

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

	Value Plan			Choice Plan		
	A great option if you take only a few drugs and use a preferred retail pharmacy.			A great option if you take several long-term generic drugs and want a ^{\$} 0 deductible.		
Annual Deductible	\$360			\$0 for generic drugs (Tiers 1 & 2) \$360 for all other drugs		
Cost-Sharing, Pharmacy Type and Days Supply	Preferred Home Delivery 90 days	Preferred Retail 31 days	Standard Retail 31 days	Preferred Home Delivery 90 days	Preferred Retail 31 days	Standard Retail 31 days
Tier 1 Preferred Generic Drugs	\$3	\$0 ^a	\$5ª	\$0	\$1	\$10
Tier 2 Generic Drugs	\$6 - \$36	\$2 - \$12	\$10 - \$20	\$5	\$5	\$20
Tier 3 Preferred Brand Drugs	25%	19% - 23%	21% - 25%	^{\$} 126	\$42	\$47
Tier 4 Nonpreferred Brand Drugs	50%	48 ^{%^b}	50 ^{%°}	27% - 50%	25% - 48%	27% - 50%
Tier 5 Specialty Drugs	$25^{\%}$ for a 31-day supply			25% for a 31-day supply		

Walgreens

Enjoy lower costs at over 28,000 preferred pharmacies, including Walgreens.* Pricing above applies during the Initial Coverage stage after any annual deductible is met. Premiums and tiers 2, 3 and 4 copayments/coinsurance may vary by region. 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.

Enroll between October 15 and December 7, 2015, or during a Special Enrollment Period, if applicable. New to Medicare? Call us today for answers to your questions about Part D.



1.866.546.8151

Need help choosing a plan? Call us 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

Go online to see if your drugs are covered, compare plan prices, find a pharmacy and enroll anytime.



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

Coverage: Over 3,000 drugs
Cost: \$0 or \$1 generics (Tier 1)
Convenience: 66,000+ pharmacies
Care: 24/7 pharmacists

*Other pharmacies are available in our network.

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 **1.866.546.8151** (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 **1.866.546.8151** (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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