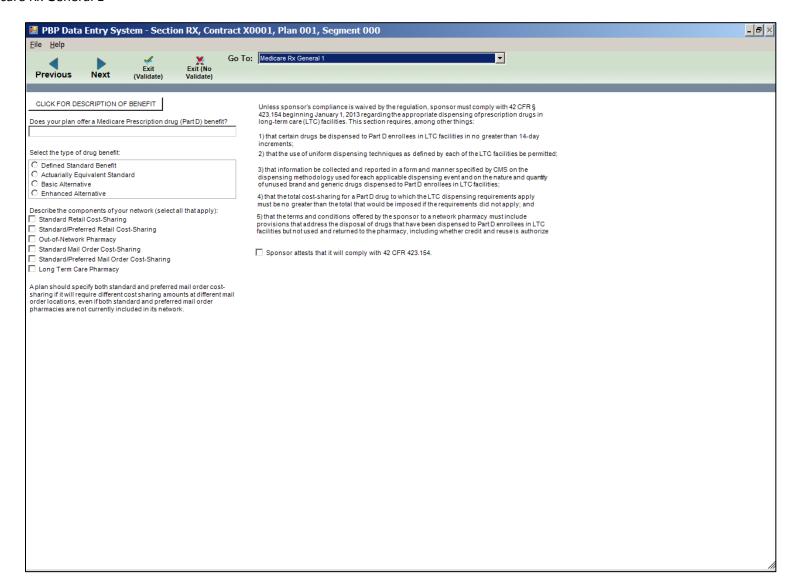
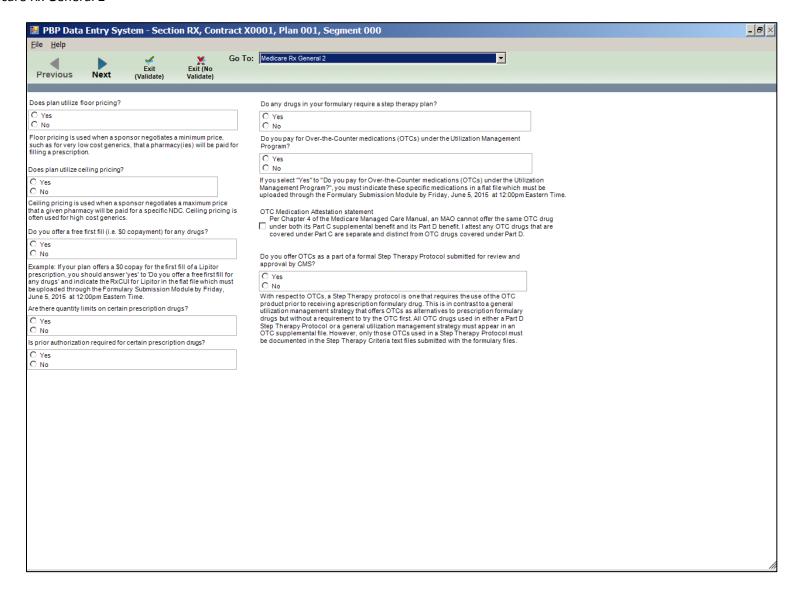
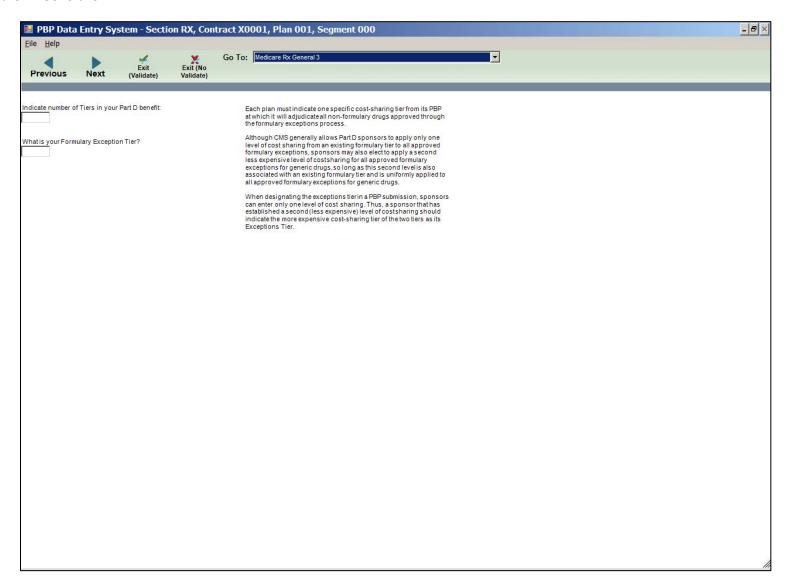
Medicare Rx General 1



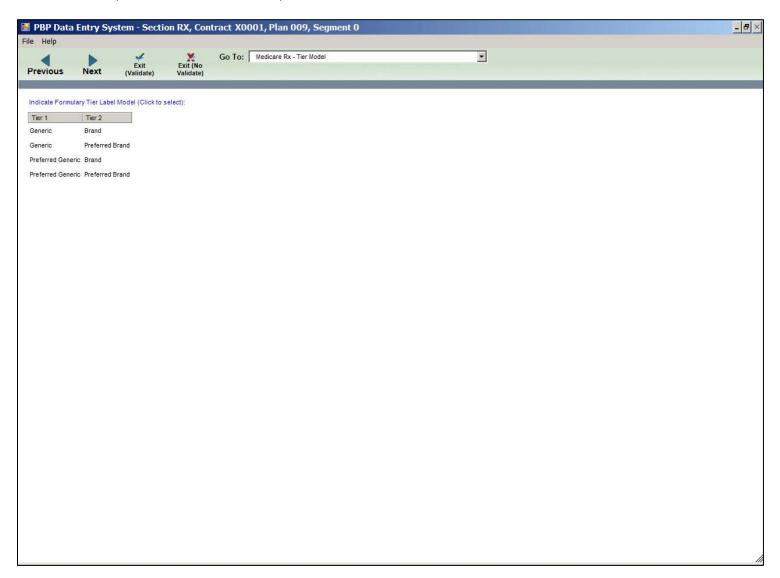
Medicare Rx General 2



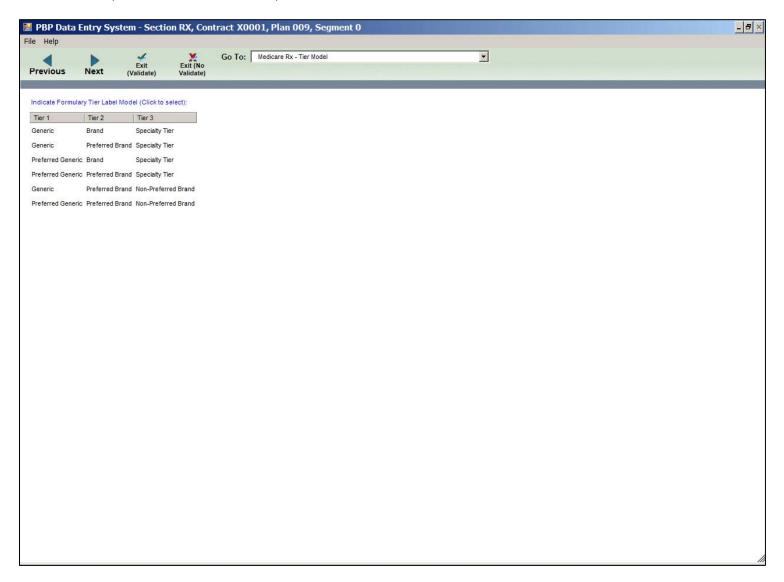
Medicare Rx General 3



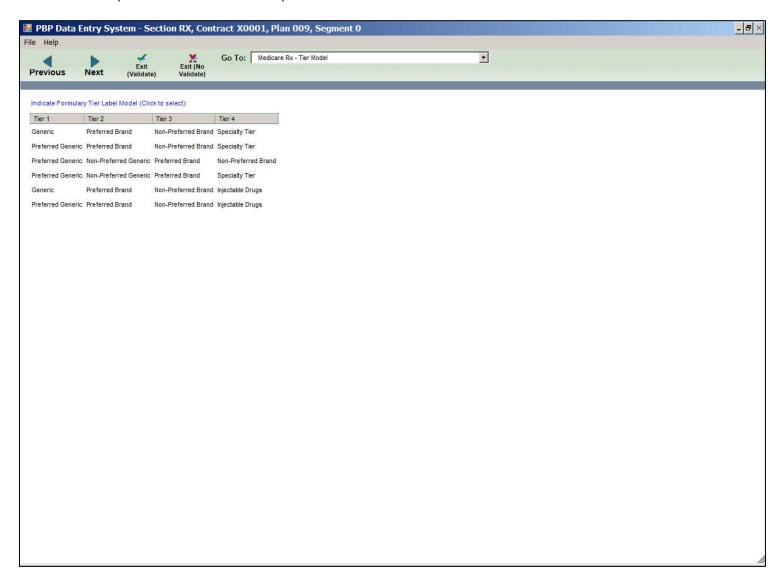
Medicare Rx – Tier Model (when a tier includes 2 tiers)



