

Prescription Drug Plan

- [Express Scripts Fax Form for Provider](#)
- [Medco Pharmacy Express Scripts Mail-Order Form](#)
- [Express Scripts Prescription Reimbursement Form](#)

The Catholic Charities prescription drug plan is provided by **Express Scripts** in conjunction with the medical benefits offered by the Christian Brothers Employee Benefit Trust. **Employees and covered dependents must be enrolled in the diocesan medical plan in order to participate in the Prescription Drug Plan.** Prescriptions can be obtained through a local pharmacy for short term prescriptions and through Mail-Order for on-going maintenance prescriptions.

Retail co-pay (up to 30-day supply)

Generic - \$10

Preferred (formulary) - \$35

Non-preferred (non-formulary) - \$60

Mail-Order co-pay (90-day supply)

Generic - \$25

Preferred (formulary) - \$90

Non-preferred (non-formulary) - \$150

How to Submit

Most providers can file directly. If yours does not, follow these instructions.

To expedite a new mail-order prescription from your healthcare provider, download the mail-order fax form and bring it to your provider. Have the provider complete and fax the form to Express Scripts at **1-800-837-0959**.

To mail in a prescription your healthcare provider has already written, download the Medco Pharmacy Mail-Order form and mail the prescription(s) along with the completed form to the address provided on the mail-order form (*link above*).

The Direct Claim Form may be used for reimbursement only when full price has been paid for a prescription drug order at a pharmacy, when the pharmacy does not accept the prescription drug ID card or if a healthcare ID card has not yet been received.

For additional information regarding the Prescription Drug Plan, log in to Express-Scripts.com or contact Member Services at **1-800-759-1089**. You may also obtain information regarding the Prescription Drug Plan through Christian Brothers Employee Benefit Trust at www.myCBS.org/health.

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