



Blue Cross Group MedicareRx (PDP)SM



live
your
Blue
lifeSM



Maximize your Part D coverage.

Look inside for details about your group retiree Medicare prescription drug plan.

Keep this information for reference.

Estos materiales están disponibles en español. Póngase en contacto con Servicio al Cliente para obtener ayuda.



Get to know Blue Cross Group MedicareRxSM

Let's talk about your group retiree Medicare Part D prescription drug benefit, including how it works, how to enroll, and what to expect once your coverage begins.

Blue Cross Group MedicareRx helps you stay healthy and protects you against high pharmacy costs.

Medicare Part D covers common outpatient medications, like those used to treat high blood pressure, high cholesterol, depression, and arthritis. These types of prescription drugs are not covered under Original Medicare Part A or Part B.

Due to Medicare reforms, the most out-of-pocket costs you'll pay in 2026 for Part D drugs is \$2,100. Each year, annual limits will be adjusted based on inflation. This cap does not apply to out-of-pocket spending on Part B drugs. Review the Summary of Benefits to understand your costs.

How does Medicare Part D work?

Copay and Deductible

You may have a copay or coinsurance for your prescriptions. You may need to meet a deductible before benefits start. Review the Summary of Benefits to understand the details of your group retiree Part D plan.

List of Covered Drugs (Formulary)

Within the formulary, you will see that prescription drugs are placed into tiers. The costs for drugs in each tier are generally different. Tier 1 includes the drugs prescribed for common conditions and usually cost the least.



Before you enroll, you can search for your medicines online at www.myprime.com.*

Select 'Medicines,' then:

- 'Find medicines,' followed by
- 'Continue without sign in.'

Under 'Select Your Health Plan':

- Select BCBS Illinois.
- Answer 'Yes.'
- Select the Blue Cross Group MedicareRx plan with your drug list.
- Click 'Continue.'

Type your medicine and dosage.

- Review the drug tier and requirements.
- Refer to the Summary of Benefits for your cost.

Your drug list name is located on the Plan Chart in your Enrollment Kit. Call the Education Helpline if you don't have a chart or need help finding out your drug list name.

Insulin and Vaccine Costs

Insulin: You won't pay more than \$35 for a one-month supply of each covered insulin product. It doesn't matter what cost-sharing tier it's on.

Vaccines: Your plan covers most Part D vaccines at no cost to you. These vaccines are covered under Medicare Part D: Shingles, Tetanus/diphtheria (Td), Tetanus, diphtheria, and pertussis (whooping cough) (Tdap), Hepatitis A, Hepatitis B and other vaccines recommended by Advisory Committee on Immunization Practices (ACIP).

You don't need to meet any required deductible for these items.

* MyPrime.com is a pharmacy benefit website owned and operated by Prime Therapeutics LLC, a separate company providing pharmacy benefit management services for your plan.



Managing your medications.

Your prescription drug plan includes programs designed to encourage safe, cost-effective and appropriate use of medications. These include prior authorization, step therapy and quantity limits. If a drug requires one or more of these programs, it will be noted in the online formulary which you can find at www.myprime.com.

Transition Benefit

During your first 90 days of coverage, you may be able to fill a one-month supply of Part D eligible, non-formulary drugs or drugs that have restrictions. You and your provider will be alerted by mail of the transition fill and the requirements needed to continue receiving your drug. Such requirements include your provider submitting a formulary exception by calling the number on your new member ID card or filling out the formulary exception form found on www.myprime.com. If the formulary exception is approved, you will pay the non-preferred drug tier cost-share.

Medicare Prescription Payment Plan

The Medicare Prescription Payment Plan is a payment option that helps you manage your budget when it comes to out-of-pocket drug costs. It spreads costs across monthly payments throughout the plan year, instead of you paying all at once at the pharmacy. While the new payment option might help you manage your expenses, it doesn't save you money or lower your drug costs. While the program is for anyone with Part D, it might not be right for everyone.

Do you need financial support for your drugs?

You can apply for Extra Help any time before or after you enroll in Part D. Visit Social Security to learn more at www.ssa.gov. Choose 'Medicare,' then 'Apply for Part D Extra Help.'

Pharmacies near and far

Our national pharmacy network includes thousands of locations. All major national retail and grocery pharmacy chains participate in the network, including:



Other pharmacies are available in our network.

The following mail order and specialty pharmacies are in the network.

