

2027 Pharmacy changes

Let's **be well** together.



Review these program updates

Adobe is introducing a few prescription drug coverage changes in 2027. Review the highlights below to understand how they may affect your coverage and out-of-pocket costs.

Lower costs for specialty medications with PrudentRx

In 2027, Adobe is introducing the new PrudentRx program for employees taking eligible specialty medications. PrudentRx helps lower costs by using manufacturer coupon programs, which can eliminate your out-of-pocket costs after you meet your deductible.

There are two important details to be aware of:

- Starting in 2027, only the amount you personally pay out of pocket will count toward your deductible and out-of-pocket maximum — manufacturer coupon dollars will not.
- If you opt out of the program, you'll pay 30% of the total drug cost (once any applicable deductible is met) instead of your standard copay. That full amount will count toward your out-of-pocket maximum.

Here's what you'll pay depending on whether you participate:

	Aetna HealthSave and HealthSave Basic (HDHP)	Aetna HealthSelect (EPO)
If you enroll in PrudentRx:	\$0 once any applicable deductible is met	\$0 — no deductible applies
If you opt out of PrudentRx:	30% of the total drug cost, once any applicable deductible is met	30% of the total drug cost — no deductible applies

If your medication is included in this program ([see list](#)), PrudentRx will contact you directly about enrolling in the program.



Higher costs for brand-name drugs when generics are available

In 2027, if you choose a brand-name drug when a generic equivalent is available, you will be charged the difference in price in addition to your copay. This difference in price does not count toward your deductible or out-of-pocket maximum (OOPM).

Example	Aetna HealthSave (HDHP)	Aetna HealthSelect (EPO)
Brand copay	\$45	\$45
Price difference (brand vs. generic)	\$110	\$110
Before deductible is met	You pay the full negotiated cost of the drug (counts toward your deductible)	N/A — no deductible applies
Once deductible is met	\$45 copay + \$110 price difference = \$155	\$45 copay + \$110 price difference = \$155
Counts toward OOPM	Only the \$45 copay	Only the \$45 copay

Note: HealthSave and HealthSave Basic members pay the full cost of the drug toward their deductible before it's met. The brand copay + price difference example above applies only once the deductible has been satisfied.

New prior authorizations and step therapy requirements

Starting in 2027, certain medications will require prior authorization or trying a lower-cost alternative before they're covered.

- Coverage for continuous glucose monitors will require prior authorization with a confirmed diagnosis of diabetes.
- Certain high-cost migraine medications will require you to try a lower-cost option first before a new prescription is covered. If you are already taking one of these affected medications in 2026, nothing will change for you.
- Certain high-cost topical dermatology medications will require prior authorization when lower-cost topical alternatives are available.