

Plan Year 2026 HealthSelectSM Medicare Rx Plan Pharmacy Benefit Overview



A PDF of this presentation and a recording will be available on the plan website at www.HSMedicareRx.com

CRPCODE: 2407_10631. Photos are for representative purposes only and do not depict actual patients.

TODAY'S HIGHLIGHTS



Pharmacy Benefit Overview



Getting the Most from Your Pharmacy Plan



Ways To Manage Your Pharmacy Benefit



EXPRESS SCRIPTS



- Thousands of national, regional chain and independent neighborhood pharmacies in our network
- 24/7 support via web, mobile app, or calling member services
- Mail Order services & Specialty Pharmacy

PHARMACY OPTIONS TO SUPPORT YOUR NEEDS



SHORT-TERM

Express Scripts retail pharmacy network of over 60,000 pharmacies



LONG-TERM

Fill up to 90 days' supply at extended days' supply retail pharmacies or Express Scripts mail order



SPECIALTY

Specialty medications through Accredo or in the retail network

MEDICATIONS ARE DIVIDED INTO 3 TIERS

Medication Tiers	Your costs			
	Retail Network		Extended Day Supply (EDS) Network and Mail Order	
	Retail 30-day supply Non-Maintenance	Retail 30-day supply Maintenance	31–60-day supply	61–90-day supply
Tier 1: Generic Medications	\$10 copay	\$10 copay	\$20 copay	\$30 copay
Tier 2: Preferred Brand Medications	\$35 copay	\$45 copay	\$70 copay	\$105 copay
Tier 3: Non-preferred Brand Medications	\$60 copay	\$75 copay	\$120 copay	\$180 copay

STAGES OF COVERAGE

Deductible

\$50 annual deductible.



Your deductible will reset
every January 1st

Initial Coverage

You pay a copay and the
plan pays the rest.



You stay in this stage
until your total drug costs
reach \$2,100

Catastrophic Coverage

Pay \$0.00 for covered Part D
drugs, and your regular copay for
non-Part D medications.



You stay in this stage for
the rest of the plan year

*Your plan covers additional drugs not normally covered by Medicare Part D. You will have cost sharing for these drugs, regardless of the coverage stage you are in.

GETTING THE MOST FROM YOUR PLAN



Ask your doctor for a generic or a lower-cost alternative



Take your medications as prescribed and set reminders to help you stay on track

Remember that 90-day supply refills on maintenance medications could save you money

A DEEPER DIVE

Important Reminders:

- You will never pay more than \$25 for a 30-day supply of insulin.
- The deductible does not apply to covered insulins, most Part D vaccines, and some preventive medications.
- For less than a full month's supply of certain drugs, you will pay a daily cost-sharing rate.
- Not all drugs are available at a 90-day supply.



WHAT IS A FORMULARY?

A formulary is list of specific drugs that are covered by the Plan. It dictates what drugs are tier 1, tier 2 and tier 3.



IMPORTANT REMINDERS



- The Food and Drug Administration approves a new medication.
- Generic versions of a brand-name medication become available.
- A medication has been withdrawn from the market for **safety reasons**.
- A medication becomes available **without the need of a prescription**.
- **Contact Express Scripts Medicare (PDP) Customer Service** for more information regarding formularies and changes.

ACCREDITO SPECIALTY PHARMACY

Personalized patient care for a wide range of complex
and chronic conditions.



Specialty clinicians are
your guide



An easy route for
getting your medication



Accredo Member
Services:
800-455-8340

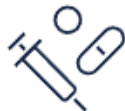
ONLINE TOOLS



Retail Pharmacies

We also have a large pharmacy network, including retail pharmacies.

Find a Pharmacy



Price a Medication

We'll make it easy to check medication costs.

Price a Medication

If you are receiving "Extra Help", otherwise known as Medicare Extra Help, the cost of your medication will be reduced. Please contact us toll-free at 1-800-445-7534 for more information.

