	Unlimited		
	7/1/2008-9/31/2011	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$40	\$70	\$65	Unlimited		
	1/1/2007-6/30/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited		
<b>Empire Plan</b> <b>UCS (CSEA) - A13, A41, A13, C41</b>	10/1/2011-Present	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$25	\$50	\$50	Unlimited		
		Level 3 (2)	\$45	\$90	\$90	Unlimited		
	7/1/2008-9/31/2011	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$40	\$70	\$65	Unlimited		
	1/1/2007-6/30/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited		
<b>Empire Plan</b> <b>UCS (Judges/Justices) A15, A17, A36, A43, A46, C15, C17, C43, D16</b>	10/1/2011-Present	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$25	\$50	\$50	Unlimited		
		Level 3 (2)	\$45	\$90	\$90	Unlimited		
	7/1/2008-9/31/2011	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$40	\$70	\$65	Unlimited		
	1/1/2007-6/30/2008	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited		
<b>Empire Plan</b> <b>APSU - A37, C37, A51, C51, D24</b>	4/1/12-Present	Level 1	\$5	\$10	\$5	Unlimited	Enhanced Flexible Formulary	Yes
		Level 2	\$25	\$50	\$50	Unlimited		
		Level 3 (2)	\$45	\$90	\$90	Unlimited		
	1/1/2007-3/31/12	Generic	\$5	\$10	\$5	Unlimited	Traditional PDL	No
		Preferred Brand	\$15	\$30	\$20	Unlimited		
		Non-Preferred Brand (2)	\$30	\$60	\$55	Unlimited		

			COPAYS					
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<b>Student Employee Health Plan (SEHP)</b>	1/1/2011-Present	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40 (3)	N/A	\$5 \$20 \$65	Unlimited	Flexible Formulary	Yes
	9/1/2010-12/31/2010	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$40 (3)	N/A	\$5 \$20 \$65	\$3,000	Flexible Formulary	Yes
	4/1/2010-8/31/2010	Level 1 Level 2 Level 3 (2)	\$5 \$15 \$30 (3)	N/A	\$5 \$20 \$55	\$3,000	Flexible Formulary	Yes
	1/1/2007-3/31/2010	Generic Preferred Brand Non-Preferred Brand (2)	\$5 \$15 \$30 (3)	N/A	\$5 \$20 \$55	\$2,500	Traditional PDL	No
<b>Excelsior Plan PA9, PC9, PE9, PF9, PN9, PR9, PS9, PV9</b>	4/1/2010-Present	Generic Preferred Brand Non-Preferred Brand (2)	\$10 \$30 \$65	\$25 \$75 \$160	\$20 \$60 \$130	Unlimited Unlimited Unlimited	Excelsior PDL – Follows Carrier's Book of Business	Yes
	1/1/2009-3/31/2010	Generic Preferred Brand Non-Preferred Brand (2)	\$10 \$30 \$65	\$25 \$75 \$160	\$20 \$60 \$130	Unlimited Unlimited Unlimited	Excelsior PDL – Follows Carrier's Book of Business	No
<b>NYSIF Workers' Compensation Program</b>	1/1/2007-Present	All Covered Drugs	\$0	\$0	\$0	Unlimited	Workers' Compensation Formulary	Yes

- (1) For a brand name drug with no generic equivalent, enrollee pays the brand copayment. For a brand name drug with a generic equivalent (with some exceptions), enrollee pays the brand copayment plus the difference in cost between the brand name drug and its generic equivalent.
- (2) Mandatory generic substitution rules continue to apply. Non-preferred brand with generic equivalent available dispensed –Enrollee pays non-preferred co-pay plus difference in cost between brand and generic.
- (3) Effective June 1, 2005 claims for employees enrolled in the SEHP plan who fill prescriptions at the SUNY Stonybrook Student Health Service pharmacy, SUNY Buffalo Student Health Service pharmacy, and SUNY Albany Student Health Service pharmacy will be reimbursed by the SEHP for covered prescriptions under the following arrangement: SEHP Enrollees will be able to have prescriptions filled at the SUNY Stonybrook Student Health Service pharmacy and SUNY Buffalo Student Health Service pharmacy for up to a thirty (30)-day-supply for a \$7 co-payment. SEHP Enrollees filling prescriptions at the SUNY Albany Student Health Service pharmacy who have reached their \$200 SUNY Albany Student prescription maximum will be able to have prescriptions filled for up to a thirty (30)-day-supply for a \$7 co-payment. Reimbursement should be made for submitted charges. Prescriptions under this arrangement must be dispensed according to existing rules for the SEHP, including required prior authorizations and, where applicable, supply limits. These Health Service pharmacies will not be Empire Plan network pharmacies. Effective June 1, 2005, the generic appeal process is available to SEHP enrollees.



