



# GROUP MEDICARE ADVANTAGE PPO

**Charles County Public Schools  
Retiree Education Presentation**

Proprietary and Confidential



**Charles County**  
Public Schools

*Working together to achieve excellence for every student.*

**CareFirst**   
Medicare Advantage



# TODAY'S AGENDA



01. CareFirst Medicare Advantage Overview
02. Your Medical and Prescription Drug Benefits
03. Extras Included in Your Plan
04. Resources and Reminders
05. Q&A



# WHAT'S CHANGING FOR 2025?



## What's Changing:

- Your medical, prescription drug, dental and vision benefits will be offered under a Medicare Advantage plan from CareFirst.
- Your new monthly health plan premium will be lower than your current premium.
- You will receive a new ID card in December.
- Your new coverage will start January 1, 2025.
- Retirees have support from RetireeFirst for help during and after the transition.

# CAREFIRST RETIREE EXPERIENCE

Retirees have trusted us for their health coverage for 65 years.



**Over 100K**

Group retirees are in the CareFirst network



**55K**

Individual Medigap (Medicare Supplemental) plan members



**14K**

Group and individual Medicare Advantage members



CareFirst   
Medicare Advantage

# WHAT IS MEDICARE ADVANTAGE?

- **Medicare Advantage (MA) Plans (also called Part C Plans)** are health plan options approved by Medicare and run by private companies, like CareFirst.
- MA plans are part of the Medicare program. Medicare pays private companies like CareFirst a certain amount for each member's care.
- MA plans are offered with and without a prescription drug benefit. **Your MA plan includes a prescription drug benefit.**
- MA plans offer **additional benefits** such as routine vision and dental coverage, telehealth options, in-home assessments, fitness benefits, and more.



# CURRENT PLAN VS. MEDICARE ADVANTAGE

CURRENT PLAN	GROUP MEDICARE ADVANTAGE
 <p>Primary coverage includes Medicare Part A and B.</p>	 <p>Medicare Advantage bundles Medicare Part A, Part B and Part D all in one plan.</p>
 <p>Secondary coverage refers to employee plan plus prescription drug.</p>	
<p>Coordination of Medicare and your commercial plan.</p>	<p>No coordination between Medicare and your commercial plan, as the Group Medicare Advantage replaces your Medicare coverage.</p>
<p>Coverage of all Medicare medical covered services (inpatient hospital, skilled nursing facility, etc.).</p>	<p>Coverage of all Medicare medical covered services (inpatient hospital, skilled nursing facility, etc.) plus additional benefits beyond original Medicare.</p>
<p>Pharmacy coverage through a commercial plan design and formulary.</p>	<p>Pharmacy coverage with a formulary (drug list) geared toward retirees.</p>
<p>National coverage. Members may visit any Medicare participating provider.</p>	<p>National coverage. Members may visit any Medicare participating provider. Providers outside of the CareFirst Medicare Advantage network must accept Medicare and agree to bill BlueCross BlueShield.</p>

# PLAN TERMINOLOGY: A REFRESHER

- **Copay:** An amount you pay as your share of the cost for a medical service or supply, like a doctor's visit, hospital outpatient visit, or a prescription drug. A copayment is a set amount (for example \$10), rather than a percentage.
- **Coinsurance:** An amount you may be required to pay, expressed as a percentage (for example 20%) as your share of the cost.
- **Annual Out-of-Pocket Maximum:** The maximum dollar amount you will pay out-of-pocket in copays and/or coinsurance in a calendar year for your Medicare-covered medical expenses. Once this amount is met, the plan pays 100% for Medicare-covered medical expenses for the remainder of the calendar year. There is a separate out-of-pocket maximum for prescription drugs.

# LOCAL AND NATIONAL PROVIDER PARTNERS

CareFirst's Passive PPO allows you to access in- and out-of-network Medicare providers at the same rate.



## Local providers

High-quality providers available throughout Maryland and the District of Columbia.



## Nationwide providers

Robust, nationwide PPO network available through BlueCross BlueShield Network Sharing.



## Broad provider choice

You can see any Medicare provider at the same in-network rates\*.

\*Out-of-network providers must participate in Medicare and be willing to bill CareFirst or their local Blues Plan.

# VISITING A PROVIDER

Use your CareFirst ID card when at the provider's office or pharmacy. You won't need your red, white and blue Medicare card to use this plan.