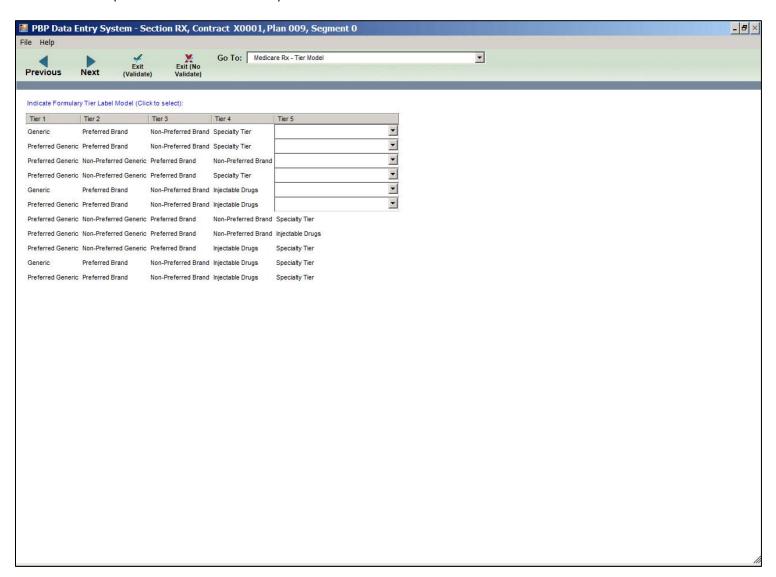
Medicare Rx- Tier Model (when a tier includes 3 tiers)



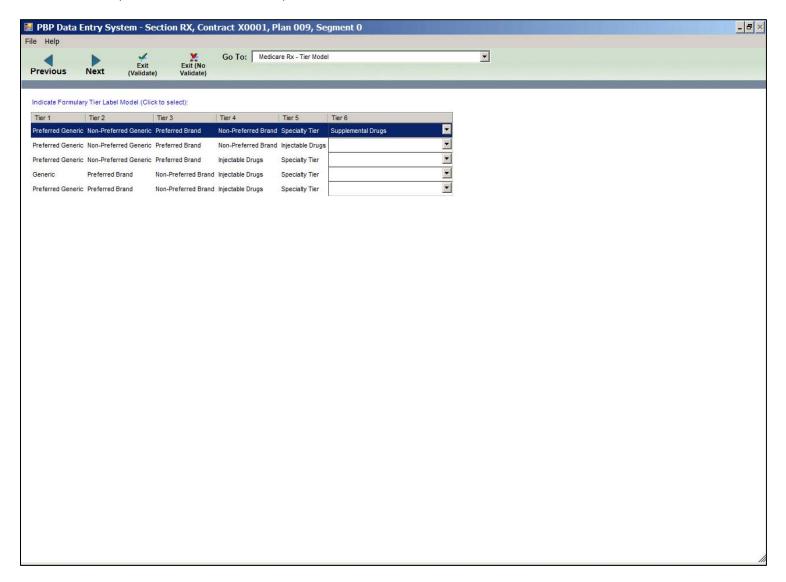
Medicare Rx – Tier Model (when a tier includes 4 tiers)



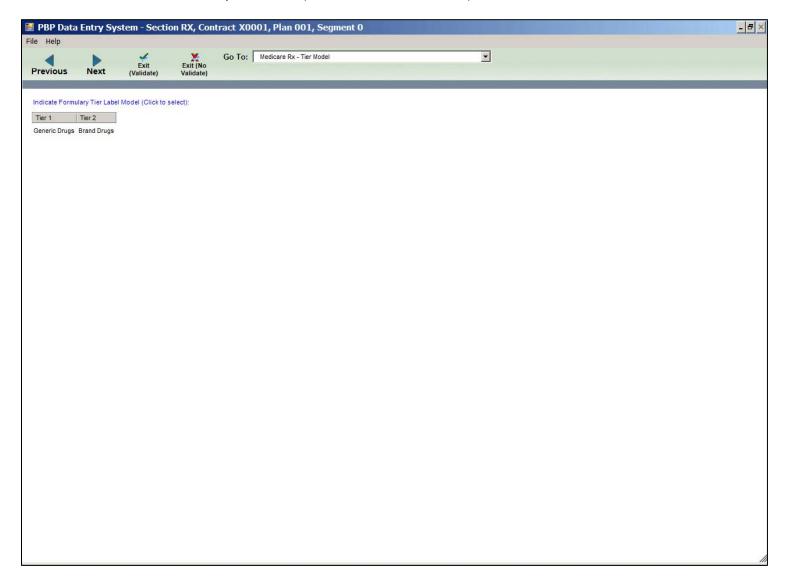
Medicare Rx – Tier Model (when a tier includes 5 tiers)



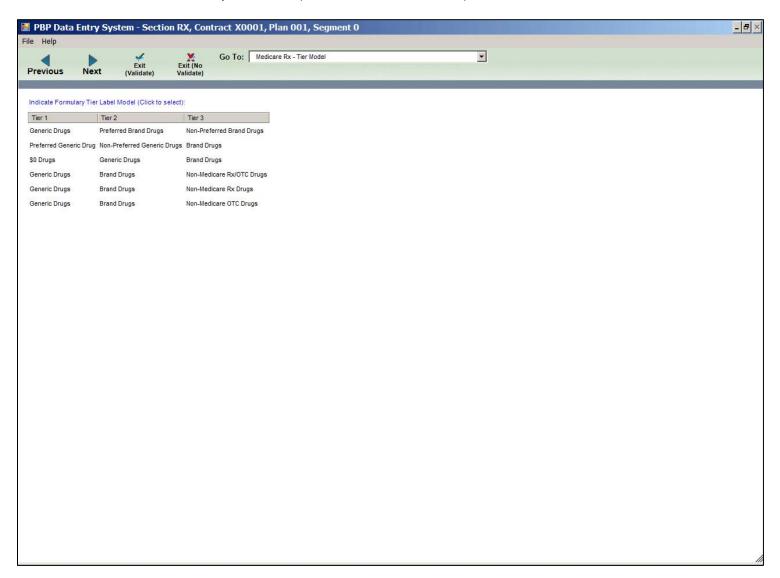
Medicare Rx – Tier Model (when a tier includes 6 tiers)



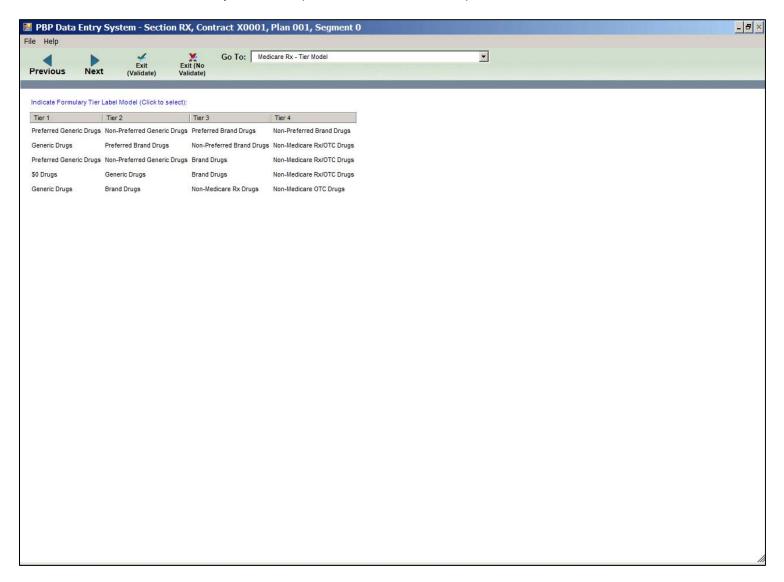
Medicare Rx – Medicare-Medicaid Formulary Tier Model (when a tier includes 2 tiers)



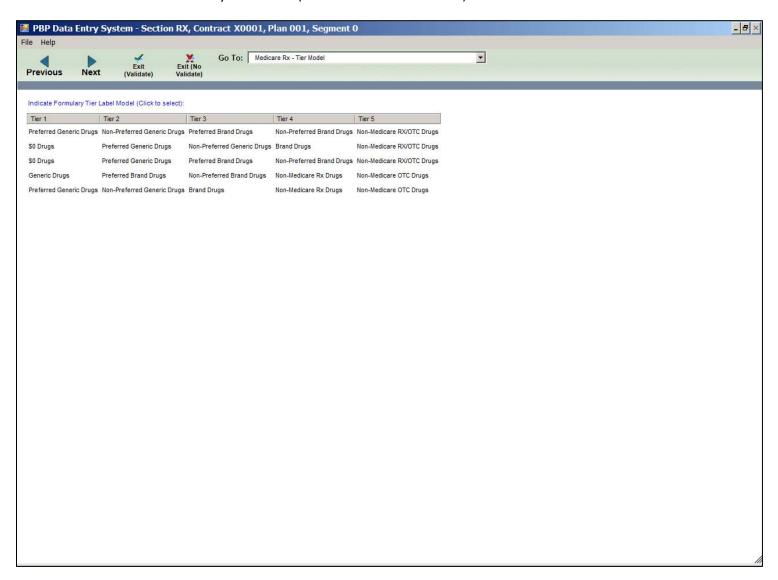
Medicare Rx – Medicare-Medicaid Formulary Tier Model (when a tier includes 3 tiers)



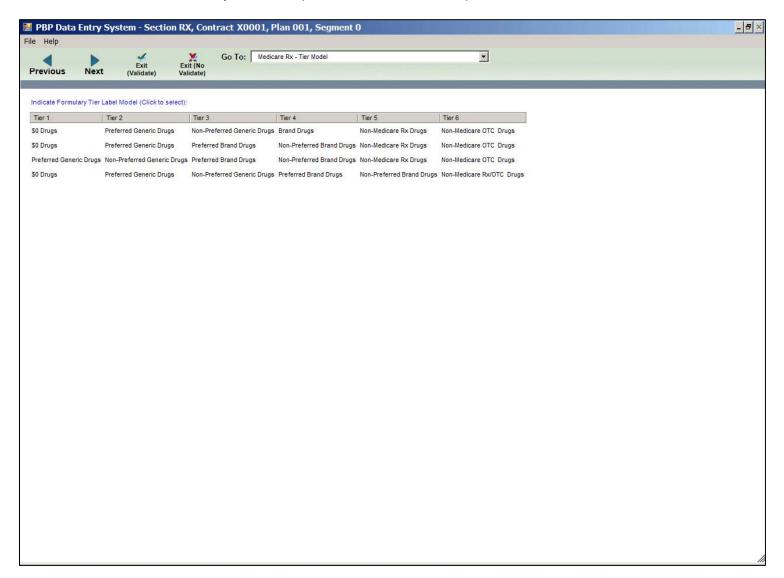
Medicare Rx – Medicare-Medicaid Formulary Tier Model (when a tier includes 4 tiers)



