



MedicareBlueSM Rx (PDP)

A Medicare Prescription Drug Plan

2019 enrollment guide



A drug plan that works with your health plan

Original Medicare will help you cover hospital and medical expenses, but when it comes to prescription drugs, you may need additional coverage. MedicareBlue Rx is a prescription drug plan that provides coverage for the drugs you may take today and protects you from the high cost of drugs you may need in the future. With two coverage and cost-sharing options available, you can choose a plan that fits your needs – and your budget.

Convenient coverage with a nationwide pharmacy network

- Coverage you can rely on: MedicareBlue Rx provides coverage for more than 3,000 prescription drugs and our online search tool makes it easy to find out if your drugs are covered
- Accessible pharmacy network: Fill your prescription at more than 67,000 pharmacies across the U.S. or have prescriptions delivered to your home
- Save with special rates: More than 36,000 pharmacies in our network offer preferred cost sharing, meaning you could save with pharmacies like CVS, Target, Walmart, Hy-Vee, Costco and more

Round out your coverage with MedicareBlue Rx

Prescription drug costs are not covered by Original Medicare, so it's important to consider all your coverage options and needs. MedicareBlue Rx could be a good fit for you if:

- You have Medicare Part A, Part B or both
- You are enrolled or plan to enroll in a Medicare Supplement Insurance plan (Medigap)
- You currently take prescription drugs, or think you may in the future

Enrolling in a prescription drug plan can also help you avoid the Part D late enrollment penalty. If you don't enroll in a Part D plan when you first become eligible, you may have to pay a penalty if you decide to enroll later. This penalty is added to your monthly premium and you will pay it for as long as you remain enrolled in a Part D plan.



Enroll now



Online

Visit **YourMedicareSolutions.com** to complete the enrollment process securely online



Phone

Call **1-866-434-2037** (TTY: **711**) daily between 8 a.m. and 8 p.m., Central and Mountain times



Licensed agent

Discuss your options and complete the enrollment process in-person or over the phone



Paper form

Fill out the enrollment form (in the folder pocket) and mail it in the pre-paid envelope

MedicareBlue Rx plan highlights

The chart below shows how much you will pay for your monthly premium and outlines your share of prescription drug costs. Cost sharing may change when you enter another phase of the Part D benefit. Contact our Medicare Solutions specialists or your licensed sales agent with questions.

Please refer to the Summary of Benefits in the folder pocket for detailed information about MedicareBlue Rx plan benefits.

Premiums and benefits	Standard plan		Premier plan	
Monthly plan premium	\$37.90		\$89.70	
Deductible	\$0 on Tier 1 and 2 drugs \$415 on Tiers 3, 4 and 5 drugs		\$0	
Initial coverage Amount you pay for a 30-day supply Tier 1: Preferred generic Tier 2: Generic Tier 3: Preferred brand Tier 4: Non-preferred drug Tier 5: Specialty	Preferred cost sharing After you pay the applicable deductible \$3 copay \$7 copay 16% coinsurance 35% coinsurance 25% coinsurance	Standard cost sharing After you pay the applicable deductible \$15 copay \$20 copay 25% coinsurance 48% coinsurance 25% coinsurance	Preferred cost sharing \$0 copay \$0 copay 17% coinsurance 45% coinsurance 33% coinsurance	Standard cost sharing \$15 copay \$20 copay 25% coinsurance 50% coinsurance 33% coinsurance
Coverage gap Begins when your total drug costs for the year reach \$3,820 ¹	Generic: 37% of plan cost Brand-name: 25% of plan cost		Tier 1: \$0 copay	Tier 1: \$15 copay
			Tier 2: \$0 copay	Tier 2: \$20 copay
Catastrophic coverage Amount you pay for a 30-day supply after you have paid \$5,100 in out-of-pocket prescription drug costs ²	Generic: 37% of plan cost Brand-name: 25% of plan cost			
	The greater of \$3.40 copay for generic drugs and \$8.50 copay for all other covered drugs, or 5% coinsurance			

¹ Your “total drug costs” include 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.

² Your “out-of-pocket costs” include 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.

Enrollment eligibility and timing




You can enroll in MedicareBlue Rx regardless of your income or health if you meet the following basic eligibility requirements:

- Must have Medicare Part A and/or Part B
- Live in the service area (Iowa, Minnesota, Montana, Nebraska, North Dakota, South Dakota or Wyoming)
- A U.S. citizen or lawfully present in the U.S.

Contact our Medicare Solutions specialists or your local licensed sales agent if you have questions about enrollment eligibility.