 <b>CareFirst</b> Medicare Advantage		<b>CareFirst BlueCross BlueShield Group Advantage (PPO)</b>	
Member Name <b>F_NAME M_INIT L_NAME</b>	PCP Office <b>IN: \$X OON: \$X</b>		
Member ID <b>EGE SBSB_ID</b>	Specialist Office <b>IN: \$X OON: \$X</b>		
Group Number <b>GRGR_ID</b>	Urgent Care Center <b>IN: \$X OON: \$X</b>		
	Emergency Room <b>IN: \$X OON: \$X</b>		
	RxBIN <b>RXBIN</b>		
	RxPCN <b>RXPCN</b>		
	RxGRP <b>RX_GROUP</b>		
Effective Date <b>M_R_DT</b>			
BC/BS Plan <b>193/963</b>			
Issuer <b>(80840)</b>			
			CMS-H7379-801
			

## Network statistics:

- ~98% of providers participate in Medicare nationwide
- 8,000 primary care doctors, 57,000 specialists and 55 hospitals in Maryland and DC participate in the CareFirst Medicare Advantage PPO network
- You also have access to the nationwide BlueCross BlueShield Medicare network

# PROVIDER COMPARISON

94% of providers who Charles County Public Schools' retirees visited in 2023 are participating in the CareFirst Medicare Advantage PPO network.

Top Provider Types	Match %
Radiology	100%
Anesthesiology	100%
Nurse Practitioner	99%
Cardiovascular Disease	98%
Internal Medicine	97%
Orthopedic Surgery	96%
Family Practice	95%
Emergency Medicine	93%
General/Acute Care Hospital	92%

Top Providers	Match %
BMA La Plata	100%
Georgetown University	100%
Maryland Oncology Hematology PA	100%
University of MD Charles Regional Medical Center	100%
Washington Hospital Center	100%
Medstar Medical Group – Southern	100%
Continuumrx of Northern Virginia	100%
Beebe Hospital	100%
Sibley Memorial Hospital	100%



