

The JPMorgan Chase Prescription Drug Plan

► Effective January 1, 2011

OVERVIEW

This Bulletin provides an overview of the JPMorgan Chase Prescription Drug Plan administered by Caremark for participants enrolled in the Medical Plan's Point-of-Service (POS) or Exclusive Provider Organization (EPO) Options effective January 1, 2011.

For more detailed information about the Prescription Drug Plan, please see **Your Guide to Benefits** at JPMorgan Chase, the summary plan descriptions for the JPMorgan Chase U.S. Benefits Program, on HR & Personal > Benefits.

If you elect coverage in the JPMorgan Chase Medical Plan's Point-of-Service (POS) High or Low Option or the Exclusive Provider Organization (EPO) Option for 2011, your prescription drug coverage will be provided through the Prescription Drug Plan, administered by Caremark. This coverage includes prescriptions filled at a retail pharmacy or through the mail order program.

If you elect coverage under the Consumer Driven Health Option (CDHO) or a Health Maintenance Organization (HMO) Option*, your prescription drug coverage will be provided directly through your Medical Plan option and the information included here **does not apply** to your prescription drug coverage benefits. Please refer to the Health Plan Comparison Charts on the Benefits Web Center (please see page 4 for access instructions) or Aetna's CDHO web site at www.MyAetnaBenefit.com for details about your coverage.

**HMOs under the JPMorgan Chase Medical Plan include: BCBS HMO IL, BCBS HMO Blue Advantage IL, Group Health, and all Kaiser Permanente plans.*

YOUR 2011 PRESCRIPTION DRUG COVERAGE AT A GLANCE

The following table provides a summary of the provisions under the JPMorgan Chase Prescription Drug Plan effective January 1, 2011. Some medications are not covered, require prior authorization, or have quantity or lifetime limits. You can learn full details about the Prescription Drug Plan on the Caremark web site. For a list of limitations and exclusions, please see the "Medical Plan" section of **Your Guide to Benefits at JPMorgan Chase**, available on HR & Personal > Benefits.

You can take part in reducing your prescription drug costs by:

- ☒ Choosing generic drugs over their more expensive, name-brand counterparts
- ☒ Trying effective, lower-cost drugs first

	In-Network
Retail Up to a 30-day supply ¹	<ul style="list-style-type: none"> ▪ Annual Deductible: \$50 individual \$100 individual + one adult \$100 individual + child(ren) \$150 family ▪ Generic: 100% covered after deductible and \$10 copay² ▪ Preferred Brand Name: 70% covered (you pay 30%) after deductible (\$100 maximum copay²) ▪ Non-Preferred Brand Name: 55% covered (you pay 45%) after deductible (\$150 maximum copay²)
Mail Order (or CVS Pharmacy) Up to a 90-day supply ¹	<ul style="list-style-type: none"> ▪ No Deductible ▪ Generic: 100% covered after \$20 copay² ▪ Preferred Brand Name: 70% covered (you pay 30%) (\$250 maximum copay²) ▪ Non-Preferred Brand Name: 55% covered (you pay 45%) (\$375 maximum copay²)
Annual Out-of-Pocket Maximum³ For Retail and Mail Order combined	\$2,000 individual \$4,000 individual + one adult \$4,000 individual + child(ren) \$6,000 family

¹ Long-term medications: Limit of two 30-day fills before 90-day mail order required. The 90-day supply may also be obtained through a CVS pharmacy.

² Maximum amounts shown are per prescription. If the cost of a generic drug is less than the copayment, you pay the lower amount

³ Annual out-of-pocket maximum includes copayments and coinsurance for covered drugs but does not include the annual retail deductible or costs for non-covered drugs. Also, it is not combined with the JPMorgan Chase Medical Plan out-of-pocket costs/limits.

Important Reminder: If you enroll in the Health Care Spending Account, you can pay for out-of-pocket prescription drug expenses with before-tax dollars

You may want to consider enrolling in the JPMorgan Chase Health Care Spending Account during this annual benefits enrollment period. Health Care Spending Account contributions are taken on a before-tax basis, lowering your taxable income, and can be used to pay for eligible prescription drug expenses (including copayments, deductibles, and coinsurance for prescription drugs).

Please Note: Generally, over-the-counter medications cannot be reimbursed from the Health Care Spending Account due to new health care regulations. However, if your doctor writes a prescription for certain over-the-counter medication (such as pain relief, sleep aids, and stomach remedies), they will be eligible for reimbursement through your Health Care Spending Account. More information about the Health Care Spending Account is available in the “Participating in the Health Care and Child/Elder Care Spending Accounts” Bulletin on My Rewards @ Work. Please see page 4 for access instructions.

Please Note: It is important that you plan your contributions carefully—any amounts not used by March 15 of the following year will be forfeited. You generally have until April 30 to submit claims for eligible expenses incurred during the plan year (January 1 through December 31) or by the end of the “grace period” (March 15).

