

HealthChoice High Option Medicare Supplement Plans With and Without Part D

NEW COPAY STRUCTURE FOR NETWORK BENEFITS

There is no annual deductible and no Coverage Gap. There is an annual out-of-pocket maximum. A **52.5%** discount applies to the copay for brand-name drugs after **\$2,970** in total drug spend.

Prescription Medications	30-Day Supply	90-Day Supply
Generic (Tier 1) Drugs	You pay cost of drug up to a maximum copay of \$10	You pay cost of drug up to a maximum copay of \$25
Preferred (Tier 2) Drugs	If cost of drug is \$60 or less, you pay maximum copay of \$15 or cost of drug, if less If cost of drug is more than \$60, you pay 25% of cost up to a maximum copay of \$30	If cost of drug is \$120 or less, you pay maximum copay of \$30 or cost of drug, if less If cost of drug is more than \$120, you pay 25% of cost up to a maximum copay of \$60
Non-Preferred (Tier 3) Drugs	If cost of drug is \$60 or less, you pay maximum copay of \$30 or cost of drug, if less If cost of drug is more than \$60, you pay 50% of cost up to a maximum copay of \$60	If cost of drug is \$120 or less, you pay maximum copay of \$60 or cost of drug, if less If cost of drug is more than \$120, you pay 50% of cost up to a maximum copay of \$120
Specialty (Tier 4) Drugs	For Specialty drugs, including generics, you pay \$60	Specialty drugs are available only in a 30-day supply
Preferred (Tier 5) Tobacco Cessation Drugs	\$0 copay	\$0 copay

THE PHARMACY OUT-OF-POCKET MAXIMUM

Out-of-Pocket Maximum	After Out-of-Pocket is Met
The annual out-of-pocket maximum is \$4,750 . Only copays for covered prescription drugs purchased at Network Pharmacies count toward the out-of-pocket maximum. See the chart above for copay amounts.	After your pharmacy out-of-pocket costs reach \$4,750 , HealthChoice pays 100% of Allowed Charges for covered prescription drugs purchased at Network Pharmacies for the remainder of the calendar year.

Pharmacy benefits generally cover up to a **30-day supply** or a **90-day supply**.