

# 2020 Summary of Benefits

**Aetna Medicare Rx offered by SilverScript Employer PDP sponsored by City of Boston (Aetna Medicare Rx offered by SilverScript)**

*A Medicare Prescription Drug Plan (PDP) offered by SilverScript® Insurance Company with a Medicare contract*

July 1, 2020 – December 31, 2020



## About Aetna Medicare Rx offered by SilverScript

Aetna Medicare Rx offered by SilverScript Employer PDP sponsored by City of Boston (Aetna Medicare Rx offered by SilverScript) is a Medicare Part D prescription drug plan with any additional coverage to expand the Part D benefits provided by City of Boston. The plan is offered by SilverScript Insurance Company, which is affiliated with CVS Caremark®.

## Plan Costs

This section includes information about your monthly premium, annual deductible (if any), and cost-sharing amounts during the Initial Coverage Stage for Aetna Medicare Rx offered by SilverScript. Although most members do not reach the Coverage Gap Stage (Stage 3) or the Catastrophic Coverage Stage (Stage 4) during the plan year, a summary of your costs in those stages is also included.

### Monthly Premium

Your coverage is provided through a contract with your former employer/union/trust. Your plan benefits administrator will let you know about your plan premium, if any.

### Medicare Part D Drug Payment Stages

All Medicare Part D prescription drug plans have drug payment stages where drug costs may vary. You move through each stage based on the amount either you or the plan spend on prescription drugs. See the following section for information on the Medicare Part D drug payment stages. The Part D *Explanation of Benefits (EOB)* and other plan materials include additional information on the four drug payment stages.

#### Stage 1: Deductible Stage

Because you have no deductible, this payment stage does not apply to you.

#### Stage 2: Initial Coverage Stage Cost Sharing

During the Initial Coverage Stage, you pay a portion of your drug costs, and the plan pays its portion. The following tables show what you pay until your total yearly drug costs reach \$4,020. Total yearly drug costs are the total drug costs paid by both you and Aetna Medicare Rx offered by SilverScript. You may get your drugs at network retail pharmacies or through the mail-order pharmacy.

## 2020 Aetna Medicare Rx offered by SilverScript Summary of Prescription Drug Benefits for City of Boston

Monthly Premium	Your plan benefits administrator will let you know about your plan premium, if any.	
Formulary	GRP B2 (3 Tier)  Please note: Our plan, in some instances, combines higher-cost generic drugs on brand tiers.	
Network	S2	
Deductible	This plan does not have a deductible.	
Initial Coverage Stage		
Your share of the cost when you get a 30-day supply of a covered Part D prescription drug:		
	Standard Network Retail Pharmacy (Up to a 30-day supply)	Long-Term Care (LTC) Pharmacy (Up to a 31-day supply)
Tier 1 Generic Drugs	\$10.00	\$10.00
Tier 2 Preferred Brand Drugs	\$20.00	\$20.00
Tier 3 Non-Preferred Drugs	\$35.00	\$35.00
Your share of the cost when you get a <i>long-term</i> supply (up to 90 days) of a covered Part D prescription drug:		
	Standard Network Retail Pharmacy (Up to a 90-day supply)	Mail-Order Pharmacy (Up to a 90-day supply)
Tier 1 Generic Drugs	\$30.00	\$20.00
Tier 2 Preferred Brand Drugs	\$60.00	\$40.00
Tier 3 Non-Preferred Drugs	\$105.00	\$105.00

**Please Note:** Our plan, in some instances, combines higher-cost generic drugs on brand tiers. Refer to the Drug List to determine the tier of coverage for each drug you take.

### Stage 3: Coverage Gap Stage Cost Sharing

The coverage gap begins after the total yearly drug costs (including what the plan has paid and what you have paid) reaches \$4,020.

Due to the additional coverage provided by City of Boston, you have the same copayments or coinsurance that you had during the Initial Coverage Stage. Therefore, you may see no change in your copayment and/or coinsurance until you qualify for catastrophic coverage.

Coverage Gap Stage		
Your share of the cost when you get a 30-day supply of a covered Part D prescription drug:		
	Standard Network Retail Pharmacy (Up to a 30-day supply)	Long-Term Care (LTC) Pharmacy (Up to a 31-day supply)
Tier 1 Generic Drugs	\$10.00	\$10.00
Tier 2 Preferred Brand Drugs	\$20.00	\$20.00
Tier 3 Non-Preferred Drugs	\$35.00	\$35.00
Your share of the cost when you get a <i>long-term</i> supply (up to 90 days) of a covered Part D prescription drug:		
	Standard Network Retail Pharmacy (Up to a 90-day supply)	Mail-Order Pharmacy (Up to a 90-day supply)
Tier 1 Generic Drugs	\$30.00	\$20.00
Tier 2 Preferred Brand Drugs	\$60.00	\$40.00
Tier 3 Non-Preferred Drugs	\$105.00	\$105.00

**Please Note:** Our plan, in some instances, combines higher-cost generic drugs on brand tiers. Refer to the Drug List to determine the tier of coverage for each drug you take.

### Stage 4: Catastrophic Coverage Stage Cost Sharing

After your yearly out-of-pocket drug costs (including drugs purchased through your retail pharmacy and through mail order) reach \$6,350:

- You pay 5% of the cost of the drug, but not more than your share of the cost in the Initial Coverage Stage (which is listed in the Initial Coverage Stage section of the EOC).

