



Key Product Benefits

- Fixed copayments and coinsurances
- A comprehensive drug list
- Convenience of nationwide coverage at thousands of pharmacies and mail-order choices
- Save on copays when Preferred Pharmacy is used

		PLAN LANDSCAPE		
		Blue Cross MedicareRx Basic (PDP) SM	Blue Cross MedicareRx Value (PDP) SM	Blue Cross MedicareRx Plus (PDP) SM
Premium	Illinois	\$61.40	\$80	\$147.80
	New Mexico	\$70.60	\$88.30	\$136.10
	Texas	\$59.40	\$86.90	\$154.70
Preferred Pharmacies	Illinois	Health Mart Atlas, Jewel-Osco ¹ , Kroger, Mariano's, Walgreens ¹ , and Walmart		
	New Mexico	Albertsons, Health Mart Atlas ² , Safeway, Smith's ² , Walgreens, and Walmart		
	Texas	Albertsons, Arete, Brookshire, Health Mart Atlas, HEB ³ , Kroger, Leader, Randall's, Walgreens ³ , Walmart		

¹ Only Jewel-Osco and Walgreens are available for the Blue Cross MedicareRx BasicSM Plan in Illinois.

² Health Mart Atlas and Smith's are not available for the Blue Cross MedicareRx Basic Plan in New Mexico.

³ Only H-E-B and Walgreens are available for the Blue Cross Medicare Rx Basic Plan in Texas.

For Agent training only, not intended for marketing/sales activities. Product information subject to change.

Part D Products 2021

Blue Cross MedicareRx (PDP)SM

Effective 1/1/2021

			PLAN LANDSCAPE					
			Blue Cross MedicareRx Basic (PDP) SM		Blue Cross MedicareRx Value (PDP) SM		Blue Cross MedicareRx Plus (PDP) SM	
	Tiers	State	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy
Initial Coverage Period Copays	Tier 1	Illinois	\$1	\$8	\$0	\$7	\$0	\$7
		New Mexico	\$1	\$8	\$0	\$7	\$0	\$7
		Texas	\$1	\$8	\$0	\$7	\$0	\$7
	Tier 2	Illinois	\$4	\$11	\$8	\$15	\$2	\$9
		New Mexico	\$4	\$11	\$8	\$15	\$2	\$9
		Texas	\$4	\$11	\$8	\$15	\$2	\$9
	Tier 3	Illinois	16%	18%	\$40	\$47	\$30	\$37
		New Mexico	12%	14%	\$40	\$47	\$30	\$37
		Texas	13%	15%	\$40	\$47	\$30	\$37
	Tier 4	Illinois	45%	47%	46%	50%	40%	45%
		New Mexico	42%	44%	38%	40%	40%	45%
		Texas	43%	45%	40%	42%	40%	45%
Tier 5	Illinois	25%					33%	
	New Mexico	25%					33%	
	Texas	25%					33%	
Annual Prescription Deductible			\$445 (All Tiers)		\$445 (Tiers 3-5)		\$0	
Gap Coverage The coverage gap begins after the total yearly drug cost (including what the plan and member has paid) reach \$4,130.			Member will pay 25% of the plan's cost for covered Brand Name Drugs and Generic Drugs until their yearly out-of-pocket drug costs reach \$6,550.				Member is fully covered for Tier 1 drugs in the gap. Member will pay 25% of the plan's cost for covered Brand Name drugs and Generic drugs on Tier 2, 3, 4, and 5 until their yearly out-of-pocket drug costs reach \$6,550	
After the Gap Copays			After member's yearly out-of-pocket drug costs (including drugs purchased through retail pharmacy and mail order) reach \$6,550, member will pay the greater of: 5% of the cost, or \$3.70 copay for generic (or brand drugs treated as generics) and a \$9.20 copayment for all other drugs					

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		PLAN LANDSCAPE	
		Blue Cross MedicareRx Choice (PDP) SM	Blue Cross MedicareRx Value (PDP) SM
Premium	Oklahoma	\$21.00	\$89.10
Preferred Pharmacies	Oklahoma	Health Mart Atlas, PPOK, Walgreens, and Walmart	Health Mart Atlas ¹ , PPOK, Walgreens, and Walmart

			PLAN LANDSCAPE		
			Blue Cross MedicareRx Choice (PDP) SM		Blue Cross MedicareRx Value (PDP) SM
	Tiers	State	Standard Pharmacy	Preferred Pharmacy	Standard Pharmacy
Initial Coverage Period Copays	Tier 1	Oklahoma	\$1	\$0	\$7
	Tier 2	Oklahoma	\$4	\$8	\$15
	Tier 3	Oklahoma	\$47	\$40	\$47
	Tier 4	Oklahoma	35%	44%	47%
	Tier 5	Oklahoma	25%	25%	
Annual Prescription Deductible			\$445 (Tiers 3-5)		\$445 (Tiers 3-5)
Gap Coverage The coverage gap begins after the total yearly drug cost (including what the plan and member has paid) reach \$4,130.			Member will pay 25% of the plan's cost for covered Brand Name Drugs and Generic Drugs until their yearly out-of-pocket drug costs reach \$6,550.		Member is fully covered for Tier 1 drugs in the gap. Member will pay 25% of the plan's cost for covered Brand Name drugs and Generic drugs on Tier 2, 3, 4, and 5 until their yearly out-of-pocket drug costs reach \$6,550
After the Gap Copays			After member's yearly out-of-pocket drug costs (including drugs purchased through retail pharmacy and mail order) reach \$6,550, member will pay the greater of: 5% of the cost, or \$3.70 copay for generic (or brand drugs treated as generics) and a \$9.20 copayment for all other drugs		

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