



Health Insurance Services, Inc.
reliable resources
you can count on

Express Scripts Part D (Rx) Benefits - OPTION 1

Benefit Period: 1/1/2021 through 12/31/2021

Deductible State	You pay a \$0 yearly deductible.		
Initial Coverage Stage	You will pay the following until your total yearly drug costs (what you and the plan pay) reach \$4,130:		
Tier	Retail One-Month (31-day) Supply		Mail Three-Month (90-day) Supply
	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy
Tiers 1-2: Preferred Generic & Generic Drugs	\$0 / \$15	\$5 / \$20	\$0 / \$30
Tier 3: Preferred Brand Drugs	\$60.00	\$65.00	\$150.00
Tier 4: Non-Preferred Brand Drugs	\$100.00	\$105.00	\$250.00
Tier 5: Specialty Tier Drugs	32.5% coinsurance	33% coinsurance	32.5% coinsurance
	Not all drugs are available at a 90-day supply, and not all retail pharmacies offer a 90-day supply. You may receive up to a 90-day supply of certain maintenance drugs (medications taken on a long-term basis) through home delivery from Express Scripts PharmacySM. There is no charge for standard shipping.		
*Coverage Gap Stage / "Donut Hole"	After your total yearly drug costs reach \$4,130, you will continue to pay the same cost-sharing amount as in the Initial Coverage stage, until you qualify for the Catastrophic Coverage stage, and Specialty drugs will cost 25%.		
Prescribed Non - Part D Drugs	Covered; Excluding Lifestyle Drugs		
*Catastrophic Coverage Stage	After your yearly out-of-pocket drug costs reach \$6,550, you will pay the greater of 5% coinsurance or: <ul style="list-style-type: none"> a \$3.70 copayment for covered generic drugs (including brand drugs treated as generics) with a maximum of the above copays a \$9.20 copayment for all other covered drugs, with a maximum of the above copays 		

**A lower-premium plan alternative is available in which brand drugs cost 25% in the Gap Stage and are not capped at a flat copay maximum in the Catastrophic Stage.*



Health Insurance Services, Inc.
reliable resources
you can count on

Express Scripts Part D (Rx) Benefits - OPTION 2

Benefit Period: 1/1/2021 through 12/31/2021

Deductible State	You pay a \$0 yearly deductible.		
Initial Coverage Stage	You will pay the following until your total yearly drug costs (what you and the plan pay) reach \$4,130:		
Tier	Retail One-Month (31-day) Supply		Mail Three-Month (90-day) Supply
	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy
Tier 1: All Generic Drugs	\$5.00	\$10.00	\$10.00
Tier 2: Preferred Brand Drugs	\$40.00	\$45.00	\$80.00
Tier 3: Non-Preferred Brand Drugs	\$75.00	\$80.00	\$180.00
Tier 4: Specialty Tier Drugs	32.5% coinsurance	33% coinsurance	32.5% coinsurance
	Not all drugs are available at a 90-day supply, and not all retail pharmacies offer a 90-day supply. You may receive up to a 90-day supply of certain maintenance drugs (medications taken on a long-term basis) through home delivery from Express Scripts PharmacySM. There is no charge for standard shipping.		
*Coverage Gap Stage / "Donut Hole"	After your total yearly drug costs reach \$4,130, you will continue to pay the same cost-sharing amount as in the Initial Coverage stage, until you qualify for the Catastrophic Coverage stage, and Specialty drugs will cost 25%.		
Prescribed Non - Part D Drugs	Covered; Excluding Lifestyle Drugs		
*Catastrophic Coverage Stage	After your yearly out-of-pocket drug costs reach \$6,550, you will pay the greater of 5% coinsurance or: <ul style="list-style-type: none"> • a \$3.70 copayment for covered generic drugs (including brand drugs treated as generics) with a maximum of the above copays • a \$9.20 copayment for all other covered drugs, with a maximum of the above copays 		

**A lower-premium plan alternative is available in which brand drugs cost 25% in the Gap Stage and are not capped at a flat copay maximum in the Catastrophic Stage.*



