

HOW MUCH YOU WILL PAY IN 2020	VALUE MEDICARE Rx OPTION	
PRESCRIPTION DRUGS	Retail Pharmacy (30-day supply)	Mail Order (90-day supply)
Annual Deductible	\$435 (excludes preferred generic drugs)	
Initial Coverage Up to a Total Drug Cost of \$4,020*		
Preferred generic drugs (Tier 1)	\$2 for a 30-day supply; \$6 for a 31- to 90-day supply	
Generic drugs (Tier 2)	25%	25%
Preferred brand-name drugs (Tier 3)	25%	25%
Non-preferred drugs (Tier 4)	25%	25%
Specialty drugs (Tier 5; limited to a 30-day supply)	25%	25%
Coverage Gap to TrOOP Maximum of \$6,350**		
Generic drugs***	25%	25%
Brand-name drugs***	25% (plan pays 5% and manufacturer discounts 70%)	
Catastrophic Coverage		
Generic drugs***	The greater of 5% or \$3.60	
Brand-name drugs***	The greater of 5% or \$8.95	

* Includes total combined costs for covered drugs paid by the plan and participant

** True Out of Pocket (TrOOP) includes costs for covered drugs paid by the participant (but not the plan) and manufacturer's discount

*** Including specialty drugs