2016 Summary of Benefits

Prescription Drug Benefit For UniCare State Indemnity Plan/Medicare Extension (OME) members

SilverScript Employer PDP sponsored by The Group Insurance Commission

a Medicare Prescription Drug Plan (PDP)
offered by SilverScript® Insurance Company
with a Medicare contract

January 1, 2016 – December 31, 2016
SECTION I – Introduction to Summary of Benefits

SilverScript Employer PDP sponsored by The Group Insurance Commission (SilverScript) is a Medicare-approved Part D prescription drug plan with additional coverage provided by the GIC to expand the Part D benefits. “Employer PDP” means that the plan is an employer-provided prescription drug plan. The Plan is offered by SilverScript® Insurance Company which is affiliated with CVS/caremark™, the GIC’s pharmacy benefit manager for UniCare State Indemnity Plan members.

This booklet gives you a summary of what we cover and what you pay. It doesn't list every service that we cover or list every limitation or exclusion. To get a complete list of services we cover, call us and ask for the Evidence of Coverage.

You have choices about how to get your Medicare prescription drug benefits

As a Medicare beneficiary, you can choose from different Medicare prescription drug coverage options:

- **SilverScript Employer PDP sponsored by The Group Insurance Commission** as the prescription drug coverage for members of the GIC’s UniCare State Indemnity Plan/Medicare Extension (OME)
- One of the GIC’s other Medicare plans
- Individual coverage through a non-GIC Medicare Part D prescription drug plan
- Individual coverage through a non-GIC Medicare Advantage Plan (like an HMO or PPO) or a non-GIC Medicare health plan that offers Medicare prescription drug coverage. You get all of your Part A and Part B coverage, and prescription drug coverage (Part D), through these plans.

You make the choice. However, if you are a UniCare State Indemnity Plan/Medicare Extension (OME) member and decide not to be enrolled in SilverScript Employer PDP sponsored by The Group Insurance Commission:

- You will lose your GIC medical, prescription drug and behavioral health coverage.
- If the retiree opts out of SilverScript, then his or her covered spouse and/or dependents will also lose their GIC medical, prescription drug and behavioral health coverage.
- You may apply for a GIC Medicare plan during any spring GIC annual enrollment period as long as you have Medicare Part A and Part B. If you do not have continuous creditable prescription drug coverage, you may have to pay a Medicare Part D late enrollment penalty.

Tips for comparing your Medicare choices

This Summary of Benefits booklet gives you a summary of what SilverScript covers and what you pay.

- If you want to compare SilverScript with other Medicare health plans, ask the other plans for their Summary of Benefits booklets.
• You can also find information about Medicare plans in your area other than SilverScript by using the Medicare Plan Finder on Medicare website. Go to http://www.medicare.gov and click “find health & drug plans.” There you can find information about costs, coverage and quality ratings for Medicare plans.

• If you would like to know more about the coverage and costs of Original Medicare, review the current Medicare & You handbook. View it online at http://www.medicare.gov or get a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

• For the details about the Medicare Part D portion of your plan, please call SilverScript Customer Care at 1-877-876-7214 to have the Evidence of Coverage mailed to you or view it online at www.gic.silverscript.com. TTY users should call 711.

Information in this booklet

• Things to Know About SilverScript
• Monthly Premium, Deductible, and Limits on How Much You Pay for Covered Services
• Prescription Drug Benefits

This document is available in other formats such as Braille and large print. This document may be available in languages other than English. For additional information, call SilverScript at 1-877-876-7214, available 24 hours a day, 7 days a week. TTY users should call 711.

Este documento está disponible en otros formatos tales como Braille y en letras grandes. Este documento podría estar disponible en un idioma distinto al inglés. Para obtener información adicional, llámenos al 1-877-876-7214, las 24 horas del día, los 7 días de la semana. Los usuarios de teléfono de texto (TTY) deben llamar al 711.

Things to Know About SilverScript

SilverScript Phone Numbers and Website

• Call toll-free 1-877-876-7214. TTY users should call 711.
• Our website: gic.silverscript.com.

