

Asuris Medicare Script™ Enhanced (PDP)

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Use this simple comparison of premiums, deductibles, copays and coinsurance to help you determine which Asuris Medicare Script plan best meets your needs.

With both plans you get:

- More than 50,000 pharmacies nationwide to choose from, plus convenient mail-order service (you must use one of the pharmacies in our network, except under non-routine circumstances)
- A monthly explanation of benefits to help you track your out-of-pocket costs
- Virtually no paperwork
- A formulary that includes most Part D-covered prescription drugs

Tiered Pharmacy Benefit in the Deductible/Initial Coverage period	Asuris Medicare Script Enhanced (PDP)	Asuris Medicare Script (PDP)
Deductible	\$100	\$200
Tier 1: Copay for generics	\$4	\$4
Tier 2: Copay for preferred brand-names	\$30	\$30
Tier 3: Copay for non-preferred brand-names	\$56	\$61
Tier 4*: Coinsurance for miscellaneous injectables	30%	27%
Tier 5*: Coinsurance for specialty medications	30%	27%

**Tiers 4 and 5 products are limited to a 30-day supply and may contain generic products.*

Deductible, copays and coinsurance amounts are based on a 30-day supply of medications (31-day supply for long-term care) and are effective Jan. 1, 2010 through Dec. 31, 2010.

With Asuris Medicare Script Enhanced (PDP), you also get:

- Coverage for Tier 1 generic drugs through the Coverage Gap—you pay a \$4 copay per prescription for each 30-day supply

Monthly Premiums:

Asuris Medicare Script™ Enhanced (PDP)	\$92.50
Asuris Medicare Script™ (PDP)	\$74.50

You may be able to get additional help with premiums and prescription costs. Contact Medicare at 1-800-Medicare (1-800-633-4227). TTY or TDD users should call 1 (877) 486-2048, 24 hours a day/7 days a week.

Call Individual Marketing for more information from 8 a.m. to 5 p.m., Pacific time, Monday through Friday, **Toll-free 1 (888) 734-3623**. TTY users should call 711

Prescription drug benefits summary

Asuris Medicare Script (PDP) prescription drug benefits work in three stages: Deductible/Initial Coverage, the Coverage Gap and Catastrophic Coverage.

Deductible/Initial Coverage is in effect until your medication costs reach \$2,830. Both your out-of-pocket costs (including deductible, copays, and coinsurance) and money Asuris pays for your medications count toward that \$2,830 limit.

When you reach the \$2,830 threshold, you enter the **Coverage Gap**. In this stage you pay for all of your own medications until you reach \$4,550 total for the year. The \$4,550 does not include what Asuris has paid.

After the \$4,550 Coverage Gap limit is reached, you enter **Catastrophic Coverage**. You remain in Catastrophic Coverage for the rest of the year and go back to Initial Coverage on Jan. 1.

Below is a summary of how these stages work for each of the plans:

Option	Deductible/ Initial Coverage	Coverage Gap	Catastrophic Coverage
Asuris Medicare Script Enhanced (PDP)	<ul style="list-style-type: none"> ▶ Deductible: \$100 ▶ Your share is \$4/\$30/\$56/30%/30%, depending on the tier. 	You pay \$4 copay per prescription for each 30-day supply for Tier 1 generics; you pay 100% of all other drug costs.	You pay the greater of \$2.50/\$6.30 copay or 5% coinsurance, depending on the tier.
Asuris Medicare Script (PDP)	<ul style="list-style-type: none"> ▶ Deductible: \$200 ▶ Your share is \$4/\$30/\$61/27%/27%, depending on the tier. 	You pay 100% of all drug costs.	You pay the greater of \$2.50/\$6.30 copay or 5% coinsurance, depending on the tier.

Asuris Medicare Script (PDP) is a stand alone prescription drug plan with a Medicare contract. Anyone who resides in Washington and has Part A and/or Part B, may apply. Members must continue to pay their Part B premiums and may not have more than one Part D plan. Benefits, premiums, formularies and pharmacy networks may change in the next contract year.

The benefit information provided is not comprehensive. Additional information should be requested before making a decision about your coverage. Members may only apply at specific times of the year. If you are enrolled in a Medicare Advantage plan you will be automatically disenrolled if you enroll in a PDP.

For full information on network pharmacies and how to obtain mail-order prescription drug service, contact Asuris Medicare Script (PDP) Customer Service at **1 (800) 541-8981**, TTY users should call 711. **FROM Nov. 15 through March 1:** HOURS 8 a.m. to 8 p.m., seven days a week. **AFTER March 1:** HOURS 8 a.m. to 8 p.m., Monday through Friday. Please leave a message on Saturdays, Sundays and holidays, and we will return your call on the next business day.

**Send completed applications to:
P.O. Box 12625, MS S5B, Salem, OR 97309-0625 or fax to 1 (888) 335-2988**

A complete list of limitations and exclusions is available in the Evidence of Coverage which can be found at **www.asuris.com/medicareScript**