

Michigan Public School Employee’s Retirement System Non-Medicare members cost-sharing for the prescription drug plan

The prescription drug plan includes the following cost-sharing features.

Coinsurance

A coinsurance requires you to pay a percentage of the cost of certain prescription drugs. The amount of your coinsurance is based on the approved amount for covered services. For most preferred prescription drugs, the plan pays 80% of the approved amount, and your coinsurance is 20%. Your coinsurance is 40% when you fill prescriptions for non-preferred brand-name drugs. If a drug price is less than the minimum copay you pay the drug price.

2025/2026

Covered prescription drugs	Retail network pharmacy	Retail network & home delivery pharmacy	Preferred specialty pharmacy	Non-preferred specialty pharmacy
	31-day supply	90-day supply	30-day supply	30-day supply
Tier 1: Generic traditional drugs	20% coinsurance \$15 minimum / \$45 maximum	20% coinsurance \$37.50 minimum / \$112.50 maximum	Not applicable	Not applicable
Tier 2: Preferred brand drugs	20% coinsurance \$15 minimum / \$45 maximum	20% coinsurance \$37.50 minimum / \$112.50 maximum	Not applicable	Not applicable
Tier 3: Non-preferred brand drugs	40% coinsurance \$15 minimum / no maximum*	40% coinsurance \$37.50 minimum / no maximum**	Not applicable	Not applicable
Tier 4: Preferred specialty drugs	Not applicable	Not applicable	20% coinsurance \$50 minimum / \$100 maximum	40% coinsurance \$50 minimum / no maximum
Tier 5: Non-preferred specialty drugs	Not applicable	Not applicable	40% coinsurance \$50 minimum / no maximum*	40% coinsurance \$50 minimum / no maximum*

Specialty drugs are those drugs that cost \$950 or more for up to a 30-day maximum supply.

* Only 20% coinsurance up to a \$45 maximum is credited to the annual coinsurance maximum.

** Only 20% coinsurance up to a \$112.50 maximum is credited to the annual coinsurance maximum. Consult the Non-Medicare Pharmacy Benefit Guide for a complete overview.