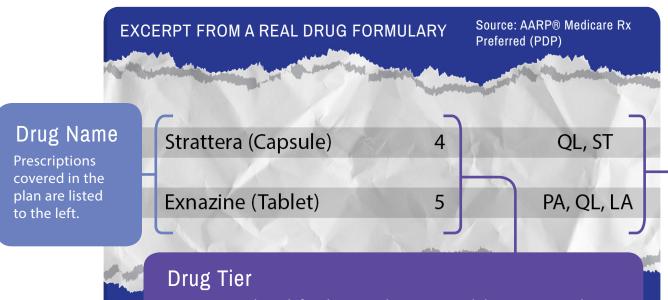
HOW TO READ YOUR DRUG FORMULARY

Understanding your Medicare Part D Prescription Drug plan's formulary is easier than it appears. Know how it's organized and what a few abbreviations mean, and you'll be able to quickly and easily decipher how your coverage works.

WHAT'S COVERED

HOW IT'S COVERED



Most Part D plans define how much you pay and the carrier pays by categorizing each drug into one of five tiers. Generally, tier one is generic — the least expensive — and your cost increases with each tier moving upward. Check your plan description to determine your co-pay or co-insurance.



Questions? Call the Medicare MarketPlace® pharmacist! 1-800-639-0781

Restrictions

The far right column explains any restrictions that may apply to each particular drug. Here's what the abbreviations mean:

PA: Prior Authorization

The plan requires you or your doctor to contact the insurance company for approval before it will cover the drug.

QL: Quantity Limits

The plan will cover only a certain amount of this drug for each copay/co-insurance or over a certain number of days.

ST: Step Therapy

You may be required to try a lower-cost drug for the same medical condition.

LA: Limited Access

Prescription may be available only at certain pharmacies.