## AARP® MedicareRx Preferred (PDP)

This is a short description of your 2023 plan benefits. For complete information, please refer to your Summary of Benefits or Evidence of Coverage. Limitations, exclusions, and restrictions may apply.

## **Plan costs**

	Your Cost	
Monthly premium	\$107.90	
Annual prescription (Part D) deductible	\$0	
Initial coverage stage	Preferred retail cost sharing (in-network 30-day supply)	Standard retail cost sharing (in-network 30-day supply)
Tier 1: Preferred Generic	\$7 copay	\$15 copay
Tier 2: Generic <sup>1</sup>	\$12 copay	\$20 copay
Tier 3: Preferred Brand	\$47 copay	\$47 copay
Select insulin drugs <sup>2</sup>	\$35 copay	\$35 copay
Tier 4: Non-Preferred Drug	40% coinsurance	45% coinsurance
Tier 5: Specialty Tier	33% coinsurance	33% coinsurance
Coverage gap stage	Tier 1 and Tier 2 drugs are covered in the gap. For covered drugs on other tiers, after your total drug costs reach \$4,660, you pay 25% coinsurance for generic drugs and 25% coinsurance for brand name drugs during the coverage gap	
Catastrophic coverage stage	After your total out-of-pocket costs reach \$7,400, you will pay the greater of \$4.15 copay for generic (Including brand drugs treated as generic), \$10.35 copay for all other drugs, or 5% coinsurance	

<sup>1</sup> Tier includes enhanced drug coverage

## <sup>2</sup> You will pay a maximum of \$35 for each 1-month supply of Part D select insulin drug through all coverage stages.

Includes **\$0** for a 90-day supply of Tier 1 and Tier 2 medications (typically generic drugs) through our Preferred Mail Service Pharmacy. \$0 copay is applicable for Tier 1 and Tier 2 medications during the initial coverage phase and may not apply during the coverage gap; it does not apply during the catastrophic stage.

This information is not a complete description of benefits. Contact the plan for more information.

AARP<sup>®</sup> MedicareRx Preferred (PDP)'s pharmacy network includes limited lower-cost pharmacies in rural AK, MT, NE, ND, SD and WY. There are an extremely limited number of preferred cost share pharmacies in suburban MT. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including whether there are any lower-cost preferred pharmacies in your area, please call us or consult the online pharmacy directory using the contact information that appears on the booklet cover.



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