YOUR MEDICAL

AND RX BENEFITS

# MEDICAL BENEFITS AT A GLANCE

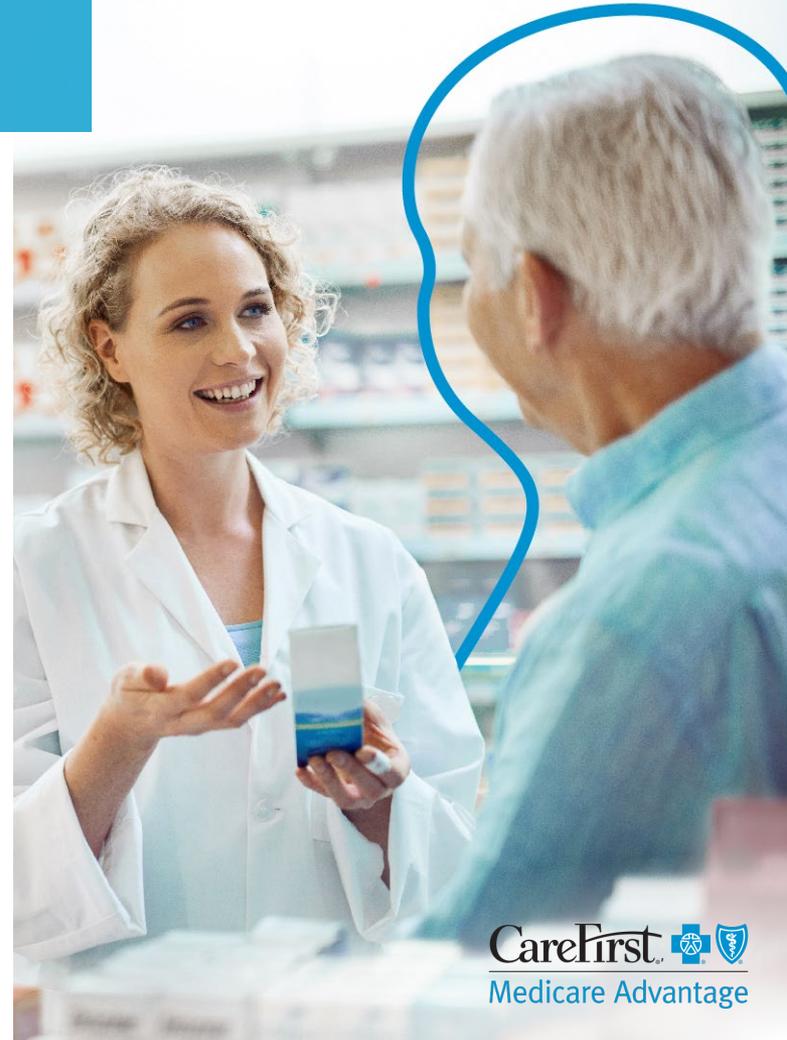
	Preferred Provider Network		BlueChoice Opt-Out Plus Open Access		Medi-Comp	CareFirst Group Advantage (PPO) IN/OON Combined
Medical Deductible	<b>IN:</b> \$0	<b>OON:</b> \$200	<b>IN:</b> \$0	<b>OON:</b> \$300	\$75	<b>\$0</b>
Maximum Out-of-Pocket (MOOP)	<b>IN:</b> \$800	<b>OON:</b> \$800	<b>IN:</b> \$2,000	<b>OON:</b> \$2,000	\$1,000	<b>\$800</b>
Primary Care Provider Copay	<b>IN:</b> \$15	<b>OON:</b> 80% after deductible	<b>IN:</b> \$10	<b>OON:</b> 80% after deductible	80% after deductible	<b>\$5</b>
Physician Specialist Copay	<b>IN:</b> \$15	<b>OON:</b> 80% after deductible	<b>IN:</b> \$15	<b>OON:</b> 80% after deductible	80% after deductible	<b>\$10</b>
Physical Therapy Copay	<b>IN:</b> \$15	<b>OON:</b> 80% after deductible	<b>IN:</b> \$15	<b>OON:</b> 80% after deductible	80% after deductible	<b>\$10</b>
Inpatient Hospital	<b>IN:</b> \$100%	<b>OON:</b> 80% after deductible	<b>IN:</b> 100%	<b>OON:</b> 80% after deductible	100% up to \$3,000 per admission; then 80% after deductible	<b>\$20</b> (per admission copay)
Outpatient Facility Services Copay	<b>IN:</b> \$30	<b>OON:</b> 80% after deductible	<b>IN:</b> \$30	<b>OON:</b> 80% after deductible	80% after deductible	<b>\$20</b>
Emergency Room Copay	<b>IN:</b> \$100	<b>OON:</b> \$100	<b>IN:</b> \$100	<b>OON:</b> \$100	80% after deductible (100% for accident within 72 hrs.)	<b>\$30</b> (waived if admitted within 24 hours)
Urgent Care Center Copay	<b>IN:</b> \$15	<b>OON:</b> \$15	<b>IN:</b> \$15	<b>OON:</b> \$15	80% after deductible (100% for accident within 72 hrs.)	<b>\$15</b> (waived if admitted within 48 hours)
Lab Tests Copay; X-ray Services	<b>IN:</b> \$0	<b>OON:</b> 80%	<b>IN:</b> \$0	<b>OON:</b> 80% after deductible	100% up to \$100, then 80% after deductible	<b>\$5</b>

# PRIOR AUTHORIZATION

Approval in advance may be required to obtain select services or prescription drugs.

## What you need to know:

- Your provider will coordinate this with CareFirst before your visit.
- You don't need to get prior authorization when you get care from out-of-network providers.
- If we say we will not cover your services, you, or your provider, have the right to appeal our decision.
- Prior authorization is required for certain services like:
  - Physical therapy
  - Podiatry
  - Cosmetic surgery
  - Transplants
  - Durable medical equipment
  - Home health



# PRESCRIPTION DRUG BENEFITS AT A GLANCE

	Preferred Provider Network	BlueChoice Prescription Drug	Medi-Comp Prescription Drug	CareFirst Group Advantage (PPO)
Part D Prescription Drug Deductible	\$0	\$0	\$0	<b>\$0</b>
Part D Out-of-Pocket Drug Costs Cap	\$5,800	\$4,600	n/a	<b>\$2,000</b>
Tier 1—Preferred Generic (30-day supply)	<b>Generic: \$10</b>	<b>Generic: \$10</b>	<b>Generic: \$10</b>	<b>\$10</b>
Tier 2—Generic (30-day supply)				<b>\$10</b>
Tier 3—Preferred Brand (30-day supply)	<b>Brand: \$15 (34 day supply)</b>	<b>Brand: \$15 (34 day supply)</b>	<b>Brand: \$15 (34 day supply)</b>	<b>\$15</b>
Tier 4—Non-Preferred Drug (30-day supply)				<b>\$30</b>
Tier 5—Specialty (30-day supply)				<b>\$30</b>
90 Day Supply (Retail)	1x copay	2x copay	1x copay	<b>2x copay</b>
Network Coverage	National	National	National	<b>National</b>
Non-Part D Enhanced Drug Benefit	n/a	n/a	n/a	<b>Coverage for lifestyle drugs, cough &amp; cold, vitamins, weight loss, etc.</b>

