



MedicareBlueSM Rx provides three prescription drug coverage plans and two cost-sharing options for generic, brand name, and specialty drugs at thousands of pharmacies across the U.S.

Premiums and deductible	Select	Standard	Premier
Monthly plan premium	\$17.30	\$80.70	\$113.60
Annual deductible	\$0 on tiers 1 and 2 drugs \$505 on tiers 3 - 5 drugs	\$0 on tiers 1 and 2 drugs \$505 on tiers 3 - 5 drugs	\$0

Preferred cost sharing	Select	Standard	Premier
Initial coverage (30-day supply)	After deductible	After deductible	
Tier 1: Preferred generic	\$0 copay	\$7 copay	\$0 copay
Tier 2: Generic	\$2 copay	\$12 copay	\$0 copay
Tier 3: Preferred brand	21% coinsurance	\$40 copay	20% coinsurance
Tier 4: Non-preferred drug	40% coinsurance	45% coinsurance	40% coinsurance
Tier 5: Specialty	25% coinsurance	25% coinsurance	33% coinsurance

Standard cost sharing	Select	Standard	Premier
Initial coverage (30-day supply)	After deductible	After deductible	
Tier 1: Preferred generic	\$12 copay	\$14 copay	\$15 copay
Tier 2: Generic	\$15 copay	\$19 copay	\$20 copay
Tier 3: Preferred brand	25% coinsurance	\$47 copay	25% coinsurance
Tier 4: Non-preferred drug	50% coinsurance	50% coinsurance	45% coinsurance
Tier 5: Specialty	25% coinsurance	25% coinsurance	33% coinsurance

Coverage gap

Begins when your total drug costs for the year reach \$4,660. Total drug costs include the total amount paid for covered drugs plus what the plan has paid for the calendar year. This does not include the plan premium.

Select	Standard	Premier	
Generic and brand name: 25% of plan cost	Generic and brand name: 25% of plan cost	Preferred Tier 1: \$0 copay Tier 2: \$0 copay	Standard Tier 1: \$15 copay Tier 2: \$20 copay
		For drugs in all other tiers: Generic and brand name: 25% of plan cost	

Catastrophic coverage

Amount you pay for a 30-day supply after you have paid \$7,400 in out-of-pocket prescription drug costs. You pay the greater of \$4.15 copay for generic drugs and \$10.35 copay for all other covered drugs, or 5% coinsurance. Out-of-pocket costs include the amount paid for covered drugs for the calendar year. This does not include the amount the plan has paid or the plan premium.

Frequently asked questions

Am I eligible for MedicareBlue Rx?

You can enroll regardless of your income or health if you meet the following eligibility requirements:

- Currently have Medicare Part A, Part B, or both
- Live in the service area (Iowa, Minnesota, Montana, Nebraska, North Dakota, South Dakota, or Wyoming)
- You are a U.S. citizen or lawfully present in the U.S.

How do I know if MedicareBlue Rx is right for me?

Prescription drug costs are not covered by Original Medicare, so it's important to consider all your coverage needs. MedicareBlue Rx may be a good fit if you:

- Are eligible for MedicareBlue Rx
- Take prescription drugs, or think you may need to in the future
- Need to fill prescriptions while traveling in the U.S.

Enrolling in a prescription drug plan can also help you avoid the Part D late enrollment penalty.

When can I join?

Most people join a prescription drug plan during their initial enrollment period (IEP) or during the annual enrollment period (AEP), but other options are available. Visit [YourMedicareSolutions.com](https://www.yourmedicare.com) to learn about enrollment periods.

How do I learn more about MedicareBlue Rx or enroll in a plan today?



Online

Learn more about MedicareBlue Rx and complete the enrollment process online at [YourMedicareSolutions.com](https://www.yourmedicare.com)



Phone

Call **1-866-434-2037** (TTY: 711) daily between 8 a.m. and 8 p.m., Central and Mountain times



Licensed agent

Discuss your options and complete the enrollment process in person or over the phone

MedicareBlueSM Rx (PDP) is a Medicare-approved Part D sponsor. Enrollment in MedicareBlue Rx depends on contract renewal. Coverage is available to residents of the service area and separately issued by one of the following plans: Wellmark Blue Cross and Blue Shield of Iowa*; Blue Cross and Blue Shield of Minnesota*; Blue Cross and Blue Shield of Montana*, a division of Health Care Service Corporation, a Mutual Legal Reserve Company; Blue Cross and Blue Shield of Nebraska*; Blue Cross Blue Shield of North Dakota*; Wellmark Blue Cross and Blue Shield of South Dakota*; and Blue Cross Blue Shield of Wyoming*.

*Independent licensee of the Blue Cross and Blue Shield Association.