

What is the Seniors Choice Part D Prescription Plan?

The Seniors Choice Part D Prescription Drug Plan is an EGWP (Employer Group Waiver Plan) 800 Series. In this case, the sponsor is MIFGIT (Merchants Industry Fund Group Insurance Trust). This allows for any CMS eligible member to join our Part D Prescription Drug Plan.

Is this considered Creditable Part D Coverage?

Yes. CMS must approve all EGWP plans before they can be marketed and sold. By enrolling in this plan you will maintain coverage in a Medicare Part D with no penalties.

You may enroll in the Seniors Choice Part D Prescription Drug anytime during the course of the year.

- Since this program is under the EGWP approval by CMS, it allows enrollment the first of any month.
- You are not restricted to the PDP annual open enrollment period established by CMS.



If I am currently enrolled in a PDP and am paying a late enrollment penalty, what happens when I enroll in the Seniors Choice Part D Prescription Plan?

You would continue to pay the same late enrollment penalty that you currently have with your PDP.

If I am currently enrolled in a PDP and am receiving a Low Income Subsidy, what happens when I enroll in the Seniors Choice Part D Prescription Plan?

You would continue to receive the same Low Income Subsidy that you are currently receiving with your PDP.

Do we have an open enrollment period when we can make changes?

Yes, every November 1st through December 31st for a January 1st effective date.

Does this plan require Medicare Parts A & B?

- You may have Part A only or
- Parts A & B

What happens after enrollment?

You will receive a confirmation letter regarding your enrollment from Seniors Choice. Based on your effective date and CMS approval, you will then receive your ID Card and Welcome Kit from Medco.

Distributed by:

Outlook Vision Discount Program is included in all three plans at no additional cost.



Seniors
Choice

800-800-6543

www.seniorschoiceplan.com

**Seniors
Choice**

Nationally distributed and administered by:

mba merchants
benefit admin

Underwritten by:

Medco Medicare
Prescription Plan®(PDP)

2012 Plan Options & Benefits

	Choice		Preferred		Premier
Phase 1: Deductible	\$320 (Brand Only)		\$320 (Brand Only)		\$0
Phase 2: Initial Coverage	Up to \$2930		Up to \$2930		Up to \$2930
31-day supply, you pay					
Generic	\$5		\$5		\$5
Preferred	\$40		\$40		\$40
Non-Preferred Brands	\$70		\$70		\$70
Specialty	\$100		\$100		\$100
90-day supply, you pay					
	Mail Order	Retail Pharmacy	Mail Order	Retail Pharmacy	Retail Pharmacy
Generic	\$10	\$12.50	\$10	\$12.50	\$12.50
Preferred	\$80	\$82.50	\$80	\$82.50	\$82.50
Non-Preferred Brands	\$140	\$145.00	\$140	\$145.00	\$145.00
Specialty	\$200	\$205.00	\$200	\$205.00	\$200.00
Phase 3: Coverage Gap	Amount you pay between the Initial Coverage period and until you reach \$4,700 in out-of-pocket covered prescription drug costs. *50% - After Pharma Discount				
31-day supply, you pay					
Generic	86%		\$5		\$5
Preferred	100%*		100%*		\$80
Non-Preferred Brands	100%*		100%*		\$140
Specialty	100%*		100%*		\$200
90-day supply, you pay					
	Mail Order	Retail Pharmacy	Mail Order	Retail Pharmacy	Retail Pharmacy
Generic	86%	86%	\$10	\$12.50	\$12.50
Preferred	100%*	100%*	100%*	100%*	\$165.00
Non-Preferred Brands	100%*	100%*	100%*	100%*	\$290.00
Specialty	100%*	100%*	100%*	100%*	\$400.00
Catastrophic Coverage	After your yearly out-of-pocket drug costs reach \$4,700, you pay the greater of:				
31-day supply, you pay					
Generic (including Brand drugs treated as Generic):	\$2.60		\$2.60		\$2.60
All Others:	\$6.50		\$6.50		\$6.50
Or the greater of (including Generics):	5% of co-insurance		5% of co-insurance		5% of co-insurance
Monthly Premium	\$62.00		\$90.00		\$298.00
Admin Fee	\$10.00		\$10.00		\$10.00
Total	\$72.00		\$100.00		\$308.00

These plans offer a 90-day supply from the Retail Pharmacy as well as Mail Order. This is done through an additional cost sharing incentive to move members with maintenance medications to Mail Order. After you have received the equivalent of a 90-day supply (or three refills) within a 180-day period, you will be responsible for the higher co-pays listed. After the third refill of maintenance medication, members who have not moved their prescription to Mail Order will pay 40% of the discounted price of the drug with a minimum that varies by plan. If the discounted cost of the drug is less than the minimum, the member pays the higher amount.