

# 2011 Prescription drug coverage options



## MedicareBlue<sup>SM</sup> Rx (PDP)

MedicareBlue Rx is a stand-alone prescription drug plan with a Medicare contract. You can choose from two plan options with the same drug tiers but different cost-sharing. MedicareBlue Rx Standard has a deductible you must pay first and then you have copays or coinsurance for your drugs. MedicareBlue Rx Premier does not have a deductible, so coverage starts right away. This plan option also covers Tier 1: Generic Drugs at a small copay in the coverage gap. Both plan options use the same formulary and nationwide network of more than 60,000 pharmacies.

2011 Benefits	MedicareBlue Rx Standard	MedicareBlue Rx Premier
<b>Monthly plan premium</b> – amount you pay	\$39.40	\$104.30
<b>Annual deductible</b> – amount you pay before initial coverage begins	\$310	\$0
<b>Initial coverage</b> – amount you pay for a 31-day supply <ul style="list-style-type: none"> <li>• <b>Tier 1:</b> Generic Drugs</li> <li>• <b>Tier 2:</b> Preferred Brand Drugs</li> <li>• <b>Tier 3:</b> Non-Preferred Brand Drugs</li> <li>• <b>Tier 4:</b> Specialty Tier Drugs</li> </ul>	After you pay the deductible: <ul style="list-style-type: none"> <li>• \$3 copay</li> <li>• \$28 copay</li> <li>• 48% coinsurance</li> <li>• 25% coinsurance</li> </ul>	<ul style="list-style-type: none"> <li>• \$4 copay</li> <li>• \$38 copay</li> <li>• 50% coinsurance</li> <li>• 33% coinsurance</li> </ul>
<b>Coverage gap</b> – amount you pay for a 31-day supply after your total yearly covered prescription drug costs reach \$2,840 <sup>1</sup> <ul style="list-style-type: none"> <li>• Generic drugs</li> <li>• Brand-name drugs</li> </ul>	<ul style="list-style-type: none"> <li>• 93% coinsurance</li> <li>• Up to the discounted amount<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>• \$4 copay for Tier 1: Generic Drugs</li> <li>• 93% coinsurance for all other generic drugs</li> <li>• Up to the discounted amount<sup>3</sup></li> </ul>
<b>Catastrophic coverage</b> – amount you pay for a 31-day supply after you have paid \$4,550 in out-of-pocket prescription drug costs <sup>2</sup>	The greater of \$2.50 copay for generic drugs and \$6.30 copay for all other covered drugs OR 5% coinsurance	The greater of \$2.50 copay for generic drugs and \$6.30 copay for all other covered drugs OR 5% coinsurance

<sup>1</sup>Your “total drug costs” means the total amount you have paid for covered drugs plus what the plan has paid for the calendar year. This does not include the plan premium you pay.

<sup>2</sup>Your “out-of-pocket costs” means the amount you have paid for covered drugs for the calendar year. This does not include the amount the plan has paid or the plan premium you pay

<sup>3</sup>The brand-name drug coverage in the coverage gap is subject to agreements between the Centers for Medicare & Medicaid Services (CMS) and drug manufacturers. Not all brand drugs may be discounted. Call Customer Service if you have questions.

**Enrollment and eligibility:** You are eligible to enroll in MedicareBlue Rx if you are entitled to Medicare Part A and/or enrolled in Medicare Part B and live in the plan's service area. You must continue to pay your Medicare Part B premium, and Medicare Part A if applicable, if not otherwise paid for by Medicaid or another third party. You may enroll in only one Part D plan at a time. If you are enrolled in a Medicare Advantage (MA) coordinated care (HMO or PPO) plan or an MA private-fee-for-service (PFFS) plan that includes Medicare prescription drugs, you may not enroll in a prescription drug plan unless you disenroll from the HMO, PPO or MA PFFS plan. You may enroll in a prescription drug plan if you are a member of a PFFS plan that does not provide Medicare prescription drug coverage, or an MA Medicare Savings Account (MSA) plan, or an 1876 Cost Plan. Members may enroll in MedicareBlue Rx only during specific times of the year.

You may send your enrollment form directly to MedicareBlue Rx by mail or online through our website or by working with an authorized independent agent. Medicare beneficiaries may also enroll in MedicareBlue Rx through the Medicare Online Enrollment Center, located at [www.medicare.gov](http://www.medicare.gov). For more information, contact Customer Service at the number listed at the end of the next column.

**Formulary, pharmacy network, mail order service:**

Formulary and non-formulary drugs are subject to change within a contract year. You will be notified at least 60 days in advance when drugs are removed from the formulary. Drug coverage benefits are subject to limitations. MedicareBlue Rx members must use network pharmacies to access their prescription drug benefit, except under non-routine circumstances when they cannot reasonably use network pharmacies. If applicable, quantity limits and restrictions will apply. Members who use pharmacies outside the network will pay any differential in the non-network pharmacy's charge and the plan's allowable charge. Types of network pharmacies include: retail, mail order, home infusion, long-term care and Indian/Tribal/Urban. The pharmacies in our network can change at any time.

**Extra help:** You may be able to get extra help to pay for your prescription drug premiums and costs. To see if you qualify for extra help, call:

- **1-800-MEDICARE (1-800-633-4227)**. TTY users should call **1-877-486-2048**, 24 hours a day/7 days a week;
- The Social Security Office at **1-800-772-1213** between 7 a.m. and 7 p.m., Monday through Friday. TTY users should call **1-800-325-0778**; or
- Your State Medicaid office.

**Other materials available:** The benefit information provided herein is a brief summary, not a comprehensive description of benefits. For more information, contact the plan. For a Summary of Benefits, formulary, pharmacy directory or information about PrimeMail\* mail order pharmacy service, please call Customer Service at the number listed below or visit [www.YourMedicareSolutions.com](http://www.YourMedicareSolutions.com).

\*PrimeMail is a mail-service pharmacy owned and operated by Prime Therapeutics LLC, an independent company providing pharmacy benefit management services.

**Federal contract:** MedicareBlue Rx's contract with CMS is renewed annually, so enrollment in the plan after 2011 cannot be guaranteed. Either CMS or the plan may choose not to renew the contract, or the plan may choose to change the area it serves. Any such change may result in termination of your enrollment. Benefits, formulary, pharmacy network, premiums and/or copayments/coinsurance may change on January 1, 2012. Please contact Customer Service for details.

**Special needs:** If you have special needs or need translation of this material into another language, alternate formats are available. Please call Customer Service for more information.

**Customer Service:** MedicareBlue Rx Customer Service: **1-866-434-2037**, 8 a.m. to 8 p.m., daily, Central and Mountain Times. TTY hearing impaired users call **711**. You have the option to speak with a licensed sales representative when you call this number. Information is also available online at [www.YourMedicareSolutions.com](http://www.YourMedicareSolutions.com). You can also obtain this information by writing to MedicareBlue Rx Customer Service, P.O. Box 155845, Fort Worth, TX 76155-0845.

MedicareBlue Rx is a Medicare-approved Part D sponsor. Coverage is available to residents of the service area and separately issued by one of the following plans: Wellmark Blue Cross and Blue Shield of Iowa,\* Blue Cross and Blue Shield of Minnesota,\* Blue Cross and Blue Shield of Montana,\* Blue Cross and Blue Shield of Nebraska,\* Blue Cross Blue Shield of North Dakota,\* Wellmark Blue Cross and Blue Shield of South Dakota,\* and Blue Cross Blue Shield of Wyoming.\*

\*Independent licensees of the Blue Cross and Blue Shield Association



**BlueCross BlueShield  
of Minnesota**

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