Hours of Operation

You can call us 24 hours a day, 7 days a week.

Who can join?

To join SilverScript, you must

• Be eligible for Medicare Part A for free, and enrolled in Medicare Part B, and
• Live in our service area which is the United States and its territories, and
• Meet any additional requirements established by the GIC.
Which drugs are covered?

The plan will send you a list of commonly used prescription drugs selected by SilverScript and covered under the Medicare Part D portion of the plan. This list of drugs is called a Formulary.

You may review the complete plan formulary and any restrictions on our website at gic.silverscript.com. Or call SilverScript Customer Care, and we will send you a copy of the formulary. This formulary does not include drugs covered through the additional coverage provided by the GIC.

The formulary may change throughout the year. Drugs may be added, removed or restrictions may be added or changed. These restrictions include:

- **Quantity Limits (QL)**
  For certain drugs, SilverScript limits the amount of the drug that it will cover.

- **Prior Authorization (PA)**
  SilverScript requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from us before we fill your prescription. If you don’t get approval, SilverScript will not cover the drug.

- **Step Therapy (ST)**
  In some cases, SilverScript requires you to first try a certain drug to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, SilverScript will not cover Drug B unless you try Drug A first. If Drug A does not work for you, SilverScript will then cover Drug B.

How will I determine my drug costs?

SilverScript groups each medication into one of three tiers:

- **Generic drugs (Tier 1)** – most cost effective drugs to buy. The active ingredients in generic drugs are exactly the same as the active ingredients in brand drugs whose patents have expired. They are required by the Food and Drug Administration (FDA) to be as safe and effective as the brand drug.

- **Preferred Brand drugs (Tier 2)** – brand drugs that do not have a generic equivalent and are included on a preferred drug list. They are usually available at a lower cost than Non-Preferred Brand drugs.

- **Non-Preferred Brand drugs (Tier 3)** – brand drugs that are not on a preferred drug list and usually are a high cost.

You will need to use your formulary to find out the tier for your drug or if there are any restrictions on your drug, as well as to determine your cost. The amount you pay depends on the drug’s tier and whether you are in the Initial Coverage, Coverage Gap or Catastrophic Coverage stage. If the actual cost of a drug is less than your normal copay for that drug, you will pay the actual cost, not the higher copay amount.
Additional drugs covered by the GIC

The GIC provides additional coverage to cover drugs that are not included on the SilverScript formulary, as well as certain drugs not covered under Medicare Part D, such as:

- Prescription drugs when used for anorexia, weight loss or weight gain
- Prescription drugs when used for the symptomatic relief of cough or cold
- Prescription vitamins and mineral products not covered by Part D
- Prescription drugs when used for treatment of sexual or erectile dysfunction
- Certain diabetic drugs and supplies not covered by Part D
- Prescription drugs for tobacco cessation
- Part B products, such as oral chemotherapy agents.

These drugs are not subject to SilverScript appeals and exceptions process and the cost of these drugs will not count towards your Medicare out-of-pocket costs or Medicare total drug costs. There may be other drugs covered by the additional coverage from the GIC. Contact SilverScript Customer Care for details.

Which pharmacies can I use?

The plan has a network of pharmacies, including retail, mail-order, long-term care and home infusion pharmacies. You must use a SilverScript network pharmacy, unless it is an emergency or non-routine circumstance.

SilverScript has preferred network retail pharmacies where you can get up to a 90-day supply of your maintenance medications for the same copay as mail-order, similar to Maintenance Choice in your current CVS/caremark plan. You will also be able to get up to a 90-day supply of your maintenance medication at non-preferred network retail pharmacies, but the copay will be three times the retail 30-day supply copay.

The pharmacies in our network can change at any time. To find a preferred or non-preferred network pharmacy near your home or where you are traveling in the United States or its territories, use the pharmacy locator tool on the website at gic.silverscript.com or call SilverScript Customer Care at 1-877-876-7214, 24 hours a day, 7 days a week. TTY users should call 711.

