

Spring 2005

Would you like to save ½ your copay each month?

Dear Member:

With the cost of prescription drugs continuing to rise we are always looking for ways to help you reduce your out of pocket expenses. The ConnectiCare voluntary Half & Half Program is an easy way for you to save ½ your copay (whether you use your local retail pharmacy or mail order) for certain prescription drugs when you split a higher dose tablet in half to reach your prescribed daily dose!

If you or a member of your family is taking a prescription drug that qualifies for our voluntary Half & Half program, participating in the program may give you an opportunity for substantial savings. On the back of this page is a chart showing the medications that are eligible for the program.

How Does the Program Work?

When you receive a prescription for the higher dose of your usual prescription, you'll only need half the number of tablets. For example: if you take a 20mg dose of your medication, ask your doctor for a prescription for a 40mg dose to be split in half. This way you get two doses per tablet.

This is a **voluntary program**, and you determine if you would like to participate. Savings on drugs included in this program can be up to 50 percent on your out of pocket copayment cost every month. **Please note:** If you and your doctor decide to take advantage of this opportunity your doctor must write you a new prescription indicating the new strength, quantity and directions **exactly as indicated on the following page.**

How you Save

- If you pay a flat dollar monthly co-payment for your prescriptions, your co-payment will be cut in half when you take advantage of this incentive program. For example: Your usual copayment is \$20 for a 30-day supply of your 20mg medication-if your prescription is written for "tablet" of the higher dose (40mg), you will receive 15 tablets and your copayment will be half of your usual copayment or \$10.
- If you pay a percentage of your drug costs, the percentage you pay will be based on a lower medication cost.

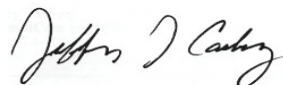
Only the select group of medications and strengths listed on the next page are included in this program. Some of the tablets are scored and others would require you to split them with a tablet splitter. Tablet splitters can be purchased at your local pharmacy.

Before you consider any changes to your medications bring this letter to your next appointment or call your physician. Only you and your physician can determine if this program is right for you. **You are under no obligation to participate in this program.** If you have any questions, you can call Member Services at (860) 674-5757 or toll free at 1 (800) 251-7722, and remember to show your ConnectiCare ID card to the pharmacy.

Sincerely,



Paul Bluestein, MD
Sr. Vice President
Chief Medical Officer



Jeffrey Casberg MS, RPh
Director, Pharmacy Services

Half & Half Program

Important Note: For the discount to be applied 1/2 tab prescriptions **must be** written by your doctor for 15 tabs (30 days supply), 30 tabs (60 days supply) or 45 tabs (90 day supply). We suggest starting with #15 tabs to insure this program is right for you.

If you are taking the daily dose listed below:	You can reduce your co-payment with a prescription for the following higher strength tablet and split your tablet in half	Comments
Zoloft 25mg	Zoloft 50mg ½ tablet daily; Disp 15 tabs	Scored Tablet
Zoloft 50mg	Zoloft 100mg ½ tablet daily; Disp 15 tabs	Scored Tablet
Lipitor 20mg	Lipitor 40mg ½ tablet daily; Disp 15 tabs	Need tablet splitter
Lipitor 40mg	Lipitor 80mg ½ tablet daily; Disp 15 tabs	Need tablet splitter
Lexapro 5mg	Lexapro 10mg ½ tablet daily; Disp 15 tabs	Scored Tablet
Lexapro 10mg	Lexapro 20mg ½ tablet daily; Disp 15 tabs	Scored Tablet
Zocor 20mg	Zocor 40mg ½ tablet daily; Disp 15 tabs	Need tablet splitter
Zocor 40mg	Zocor 80mg ½ tablet daily; Disp 15 tabs	Need tablet splitter
Crestor 5mg	Crestor 10mg ½ tablet daily; Disp 15 tabs	Need tablet splitter
Crestor 10mg	Crestor 20mg ½ tablet daily; Disp 15 tabs	Need tablet splitter
Crestor 20mg	Crestor 40mg ½ tablet daily; Disp 15 tabs	Need tablet splitter
Pravachol 10mg	Pravachol 20mg ½ tablet daily; Disp 15 tabs	Need tablet splitter
Pravachol 40mg	Pravachol 80mg ½ tablet daily; Disp 15 tabs	Need tablet splitter
Paroxetine (Paxil) 10mg*	Paroxetine 20mg ½ tablet daily; Disp 15 tabs	Need tablet splitter
Paroxetine (Paxil) 20mg*	Paroxetine 40mg ½ tablet daily; Disp 15 tabs	Need tablet splitter

*Generic version only

Cost Savings Table

(examples based on 10/20/35 Pharmacy copayment benefit design, please see your benefit summary for your copayment design)

If you are taking the daily dose listed below:	Current Monthly copayment	New monthly copay	Annual savings to member
Zoloft 25mg	\$35.00	\$17.50	\$210.00
Zoloft 50mg	\$35.00	\$17.50	\$210.00
Lipitor 20mg	\$20.00	\$10.00	\$120.00
Lipitor 40mg	\$20.00	\$10.00	\$120.00
Lexapro 5mg	\$20.00	\$10.00	\$120.00
Lexapro 10mg	\$20.00	\$10.00	\$120.00
Zocor 20mg	\$20.00	\$10.00	\$120.00
Zocor 40mg	\$20.00	\$10.00	\$120.00
Crestor 5mg	\$35.00	\$17.50	\$210.00
Crestor 10mg	\$35.00	\$17.50	\$210.00
Crestor 20mg	\$35.00	\$17.50	\$210.00
Pravachol 10mg	\$20.00	\$10.00	\$120.00
Pravachol 40mg	\$20.00	\$10.00	\$120.00
Paroxetine 10mg	\$10.00	\$5.00	\$60.00
Paroxetine 20mg	\$10.00	\$5.00	\$60.00

Note: ConnectiCare will not replace tablets damaged or lost while splitting.

Jan. 2005