#### Who can join?

To join Aetna Medicare Rx offered by SilverScript, you must be eligible for coverage provided by City of Boston, be entitled to Medicare Part A and/or be enrolled in Medicare Part B, be a United States citizen or be lawfully present in the United States and live in our service area. Aetna Medicare Rx offered by SilverScript is available in the United States and its territories.

## Which drugs are covered?

To find out if your drug is on the formulary (list of Part D prescription drugs) or about any restrictions, call Aetna Medicare Rx offered by SilverScript Customer Care (phone numbers are printed on the back cover of this booklet). You may also request a copy of the complete plan formulary or access it online at [AetnaRetireePlans.com](http://AetnaRetireePlans.com).

**Please note:** City of Boston provides additional coverage that may cover prescription drugs not included in your Medicare Part D benefit. For more information about your share of the cost or which prescription drugs may or may not be covered, please call Aetna Medicare Rx offered by SilverScript Customer Care (phone numbers are printed on the back cover of this booklet).

The following categories are included in your enhanced drug benefit:

- Cosmetic
- Cough and Cold
- Fertility
- Erectile Dysfunction
- Vitamins and Minerals
- Weight Loss

Generic drugs are paid at the lowest generic cost share, and brand drugs are paid at the Preferred Brand cost share. Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include step therapy, prior authorization or quantity limitations.

## How will I determine my drug costs?

Aetna Medicare Rx offered by SilverScript groups each medication into one of three tiers. Use your formulary to find out the tier your drug is on to determine how much it will cost you. The amount you pay depends on the drug's tier and whether you are in the Deductible (if any), Initial Coverage, Coverage Gap, or Catastrophic Coverage Stage. As you move from stage to stage, the amount you and the plan pay for your drugs may change. If the actual cost of a drug is less than the normal copayment or coinsurance for that drug, you will pay the actual cost, not the higher copayment or coinsurance.

## Which pharmacies can I use?

More than 65,000 pharmacies nationwide make up the pharmacy network. These include retail, mail-order, long-term care and home infusion pharmacies. To find a network pharmacy near your home or where you are traveling in the United States or its territories, call Aetna Medicare Rx offered by SilverScript Customer Care (phone numbers are printed on the back cover of this booklet), or visit [Caremark.com](http://Caremark.com).

You generally must use a network pharmacy in order to receive full benefit coverage on your prescriptions. You may get drugs from an out-of-network pharmacy in an emergency, but you may have to pay the full cost (rather than your normal share of the cost) at the time you fill your prescription. If you use an out-of-network pharmacy in an emergency, we will reimburse you your total cost minus your copay amount for the drug. You must submit a paper claim in order to be reimbursed.

*Please note:* After the mail-order pharmacy receives an order, it typically takes up to 10 days for you to receive your prescription drug. You have the option to sign up for automated mail-order delivery. Specialty pharmacies fill high-cost specialty drugs that require special handling. Although specialty pharmacies may deliver covered medicines through the mail, they are not considered "mail-order pharmacies." Therefore, most specialty drugs are not available at the mail-order cost share.

## For more information

This booklet provides a summary of what Aetna Medicare Rx offered by SilverScript covers and what you will pay. To get a complete list of our benefits, please call Aetna Medicare Rx offered by SilverScript Customer Care (phone numbers are printed on the back cover of this booklet) and ask for the *Evidence of Coverage*.

If you want to know more about the coverage and costs of Original Medicare, look in your current *Medicare & You* handbook. View it online at <https://www.medicare.gov> or get a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

The formulary and/or pharmacy network may change at any time. You will receive notice when necessary.

If there is a difference between this document and the Evidence of Coverage (EOC), the EOC is considered correct.

Aetna Medicare Rx offered by SilverScript's retiree pharmacy coverage is an enhanced Part D Employer Group Waiver Plan that is offered as a single integrated product. The enhanced Part D plan consists of two components: basic Medicare Part D benefits and supplemental benefits. Basic Medicare Part D benefits are offered by Aetna Medicare Rx offered by SilverScript based on our contract with CMS. We receive monthly payments from CMS to pay for basic Part D benefits. Supplemental benefits are non-Medicare benefits that provide enhanced coverage beyond basic Part D. Supplemental benefits are paid for by plan sponsors or members and may include benefits for non-Part D drugs. Aetna Medicare Rx offered by SilverScript reports claim information to CMS according to the source of applicable payment (Medicare Part D, plan sponsor or member).

Standalone Prescription Drug Plans are offered by SilverScript, a CVS Health company.

Aetna Medicare Rx offered by SilverScript Employer PDP is a Prescription Drug Plan. This plan is offered by SilverScript Insurance Company, which has a Medicare contract. Enrollment depends on contract renewal.

## Important Plan Information

### Aetna Medicare Rx offered by SilverScript Customer Care

<b>CALL</b>	1-855-334-5057  Calls to this number are free, 24 hours a day, 7 days a week.  Aetna Medicare Rx offered by SilverScript Customer Care also has free language interpreter services available for non-English speakers.
<b>TTY</b>	711  This number requires special telephone equipment and is only for people who have difficulties with hearing or speaking.  Calls to this number are free, 24 hours a day, 7 days a week.
<b>FAX</b>	1-888-472-1129
<b>WRITE</b>	SilverScript Insurance Company P.O. Box 30016 Pittsburgh, PA 15222-0330