

# Pharmacies & Medications

## Your Medications, Our Coverage.

Johns Hopkins US Family Health Plan offers all of the TRICARE Prime® comprehensive prescription drug benefits, as mandated by the DoD. We are proud to provide our members with convenient access to their medication when they need it most.

### Pharmacy Information

Johns Hopkins US Family Health Plan includes all Walgreens pharmacies nationwide — that's 8,100 locations and growing. In addition to convenient locations, Walgreens has many digital tools to help our members manage medications and easily refill prescriptions.

We offer two convenient ways for our members to receive their prescriptions:

- **Home delivery:** Available for up to a 90-day supply of approved medications.
- **Retail pharmacy pick-up:** Fill and pick up your prescriptions at any of our network pharmacies nationwide without having to submit a claim. Through our retail pharmacy network, you can fill a 30-day supply of your everyday medications, or a 90-day supply of medications for a chronic condition, for the same copay as home delivery.

To find a network pharmacy near you, please visit our website at: [HopkinsUSFHP.org](https://HopkinsUSFHP.org)

### Prescription Drug Coverage

Johns Hopkins US Family Health Plan utilizes the TRICARE® pharmacy formulary. The formulary lists all of the prescription drugs that are covered under the TRICARE benefit. It is a tiered, open formulary, and includes:

- Generic drugs (*Tier 1*)
- Preferred brand drugs (*Tier 2*)
- Non-preferred brand drugs (*Tier 3*)

Each of these tiers represents a cost share that Johns Hopkins US Family Health Plan members are responsible for paying. See if a specific drug is covered and its cost share: [express-scripts.com/static/formularySearch/2.9.5/#/formularySearch/drugSearch](https://express-scripts.com/static/formularySearch/2.9.5/#/formularySearch/drugSearch)

### Other Covered Medication

Our pharmacy program provides outpatient coverage to members for medications that are approved for marketing by the U.S. Food and Drug Administration (FDA) and that generally require prescriptions. Other covered medications include:

- Insulin
- Insulin syringes and needles
- Smoking cessation products at no out-of-pocket cost (*maximum of 2 quit attempts per year*)
- Glucose test strips
- Lancets



## Non-Covered Medication

Prescription medications that are used to treat conditions not currently covered by Johns Hopkins US Family Health Plan by statute or regulation are excluded from the pharmacy benefit. Excluded medications include:

- Drugs prescribed for cosmetic purposes
- Fluoride preparations
- Food supplements
- Homeopathic and herbal preparations
- Multivitamins
- Over-the-counter products (except insulin, diabetic supplies and smoking cessation products)

## Copayments

Prescription drugs that are picked up at a retail network pharmacy for up to a 30-day supply:

- \$11 for generic drugs
- \$28 for preferred drugs
- \$53 for non-preferred drugs

Home delivery of a prescription drug for up to a 90-day supply (maintenance medications only):

- \$7 for generic drugs
- \$24 for preferred drugs
- \$53 for non-preferred drugs

You can view the cost share for a medication using the TRICARE® formulary search tool:  
[express-scripts.com/static/formularySearch/2.9.5/#/formularySearch/drugSearch](https://express-scripts.com/static/formularySearch/2.9.5/#/formularySearch/drugSearch)

You can also search for lower-cost alternatives to a medication you are currently taking.



For the most up-to-date information regarding pharmacies and medications, please visit our website at: [HopkinsUSFHP.org](https://HopkinsUSFHP.org)