LONG-TERM (MAINTENANCE) MEDICATIONS

Long-term (or maintenance) medications are taken or prescribed on a regular, recurring basis, such as those taken for high blood pressure and those meant for lowering cholesterol. Examples of maintenance medications include Lipitor, Lexapro, Advair, and Nexium. To determine if the medication you are taking is considered a maintenance medication, please view the Maintenance Drug List on www.caremark.com/jpmc or contact a Caremark Customer Service Representative (see page 4 for contact information).

One of the best features of the Prescription Drug Plan is the discount available for prescriptions purchased in bulk by Caremark and fulfilled through the Mail Order Program. Using this program saves both you and JPMorgan Chase money. If you are taking a maintenance medication, you must obtain a 90-day supply by mail through Caremark’s Mail Order Program (or at a CVS pharmacy). The annual deductible applicable to retail prescriptions does not apply to a 90-day supply obtained at a CVS pharmacy.

Please Note: The first time you need to fill a maintenance medication prescription under the Prescription Drug Plan, you will be able to obtain two 30-day supplies at a network pharmacy (by paying retail prescription rates). After that, you will no longer have coverage for those medications unless you obtain a 90-day supply via the Mail Order Program or at a CVS pharmacy. This feature gives you and your doctor the ability to confirm that the medication and dosage is right for you prior to filling a long-term prescription.

The table below provides examples of estimated cost savings when you obtain your maintenance medications via mail order instead of through a retail pharmacy.

Medication	Estimated cost for a 30-day supply x 2* refills at a retail pharmacy (90-day supply)	Mail Order/CVS pharmacy (90-day supply)	Annual Savings (for four 90-day supplies)
Lipitor (10 mg)	\$63	\$53	\$40
Advair (500/50 mcg)	\$222	\$196	\$104

**These numbers are for illustration only. The Prescription Drug Plan permits only one refill of a maintenance medication prescription after the original 30-day supply.*

Things to Consider: Long-Term (Maintenance) Medications

- If you are unsure if your medication is considered a maintenance drug, view the Maintenance Drug List on www.caremark.com/jpmc or contact a Caremark Customer Service Representative.
- You can determine the cost of any medication by going to www.caremark.com/jpmc and selecting “Check Drug Cost.”
Please Note: Costs may vary at different retail pharmacies.
- Caremark will send a reminder if you obtain a 30-day supply of medication subject to the 90-day requirement.

PPIs AND H2 BLOCKERS (FOR STOMACH ACID-RELATED CONDITIONS)

Proton Pump Inhibitors (PPIs) and H2 blockers are used for the prevention and treatment of acid-related conditions such as heartburn, acid reflux, gastroesophageal reflux disease (GERD), or ulcers. If modifying your food choices or sleep habits, smoking cessation, and/or weight loss don't help, there are a variety of medication options, including non-prescription antacids (not covered under the Prescription Drug Plan), acid-reducing H2 blocker drugs, and PPI medications (please see below for examples).

Lower Cost for Generic PPI and H2 Blockers

While generic PPI and H2 blocker medications are in the **generic copay** tier, brand name medications are in the **non-preferred brand** tier. Your cost under each of these tiers is as follows:

- **Generic Tier:** You pay the lower of the actual cost or \$10 for a 30-day supply/ \$20 for a 90-day supply.
- **Non-Preferred Brand Tier:** You pay 45% of the cost (up to a maximum of \$150 retail, \$375 mail order) per prescription.

The chart below shows the 2011 coverage for each category, as well as examples of each type of medication.

Category	Non-Prescription/ Over-the-Counter Medications	Generic Medications	Corresponding Brand Name Medications
2011 Prescription Drug Plan Coverage	Not covered	Generic Tier	Non-Preferred Brand Tier
Examples: Antacids	Maalox, Mylanta, Rolaids, Tums	N/A	N/A
Examples: H2 blockers	Tagamet HB, Pepcid AC, Axid AR, Zantac 75	cimetidine famotidine nizatidine ranitidine	Tagamet Pepcid Axid Zantac
Examples: PPIs	Prilosec OTC, OTC omeprazole	Prescription omeprazole pantoprazole lansoprazole	Prilosec Protonix Prevacid

PPI Step Therapy Program

The PPI Step Therapy Program encourages the use of effective, lower-cost alternatives to brand name medications. The various PPI medications are generally equivalent in effectiveness and safety, but do vary greatly in cost. The first time you need to fill a brand name PPI under the JPMorgan Chase prescription program with Caremark, the program review and approval process must occur before the prescription is obtained. Your doctor will be consulted and you will be required to try a generic PPI first. If you do not do so, coverage for your brand name PPI may be denied and you will have to pay the full cost. **Please Note:** If you have previously tried a generic PPI, the review may indicate you will not be subject to the step therapy program.

