



EXPRESS SCRIPTS®
Medicare (PDP)

Life's better when you have a prescription drug plan you can rely on.



2016 PART D PLAN
ENROLLMENT
GUIDE

Thanks for your interest in Express Scripts Medicare.

Dear Medicare Beneficiary:

When it comes to your medication needs, not all stand-alone Part D plans are the same. You deserve reliable coverage and service from people who take your needs to heart.

With **Express Scripts Medicare**[®] (PDP), you get a higher level of care from a team of expert advisors and pharmacy professionals who focus on you and your medications. You also get the peace of mind that comes from having access to the drugs you need, the pharmacies you use and the value you want.

Whether you take several prescription drugs a day, or just a few from time to time, Express Scripts Medicare offers you:

- Coverage for over 3,000 of the most commonly prescribed brand and generic drugs
- \$0 or \$1 generics (Tier 1) at over 28,000 preferred pharmacies, including Walgreens*
- More than 66,000 network pharmacies, including national chains, independent pharmacies and home delivery from the Express Scripts Pharmacy^{SM*}

We invite you to experience the difference that having the right drug plan can make. Please review this booklet and talk with one of our Express Scripts Medicare Advisors today. We're here to help anytime, whether you just have questions or are ready to enroll.

Sincerely,

Your Express Scripts Medicare Team



We're here to give you the care and support you deserve.

Our specially trained advisors can help you choose the right plan now and find ways to help you save all year. You can also talk to a pharmacist anytime, day or night, once you join. Whenever you have questions, call us. We're right here in the U.S. and always ready to help.

Join Express Scripts Medicare today.



1.866.477.5704

An Express Scripts Medicare Advisor can answer your questions or help you enroll on the phone from 8:00 a.m. to 8:00 p.m., 7 days a week, except Thanksgiving. TTY users, call **1.800.716.3231**.



Express-ScriptsMedicare.com

Check to see if your drugs are covered, compare plan prices, locate a pharmacy and enroll anytime.

Keep these **four Cs** in mind when choosing a Medicare Part D plan.



Selecting a prescription plan is easier when you know what to look for and how to get more value for your Medicare dollar. **Just remember these four Cs:**



Coverage

Look for a plan that covers your drugs.

- Our broad list of brand and generic drugs includes those most commonly prescribed for Medicare members
- If your drug isn't covered, our pharmacists can suggest alternatives that you and your doctor can consider



Cost

Just because a plan has a low premium doesn't mean it offers you better value. Always consider the overall cost of the plan, which includes:

- Monthly premium
- Yearly deductible
- Copayments or coinsurance that you pay for the prescription drugs you take



Convenience

Make sure your pharmacy is in the plan's network or, even better, that there's a preferred pharmacy near you.

- Our plan has over 66,000 network pharmacies, plus lower costs at over 28,000 preferred pharmacies, including Walgreens*
- If you take any prescription drugs on a regular basis, you may want to choose home delivery with free standard shipping from the Express Scripts Pharmacy*



Care

Don't forget about the value of having excellent care and customer service. As an Express Scripts Medicare member, you'll have 24/7 access to:

- Specially trained advisors who can suggest ways to lower your costs and delay reaching the Coverage Gap
- Pharmacists who can answer questions about all your medications – even in the middle of the night

Did you know:

It could pay to switch to the Part D plan that's right for you.

Look for a plan with the lowest overall cost for the medications you need. Our Express Scripts Medicare Advisors are ready to help.



Whatever your medication needs, we have the Part D plan that's right for you.



Whichever plan you select, you will enjoy lower costs at over 28,000 preferred pharmacies, including Walgreens.*

Value Plan

A great option if you take only a few drugs and use a preferred retail pharmacy.

Annual Deductible	\$360		
	Initial Coverage Stage		
Cost-Sharing, Pharmacy Type and Days Supply	Preferred Home Delivery 90 days	Preferred Retail 31 days	Standard Retail 31 days
Tier 1 Preferred Generic Drugs	\$3	\$0 ^a	\$5 ^a
Tier 2 Generic Drugs	\$6 – \$36	\$2 – \$12	\$10 – \$20
Tier 3 Preferred Brand Drugs	25%	19% – 23%	21% – 25%
Tier 4 Nonpreferred Brand Drugs	50%	48% ^b	50% ^c
Tier 5 Specialty Drugs	25% for a 31-day supply		

Monthly premiums and tiers 2, 3 and 4 copayments/coinsurance may vary by region. For details, please see the Summary of Benefits, visit us online or call an Express Scripts Medicare Advisor. Remember, you must continue to pay your Medicare Part B premium.

a Except in FL (\$1 Preferred Retail; \$6 Standard Retail)

b 45% in CT/MA/RI/VT; 46% in WI

c 47% in CT/MA/RI/VT; 48% in WI



Choice Plan

A great option if you take several long-term generic drugs and want a \$0 deductible.