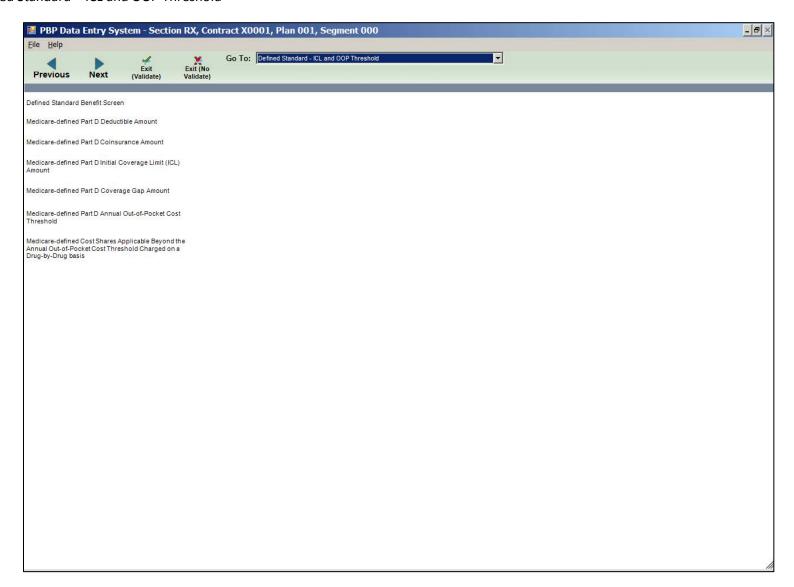
Medicare Rx – Medicare-Medicaid Formulary Tier Model (when a tier includes 5 tiers)



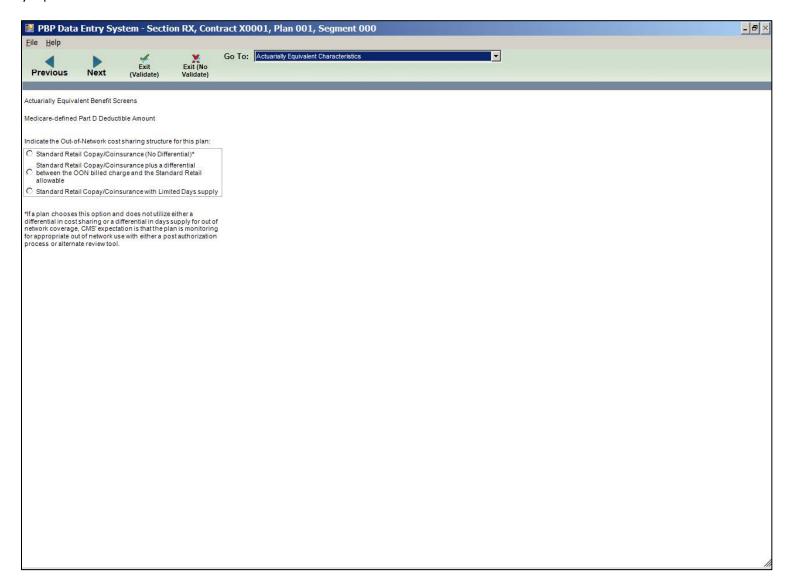
Medicare Rx – Medicare-Medicaid Formulary Tier Model (when a tier includes 6 tiers)



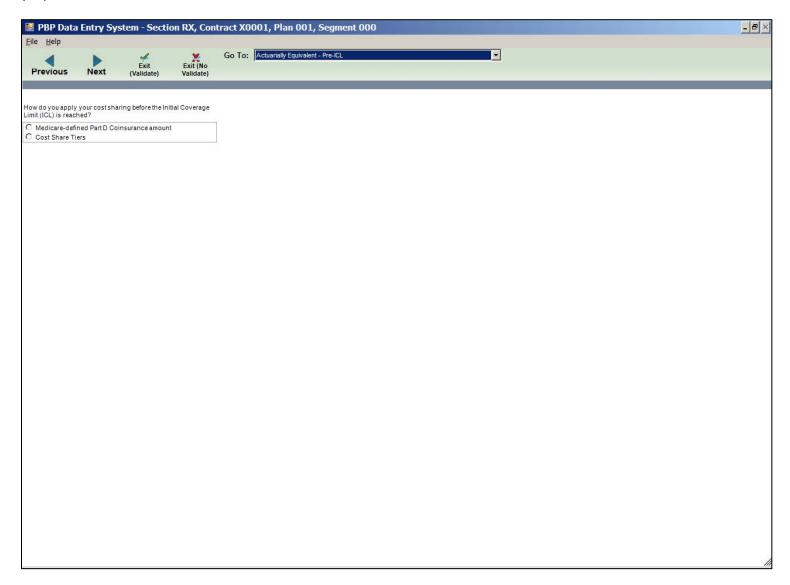
Defined Standard – ICL and OOP Threshold



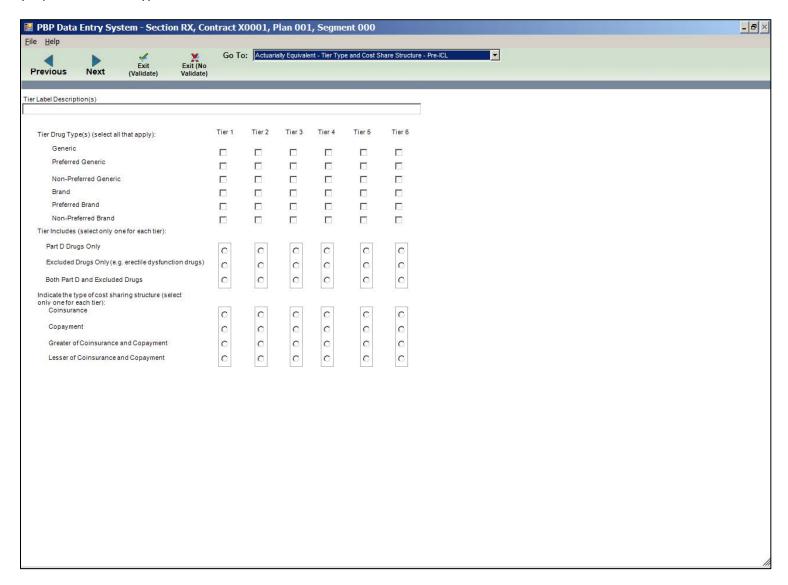
Actuarially Equivalent Characteristics



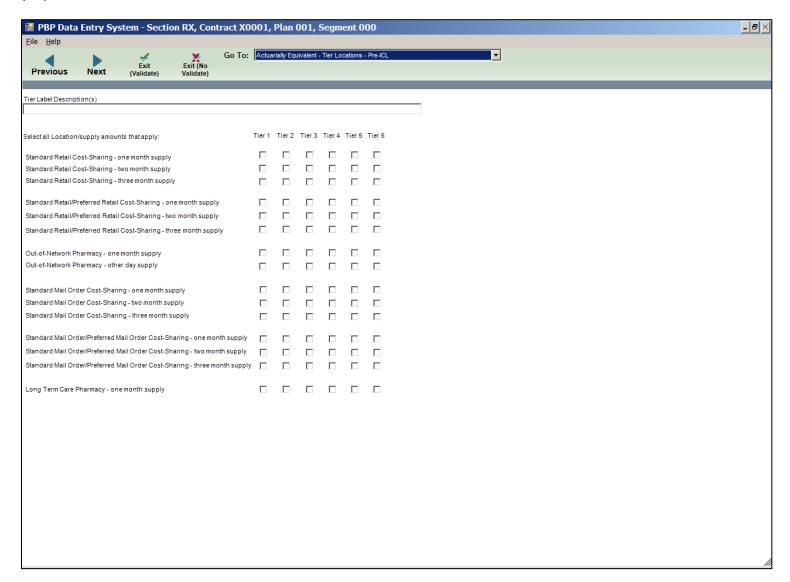
Actuarially Equivalent – Pre-ICL



Actuarially Equivalent – Tier Type and Cost Share Structure – Pre-ICL



Actuarially Equivalent – Tier Locations – Pre-ICL



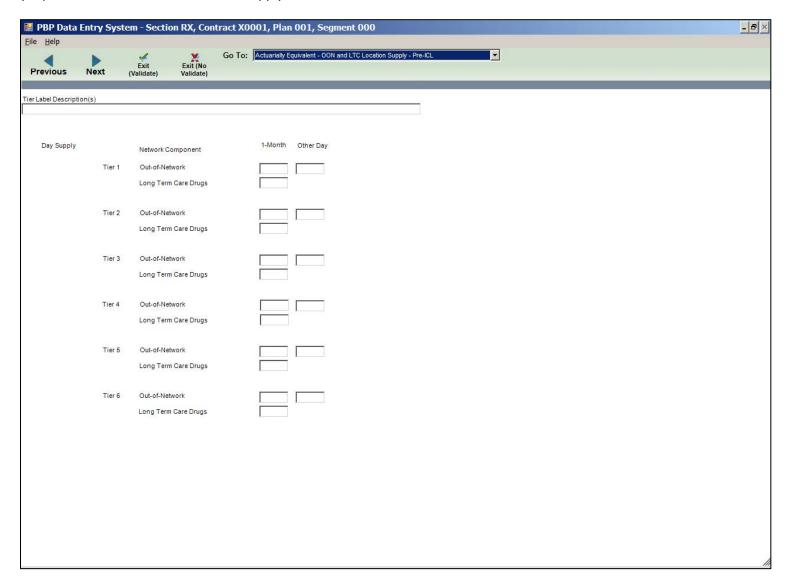
Actuarially Equivalent – Retail Pharmacy Location Supply – Pre-ICL

