

# ORNL's Medicare Supplement Program

## Prescription Drug Coverage

### General Information

As part of ORNL's Medicare Supplement Program, you will be enrolled in prescription drug coverage through Express Scripts. This plan is an enhanced Medicare Part D plan meaning that you will not experience the coverage gap phase (aka, "donut hole") that standard Part D plans have, and the plan covers a larger formulary of prescriptions drugs than standard Part D plans. You will receive an Express Scripts welcome kit in the mail that includes your ID card.

### Cost

Premium	<b>Shared Cost:</b> \$102/month, per person <b>Full Cost:</b> \$204/month, per person Premium will be deducted from your pension each month, or you will be direct billed.			
Out-of-pocket cost	<u>Retail pharmacy fills:</u> \$150 annual deductible for prescriptions filled at a retail pharmacy <u>Home delivery fills:</u> Prescriptions filled by mail order are not subject to a deductible. After meeting the annual retail deductible, you will pay according to the chart below:			
	<b>Tier</b>	<b>Retail Cost-Share after deductible (31-day supply)</b>	<b>Retail Cost-Share after deductible (90-day supply)</b>	<b>Home-Delivery Cost Share (90-day supply)</b>
	Tier 1: Generic	20% coinsurance \$10 minimum	20% coinsurance \$30 minimum	\$15 copayment
	Tier 2: Preferred Brand	30% coinsurance \$10 minimum	30% coinsurance \$30 minimum	\$35 copayment
	Tier 3: Non-Preferred Brand	30% coinsurance \$10 minimum	30% coinsurance \$30 minimum	\$35 copayment
<i>Note: The Plan requires that Medicare Part B prescriptions, such as diabetic test strips and lancets, be processed under Medicare Part B first, then Express Scripts. This will require these prescriptions be purchased at retail.</i>				

### Pharmacy Benefits

While you receive greater benefits by using a network pharmacy, you can go to any pharmacy you choose and still receive prescription benefits. You may call Express Scripts at 1-877-701-9946 for assistance in locating a network pharmacy.

### Home Delivery Option

The home delivery (mail order) option, designed for maintenance drugs, provides up to a 90-day supply of a medication. You will pay the required copayment. Any prescription drugs you currently have on mail order will automatically transfer to this plan.

New prescriptions can be ordered by completing an order form and mailing it with your prescription, or the doctor can send them directly to Express Scripts.

### Contact Information

<b>Mail</b>	Express Scripts P.O. Box 30493 Tampa, FL 33633-0561	<b>Phone</b>	1-877-701-9946
<b>Online</b>	<a href="http://www.express-scripts.com">www.express-scripts.com</a>	<b>Fax</b>	Your doctor should call 1-888-327-9791 for instructions on faxing prescriptions.