

Medical Supplement Summary Prepared for: Peralta Community College District

Plan: Med Sup – United American - Peralta Community College District - Plan F 1/1/2023 - 12/31/2023

Medicare Part A Services	Member Pays
Part A Deductible	\$0
Part A Coinsurance	\$0
Skilled Nursing Facility Care	\$0, Days 1-100
Emergency Room	\$0
Medicare Part B Services	
Part B Deductible	\$0
Part B Coinsurance	\$0
Primary Care Visit	\$0
Specialist Visit	\$0
Part B Excess Covered	Yes
Medical Supplement Coverage Specifications	
Medical Out-of-Pocket Maximum	N/A
Foreign Travel Coverage	\$250 deductible, 20% coinsurance and amounts over the \$50,000 lifetime maximum for medically necessary emergency care services beginning during the first 60 days of each trip outside the USA
Ancillary Benefit Coverage	
Additional Medical notes	

Medical Supplement Stipulations

- Network open to any medical facility that accepts Medicare in all 50 states to include U.S. territories.
- During this policy term, if there are changes by CMS or federal law in relation to MAPD, MA, Med Supp or EGWP plans there may be changes to the rates and/or benefit provisions. In the event that this were to occur, any changes will be communicated to the Group not less than 60 days before the effective date of any such change (other than

Part D Summary Prepared for: Peralta Community College District

Plan: Part D – Anthem - Peralta Community College District - \$1/\$3/\$1 Plan Rate
 Period: 1/1/2023 - 12/31/2023

Pharmacy Coverage	Member Pays
Prescription Deductible	\$0
Retail 30 Day Supply	
Tier 1 (Generics)	\$1
Tier 2 (Pref. Brands)	\$1
Tier 3 (NP Brands)	\$1
Tier 4 (Specialty)*	\$1
Retail 90 Day Supply	
Tier 1 (Generics)	\$3
Tier 2 (Pref. Brands)	\$3

Tier 3 (NP Brands)	\$3
Tier 4 (Specialty)	Limited to a one month supply
Mail-Order 90 Day Supply	
Tier 1 (Generics)	\$1
Tier 2 (Pref. Brands)	\$1
Tier 3 (NP Brands)	\$1
Tier 4 (Specialty)	Limited to a one month supply
Part D Coverage Specifications	
RX Tiers	4 Tier
Prescription Out-of-Pocket Maximum	N/A
Drug Formulary	Most Comprehensive (Open)
Lifestyle Drugs Covered	Yes
All Non-Part D Drugs Covered	Yes
Utilization Management	Prior Authorizations, Quantity Limits and Step Therapy
Coverage Gap	Full-Coverage
Catastrophic Coverage	Members pay the greater of 5% or the CMS Standard Copay, to a maximum of \$1

*Most specialty drugs can only be dispensed up to a 31-day supply at retail

Part D Stipulations

- The catastrophic coverage phase begins once the true out-of-pocket costs has reached \$7400 in 2023 per CMS.
- Network of over 60,000+ locations including all major chains, super markets, and mom/pop stores.
- All Part D drug plans are creditable coverage; therefore, Creditable Coverage Notices are not required.
- Price above is based on census provided. We reserve the right to re-rate this policy pending any new census information.
- During this policy term, if there are changes by CMS or federal law in relation to MAPD, MA, Med Supp or EGWP plans there may be changes to the rates and/or benefit provisions. In the event that this were to occur, any changes will be communicated to the Group not less than 60 days before the effective date of any such change (other than mutually agreed changes) or shorter notice as may be required to comply with CMS or federal law

