#### **Prescription Drug Benefits**

Both the Open Access PPO and HMO plans include prescription drug benefits, so you will not need a separate Medicare Part D plan. Prescription drug benefits cover common outpatient medications, like those used to treat blood pressure, cholesterol, depression and arthritis. You will have a copay for each Part D prescription. There is no Part D deductible to meet before your drugs are covered.

Due to Medicare reforms, the most you will pay in 2025 for Part D drugs is \$2,000. In the years that follow, annual limits will be adjusted based on inflation. This cap does not apply to out-of-pocket spending on Part B drugs. Review the Summary of Benefits to understand your costs.

## **List of Covered Drugs (Formulary)**

Your plan has the 5 Tier Premier Formulary.

Within the formulary, you will see that

prescription drugs are placed into tiers. The costs for drugs in each tier are different. Tier 1 includes the drugs prescribed for common conditions and usually cost the least.

#### **Transition Benefit**

You will have a copay for each Part D prescription. There is no Part D deductible to meet before your drugs are covered. You and your provider will be alerted via mail of the transition fill and the requirements needed to continue receiving your drug. Such requirements include your provider submitting a formulary exception by calling the number on your new member ID card or filling out the formulary exception form found on **www.myprime.com**. If the formulary exception is approved, you will pay the non-preferred drug tier cost-share.

**Please note:** Federal law forbids people who have Medicare from using coupons or other discounts with their Part D plan. These may only be used outside of your Part D benefit.



#### **Insulin and Vaccine Costs**

Insulin: You will not pay more than \$35 for a one-month supply of each covered insulin product. It does not matter what cost-sharing tier it is on. Vaccines: Your plan covers most Part D vaccines at no cost to you. The following vaccines are covered under Medicare Part D: Shingles, Tetanus/diphtheria (Td), Tetanus, diphtheria, and pertussis (whooping cough) (Tdap), Hepatitis A and Hepatitis B.

You do not need to meet any required deductible for these items.

#### **Pharmacies Near and Far**

The BCBSTX national pharmacy network includes thousands of locations. All major national retail and grocery pharmacy chains participate in the network, including: Albertsons, Brookshire's, CVS, H-E-B, Kroger, Randalls, Tom Thumb, United Supermarkets, Walgreens, Walmart, and independents.

# Mail order and specialty network pharmacies

Once you enroll in your new plan, you will want to bookmark these websites and save the numbers to your phone:

#### **Mail-Order Pharmacies**

#### **Walgreens Mail Service**

Visit walgreensmailservice.com
Call 1-877-277-7895 TTY 711

#### **Amazon Pharmacy**

Visit **pharmacy.amazon.com**Call **1-855-393-4279** TTY **711** 

# **Express Scripts Pharmacy**

Visit www.express-scripts.com/rx Call 1-833-599-0729 TTY 711

## **Specialty Pharmacies**

#### **Walgreens Specialty Pharmacy**

Visit walgreensspecialtyrx.com
Call 1-877-627-6337 TTY 711

#### Accredo

Visit **www.accredo.com**Call **1-833-721-1619** TTY **711** 

#### Managing your medications.

Your prescription drug plan includes programs designed to encourage safe, cost-effective and appropriate use of medications. These include prior authorization, step therapy and quantity limits. If a drug requires one or more of these programs, it will be noted in the formulary.

#### **Medicare Prescription Payment Plan**

You may opt to pay out-of-pocket drug costs, such as a copay or coinsurance, in installments instead of all at once at the pharmacy. This spreads what you pay over the course of the year. The payment plan may be helpful for people who have high cost-sharing early in the plan year. While the program is for anyone with Part D, it might not be right for everyone. Program details will be included in your welcome guide.

# Do you need financial support for your drugs?

You can apply for Extra Help any time before or after you enroll in Part D. Visit Social Security to learn more at **www.ssa.gov**. Choose 'Medicare,' then 'Apply for Part D Extra Help.'

# Before you enroll, you can search for your medicines online at www.myprime.com.

#### Select 'Medicines,' then:

- 'Find medicines,' followed by
- 'Continue without sign in'

#### Under 'Select Your Health Plan':

- Select BCBS Texas
- Answer 'Yes'
- Scroll to the bottom of the drop-down list and select Blue Cross Group Medicare Advantage (PPO) – 5T Complete or Blue Cross Group Medicare Advantage (HMO) – 5T Complete
- · Click 'Continue'

#### Type your medicine and dosage.

- Review the drug tier and requirements
- Refer to the Summary of Benefits for your cost

**Note:** Formularies will not be available until October 1, 2024. You will not see the HMO plan as an option until then.

#### **About diabetic test strips**

0% cost sharing is limited to diabetic testing supplies (meters and strips) obtained through the pharmacy for Lifescan branded products (OneTouch Verio Flex, OneTouch Verio Reflect, OneTouch Verio IQ, OneTouch Verio, OneTouch Ultra Mini and OneTouch Ultra.)

Prior Authorization will be required for all other diabetic testing supplies (meters and strips) and will be subject to 0% cost sharing. All test strips will also be subject to a quantity limit of 204 per 30 days.

