

2025 Johns Hopkins EPO Plan Schedule of Benefits (Effective 01/01/2025)



Prescription Deductibles

	In-Network Retail Pharmacy (30-day supply)	In-Network Retail Pharmacy (90-day supply)	Mail Order (90-day supply)
Plan Year Deductible			
Individual	\$0	\$0	\$0
Family	\$0	\$0	\$0
Out-of-Pocket Maximum			
Individual	\$4100	\$4100	\$4100
Family	\$8200	\$8200	\$8200
Lifetime Maximum			
Individual	Unlimited	Unlimited	Unlimited
Family	Unlimited	Unlimited	Unlimited

Revised

October 9, 2024

<https://www.ehp.org/benefits-schedule/2025-johns-hopkins-epo-plan/?benefit=prescription&view=services>

Plan Codes

JE1C0000

2025 Johns Hopkins EPO Plan Schedule of Benefits (Effective 01/01/2025)



Prescription Services and Supplies

	In-Network Retail Pharmacy (30-day supply)	In-Network Retail Pharmacy (90-day supply)	Mail Order (90-day supply)
Oral Contraceptives			
Generic	\$0	\$0	\$0
Preferred	25%; \$40 min; \$60 max	25%; \$120 min; \$180 max	25%; \$120 min; \$180 max
Non-Preferred	50%; \$65 min; \$105 max	50%; \$195 min; \$315 max	50%; \$195 min; \$315 max
Prescription Drugs			
Generic	\$10	\$30	\$30
Preferred	25%; \$40 min; \$60 max	25%; \$120 min; \$180 max	25%; \$120 min; \$180 max
Non-Preferred	50%; \$65 min; \$105 max	50%; \$195 min; \$315 max	50%; \$195 min; \$315 max
Brand with Generic Equivalent	50%; \$65 min; \$105 max, plus the cost differential between generic and brand	50%; \$195 min; \$315 max, plus the cost differential between generic and brand	50%; \$195 min; \$315 max, plus the cost differential between generic and brand
Specialty Medications for members enrolled in Prudent RX – medications listed at ehp.org	\$0	Restricted to a 30-day retail supply only	Restricted to a 30-day retail supply only
Specialty Medications for members not enrolled in Prudent RX – medications listed at ehp.org	30%	Restricted to a 30-day retail supply only	Restricted to a 30-day retail supply only

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