ier Label Descri andard Retail (Day Supply	ption(s) Cost-Sharing Compo						
	Cost-Sharing Compo						
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			onth 2-Monti	3-Month	*Extended day supply applies to all Drugs?	*For example, you chose a 2-month or 3-month supply at the Standard/Preferred Retail Cost-Sharing or the Mail-Order Pharmacy, you must answer "yes" to the question "Are all	
	Standard Retail Standard				Are all of the drugs on your formulary for this tier available with an extended day supply?	drugs on your formulary for this tier available with an extended day supply?" if all of the drugs on that tier are	
	Retail/Preferred Reta				O Yes O No	available at the extended day supply.	
Tier 2	Standard Retail				Are all of the drugs on your formulary for this tier available with an extended day supply?		
	Standard Retail/Preferred Reta				O Yes O No		
Tier 3	Standard Retail				Are all of the drugs on your formulary for this tier available with an extended day supply?		
	Standard Retail/Preferred Reta	,			C Yes C No		
Tier 4	Standard Retail				Are all of the drugs on your formulary for this tier		
	Standard Retail/Preferred Reta				available with an extended day supply? O Yes		
					O No		
	Standard Retail Standard				Are all of the drugs on your formulary for this tier available with an extended day supply?		
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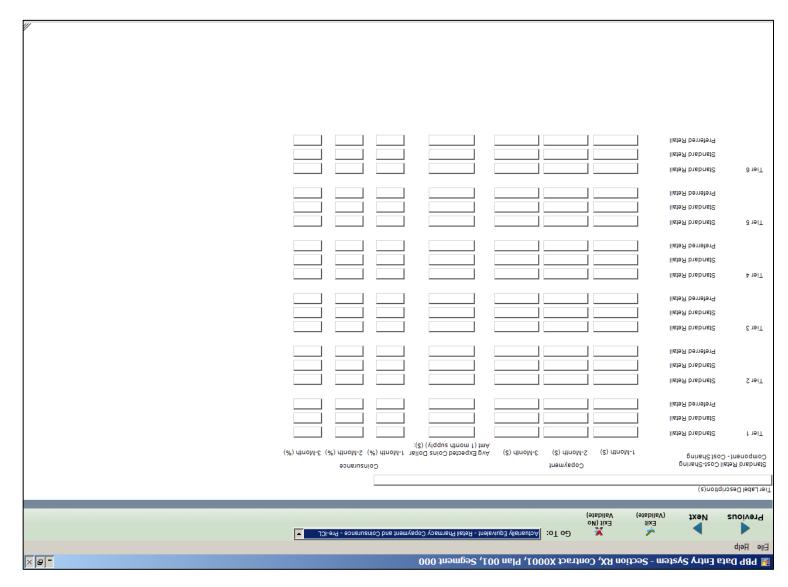
Actuarially Equivalent – Mail Order Location Supply – Pre-ICL

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Tier 4	Standard Mail Order Standard/Preferred Mail Order						
Tier 5	Standard Mail Order Standard/Preferred Mail Order						
Tier 6	Standard Mail Order Standard/Preferred Mail Order						
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Actuarially Equivalent - OON and LTC Location Supply - Pre-ICL



Actuarially Equivalent – Retail Pharmacy Copayment and Coinsurance – Pre-ICL



CMS SENSILIAE INFORMATION - REQUIRES SPECIAL HANDLING

Actuarially Equivalent – Mail Order Copayment and Coinsurance – Pre-ICL

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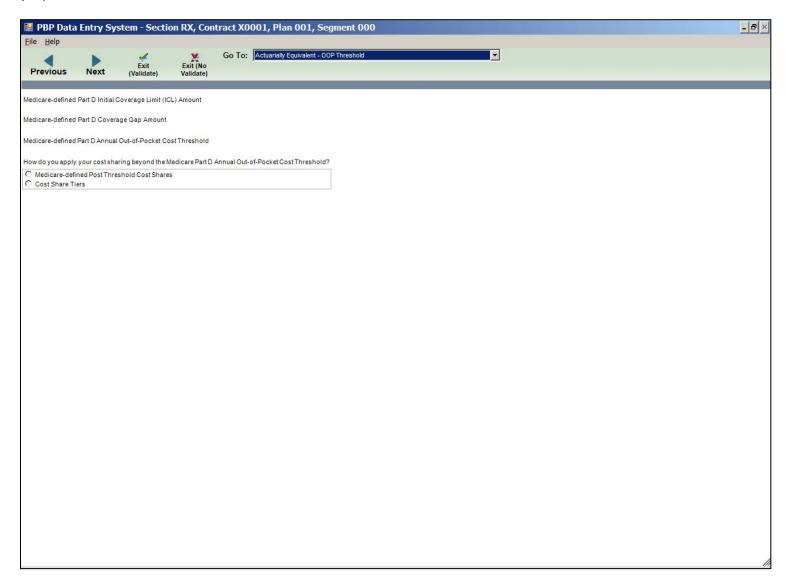
Actuarially Equivalent – OON and LTC Copayment and Coinsurance – Pre-ICL

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Actuarially Equivalent – Daily Copayment Amount Cost Sharing – Pre-ICL

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Actuarially Equivalent - OOP Threshold



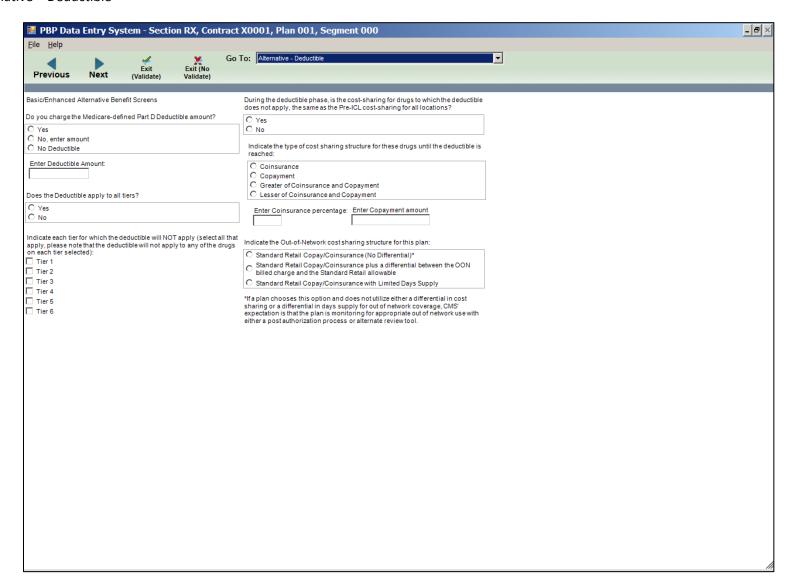
Actuarially Equivalent – Tier Type – Post-OOP Threshold

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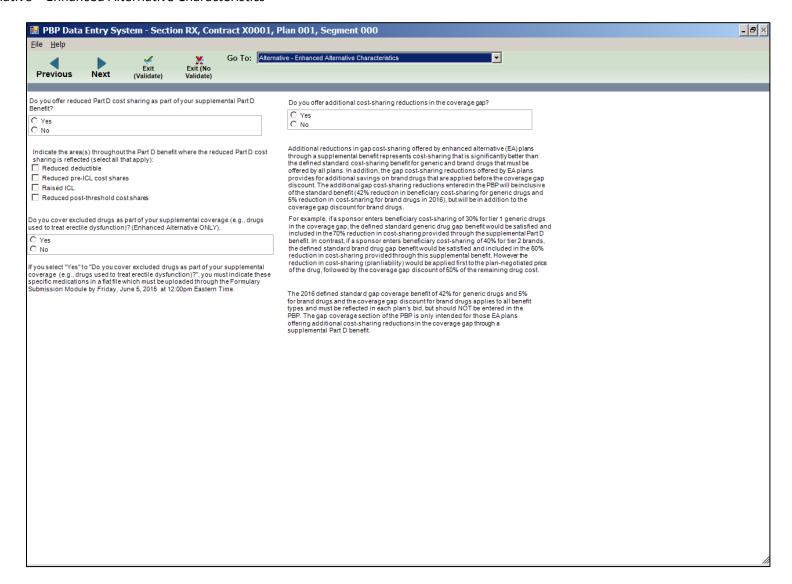
Actuarially Equivalent – Tier Cost Sharing – Post-OOP Threshold

