

YOUR BENEFITS GUIDE – PRESCRIPTION DRUG PLAN OPTIONS

Option 2: Electric Boat Retiree Limited Rx Prescription Drug Plan

Like the Unlimited Rx Plan, the **Limited Rx** Plan also qualifies as a Medicare Part D Plan. The Limited Rx plan has the exact same maximum copayment schedule and formulary as the Unlimited Rx Plan - \$15 for generic drugs, \$40 for preferred brands, and \$60 for non-preferred brands and specialty drugs for a 31-day supply at participating **preferred** retail pharmacies and \$30 for generic drugs, \$80 for preferred brands and \$120 for non-preferred brands for a 90-day supply through the Express Scripts home delivery program.

When filling prescriptions at participating **standard** pharmacies, members of the Limited Rx Plan pay \$5 more for each prescription.

However, under the **Limited Rx** plan, once members reach their Initial Coverage Limit of \$4,130 and enter the Coverage Gap, **Limited Rx plan members will pay 25% for their Medicare Part D brand drugs and 95% of the cost of their Medicare Part D brands will count towards their out of pocket maximum or TROOP.** During the Coverage Gap, generic drugs continue to be covered at a maximum \$15 copay for a 31 day supply and a maximum \$30 copay for a 90 day supply through the Express Scripts home delivery program or at 25% of their discounted retail cost – whichever is LESS.

Once the \$6,550 out-of-pocket maximum or TROOP is met, Catastrophic Coverage kicks in and drugs are covered at 5% of the cost of the drug or \$3.70 for generics and \$9.20 for brands –whichever is greater, for the remainder of the calendar year.

Option 3: Electric Boat Retiree Value Rx Prescription Drug Plan

The **Value Rx** Plan is our newest plan and is offered at a lower monthly premium cost but maintains the same comprehensive covered drug list or formulary. Unlike the **Unlimited Rx** and **Limited Rx** plans, the **Value Rx** is a five tier drug plan with two generic drug tiers and lower generic copayments. The **Value Rx** plan offers Preferred (Tier 1) generic drugs at a \$2 copay and Tier 2 generic drugs at a \$10 copay for a 31-day supply when filled at a preferred pharmacy. Brand name drugs are subject to a \$200 calendar year deductible and then preferred brand drugs are covered at a \$40 copay while non-preferred brand drugs are covered at a 40% coinsurance and specialty drugs have a 30% coinsurance. Cost share and copays are slightly higher through standard pharmacies.

When members of the **Value Rx** plan use Express Scripts home delivery, all **generic** drugs are filled at **NO COST** from the beginning of the year to the very end of the year regardless of which Medicare Part D stage the member is in at the time the prescription is filled!

Members using Express Scripts home delivery for brand name drugs will pay \$110 for a 90 day supply for Preferred brand drugs and 40% for non-preferred brands during the Initial Coverage stage. Specialty drugs are usually only filled at a 31 day supply at a time.

Otherwise, once members of the **Value Rx** plan reach their Initial Coverage Limit of \$4,130, Tier 1 and 2 generics are covered at retail at the same maximum copays during the Coverage Gap as in the Initial Coverage stage or at 25% of the discounted retail cost, whichever is LESS. **Value Rx** plan members will pay 25% for their Medicare Part D brand drugs and 95% of the retail cost of their Medicare Part D brands will count towards their out of pocket maximum or TROOP.

YOUR BENEFITS GUIDE – PRESCRIPTION DRUG PLAN OPTIONS

Once the \$6,550 out-of-pocket maximum or TROOP is met, Catastrophic Coverage kicks in and drugs are covered at 5% of the cost of the drug or \$3.70 for generics and \$9.20 for brands – whichever is greater, for the remainder of the calendar year. However, **generics** can continue to be filled at **NO COST** through Express Scripts home delivery!