When to enroll

Knowing when you can enroll, disenroll and make changes to your prescription drug plan is important so that you can avoid enrollment penalties and lapses in coverage. Review the summary of Medicare enrollment dates below to determine when you can enroll in MedicareBlue Rx.

Time period 	What you can do 	When you can do it 
Initial enrollment period (IEP)	Enroll in a prescription drug plan, Medicare Advantage (MA) plan or MA plan with prescription drug coverage	Three months prior to, the month of, or three months after you turn 65. Or, after month 24 of receiving disability benefits
Annual enrollment period (AEP)	Existing Medicare beneficiaries can enroll in or change to a prescription drug plan, Medicare Advantage (MA) plan or MA plan with prescription drug coverage	Each year from October 15 to December 7 (coverage effective January 1 of the following year)
Open enrollment period (OEP)	Disenroll from a Medicare Advantage (MA) and enroll in another MA plan, with or without Part D coverage, or Original Medicare and, if needed, a stand-alone Part D plan	Each year from January 1 to March 31 (change effective the first of the month after you submit the request)
Special enrollment period (SEP)	Enroll in a prescription drug plan or Medicare Advantage plan	If you qualify for an SEP, you can enroll after your IEP or the AEP has ended

Get the most out of MedicareBlue Rx

Explore our online resources to help you get the most out of your MedicareBlue Rx benefits. The drug list, also called the formulary, and the pharmacy search tool will help you look up your drugs and the pharmacy network. These resources, and many more, are available online.

Drug tiers

It can be difficult to estimate what your prescription drug costs might be, but drug tiers, or levels, can help you make an educated guess. Our drug list includes five drug tiers and, generally, drugs on tier one will be the least expensive while drugs on tier five will be the most expensive.



Search our drug list at
YourMedicareSolutions.com/drugs

Don't see your drug on the drug list?

Your doctor may be able to prescribe a different drug that is covered by MedicareBlue Rx. Your doctor can also submit a request to have your drug covered if no other option is available. Visit **YourMedicareSolutions.com** for details.

Medication Therapy Management program

If you meet certain requirements, MedicareBlue Rx provides a Medication Therapy Management (MTM) program at no cost. The program helps you and your doctor make sure your medications are appropriate for your needs. You may be eligible for this program if you:

- Take eight or more Part D covered maintenance drugs
- Have three or more long-term health conditions, such as asthma and diabetes
- Reach \$4,044 in annual drug costs paid by you and MedicareBlue Rx

Learn more about the eligibility requirements at **YourMedicareSolutions.com**.

Pharmacy network

MedicareBlue Rx has a nationwide network with more than **67,000** pharmacies with each one offering either preferred or standard cost sharing. You will usually pay less when you use one of the **36,000** network pharmacies offering preferred cost sharing.



Search our pharmacy network at
YourMedicareSolutions.com/pharmacy

How to enroll

There are four easy ways for you to enroll in MedicareBlue Rx:



Online

Visit **YourMedicareSolutions.com** to complete the enrollment process securely online



Phone

Call **1-866-434-2037** (TTY: **711**) daily between 8 a.m. and 8 p.m., Central and Mountain times



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Paper form

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Speak the lingo

Annual deductible: Amount you pay before coverage begins.

Catastrophic coverage: Amount you pay for a 30-day supply after you have paid \$5,100 in out-of-pocket prescription drug costs. "Out-of-pocket costs" include the amount you have paid for covered drugs for the calendar year, not including the amount the plan has paid or the plan premium.

Coinsurance: A percentage of the cost you pay toward prescription drugs after your deductible has been met.

Copay: The dollar amount you pay each time you receive a prescription.

Coverage gap: Amount you pay for a 30-day supply after your yearly covered prescription drug costs reach \$3,820. "Total drug costs" include 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 may also hear the coverage gap referred to as the donut hole.

Drug tier: All covered drugs are put on one of five tiers, or levels, in the MedicareBlue Rx formulary. Knowing what tier your drug is on will help you figure out your share of the drug cost. Generally, drugs on tier one will be the least expensive while drugs on tier five will be the most expensive.

Formulary: A list of drugs that is approved by the federal government and covered by MedicareBlue Rx. You may also hear the formulary referred to as a drug list.

Initial coverage: Amount you pay for a 30-day supply after paying the annual deductible.

Premium: A fixed amount that you pay monthly to be a member of MedicareBlue Rx.