PBP Dat	a Entry S	ystem - Sec	tion RX, Con	tract X00	01, Plan 001, Se	gment 000				_ 8
Previous	Next	Exit (Validate)	Exit (No Validate)	Go To:	Actuarially Equivalent - Tie	er Cost Sharing - Post-O	OP Threshold	-		
Tier Label Descri	ption(s)									
		Copayment (S)	Coinsurance (%)						
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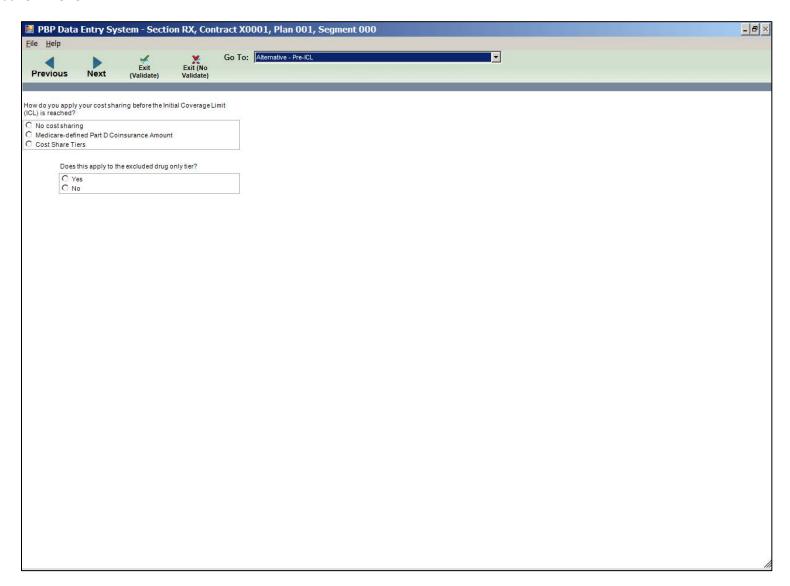
Alternative – Deductible



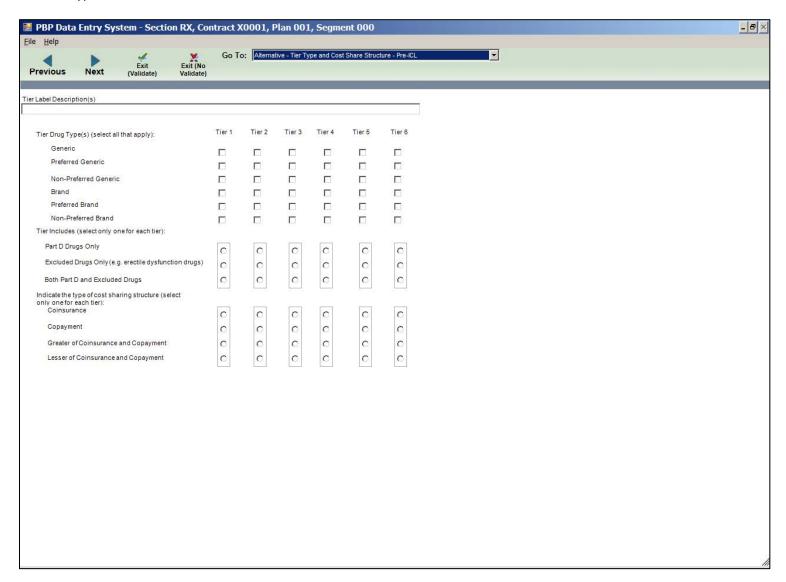
Alternative - Enhanced Alternative Characteristics



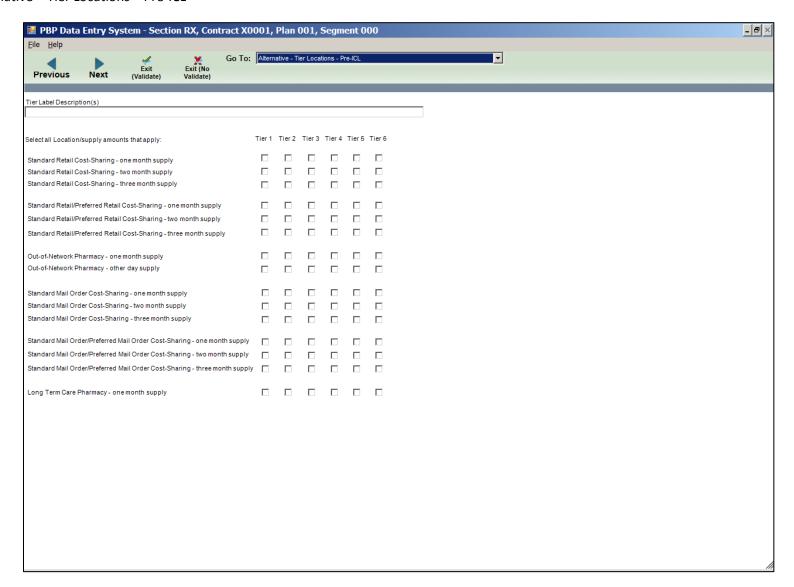
Alternative - Pre-ICL



Alternative - Tier Type and Cost Share Structure - Pre-ICL



Alternative - Tier Locations - Pre-ICL



Alternative – Retail Pharmacy Location Supply – Pre-ICL

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Tier 2	Standard Retail				Are all of the drugs on your formulary for this tier available with an extended day supply?		
	Standard Retail/Preferred Retail				C Yes		
Tier 3	Standard Retail			1	Are all of the drugs on your formulary for this tier available with an extended day supply?		
	Standard Retail/Preferred Retail				C Yes		
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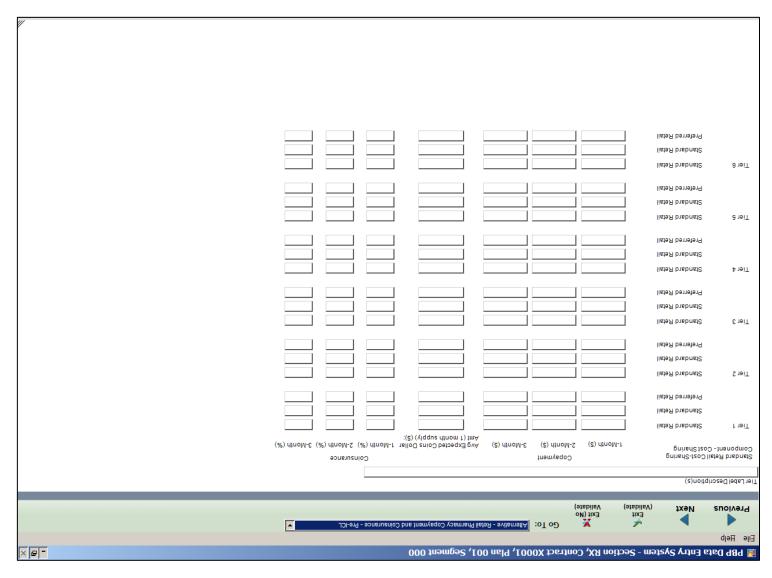
Alternative - Mail Order Location Supply - Pre-ICL

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Tier 5	Standard Mail Order Standard/Preferred M Order	· .l.							
Tier 6	Standard Mail Order Standard/Preferred N Order								

Alternative - OON - LTC Location Supply - Pre-ICL

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	Tier 2	Out-of-Network Long Term Care Drugs		
	Tier 3	Out-of-Network Long Term Care Drugs		
	Tier 4	Out-of-Network Long Term Care Drugs		
	Tier 5	Out-of-Network Long Term Care Drugs		
	Tier 6	Out-of-Network Long Term Care Drugs		

Alternative – Retail Pharmacy Copayment and Coinsurance – Pre-ICL



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Alternative – Mail Order Copayment and Coinsurance – Pre-ICL

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CWS SENSILIAE INEOBWYLION - BEĞNIBES SEECIVT HYNDI'ING

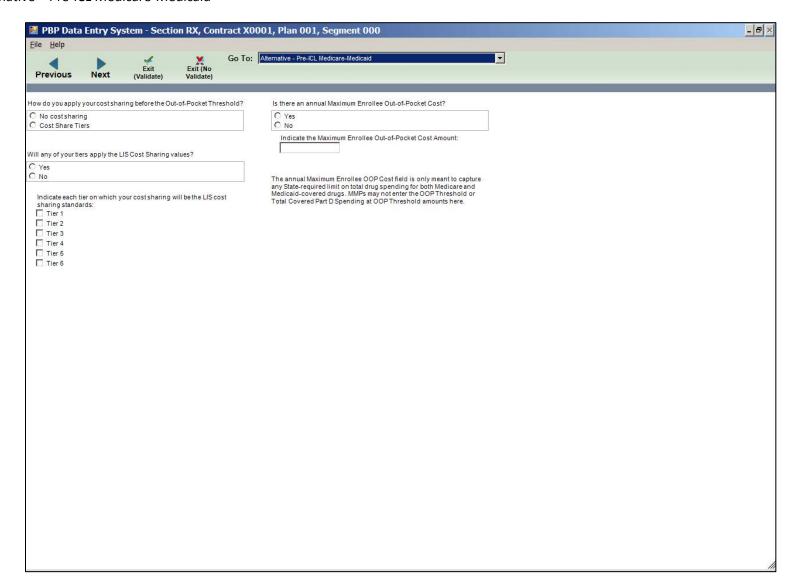
Alternative – OON and LTC Copayment and Coinsurance – Pre-ICL

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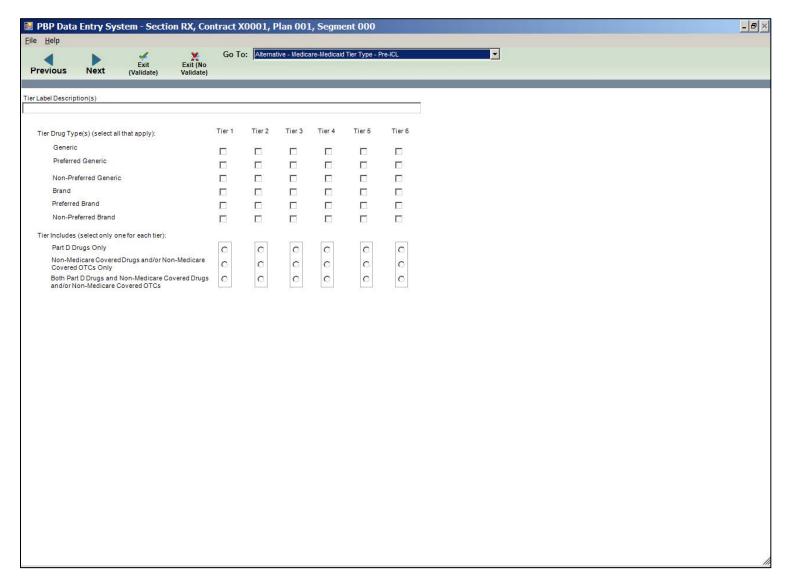
Alternative – Daily Copayment Amount Cost Sharing – Pre-ICL