All three plans, the Unlimited Rx, Limited Rx and Value Rx prescription drug plans share the same list of covered drugs, or prescription drug formulary, however, the Unlimited Rx and Limited Rx plans have a four tier formulary with one tier for generic drugs and the Value Rx plan has a five tier formulary with two tiers for generic drugs.

With respect to the Electric Boat Retiree Unlimited Rx Prescription Drug Plan, there is truly no other alternative like it available in the individual Medicare market. With respect to the Limited Rx and Value Rx plans, while there may possibly be comparable plans available, you will likely find them to have higher copays and cost shares and less comprehensive drug formularies. Please review your options and if one of these alternatives will be beneficial to you, you are welcome to combine one of the four Electric Boat Retiree Medical Plan Options with one of the three Electric Boat Retiree Prescription Drug Options.

On pages to follow in this guide, you will find the top brand name drugs that were most frequently dispensed to Electric Boat retirees and their spouses during 2020. There are two charts that provide copay and cost share information for these brand name drugs. The first chart provides this information for the Unlimited Rx and Limited Rx plans and the second chart provides this information for the Value Rx plan.

These charts also indicate if the brand name drug requires prior authorization, step therapy or has quantity limits. Prior authorization and step therapy requirements entail having your physician submit clinical information regarding your medical and/or prescription drug history or medical diagnosis in order to establish whether or not you meet medical criteria for approval from Express Scripts.

EB Retiree Prescription Drug Plan VALUE Rx

Medicare Part D Prescription Drug Benefit

Provided By Express Scripts Insurance Company

Benefit Period Start	January 1, 2021
Benefit Period End	December 31, 2021
Plan Deductible	\$200 for Brand Name Drugs Only

**During the Initial Coverage Stage, you pay copays until your total drug cost reaches \$4,130
Total drug cost = your copays + payments from the plan**

You pay the following for up to a 31 day supply at a Retail Pharmacy

	Preferred Pharmacies	Standard Pharmacies
Tier 1 Preferred Generic	\$2	\$7
Tier 2 Generic	\$10	\$15
Tier 3 Preferred Brand	\$40	\$50
Tier 4 Non-Preferred	40%	45%
Tier 5 Specialty	30%	33%

You pay the following for up to a 90 day supply at a Retail Pharmacy

	Preferred Pharmacies	Standard Pharmacies
Tier 1 Preferred Generic	\$5	\$15
Tier 2 Generic	\$30	\$40
Tier 3 Preferred Brand	\$120	\$150
Tier 4 Non-Preferred	40%	45%
Tier 5 Specialty*	30%	33%

You pay the following for up to a 90 day supply through Express Scripts Home Delivery

Tier 1 Preferred Generic	\$0
Tier 2 Generic	\$0
Tier 3 Preferred Brand	\$110
Tier 4 Non-Preferred	40%
Tier 5 Specialty*	30%

If your total drug cost reaches \$4,130 in 2021, you enter the Coverage Gap and pay the following cost share until your TRUE out-of-pocket (TROOP) reaches \$6,550:

	Preferred Pharmacies	Standard Pharmacies
Tier 1 Preferred Generic	Lesser of the same generic copay as Initial Coverage Stage or 25%	
Tier 2 Generic	Lesser of the same generic copay as Initial Coverage Stage or 25%	
Tier 3 Preferred Brand	25%	
Tier 4 Non-Preferred	25%	
Tier 5 Specialty*	25%	

Your TRUE out-of-pocket (TROOP) includes any cost you incur for your covered drugs PLUS the 70% pharmaceutical manufacturer discount you receive on brand name drugs while in the Coverage Gap. Once the \$6,550 TROOP is reached in 2021, you enter the Catastrophic Stage and you pay the following for the remainder of the year:

Generic Drugs	Greater of 5% or \$3.70 - except for Tier 1 & 2 generics through Express Scripts Home Delivery remain at \$0 copay.
Brand Name	Greater of 5% or \$9.20
2021 Monthly Premium	\$85.13

*Most specialty medications can only be dispensed up to a 31 day supply.