\$0 for generic drugs (Tiers 1 & 2)
\$360 for all other drugs

Initial Coverage Stage

Preferred Home Delivery 90 days	Preferred Retail 31 days	Standard Retail 31 days
\$0	\$1	\$10
\$5	\$5	\$20
\$126	\$42	\$47
27% – 50%	25% – 48%	27% – 50%
25% for a 31-day supply		

Preferred pharmacies are network pharmacies that have agreed to charge a lower cost for certain prescription drugs. Members may use any of our network pharmacies, but you will typically pay less when you use a **preferred retail** or **preferred home delivery** pharmacy compared to a **standard retail** pharmacy.

Part D Basics

We know that Part D can be confusing. Here's some helpful information to guide you through the **four stages** of a standard Medicare prescription drug plan.

In the **Deductible Stage**, you pay a set amount before your plan begins to pay its share of the cost. The standard deductible for 2016 is \$360. Our Choice plan has a \$0 deductible for generic drugs in Tiers 1 and 2.

The **Initial Coverage Stage** begins after you meet the deductible and continues until your year-to-date total drug costs (the amount you and your plan pay) reach \$3,310. In this stage, you pay a copayment or coinsurance and the plan pays its share of the costs.

The **Coverage Gap Stage** (or Donut Hole) starts after your year-to-date total drug costs exceed \$3,310 and continues until your year-to-date out-of-pocket costs reach \$4,850. In this stage, you pay 58% of the cost for generic drugs and 45% of the cost for brand drugs, excluding dispensing and any vaccine administration fees.

You reach the **Catastrophic Coverage Stage** after your year-to-date out-of-pocket costs exceed \$4,850. During this stage, you pay the greater of \$2.95 or 5% of the cost for generic drugs (including brand drugs treated as generics) and the greater of \$7.40 or 5% of the cost for all other drugs.





EXPRESS SCRIPTS®
Medicare (PDP)

P.O. Box 14720, Lexington, KY 40512

Your plan for reliable:

- ✓ Coverage
- ✓ Cost
- ✓ Convenience
- ✓ Care

3 easy ways to join Express Scripts Medicare.



Phone

Call **1.866.477.5704** from 8:00 a.m. to 8:00 p.m., 7 days a week, except Thanksgiving. An Express Scripts Medicare Advisor can answer your questions and enroll you right on the call. TTY users, call **1.800.716.3231**.



Online

Complete the enrollment form on our secure website at **Express-ScriptsMedicare.com**.



Mail

Complete and sign the enclosed enrollment form and return it in the postage-paid envelope.

Important: You must enroll between October 15 and December 7, 2015, or during a Special Enrollment Period, if applicable. If you're new to Medicare, you can enroll anytime during your Initial Enrollment Period.

*Other pharmacies are available in our network.

Medicare beneficiaries may also enroll in Express Scripts Medicare through the CMS Medicare Online Enrollment Center located at <http://www.medicare.gov>.

This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments and restrictions may apply. Benefits, premiums and/or copayments/coinsurance may change on January 1 of each year. The formulary and/or pharmacy network may change at any time. You will receive notice when necessary.

This information is available for free in other languages. Please call our Customer Service numbers at **1.866.477.5704** (TTY: **1.800.716.3231**). Customer Service is available 24 hours a day, 7 days a week, except Thanksgiving and Christmas.

Esta información está disponible sin cargo en otros idiomas. Llame a los números de Servicio al cliente al **1.866.477.5704** (TTY: **1.800.716.3231**). El Servicio al cliente está disponible las 24 horas del día, los 7 días de la semana, excepto durante Acción de Gracias y Navidad.

Express Scripts Medicare (PDP) is a prescription drug plan with a Medicare contract.
Enrollment in Express Scripts Medicare depends on contract renewal.

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