Once you enroll in your new plan, you will want to bookmark these websites and save the numbers to your phone:

Mail-Order Pharmacies

Walgreens Mail Service

Visit www.walgreensmailservice.com

Call **1-888-277-5475** TTY 711

Amazon Pharmacy

Visit <https://pharmacy.amazon.com>

Call **1-855-393-4279** TTY 711

Express Scripts Pharmacy

Visit www.express-scripts.com/rx

Call **1-833-715-0944** TTY 711

Specialty Pharmacies

Walgreens Specialty Pharmacy

Visit www.walgreensspecialtyrx.com

Call **1-877-627-6337** TTY 711

Accredo

Visit www.accredo.com

Call **1-833-721-1619** TTY 711

Please note: Federal law forbids people who have Medicare from using coupons or other discounts with their Part D plan. These may only be used outside of your Part D benefit.

Prime Therapeutics LLC is a pharmacy benefit management company, contracted by Blue Cross and Blue Shield of Illinois (BCBSIL) to provide pharmacy benefit management services. BCBSIL, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics.

Amazon Pharmacy is contracted to provide pharmacy home delivery services to Blue Cross and Blue Shield of Illinois members.

Accredo is a specialty pharmacy that is contracted to provide services to members of Blue Cross and Blue Shield of Illinois. Accredo is a trademark of Express Scripts Strategic Development, Inc.

Express Scripts® Pharmacy is a pharmacy that is contracted to provide mail pharmacy services to members of Blue Cross and Blue Shield of Illinois. Express Scripts® Pharmacy is a trademark of Express Scripts Strategic Development, Inc.

Walgreens Mail Service is contracted to provide mail pharmacy services to members of Blue Cross and Blue Shield of Illinois. Prime Therapeutics LLC provides pharmacy benefit management services for Blue Cross and Blue Shield of Illinois and is owned by 19 Blue Cross and Blue Shield Plans, subsidiaries or affiliates of those plans.

Walgreens Specialty Pharmacy is contracted to provide specialty pharmacy services to members of Blue Cross and Blue Shield of Illinois. Prime Therapeutics LLC provides pharmacy benefit management services for Blue Cross and Blue Shield of Illinois and is owned by 19 Blue Cross and Blue Shield Plans, subsidiaries or affiliates of those plans.

Blue Access for MembersSM

Register for BAMSM at www.mybam.bcbsil.com.

BAM is a secure website and, along with our mobile app, is designed to give you quick, easy access to the health information you need. You can:

- Access your Evidence of Coverage.
- Search for pharmacies.
- See your prescription history.
- Link to **www.myprime.com** to view your drug list/formulary.
- View claims status and up to 18 months of activity.
- Request an ID card or print a temporary ID.
- and much more.



If you already have a BAM account, you will not need to create a new one.



Important details about your new member ID card:

Your member ID card will be mailed to you. You can also find it on BAM. It will have this information:

- **Your name**
- **The name of your group retiree Medicare plan**
- **Your new member ID number**—This number is unique to you.
- **Plan and Group numbers**—These numbers are used by the plan only.
- **Copays**—These are the fixed amounts you may have to pay when you visit a provider.
- **Customer service phone number**
- **Our website**

Be sure to show the new card to your pharmacy. Remind them that your old ID and number are no longer valid, even if you were a BCBSIL member before enrolling in this Medicare Part D plan. If they do not use the new card and number, your benefits cannot be confirmed and there may be delays in processing your claims.

Remember to keep your ID card safe like you would a credit or debit card. You won't need to use your red, white and blue Medicare card at the pharmacy, so don't carry it with you. Keep it secure, not in your wallet.

You may want to update the customer service number you have saved in your phone or other devices with the number listed on the back of your new card.



Frequently Asked Questions about Medicare and Medicare Part D plans.

Q. What is Medicare?

A. Medicare is the federal government health care program designed for people ages 65 and over. Most U.S. citizens earn the right to enroll in Medicare by working and paying their taxes for a minimum of 10 years. The earliest someone who is turning age 65 can sign up for Original Medicare Parts A and B is three months before the month they will turn age 65. Under certain circumstances, people under 65 may be eligible for Medicare.

There are four parts of Medicare related to specific services:

Part A — Hospital coverage

Part B — Medical coverage

Part C — Medicare Advantage Plans (private insurers like BCBSIL that contract with the government to provide Medicare coverage through a variety of insurance products)

Part D — Prescription drug coverage

IMPORTANT: To participate in a group retiree Medicare plan, you will need to enroll in both Parts A and B. If you do not enroll in Medicare Parts A, B and D when you are first eligible, you may be subject to late enrollment penalties.

Q. Where can I find additional Medicare resources?

A. The following websites may be helpful: www.medicare.gov; www.ssa.gov; www.cms.gov.

Q. How do I enroll in Medicare?

A. Medicare enrollment is done through the Social Security Administration. It takes time to process. If you plan to retire at 65, we recommend enrolling three months prior to your 65th birthday.