Easily view the cost of medications by brand or generic, 30 or 90 days, and multiple pharmacy options

Price a Medication

Atorvastatin Calcium

Generic drug name for Lipitor
[Atorvastatin drug options](#) | [Drug details](#)

Strength	I take or use	Frequency of use	
20 mg Tablet	1 each	Daily	

Atorvastatin Calcium 20 Mg Tablet
78704

Coverage	30-day	90-day
Coverage rules apply	Not available	\$0.00 Price details
	\$0.00 Price details	\$0.00 Price details

Cvs #01430
2101 S Lamar Blvd Unit B
Austin, TX 78704-4921
(512) 383-9522

Walgreens #01933
2501 S Lamar Blvd
Austin, TX 78704-4750
(512) 443-7534



PRIOR AUTHORIZATION

MONITORS PRESCRIPTION MEDICATIONS



Makes sure your prescription is suitable for the intended use & covered by your prescription plan



Simply means that more information is needed to see if your plan covers the medication



To get your prior authorization started, contact your doctor's office or call member services at **866-264-4676**



STEP THERAPY HELPS REDUCE COSTS



Safe and proven-effective medication



First-step medications are typically generic and lower-cost brand-name medications



Second-step medications are best suited for the few patients who don't respond to first-step medications



DON'T MISS YOUR SHOT TO PROTECT YOURSELF



- Vaccinations are covered by your prescription plan at participating retail pharmacies

- Common vaccines covered under your plan include shingles, tetanus, hepatitis A & B, RSV, and more

- Don't forget to present your ID card to the pharmacist

MEDICINE AT YOUR DOORSTEP

Convenient mail order from Express Scripts® Pharmacy



Express Scripts® Pharmacy will contact your doctor to get your new prescription if you choose this option



Delivered straight to your door with free standard shipping, with auto-refills and reminders available



Talk with a pharmacist by phone 24/7

PRESCRIPTION ID CARD

EVERNORTH[®] HEALTH SERVICES		HealthSelect[®] Medicare 
Express Scripts Medicare [®] (PDP) Prescription ID Card		
RxBIN	610014	
RxPCN	MEDDPRIME	
RxGrp	XXXXXXXX	
Issuer (80840)	9151014609	
ID No.	AZZA27012308	
Name	JOHN Q. SAMPLE	
Issued	XX/XX/XXXX	
		MedicareRx Prescription Drug Coverage  CMS-S5660-801



Includes important information



Customer service telephone number



Digital prescription ID card available

www.HSMedicareRx.com



[Find a Pharmacy](#)

[Price a Medication](#)

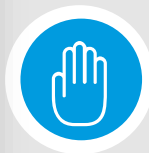
[Resources](#)



Welcome HealthSelectSM
Medicare Rx Prescription Drug
Program participants

[Log In](#)

Don't have an account? [Register](#)



Preview helpful information including plan details, medication prices and covered medications



Locate a pharmacy near you



Learn more about Express Scripts and how to get started.

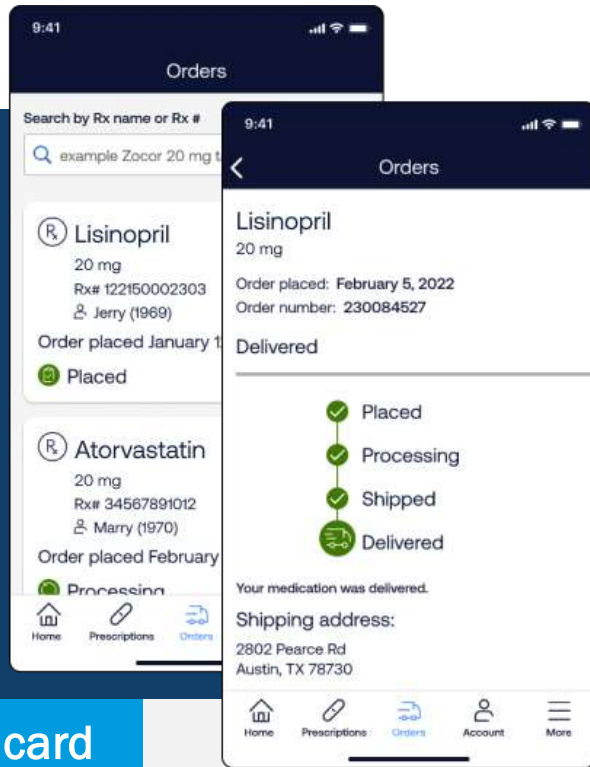
RESOURCES FOR YOU

Create your digital profile at HSMedicareRx.com or on the **Express Scripts® mobile app** for services including:

- Your digital ID card
- Lower-cost medication options
- Nearby, in-network pharmacies
- Easy medication refills
- Home delivery with order tracking



Call the customer service number on your ID card
– available 24/7 for general support or to talk to a
specially trained pharmacist.



Thank You!

www.HSMedicareRx.com

Member Services: 866-264-4676

Online tools have never been easier to access and utilize to get the most out of your pharmacy benefit.

QR code to member website:



Download our mobile app. Search Express Scripts® in your app store:

