

NALC Health Benefit Plan High Option 2024 Medicare Benefits At-A-Glance

When Medicare Part A and Part B are the primary payor, all deductibles, coinsurances and copayments are waived, except for prescription drugs. Always rely on the Plan's official approved brochure (RI 71-009) for complete detailed information of the Plan's benefits when Medicare is not paying for the service or supply.

BENEFIT	YOU PAY	
Hospitalization (no precertification required) Inpatient Medical/Surgical and Mental Health Outpatient	Nothing Nothing	
Physician Care Annual Routine Physical Exam Adult Routine Immunizations and Tests Inpatient and Outpatient Medical and Surgical Care Mental Health and Substance Use Disorder	Nothing Nothing Nothing Nothing	
	<u>Network</u>	<u>Non-Network</u>
Prescription Drugs Retail Pharmacy 1st and 2nd fill	10% of generic cost (5% of cost for asthma, diabetes & hypertension) 20% of Formulary brand cost 40% of Non-formulary brand cost	Full cost at time of purchase – 50%
Mail Order Program 60-day supply 90-day supply	\$7 generic / \$50 Formulary brand / \$75 Non-formulary brand \$10 generic / \$75 Formulary brand / \$110 Non-formulary brand (\$4 generic / \$40 Formulary brand / \$60 Non-formulary brand for asthma, diabetes & hypertension)	
Specialty Drugs Mail Order	\$200 30-day supply / \$300 60-day supply / \$400 90-day supply	

A generic equivalent will be dispensed if it is available, unless your physician specifically requires a brand name. There is a 30-day plus one refill limit at local retail.

Note: You may purchase up to a 90-day supply (84-day minimum) of covered drugs and supplies at a CVS Caremark® Pharmacy or Longs Drugs through our Maintenance Choice Program. You will pay the applicable mail order copayment for each prescription purchased.

Catastrophic Limits

After coinsurance amounts for prescription drugs purchased at a network retail pharmacy and mail order copayment amounts including specialty drugs total \$3,100 per person or \$4,000 per family, network retail coinsurance amounts and specialty drug mail order copayment amounts are waived for the remainder of the calendar year.

When you have Medicare Part D

We waive refill and retail day's supply limitations when Medicare Part D is the primary payor and covers the drug.

This is a summary of some of the features of the NALC Health Benefit Plan High Option. Detailed information on the benefits for the 2024 NALC Health Benefit Plan can be found in the official brochure (RI 71-009). All benefits are subject to the definitions, limitations, and exclusions set forth in the official brochure.