

Specialty Drug Benefit

Specialty medications can be covered under either the EUTF HMSA medical plan or CVS prescription drug plan. Your benefit depends on the medication prescribed, where the medication is dispensed, and plan design (e.g., deductible, coinsurance, and prior authorization).

Medication Prescribed

There are some specialty medications that are considered medical benefit only drugs and are only covered under the HMSA medical plan. These are generally medications that require special handling or administration and where patients may require medical monitoring after administration. Additionally, some medications, while covered under the CVS prescription drug plan, are better suited to being covered under the HMSA medical plan due to complexities with coordinated laboratory draws and/or medical facility visits for medication administration. The specialty formulary and exclusions under the CVS prescription drug plan can be found at caremark.com/eutf.

Where the Medication is Dispensed

Generally, specialty medications skillfully administered by a healthcare provider (in the doctor’s office) are covered under the HMSA medical plan and specialty medications self-administered or dispensed by the pharmacy are covered under the CVS prescription drug plan. Where your medication is dispensed is typically determined by your doctor, so it is important to provide them with both your medical and pharmacy cards and discuss with them which benefit is suitable for you.

Plan Design

Below is a comparison of the EUTF HMSA medical and CVS prescription drug plan in-network benefit. Specialty drugs are dispensed up to a 30-day supply, and there is no coordination of benefits across the EUTF HMSA medical and CVS prescription drug plans.

	HMSA Medical Plan (Refer to the Injections benefit in HMSA’s Guide to Benefits.)		CVS Prescription Drug Plan (Refer to the Specialty benefit in the CVS Benefits at a Glance.)	
EUTF Actives	Member pays	MOOP ¹	Member pays	MOOP ²
HMSA 90/10	10%	\$2,000	Generic: 10% up to \$200/fill Pref. brand: 20% up to \$300/fill NonPref. brand: 30% up to \$400/fill	Specialty MOOP: \$2,500
HMSA 80/20	20%	\$2,500		
HMSA 75/25	25% (after \$300 deductible)	\$3,300 ³		
HMSA HMO	\$0 (excluding \$15 office visit copay)	\$1,500		
HSTA VB Actives	Member pays	MOOP ¹	Member pays	MOOP ²
HMSA 90/10	10%	\$2,000	Generic: \$5 Brand: \$15	\$4,350
HMSA 80/20	20%	\$2,500		

	HMSA Medical Plan (Refer to the Injections benefit in HMSA's Guide to Benefits.)		CVS Prescription Drug Plan (Refer to the Specialty benefit in the CVS Benefits at a Glance.)	
EUTF Retirees	Member pays	MOOP ¹	Member pays	MOOP ²
NM and MC Retirees	20%	\$2,500	20% up to \$250/fill	\$2,000
HSTA VB Retirees	Member pays	MOOP ¹	Member pays	MOOP ²
NM Retirees	10%	\$2,000	Generic: \$5 Brand: \$15	\$2,000
MC Retirees	10%	\$2,000	Generic: \$3 Brand: \$9	\$2,000

¹ The HMSA plan maximum out-of-pocket (MOOP) is accumulated on a calendar year basis, and the family MOOP is two times the single MOOP under the active plans and three times the single MOOP under the retiree plans.

² The CVS plan MOOP is accumulated on a calendar year basis and is per person (with the exception of the HSTA VB active plans where the family MOOP is two times the single MOOP).

³ The HMSA 75/25 MOOP reduced to \$3,300 effective July 1, 2026.

For More Information

To learn more about your specialty medication benefits, contact the following:

HMSA: Call **808-948-6499** or toll free **1-808-776-4672**. Or, visit **hmsa.com/eutf**.

CVS: For assistance with ordering specialty prescriptions or to locate a specialty pharmacy, call **1-855-801-8263**. For assistance with ordering from CVS Specialty, call **1-800-896-1464**. For coverage of non-preferred specialty medications, have your physician call **1-808-254-4414**. Or, visit **caremark.com/eutf**.