Most people should enroll in Medicare Part A (hospital coverage) during the Initial Enrollment Period. This is the period during which you can

enroll in Medicare for the first time. It is a seven-month period that begins three months before the month you turn 65, includes the month you turn 65, and runs for three months after the month you turned 65. For example, if you were born in June, your window to enroll is March 1 through September 30. SSA will send you enrollment instructions at the beginning of your IEP.

If you're already receiving Social Security benefits, you will be automatically enrolled in Medicare Part A at the start of your IEP. However, you will need to contact SSA to sign up for Part B. If you do not receive instructions from the SSA, call **1-800-772-1213** (TTY **1-800-325-0778**) or go to www.ssa.gov to enroll in Medicare.

Q. When will my Medicare Parts A and B coverage be effective?

A. Coverage is effective on the first day of the month following the date the application was processed or the Medicare Parts A and B effective date, whichever is later.

Q. Do I need to enroll in both Original Medicare and this Medicare Part D plan?

A. You have two separate enrollments: Original Medicare and this plan. Enrollment in Medicare Parts A and B through the federal government is required to be eligible for any Medicare plans, including this group retiree plan. To have full coverage, you must sign up for Medicare Parts A and B and continue to pay any required premiums. You will need to do this first and get your 11-character Medicare Beneficiary Identifier before you can enroll in your group retiree plan.

When enrolling in your Medicare Part D plan, you will provide your MBI located on your red, white and blue Medicare card, along with your effective date.



Q. I am already enrolled in a Medicare Part D plan. Will it continue?

A. You can only be enrolled in one Medicare Part D plan at a time. When your enrollment in this group retiree plan is final, Medicare will automatically cancel your previous Medicare Part D plan coverage. We can offer support as you go through this change.

Q. When will my group retiree Medicare Part D plan start?

A. Coverage is effective on the first day of the month following the date your application was processed or your Medicare Part A and Part B effective date, whichever is later.

Q. When will I get my new Medicare Part D member ID card?

A. You should receive it within 10-14 days after Medicare approves your enrollment. You will receive three separate mailings: an acknowledgment letter followed by a confirmation letter and then your new card.

Q. What are the costs of Medicare outside my group retiree plan?

A. Part A will not cost you anything if you or your spouse paid into Social Security for a minimum of 10 years. You pay a premium each month for **Part B**. Most people will pay the standard premium amount. Your Part B premium will be automatically deducted from your benefit payment if you get benefits from one of these:

- Social Security
- Railroad Retirement Board
- Office of Personnel Management

If you don't get these benefit payments, you will receive a Part B premium bill.

Part B and Part D monthly premiums change each year. And, if your income is above a certain limit, you'll pay a surcharge to the government in addition to your premium. This is called **IRMAA**: Income-Related Monthly Adjustment Amount. Any Part B and Part D IRMAA surcharge is based on the modified adjusted gross income reported on your IRS tax return from two years ago. A notice from Medicare will be mailed to those who will pay the IRMAA surcharge(s).

If you've had a life-changing event that reduced your household income, you can ask Social Security to lower the additional amount you'll pay.

Q. What happens if I do not pay my Part B premiums?

A. Non-payment of Part B premiums and/or IRMAA surcharges will result in termination of coverage.

Q. Can my spouse or partner be on a different plan?

A. All Medicare-based plans are individual plans. A retiree and their eligible spouse/partner each enroll as individuals, even if they choose the same plan.

Q. Can I continue to use manufacturer coupons and/or discount cards with this plan?

A. Federal law forbids people who have Medicare from using coupons or other discounts with their Part D plan. These may only be used outside of your Part D benefit.

Q. Are there resources to help with the high cost of drugs?

A. Financial assistance to help with the costs of prescription drugs, like deductibles and copays, may be available through the government's Low Income Subsidy program, also called Extra Help. You can apply for it any time. Visit the Social Security web site at www.ssa.gov and click 'Medicare,' then 'Apply for Part D Extra Help'.

Q. Will I receive a periodic Medicare Part D statement?

A. You will receive your Explanation of Benefits from Blue Cross and Blue Shield of Illinois. How often you receive one depends on how often you fill a prescription. The EOB is a statement, not a bill. It simply details what you have paid and indicates the level of benefits you've used.





Questions about your group retiree Medicare plan?

Talk to your benefit administrator or refer to the plan documents for details.

Or call the Education Helpline for more information. 1-877-842-7564 (TTY 711)

We are open October 1 – March 31: Daily, 8:00 a.m. to 8:00 p.m., Local Time

April 1 – September 30: Monday through Friday, 8:00 a.m. to 8:00 p.m., Local Time.

Alternate technologies (for example, voicemail) will be used on weekends and holidays.

Prescription drug plans provided by Blue Cross and Blue Shield of Illinois, which refers to Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC), an Independent Licensee of the Blue Cross and Blue Shield Association. A Medicare-approved Part D sponsor. Enrollment in HCSC's plans depends on contract renewal.