Health Insurance Services, Inc.
reliable resources
you can count on

Express Scripts Part D (Rx) Benefits - OPTION 3

Benefit Period: 1/1/2021 through 12/31/2021

Deductible State	You pay a \$0 yearly deductible.		
Initial Coverage Stage	You will pay the following until your total yearly drug costs (what you and the plan pay) reach \$4,130:		
Tier	Retail One-Month (31-day) Supply		Mail Three-Month (90-day) Supply
	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy
Tier 1: All Generic Drugs	\$0.00	\$5.00	\$0.00
Tier 2: Preferred Brand Drugs	\$30.00	\$35.00	\$60.00
Tier 3: Non-Preferred Brand Drugs	\$60.00	\$65.00	\$120.00
Tier 4: Specialty Tier Drugs	32.5% coinsurance	33% coinsurance	32.5% coinsurance
	Not all drugs are available at a 90-day supply, and not all retail pharmacies offer a 90-day supply. You may receive up to a 90-day supply of certain maintenance drugs (medications taken on a long-term basis) through home delivery from Express Scripts PharmacySM. There is no charge for standard shipping.		
*Coverage Gap Stage / "Donut Hole"	After your total yearly drug costs reach \$4,130, you will continue to pay the same cost-sharing amount as in the Initial Coverage stage, until you qualify for the Catastrophic Coverage stage, and Specialty drugs will cost 25%.		
Prescribed Non - Part D Drugs	Covered; Excluding Lifestyle Drugs		
*Catastrophic Coverage Stage	After your yearly out-of-pocket drug costs reach \$6,550, you will pay the greater of 5% coinsurance or: <ul style="list-style-type: none"> a \$3.70 copayment for covered generic drugs (including brand drugs treated as generics) with a maximum of the above copays a \$9.20 copayment for all other covered drugs, with a maximum of the above copays 		

**A lower-premium plan alternative is available in which brand drugs cost 25% in the Gap Stage and are not capped at a flat copay maximum in the Catastrophic Stage.*

Premier Senior Health Plan (PSHP) - Group Medicare Part D Plans in 2021

What is an EGWP? An Employer Group Waiver Plan is a standalone group Medicare Part D plan, the acronym for which is pronounced “egg whip.” It is typically sponsored by an employer or union alongside a group Medicare Supplement. PSHP uses Express Scripts as its EGWP pharmacy benefits manager (PBM).

How is an EGWP different from an Individual Part D or MAPD plan? EGWP’s have broader formularies than individual Medicare Part D plans. A formulary is the list of medications covered by a plan. Also, EGWP’s cover prescribed non-Part D medications for purposes such as weight-loss, high-dose vitamins, and more.

Is there protection from the Donut Hole? Yes. There are plans available with full coverage in the donut hole. This means that once members reach the coverage gap that is part of all individual Part D and MAPD plans, there’ll be no surprise generic and brand increases to 25% coinsurance at the point of sale. The copays in the Initial Coverage phase will remain intact for the member if he or she ever reaches this common coverage gap.

How does the Catastrophic Stage work with an EGWP? The Catastrophic Phase of coverage takes effect at the same point and works the same way in EGWP coverage as with individual Part D and MAPD plans. However, if a member reaches the Catastrophic phase, no generic or brand name cost will ever surpass the copays or coinsurance amounts in the Initial Coverage Phase of the plan. This protection for the member is known as a Catastrophic “wrap.” As with individual plans, specialty drugs have a 5% coinsurance max

Preferred & Standard Pharmacies: There are some chain and independent pharmacies that are “Standard.” At these locations, members will pay \$5 more in copay per tier for generic and brand drugs, and 0.5% more in coinsurance for specialty drugs. However, most independent and chain pharmacies nationwide are Preferred.

What type of customer service and advocacy can be expected? If members have any questions about medication availability, receive any letters in the mail from Express Scripts (such as formulary exceptions or prior authorizations), or have any questions about the plan or Medicare Part D in general, then we are here to help. If need be, we will work with their doctor(s) and pharmacist(s) to ensure that medications are received in a timely manner. We encourage members call Premier Senior Health Plan (PSHP) directly with any questions.

EGWP Design Enhancements

	Part D Benefit Stage	Rx Spend	Standard Part D Plan	EGWP Enhancements Plan Design Examples
1	Deductible	\$0-\$445	Member pays 100% of the network discounted cost	<ul style="list-style-type: none">Eliminate or reduce the deductibleMake deductible channel or drug specific (ie: brand or retail only)
2	Initial Coverage	\$446-\$4,130	The member pays the applicable co-payment/co-insurance	<ul style="list-style-type: none">Modify the initial coverage limit (greater than \$4,130) to eliminate part/all of the Coverage GapModify copay/coinsurance
3	Coverage Gap	\$4,131-\$6,550 TrOOP	Coverage Gap Discount Program (70% discount on “applicable” drugs) Coinsurance to 25%	<ul style="list-style-type: none">Modify copay/coinsuranceEliminate Coverage Gap altogether
4	Catastrophic Coverage	\$6,550+ TrOOP	The member pays lower co-payment amounts defined by CMS	<ul style="list-style-type: none">Plans cannot exceed the CMS standard member cost share limit*Can put MAXs in place so member cost-share never exceeds master benefit

*For 2021 the Medicare Part D standard limit in the Catastrophic Coverage stage is 5% member, 15% plan, 80% government.

Brokers: Contact PSHP for plan designs, rates, eligibility, sales strategy, proposals, and more. Minimum number of enrollees is two lives age 65+