

Your 2018 Prescription Drug Benefit Chart 10/20/40 (with Senior Rx Plus)

Your retiree drug coverage includes Medicare Part D drug benefits and non-Medicare supplemental drug benefits. The cost shown below is what you pay after all benefits under your retiree drug coverage have been provided.

Formulary	Open
Deductible	\$0
Covered Services	What you pay

Part D Initial Coverage

Below is your payment responsibility from the time you meet your deductible, if you have one, until the amount paid by you and the Coverage Gap Discount Program for covered Part D prescriptions reaches your True Out of Pocket limit of \$5,000.

Retail Pharmacy	per 30-day supply (Specialty limited to a 30-day supply)
<ul style="list-style-type: none"> • Select Generics • Generics 	\$0 copay \$10 copay
<ul style="list-style-type: none"> • Preferred Brands 	\$20 copay
<ul style="list-style-type: none"> • Non-Preferred Brands, including Specialty Drugs and Non-Formulary Drugs 	\$40 copay

Typically retail pharmacies dispense a 30-day supply of medication. Many of our retail pharmacies can dispense more than a 30-day supply of medication. If you purchase more than a 30-day supply at these retail pharmacies, you will need to pay one copay for each full or partial 30-day supply filled. For example, if you order a 90-day supply, you will need to pay three 30-day supply copays. If you get a 45-day or 50-day supply, you will need to pay two 30-day copays.

Mail-Order Pharmacy	per 90-day supply (Specialty limited to a 30-day supply; 30-day Retail copay or coinsurance applies)
<ul style="list-style-type: none"> • Select Generics • Generics 	\$0 copay \$20 copay
<ul style="list-style-type: none"> • Preferred Brands 	\$40 copay
<ul style="list-style-type: none"> • Non-Preferred Brands, including Specialty Drugs and Non-Formulary Drugs 	\$80 copay

Covered Services	What you pay
Part D Catastrophic Coverage	
Your payment responsibility changes after the cost you and the Coverage Gap Discount Program have paid for covered drugs reaches your True Out of Pocket limit of \$5,000.	
<ul style="list-style-type: none"> Select Generics 	\$0 copay
<ul style="list-style-type: none"> Generic Drugs 	5% coinsurance with a minimum copay of \$3.35 and a maximum copay of \$10.00 (Specialty limited to a 30-day supply)
<ul style="list-style-type: none"> Brand-Name Drugs 	5% coinsurance with a minimum copay of \$8.35 and a maximum copay of \$20.00 (Specialty limited to a 30-day supply)
Extra Covered Drugs	
These are drugs that are covered by your retiree drug plan that are often excluded from Part D coverage. These drugs do not count towards your True Out of Pocket expenses. They do not qualify for lower Catastrophic copays. These drugs are covered by your Senior Rx Plus benefits.	
Cough and Cold DESI Vitamins and Minerals Lifestyle drugs, including Erectile Dysfunction (ED)	See Formulary for complete list of drugs covered
<ul style="list-style-type: none"> Generics 	You pay your Retail or Mail-Order copay
<ul style="list-style-type: none"> Preferred Brands 	You pay your Retail or Mail-Order copay
<ul style="list-style-type: none"> Non-Preferred Brands 	You pay your Retail or Mail-Order copay
Extra Covered Drugs - California	
These are drugs that are covered on retiree drug plans issued in California. These drugs are often excluded from Part D coverage, but are covered by your Senior Rx Plus benefits. If you have a deductible, it does not apply to these drugs.	
Contraceptive Devices	Copay or coinsurance per Covered Device
<ul style="list-style-type: none"> Prescription 	\$20 copay

- Vaccines:** Medicare covers some vaccines under Part B medical coverage and other vaccines under Part D drug coverage. Vaccines for Flu, including H1N1, and Pneumonia are covered under Medicare medical coverage. Vaccines for Chicken Pox, Shingles, Tetanus, Diphtheria, Meningitis, Rabies, Polio, Yellow Fever, and Hepatitis A are covered under Medicare drug coverage. Hepatitis B is covered under medical coverage if you fall into a high risk category and under drug coverage for everyone else. Other common vaccines are also covered under Medicare drug coverage for Medicare-eligible individuals under 65.
- Senior Rx Plus:** Your supplemental drug benefit is non-Medicare coverage that reduces the amount you pay, after your Group Part D benefits and the Coverage Gap Discount. The copay or coinsurance shown in this benefit chart is the amount you pay for covered drugs filled at network pharmacies.