You may use an out-of-network pharmacy only in an emergency or non-routine circumstance. If you use an out-of-network pharmacy, you may be required to pay the full cost of the drug at the pharmacy. In this case, you must complete a paper claim and send it to SilverScript to request reimbursement. You are responsible for your copay and will be reimbursed the plan’s share of the cost.

If you may need to get your prescription filled while you are traveling outside the country, contact SilverScript Customer Care before you leave the U.S. You can request a vacation override for up to a 90-day supply of your medication. If you are traveling outside of the country and have an emergency drug expense, submit your itemized receipt with the completed SilverScript claim form to the GIC at P.O. Box 8747, Boston, MA 02114.
Please note: Veterans Affairs (VA) pharmacies are not permitted to be included in Medicare Part D pharmacy networks. The federal government does not allow you to receive benefits from more than one government program at the same time.

If you are eligible for VA benefits, you may still use VA pharmacies under your VA benefits. However, the cost of those medications and what you pay out-of-pocket will not count toward your Medicare out-of-pocket costs or Medicare total drug costs. Each time you get a prescription filled, you can compare your GIC benefit through SilverScript to your VA benefit to determine the best option for you.

Section II – Summary of Benefits

How Medicare Part D Stages Work

The standard Medicare Part D plan has four stages or benefit levels. This is how these stages work in 2016:

<table>
<thead>
<tr>
<th>Stage</th>
<th>Standard Medicare Part D Plan without your additional coverage provided by the GIC</th>
<th>SilverScript with your additional coverage provided by the GIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$360</td>
<td>$0</td>
</tr>
<tr>
<td>Initial Coverage</td>
<td>After meeting the deductible, a person pays 25% of the drug cost until he reaches $3,310 in total drug costs.</td>
<td>Since you have no deductible, you start in this stage and pay your GIC copay.</td>
</tr>
<tr>
<td>Coverage Gap</td>
<td>Also called the “donut hole,” this is when a person pays a large portion of the cost, either:</td>
<td>You continue to pay only your GIC copay.</td>
</tr>
<tr>
<td></td>
<td>45% brand-name drug cost</td>
<td></td>
</tr>
<tr>
<td></td>
<td>58% generic drug cost</td>
<td></td>
</tr>
<tr>
<td>Catastrophic Coverage</td>
<td>After you reach $4,850 in Medicare Part D out-of-pocket costs, a person pays the greater of:</td>
<td>After you reach $4,850 in Medicare Part D out-of-pocket costs, you pay the lower of:</td>
</tr>
<tr>
<td></td>
<td>5% of the drug cost, or</td>
<td>Your GIC copay or</td>
</tr>
<tr>
<td></td>
<td>$2.95 for generic drugs</td>
<td>The Medicare Catastrophic Coverage cost-share, the greater of:</td>
</tr>
<tr>
<td></td>
<td>$7.40 for brand-name drugs</td>
<td>5% of the drug cost, or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$2.95 for generic drugs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$7.40 for brand-name drugs</td>
</tr>
</tbody>
</table>
In 2016, the standard Medicare Part D plan maximum out-of-pocket expense of $4,850 includes the deductible, any amount you have paid for your copay, any amount you have paid during the coverage gap, any manufacturer discounts on your brand-name drugs in the coverage gap, and any amount paid by Extra Help or other governmental or assistance organizations on your behalf.

Medicare’s maximum out-of-pocket cost does not include the monthly premium, if any, the cost of any prescription drugs not covered by Medicare, any amount paid by SilverScript, or any amount paid through the additional coverage provided by the GIC.

**Your Prescription Drug Benefits – Monthly Premium, Deductible, and Limits on How Much You Pay for Covered Services**

<table>
<thead>
<tr>
<th>How much is the monthly premium?</th>
<th>SilverScript</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>There is no separate prescription drug premium. This benefit is provided as part of your medical coverage. If you have any questions about your premium, contact the GIC’s Public Information Unit at 617-727-2310 ext. 1; TTY users: 617-227-8583; available 8:45 a.m. to 5:00 p.m., Monday through Friday.</td>
</tr>
</tbody>
</table>

If your individual income is over $85,000, or if your income is over $170,000 and you are married filing your taxes jointly, you will be required to pay an income-related additional monthly premium to the federal government in order to maintain your Medicare prescription drug coverage. This premium is adjusted based on your income.

