



In the pursuit of health®

**Santa Rosa County BOCC #96107
2019 BlueMedicare Group Rx (Employer PDP)**

Benefits	BlueMedicare Group Rx Option 1
Premium	Included in PPO1Rx1
Annual Deductible	\$0
Retail	31-day Supply
Tier 1 - Preferred Generics	\$10 Copayment
Tier 2 - Generics	\$10 Copayment
Tier 3 - Preferred Brand	\$40 Copayment
Tier 4 - Non-Preferred Brand	\$70 Copayment
Tier 5 - Specialty Drugs	25% Coinsurance
Mail Order	90-day Supply with Mail Order
Tier 1 - Preferred Generics	\$0 Copayment
Tier 2 - Generics	\$0 Copayment
Tier 3 - Preferred Brand	\$80 Copayment
Tier 4 - Non-Preferred Brand	\$140 Copayment
Tier 5 - Specialty Drugs	25% Coinsurance (31-day supply only)
Gap	31-day Supply
Tier 1 - Preferred Generics	\$10 Copayment
Tier 2 - Generics	\$10 Copayment
Tier 3 - Preferred Brand	\$40 Copayment
Tier 4 - Non-Preferred Brand	\$70 Copayment
Tier 5 - Specialty Drugs	25% Coinsurance
Catastrophic	\$3.40 Copayment for generic drugs \$8.50 Copayment for brand drugs

Florida Blue is an Rx (PDP) Plan with a Medicare contract. Enrollment in Florida Blue depends on contract renewal.

Prescription drug copayments do not accumulate towards the health plan-year out-of-pocket maximum.

Part D Creditable Coverage – The enrolling member may incur Part D late enrollment penalties as defined and set by CMS in accordance with Part D guidelines if prior creditable coverage cannot be proven.