

- Prescription Advantage may be able to offer primary prescription drug coverage to Massachusetts residents not eligible for Medicare.
- If you are under age 65 and disabled, your income cannot exceed the Category 2 income limits listed on the chart below.
- If you become eligible for Medicare, it is your responsibility to inform Prescription Advantage.

Category	Income if single		Income if married		Annual out-of-pocket spending limit	Individual quarterly deductible	RETAIL co-payments per 30-day supply			MAIL ORDER co-payments per 90-day supply		
	Yearly \$	Monthly \$	Yearly \$	Monthly \$			Level 1	Level 2	Level 3	Level 1	Level 2	Level 3
N1	0 – 21,546	0 - 1,796	0 – 29,214	0 - 2,435	\$985	\$0	\$7	\$18	\$40	\$14	\$36	\$80
N2	21,547– 30,005	1,797 - 2,500	29,215 – 40,683	2,436 - 3,390	\$1,970	\$0	\$7	\$18	\$40	\$14	\$36	\$80
N3	30,006 – 35,910	2,501 – 2,993	40,684 – 48,690	3,391 – 4,058	\$2,740	\$65	\$12	\$30	\$50	\$24	\$60	\$100
N4	35,911 – 47,880	2,994 - 3,990	48,691 – 64,920	4,059 - 5,410	\$3,280	\$110	\$12	\$30	\$50	\$24	\$60	\$100
N5	47,881 – 79,800	3,991 – 6,650	64,921 – 108,200	5,411 – 9,017	\$4,375	\$220	\$12	\$30	\$50	\$24	\$60	\$100
N6	79,801 or over	6,651 or over	108,201 or over	9,018 or over	\$7,290	\$350	\$12	\$30	\$50	\$24	\$60	\$100

Monthly Premium:

You are not required to pay a monthly premium to receive Prescription Advantage benefits.

Deductibles and Co-payments:

Each quarter, you must pay the deductible amount (if any) and co-payments listed.

Cost Reimbursement:

You will be responsible for paying the full cost of your prescription at the pharmacy (or through mail order) at the time you fill your prescription(s) and then send a request to Prescription Advantage for reimbursement.

Annual Out-of-Pocket Spending Limit:

If your total spending for deductibles and co-payments reaches your spending limit amount, Prescription Advantage will cover your co-payments for the remainder of the Plan year for all covered drugs.

How to Determine Which Drugs are Covered:

Prescription Advantage uses a Plan formulary, which is a list of prescription drugs available to members. The Plan formulary is developed, reviewed, and updated by a select panel of pharmacists. For detailed information regarding your medications and whether they are covered, please call Prescription Advantage Customer Service.