**Bargaining Units and the Unions Representing the Employee Bargaining Units**

- a. *Administrative Services Unit (ASU)*, represented by the Civil Service Employees Association (CSEA), is comprised primarily of office support staff and administrative personnel;
- b. *Institutional Services Unit (ISU)*, represented by the Civil Service Employees Association (CSEA), is comprised primarily of employees who are responsible for providing therapeutic and custodial care such as mental health therapy aides, developmental aides, licensed practical nurses, etc.;
- c. *Operational Services Unit (OSU)*, represented by the Civil Service Employees Association (CSEA), is comprised of craft workers, maintenance and repair personnel, and machine operators;
- d. *Division of Military and Naval Affairs (DMNA)*, represented by the Civil Service Employees Association (CSEA), is comprised of civilian employees within the New York State Division of Military and Naval Affairs;
- e. *Professional, Scientific and Technical Services Unit (PS&T)*, represented by the Public Employees Federation (PEF), is comprised primarily of professional and technical personnel;
- f. *Security Services Unit (SSU)*, represented by New York State Correctional Officers and Police Benevolent Association (NYSCOPBA), is comprised of State security personnel (other than State Police) and institutional safety officers;
- g. *Security Supervisors Unit (SSPU)*, represented by Council 82, AFSCME, AFL-CIO, is comprised of supervisory security personnel;
- h. *Agency Police Services Unit (APSU)*, represented by The Police Benevolent Association of New York State, Inc., is comprised of certain personnel who police duties and responsibilities and are employed in the State University system, Office of Parks & Recreation & Historic Preservation, and Department of Environmental Conservation;
- i. *State University Professional Services Negotiating Unit (PSNU)*, represented by the United University Professions (UUP), is comprised of faculty and non-teaching professional staff within the State University system;

- j. *State Police Troopers*, represented by the Police Benevolent Association (PBA) of the New York State Troopers, Inc., is comprised of troopers in the New York State Division of State Police who are responsible for road patrol and law enforcement;
- k. *State Police Commissioned and Non-Commissioned Officers (Supervisors Unit)*, represented by the Police Benevolent Association (PBA), is comprised of staff responsible for supervising troopers and investigators in the New York State Division of State Police;
- l. *State Police Investigators (BCI)*, represented by the New York State Police Investigators Association (PIA), is comprised of investigators and senior investigators in the New York State Division of State Police; and
- m. *Rent Regulation Services Unit (RRSU)*, represented by District Council 37 of AFSCME, AFL-CIO, is comprised of employees in the New York State Division of Housing and Community Renewal.
- n. In addition, the following groups of employees are eligible to participate in the Empire Plan Prescription Drug Program:
  - 1) *NYS Management/Confidential employees (M/C)*: Unrepresented Employees of the Executive Branch who serve in management positions and/or whose work is of a confidential nature. For purposes of this Request for Proposal this includes Legislative Employees and unrepresented Employees of the Office of the State Comptroller and Office of the Attorney General.
  - 2) *Unified Court System (UCS)*: Judges, Judicial Branch Employees, including represented and non-represented Judicial Employees of the Judiciary Branch of the NYS Unified Court System.
  - 3) *Participating Employer (PE)*: Employees of public authorities, public benefit corporations, or other public agencies, subdivisions, or quasi-public organizations of the State which elects, with the approval of the President of the Civil Service Commission, to participate in the New York State Health Insurance Program.
  - 4) *Participating Agencies (PA)*: Employees of any unit of local government such as school districts, special districts, and district or municipal corporations, which elects with the approval of the President of the Civil Service Commission, to participate in the New York State Health Insurance Program.
  - 5) *NY Retirees*: Retired employees of NYS, PEs or PAs eligible to continue coverage in NYSHIP; and

- o. *Other* - The following groups are included in this category:
- 1) *Vestees*: Former employees of NYS or PEs who are eligible to continue coverage in NYSHIP after leaving employment and prior to retirement;
  - 2) *Dependent Survivors*: Unmarried covered spouses and covered eligible dependent children who choose to continue coverage under NYSHIP after the death of the Enrollee;
  - 3) *Preferred List Employees*: Former employees of NYS whose positions were abolished and who are eligible to remain covered by NYSHIP until reemployed, or up to one year, whichever occurs first; and
  - 4) *NYS and PA COBRA Enrollees*: Enrollees and Dependents who have continued coverage under the Federal continuation of coverage law, under which former employees and their families may temporarily extend health care coverage at the same level of benefits they received as active employees enrolled in NYSHIP.
- p. The following groups of employees are covered by the Empire Plan Prescription Drug Program through the Student Employee Health Plan (SEHP):
- 1) *State University Graduate Student Negotiating Unit (GSNU)*: Represented by the Graduate Student Employees Union/Communication Workers of America (GSEU/CWA), is comprised of teaching assistants and graduate student assistants who are pursuing advanced degrees at State University campuses; and
  - 2) *GSNU COBRA Enrollees*: Enrollees and Dependents who have continued coverage under the Federal continuation of coverage law under which former employees and their families may temporarily extend health care coverage at the same level of benefits they received as active employees enrolled in NYSHIP.