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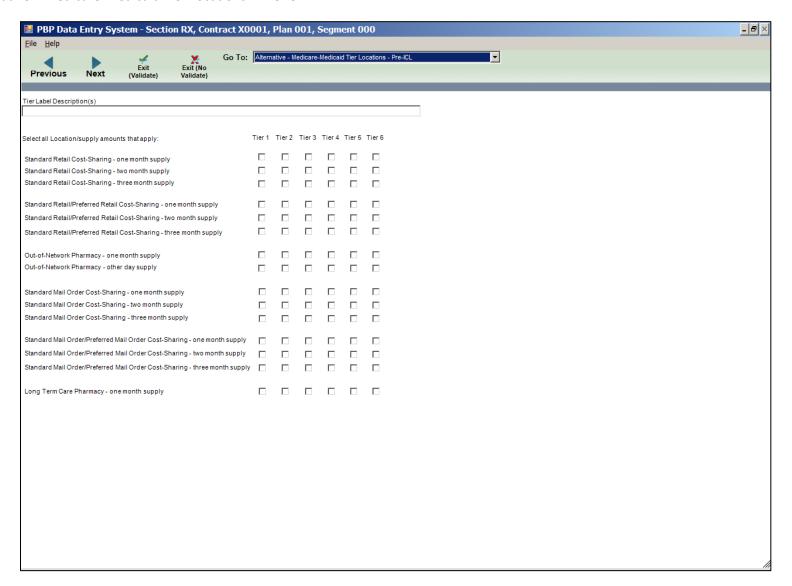
Alternative - Pre-ICL Medicare-Medicaid



Alternative - Medicare-Medicaid Tier Type - Pre-ICL



Alternative – Medicare-Medicaid Tier Locations – Pre-ICL



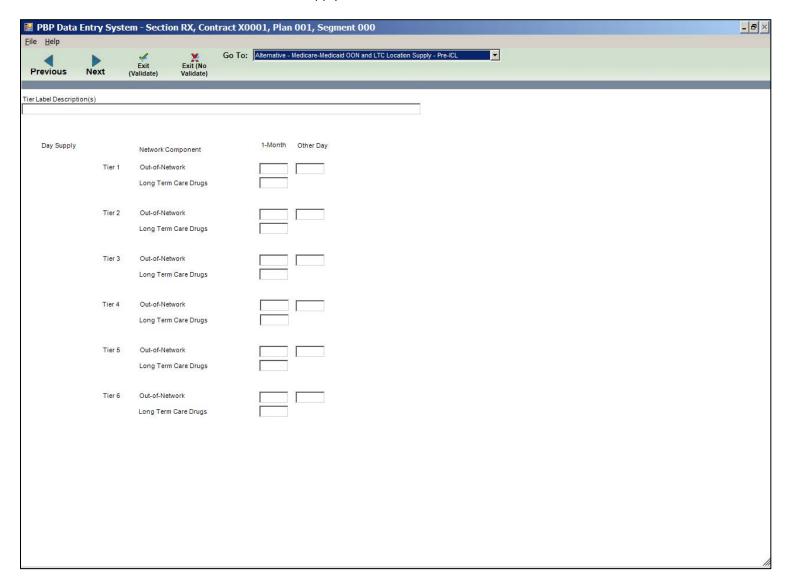
Alternative – Medicare-Medicaid Retail Pharmacy Location Supply – Pre-ICL

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Tier 1	Standard Retail				Are all of the drugs on your formulary for this tier available with an extended day supply?	Pharmacy, you must answer "yes" to the question "Are all drugs on your formulary for this iter available with an extended day supply?" If all of the drugs on that tier are	
	Standard Retail/Preferred Retai				C Yes C No	available at the extended day supply.	
Tier 2	Standard Retail				Are all of the drugs on your formulary for this tier available with an extended day supply?		
	Standard Retail/Preferred Retai				C Yes C No		
Tier 3	Standard Retail				Are all of the drugs on your formulary for this tier available with an extended day supply?		
	Standard Retail/Preferred Retai				O Yes O No		
Tier 4	Standard Retail				Are all of the drugs on your formulary for this tier available with an extended day supply?		
	Standard Retail/Preferred Retai				C Yes C No		
Tier 5	Standard Retail				Are all of the drugs on your formulary for this tier available with an extended day supply?		
	Standard Retail/Preferred Retai				C Yes		
Tier 6	Standard Retail				Are all of the drugs on your formulary for this tier available with an extended day supply?		
	Standard Retail/Preferred Retai	, =			C Yes C No		
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Alternative – Medicare-Medicaid Mail Order Location Supply – Pre-ICL

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Tier 5	Standard Mail Order					
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Tier 6	Standard Mail Order					
	Standard/Preferred Ma Order	ul E				

Alternative - Medicare-Medicaid OON and LTC Location Supply - Pre-ICL



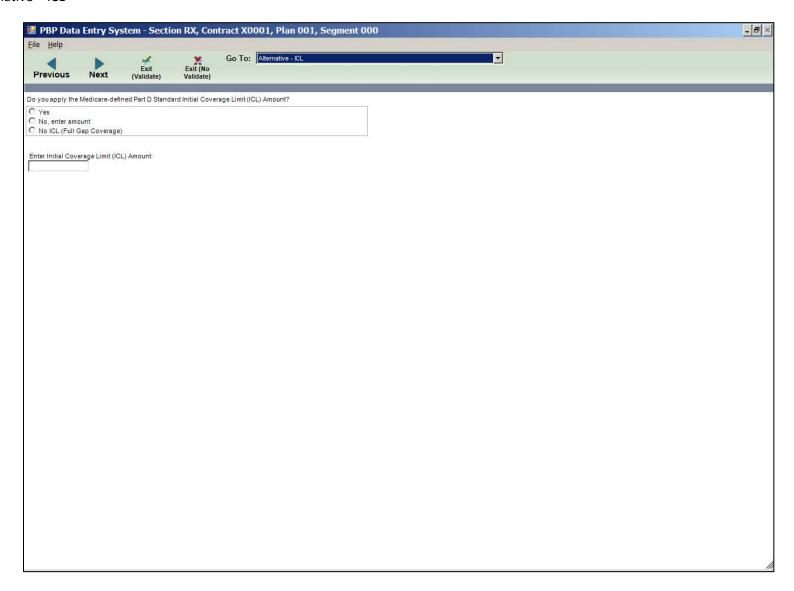
Alternative – Medicare-Medicaid Copayment – Pre-ICL

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Network Componi Standard F Order Standard F Standard F Standard F Standard F	nent Retail Mail	Minimum	Maximum	Network Component Out-of-Network Long Term Care Drugs				
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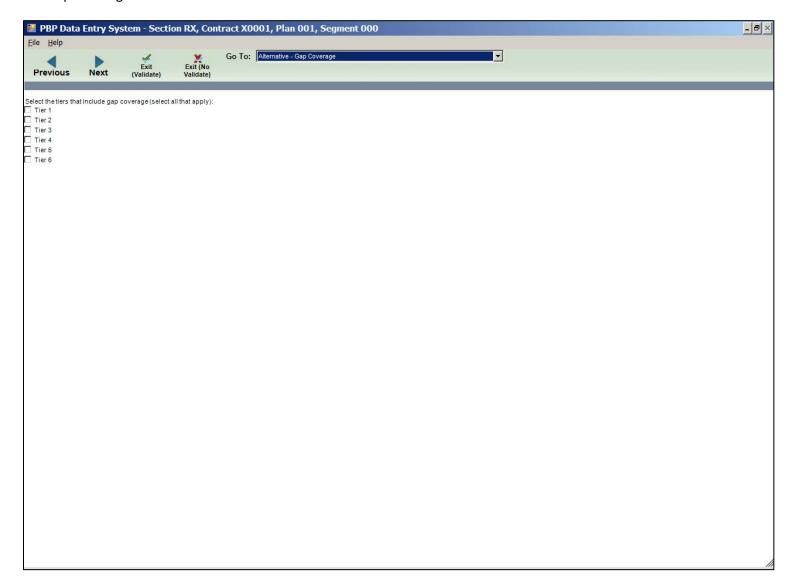
Alternative – Medicare-Medicaid Daily Copayment Amount Cost Sharing

