

# FlexChoice Rx Simplified Health Net Pharmacy Benefits

*At Health Net, we understand that choice and flexibility are important to you and your family. That's why we developed our FlexChoice Simplified pharmacy plans. Each covered prescription drug is assigned to one of the tiers in the chart below.*

## Prescriptions by Mail

If your prescription is for a drug you take regularly, you have the option of filling it through our convenient Prescriptions by Mail Drug Program. This program allows you to receive up to a 3-month supply of the prescription. For complete details, log on to our website at [healthnet.com](http://healthnet.com) > [View Prescription Coverage](#) > [Manage Your Prescriptions](#) > [Prescriptions by Mail](#).

Pharmacy Benefit Copayments		
<b>Tier 1</b>	<b>\$10 Retail</b>	<b>\$20 by Mail</b>
<b>Tier 2</b>	<b>\$20 Retail</b>	<b>\$40 by Mail</b>
<b>Tier 3</b>	<b>\$40 Retail</b>	<b>\$80 by Mail</b>
<b>Self-Injectables</b>	<b>\$40 Retail</b>	

## What is Covered

The following are covered under the Health Net Pharmacy Benefit:

- Drugs listed in the Preferred Drug list
- Prescription drugs, up to a 31-day supply
- Diabetic prescription drugs and supplies—see Schedule of Benefits for complete details

## What is Not Covered

The following are not covered under the Health Net Pharmacy Benefit:

- Drugs obtained at non-participating pharmacies
- Over-the-counter medications (unless listed on the formulary)
- Infertility drugs
- See the Schedule of Benefits for a complete listing; additional exclusions and limitations may apply



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