Extra help for those who need it

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

- **Medicare**

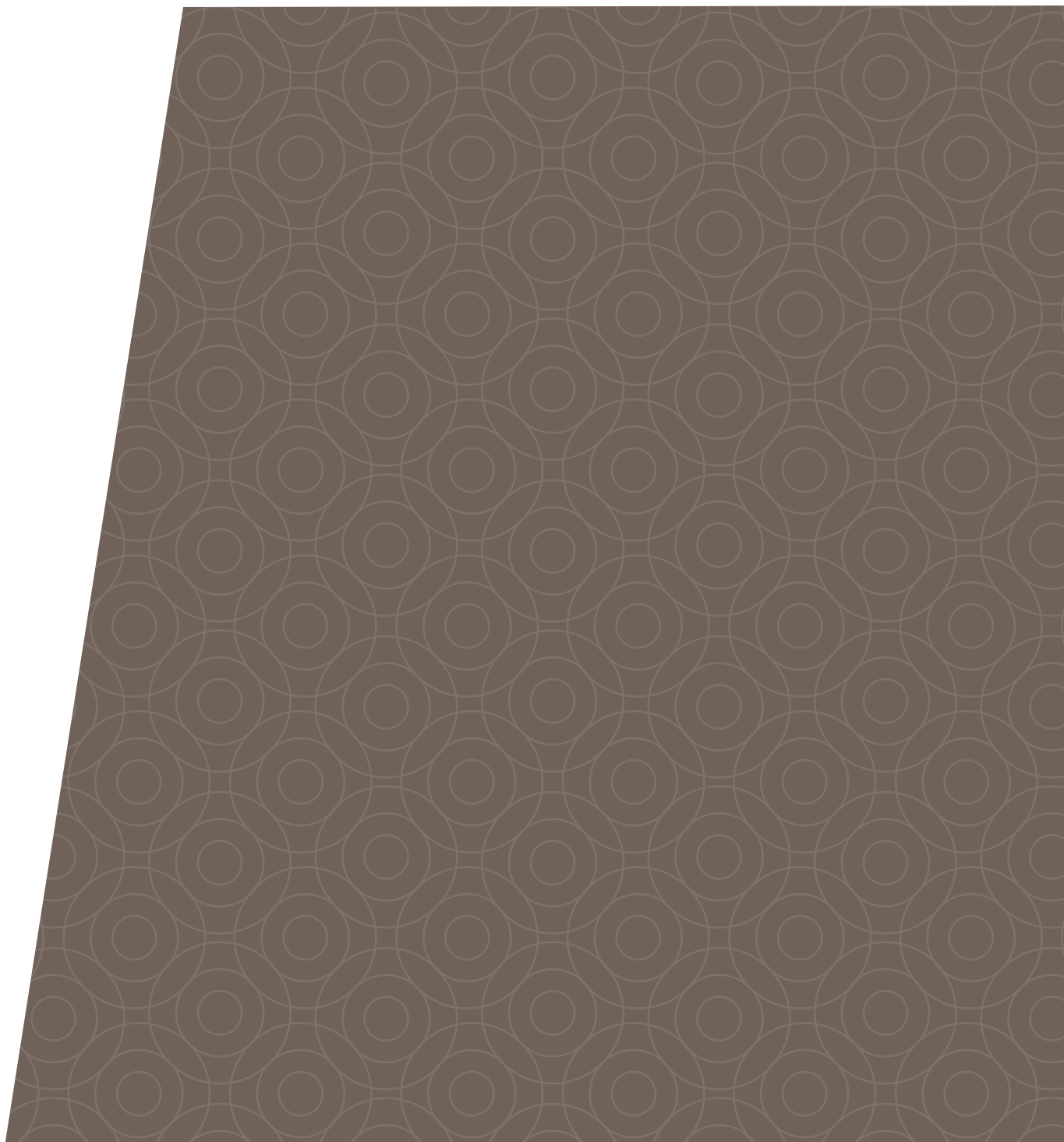
1-800-633-4227 (TTY: **1-877-486-2048**)
24 hours a day, seven days a week

- **Social Security Administration**

1-800-772-1213 (TTY: **1-800-325-0778**)
7 a.m. to 7 p.m., Monday through Friday

- **Your State Medicaid office**







MedicareBlueSM Rx (PDP) is a Medicare-approved Part D sponsor. Enrollment in MedicareBlue Rx depends on contract renewal. 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 licensee of the Blue Cross and Blue Shield Association.

This information is not a complete description of benefits. Call **1-866-434-2037** (TTY: **711**) for more information.