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Tier 1	Standard Retail Standard Mail Order	Minimum Maximum Copayment(\$) Copayment(\$)	1-Month Daily (\$)	Long Term Care Drug	Minimum Maximum Copayment(S) Copayment(S)	1-Month Daily (\$)
Tier 2	Standard Retail Standard Mail Order			Long Term Care Drugs		
Tier 3	Standard Retail Standard Mail Order			Long Term Care Drugs		
Tier 4	Standard Retail Standard Mail Order			Long Term Care Drug		
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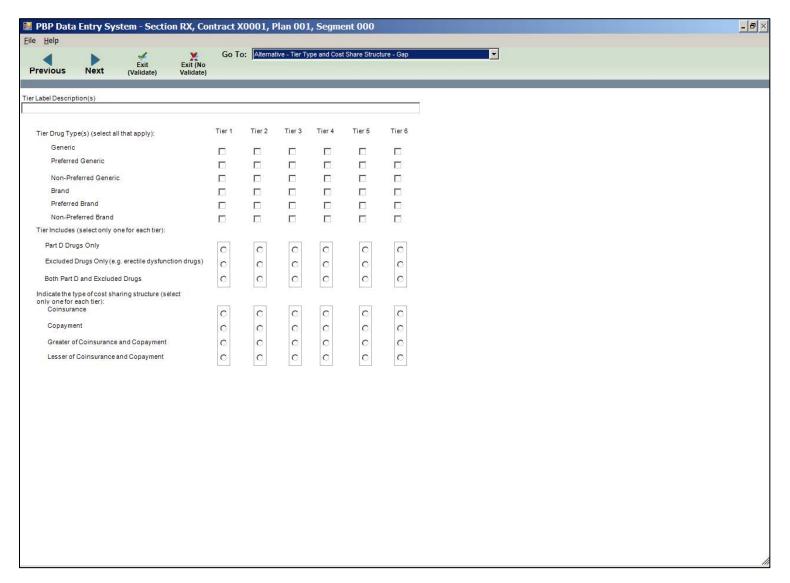
Alternative – ICL



Alternative – Gap Coverage



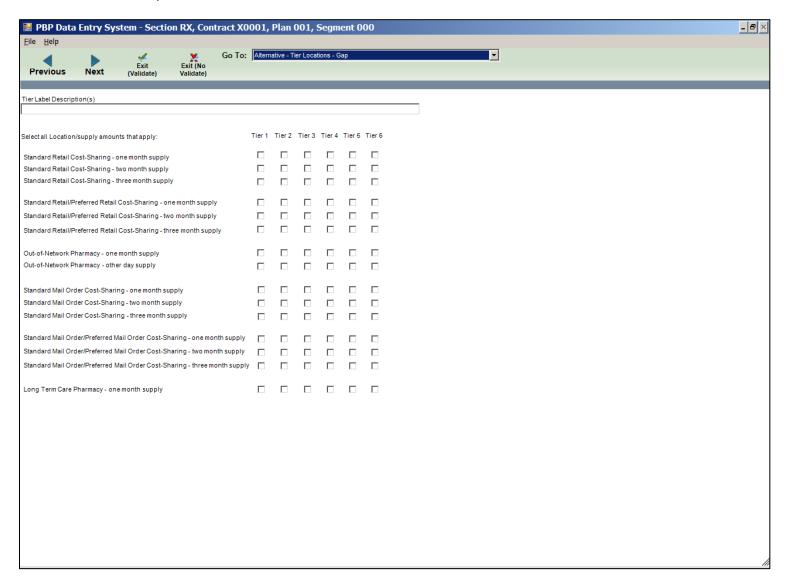
Alternative – Tier Type and Cost Share Structure – Gap



Alternative – Tier Coverage – Gap

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Tier Label Descript	otion(s)									
To what extent ex	any Bro ICI	rand drugs on	Tier 1	Tier 2	Tier 3	Tier 4	Tier 5	Tier 6	not include any drugs from a tier that is	
this tier covered th	through the ga								fully covered in the gap.	
Full Tier Covera		on the tier) ome drugs on the tie	er) C	0	0	0	0	0	If you select Partial Tier Gap Coverage, you must submit a gap supplemental file for the drugs covered on the partially covered tier. The gap supplemental file must be uploaded through the Formulary Submission Module by Friday, June 5,	
you must indicate	e whether that	ly covered in the gap coverage is for bran or both brand and	o, id						2015 at 12:00pm Eastern Time.	
Brand Drugs On	nly		0	0	0	0	0	0		
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Indicate the type of	of drugs cover	red on your tiers:								
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Alternative – Tier Locations – Gap



Alternative – Retail Pharmacy Location Supply – Gap

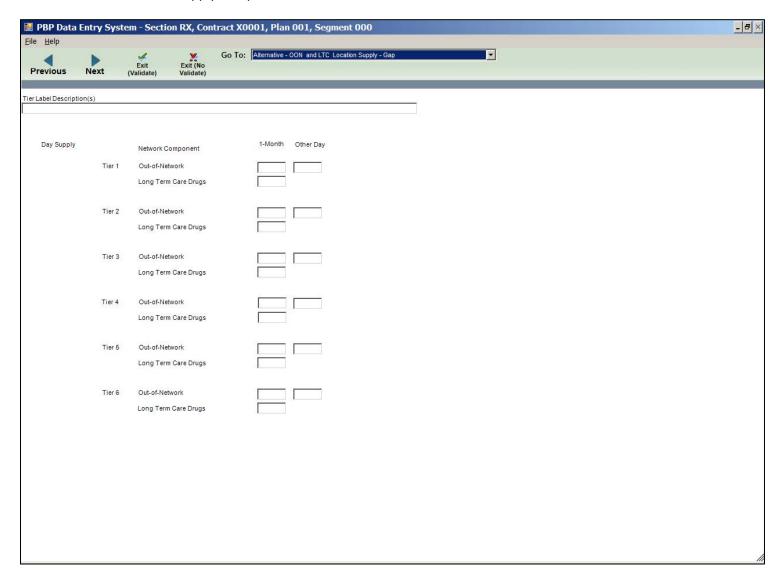
tandard Retail Cost-Sharing C Day Supply Tier 1 Standard Reta Standard Retail/Preferrer Tier 2 Standard Reta Standard Retail/Preferrer Tier 3 Standard Reta Standard Retail/Preferrer	1-Mon	th 2-Month	3-Month	*Extended day supply applies to all Drugs? Are all of the drugs on your formulary for this tier available with an extended day supply? C Yes No	"For example, you chose a 2-month or 3-month supply at the Standard/Preferred Retail Cost-Sharing or the Mail-Order Pharmacy, you must answer "yes" to the question "Are all drugs on your formulary for this tier available with an extended day supply?" if all of the drugs on that tier are available at the extended day supply.
Day Supply Tier 1 Standard Reta Standard Retail/Preferrer Tier 2 Standard Reta Standard Retail/Preferrer Tier 3 Standard Reta Standard	1-Mon	ath 2-Month	3-Month	Are all of the drugs on your formulary for this tier available with an extended day supply? C Yes C No	Standard/Preferred Retail Cost-Sharing or the Mail-Order Pharmacy, you must answer "yes" to the question "Are all drugs on your formulary for this tier available with an extended day supply?" if all of the drugs on that tier are
Day Supply Tier 1 Standard Reta Standard Retail/Preferrer Tier 2 Standard Reta Standard Retail/Preferrer Tier 3 Standard Reta Standard	1-Mon	ath 2-Month	3-Month	Are all of the drugs on your formulary for this tier available with an extended day supply? C Yes C No	Standard/Preferred Retail Cost-Sharing or the Mail-Order Pharmacy, you must answer "yes" to the question "Are all drugs on your formulary for this tier available with an extended day supply?" if all of the drugs on that tier are
Standard Retail/Preferrer Tier 2 Standard Reta Standard Retail/Preferrer Tier 3 Standard Reta Standard	ed Retail			available with an extended day supply? C Yes C No	drugs on your formulary for this tier available with an extended day supply?" if all of the drugs on that tier are
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Standard	il			C Yes	
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	d Retail			available with an extended day supply?	
Tier 4 Standard Reta	ail 🗀		1	No Are all of the drugs on your formulary for this tier	
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				C No	
Tier 5 Standard Reta Standard	il			Are all of the drugs on your formulary for this tier available with an extended day supply?	
Retail/Preferre	d Retail			C Yes C No	
Tier 6 Standard Reta	úl			Are all of the drugs on your formulary for this tier available with an extended day supply?	
Standard Retail/Preferre	d Retail			C Yes C No	

Alternative – Mail Order Location Supply – Gap

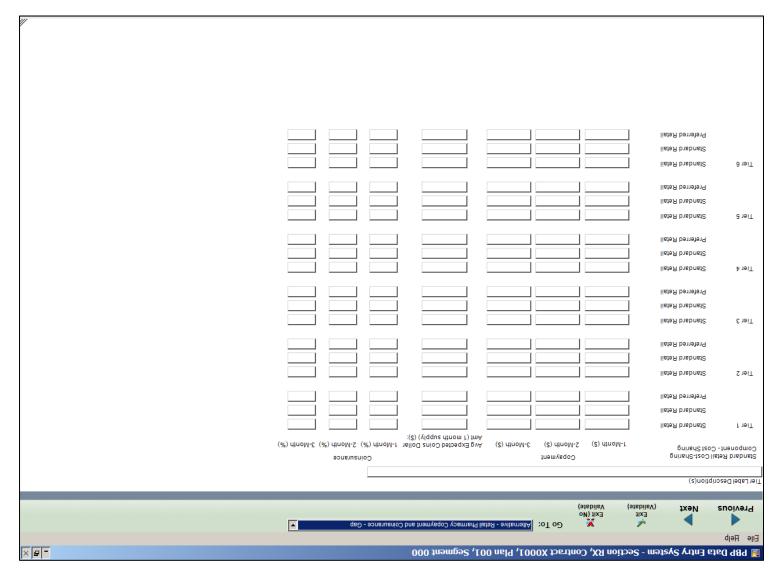
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CWS SENSILIAE INEOBWYLION - BEĞNIBES SEECIVT HYNDI'ING