You will receive a letter from Social Security letting you know if you have to pay this extra amount. This letter will explain how they determined the amount you must pay and the actual Income Related Monthly Adjustment Amount (IRMAA).

If you are responsible for an additional premium the extra amount will be deducted automatically from your Social Security check. If your Social Security check is not enough to cover the additional premium, Medicare will send you a bill. You do not pay this amount to the GIC or SilverScript. You send your payment to Medicare.

For more information about the withholdings from your check, visit www.socialsecurity.gov/mediinfo.htm, call 1-800-772-1213, 7 a.m. to 7 p.m., Monday through Friday, or visit your local Social Security office. TTY users should call 1-800-325-0778.

For more information about Part D premiums based on income, call Medicare at 1-800-MEDICARE (1-800-633-4227).
How much is the deductible?

This plan does not have a deductible.

Initial Coverage

<table>
<thead>
<tr>
<th>Tier</th>
<th>Up to a 30-day supply at a retail network pharmacy</th>
<th>Up to a 90-day supply at a preferred retail network pharmacy</th>
<th>Up to a 90-day supply at a non-preferred retail network pharmacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1 Generic</td>
<td>$10</td>
<td>$25</td>
<td>$30</td>
</tr>
<tr>
<td>Tier 2 Preferred Brand</td>
<td>$30</td>
<td>$75</td>
<td>$90</td>
</tr>
<tr>
<td>Tier 3 Non-Preferred Brand</td>
<td>$65</td>
<td>$165</td>
<td>$195</td>
</tr>
</tbody>
</table>

SilverScript

You pay the amounts below until your total yearly drug costs reach $3,310. Total yearly drug costs are the total drug costs for Part D drugs paid by both you and the plan.

You may get your drugs at network retail pharmacies and mail order pharmacies. Some of our network pharmacies are preferred network retail pharmacies. Similar to Maintenance Choice in your current CVS/caremark plan, you pay the same as mail order for a 90-day supply of a maintenance medication at preferred network retail pharmacies.

<table>
<thead>
<tr>
<th>Tier</th>
<th>Up to a 90-day supply through the mail order pharmacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1 Generic</td>
<td>$25</td>
</tr>
<tr>
<td>Tier 2 Preferred Brand</td>
<td>$75</td>
</tr>
<tr>
<td>Tier 3 Non-Preferred Brand</td>
<td>$165</td>
</tr>
</tbody>
</table>
### SilverScript

<table>
<thead>
<tr>
<th>Tier</th>
<th>Up to a 34-day supply at a long-term care (LTC) facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1 Generic</td>
<td>$10</td>
</tr>
<tr>
<td>Tier 2 Preferred Brand</td>
<td>$30</td>
</tr>
<tr>
<td>Tier 3 Non-Preferred Brand</td>
<td>$65</td>
</tr>
</tbody>
</table>

### Coverage Gap

Due to the additional coverage provided by the GIC, you pay the same copay that you paid during the Initial Coverage stage. You will see no change in your copay until you qualify for Catastrophic Coverage.

### Catastrophic Coverage

After you reach $4,850 in Medicare out-of-pocket drug costs for the year, you pay the lower of:

- Your GIC copay, or
- Medicare’s Catastrophic Coverage, which is the greater of
  - 5% of the cost, or
  - $2.95 copay for generic, including brand drugs treated as generic, or
  - $7.40 copay for all other drugs

SilverScript Employer PDP is a Prescription Drug Plan. This plan is offered by SilverScript Insurance Company, which has a Medicare contract. Enrollment depends on contract renewal.
Important Plan Information
Información Importante Sobre el Plan