

# **Verify your Prescriptions on your Plan...**

How your plan will cover your Rx in 2022:

**Drug Tier Levels** and...

**Is a Tier Level 3 preferred Brand drug a flat copay or a % of the retail cost?**

Your plan determines the tier level of each drug included on the plan's formulary. This is what determines the cost you pay at the pharmacy (see also T3 example below):

**Tier 1 (T1)** Preferred generics

**Tier 2 (T2)** Non-preferred, more expensive generics

**Tier 3 (T3)** Preferred Brand drugs

**Tier 4 (T4)** Non-preferred Brand drugs

**Tier 5 (T5)** Specialty drugs, often injectables for serious chronic conditions.

**Optional Tier 6: "Select"** very common preferred generics often priced \$0 or very low copays at preferred pharmacies. Not all plans offer Tier 6 pricing.

Here is an example of a Tier 3 Flat Copay versus a % of the retail price of the drug:

Retail Price	Flat Copay	17% - 22% of Retail
\$450/month	\$35 or \$45/month	\$76.50 to \$99/month

**Use Preferred Pharmacies for special lower copay pricing.**

**Apply to Social Security for Low Income Subsidy/Extra Help.**

**Pharmacies:** While almost every pharmacy (chain or independent) is a part of the Medicare Part D network, most Part D Drug plans contract **special low pricing with selected Preferred Pharmacies** (different for each plan). This can make a HUGE difference in your copays.

Also, most Rx can be filled for 90 days at a retail pharmacy but be aware that you only receive the 90-day 2-for-1 pricing when using the plan's Mail Order Vendor.

**Part D LIS Subsidy:** It never hurts to see if you qualify for **Part D assistance called Low Income Subsidy/Extra Help.** Contact Social Security or go online for the form to apply for your eligibility. You can do this anytime of year and prescription copays drop as soon as you qualify.

**Insulin Savings Program – Is your Insulin covered?**

Medicare has implemented the **Insulin Savings Program** for Part D but **only some plans offer it as part of their Prescription Drug Coverage.** Copays for the insulins on the plan's formulary are very low (such as \$35/mo.) and continue throughout the year, even during the Part D GAP.