Alternative – OON and LTC Location Supply – Gap



Alternative – Retail Pharmacy Copayment and Coinsurance – Gap



CWS SENSILIAE INEOKWYLION - KEĞNIKES SLECIYT HYNDI'ING

Alternative – Mail Order Copayment and Coinsurance – Gap

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CWS SENSILIAE INEOBWYLION - BEĞNIBES SEECIVT HYNDI'ING

Alternative – OON and LTC Copayment and Coinsurance – Gap

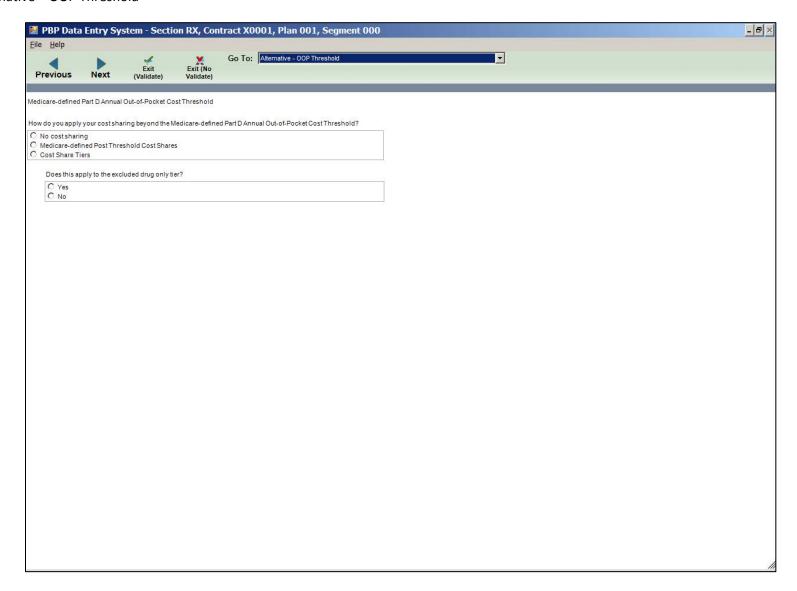
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Alternative – Daily Copayment Amount Cost Sharing – Gap

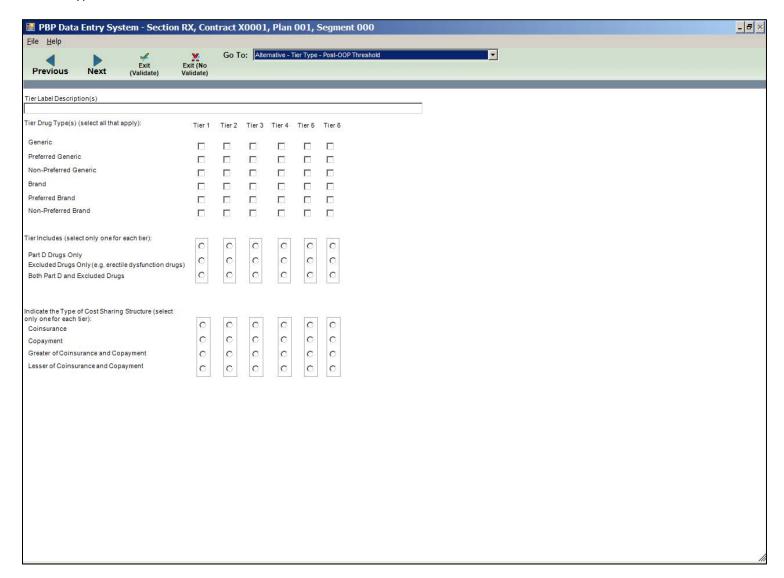
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CWS SENSILIAE INEOBWYLION - BEĞNIBES SEECIVT HYNDI'ING

Alternative – OOP Threshold



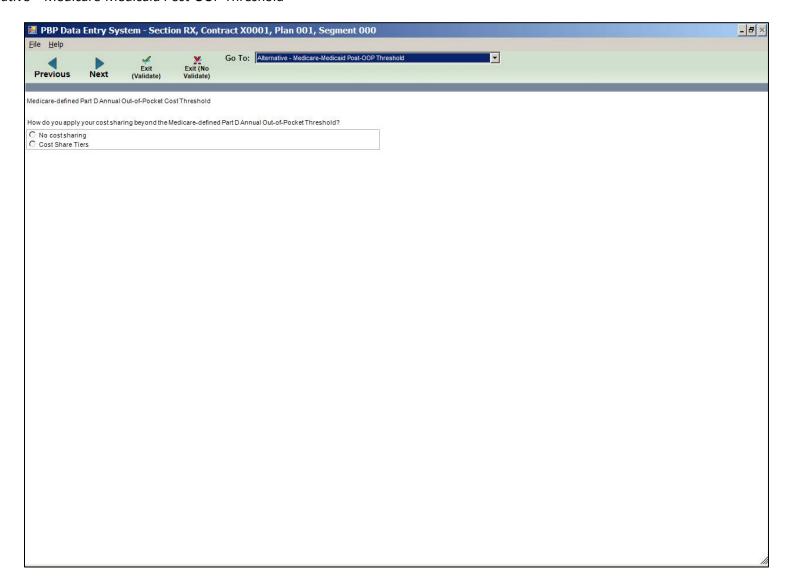
Alternative - Tier Type Post-OOP Threshold



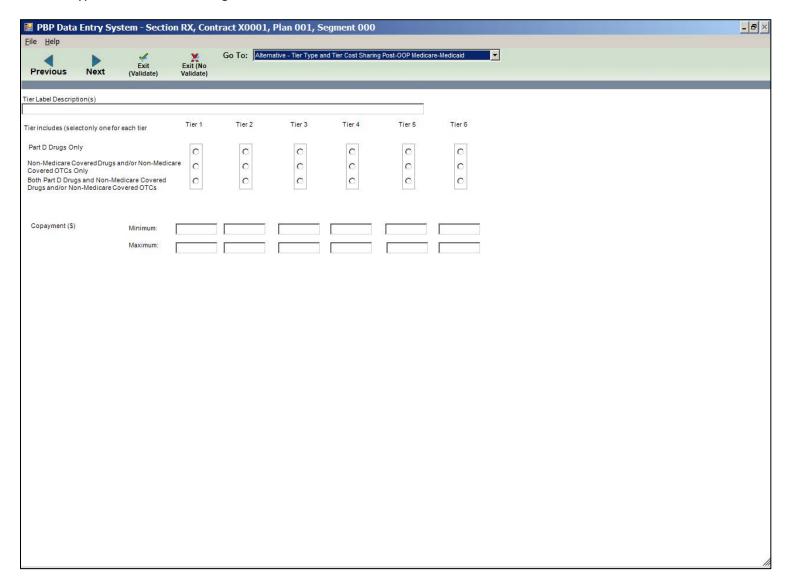
Alternative – Tier Cost Sharing Post-OOP Threshold

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Tier Label Descri	ption(s)			<u></u>	
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Alternative - Medicare-Medicaid Post-OOP Threshold



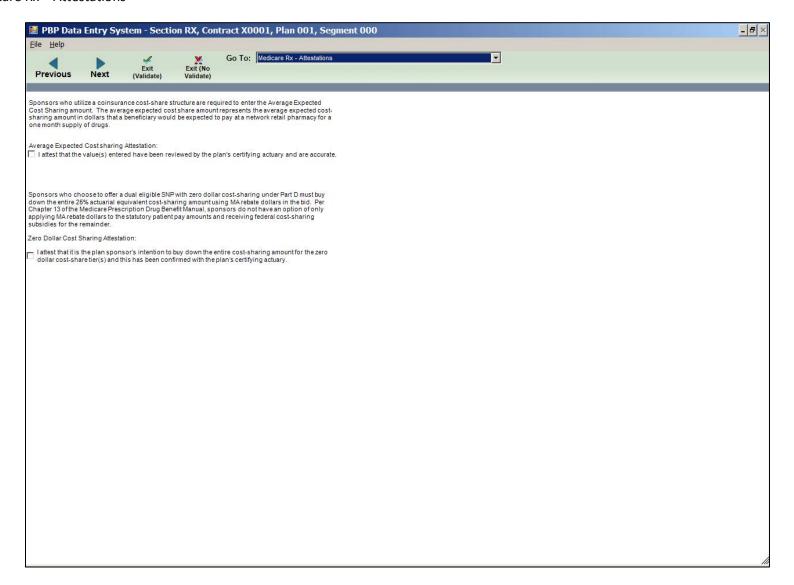
Alternative – Tier Type and Tier Cost Sharing Post-OOP Medicare and Medicaid



Defined Standard – Locations and Location Supply

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Eile Help	Go To: Defined Standard - Locations and Location Supply	
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(validate)		
	Enter number of days for:	
	Are all of the drugs on your formulary available with an 1-Month 2-Month 3-Month Other Day extended day supply?	
Select all Location/supply amounts that apply:	C Yes C No	
Standard Retail Cost-Sharing - one month supply Standard Retail Cost-Sharing - two month supply Standard Retail Cost-Sharing - three month supply	When you select a 2-month and/or a 3-month supply at a retail or mail order pharmacy, you must indicate whether or not all drugs on the entire FORMULARY are available with an extended day supply.	
Out-of-Network Pharmacy - one month supply Out-of-Network Pharmacy - other day supply	The 2016 defined standard gap coverage benefit of 42% for generic drugs and 5% for brand drugs and the coverage gap discount for brand drugs applies to all benefit types and must beflected in each plan's bid, but	
Standard Mail Order Cost-Sharing - one month supply Standard Mail Order Cost-Sharing - two month supply Standard Mail Order Cost-Sharing - three month supply	should NOT be entered in the PBP. The gap coverage section of the PBP is only intended for those EA plans offering additional cost-raing reductions in the coverage gap through a supplemental Part D benefit.	
Long Term Care Pharmacy - one month supply		
		,

Medicare Rx – Attestations



Medicare RX – Notes