SPECIALTY GUIDELINE MANAGEMENT PROGRAM

Specialty drugs were originally developed for rare diseases such as hemophilia and Gaucher Disease; but they are now being used to treat complex but more common conditions such as asthma, infertility, psoriasis, rheumatoid arthritis, multiple sclerosis, growth hormone disorders, hepatitis C, pulmonary arterial hypertension (PAH), and respiratory syncytial virus (RSV). They are powerful biotech drugs that are high cost and often self-injected. They may require refrigeration or special handling, and are not generally dispensed through a retail pharmacy. A list of specialty medications is available at www.caremark.com/jpmc.

The Specialty Guideline Management Program helps ensure responsible utilization, taking into account safety, efficacy, and appropriateness of the prescription medication. The first time you need to fill a specialty drug under the JPMorgan Chase prescription program with Caremark, the program review and approval process must occur before the prescription is obtained. Caremark will work with your physician to obtain the necessary clinical information for their review, which will ensure the medication is being prescribed in accordance with nationally recognized clinical guidelines before coverage is provided. This review may determine that other medications are more appropriate, and result in the denial of coverage for the specialty medication.

Prescription Drug Information Online:

Visit the JPMorgan Chase Caremark web site at www.caremark.com/jpmc and:

- Read coverage provisions;
- View the JPMorgan Chase Drug List of Preferred Brand drugs;
- View a list of maintenance medications;
- View a list of specialty medications;
- Check the cost of retail and mail order medications;
- Locate CVS and network pharmacies in your area; and
- Find out how to obtain mail order and specialty medications.

Once you are enrolled in the Prescription Drug Plan, go to www.caremark.com and register for access to the member site, where you'll find helpful tips and information. (**Please Note:** Information listed on your Caremark ID card is required in order to register for the site.) General information on a variety of health topics is also available at:

- The "Drug Information Center," where you can learn about various medications
- "Cool Tools," where you can access interactive features, calculators, quizzes, and health diaries

After you have filled a prescription, you can access a personalized report based on your prescription usage history with Caremark. The report tracks the prescriptions you have filled as a participant in the JPMorgan Chase Prescription Drug Plan. It identifies savings opportunities, such as the availability of lower-cost generic drugs to be substituted for brand-name drugs. The information is available on the "Savings Center" section of the Caremark web site. This report will also be mailed to your home address on a periodic basis and can be used to discuss cost-effective alternatives with your doctor.

Prescription Drug Information by Phone:

You can reach a Caremark Customer Service Representative 24 hours a day, seven days a week at 1-866-209-6093.

Additional Resources

Listed below are additional details about the other benefit resources mentioned in this Bulletin:

The Benefits Web Center is your source for enrollment information, including the Health Plan Comparison Charts. You can also view your health care options, make elections, or make changes to your coverage for 2011. To access the Benefits Web Center:

- **From Work:** Go to Company Home > My Rewards @ Work
- **From Home:** Go to www.MyRewardsAtWork.com

The Benefits Call Center is available if you do not have web access or if you have general questions about your medical or prescription drug coverage. **Please Note:** If you have specific questions about prescription drug coverage, please contact Caremark (see contact information above).

You can reach the Benefits Call Center at 1-877-JPMChase (1-877-576-2427). (*Quick Path:* Enter your Standard ID or Social Security number, Press 1, enter PIN, Press 1.) Representatives are available Monday through Friday, from 8 a.m. to 7 p.m. Eastern Time, except certain U.S. holidays. (The TDD number for individuals with a hearing impairment is 1-800-719-9980.)

*This Bulletin modifies and changes **Your Guide to Benefits at JPMorgan Chase** and is a summary of material modification for certain plans under the JPMorgan Chase U.S. Benefits Program. It supplements, clarifies, and amends various sections of the Guide and the Summary Plan Descriptions, and should be referred to as part of the Guide and the Summary Plan Descriptions. Please retain this information for your records.*

The JPMorgan Chase U.S. Benefits Program is available to most full-time and part-time U.S. dollar-paid, salaried employees who are regularly scheduled to work 20 hours or more a week and who are employed by JPMorgan Chase & Co. or one of its subsidiaries to the extent that such subsidiary has adopted the JPMorgan Chase U.S. Benefits Program. This information does not include all of the details contained in the applicable insurance contracts, plan documents, and trust agreements. If there is any discrepancy between this information and the governing documents, the governing documents will control. JPMorgan Chase & Co. expressly reserves the right to amend, modify, reduce, change, or terminate its benefits and plans at any time. The JPMorgan Chase U.S. Benefits Program does not create a guarantee of employment between JPMorgan Chase and any individual. JPMorgan Chase or you may terminate the employment relationship at any time.

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