**Note: Part D cost-sharing does not count toward the overall medical out-of-pocket maximum (MOOP) for your plan.**

# ACCESSING YOUR DRUG BENEFITS



We offer holistic and comprehensive prescription drug coverage



## Pharmacy locations

Access to over **62,000 pharmacy locations** nationwide including all major chains like:

- CVS
- Walmart
- Weis
- Walgreens
- Costco
- Safeway
- Wegmans
- Medicine Shoppe
- Giant Pharmacy
- Harris Teeter



## Mail order savings

Get routine prescriptions fulfilled through the mail for **1x copay** for 90 day supply

# TRANSITION POLICY

## A transition fill is typically a one-time, one-month supply of a drug



Transition fills let you get temporary coverage for Part D drugs that are not on your plan's formulary or that have certain coverage restrictions (such as prior authorization or step therapy).

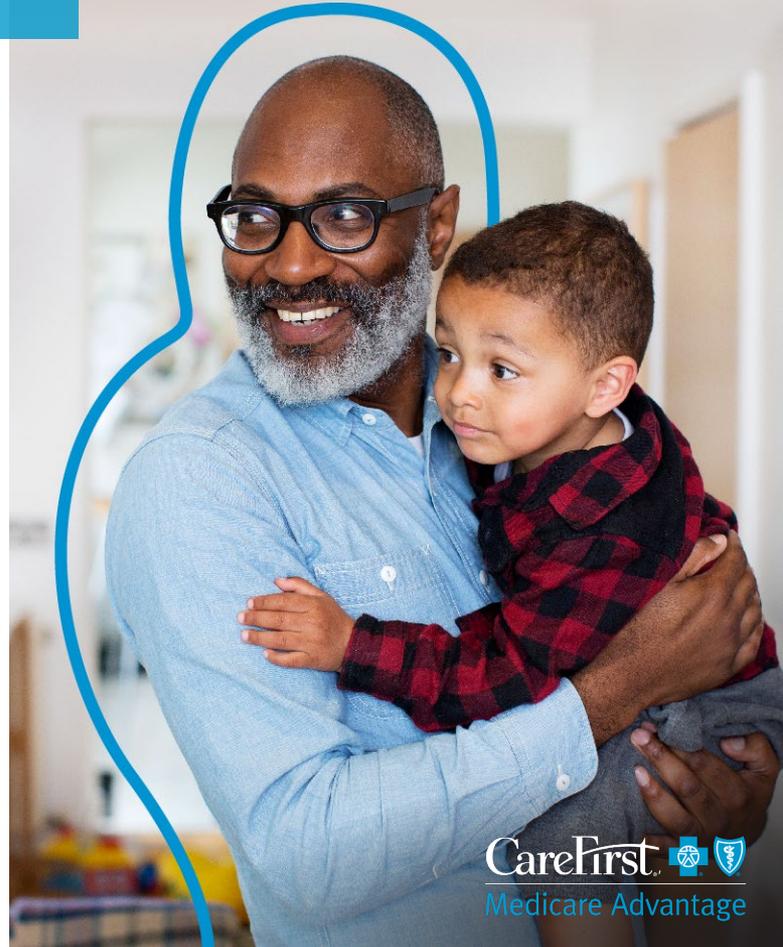


We may cover your drug in certain cases during your first 90 days of membership. You can only get transition fills for drugs you were already taking before switching plans or before your existing plan changed its coverage.



The transition supply gives you time to talk to your doctor or other prescriber about pursuing other options available to you within our formulary.

Please refer to your Evidence of Coverage for more information on the CareFirst BlueCross BlueShield Medicare Advantage transition process.





**EXTRAS INCLUDED**

**IN YOUR PLAN**

# DENTAL HIGHLIGHTS



## An overview of the plan's dental coverage

To find a dental provider, visit [carefirst.com/learn/groupma](https://www.carefirst.com/learn/groupma) and select *Find a Doctor* in the middle of the page. Then select the Medicare Advantage Dental (PPO) network.

### CAREFIRST BLUECROSS BLUESHIELD GROUP ADVANTAGE (PPO)

Dental Benefit	In-Network Member Cost	Out-of-Network Member Cost
Deductible	\$30	\$90
Maximum Annual Benefits	\$1,400	
Class I: Preventive and diagnostic treatment	20% coinsurance	
Class II: Basic dental services (i.e. fillings)	20% coinsurance, after deductible	
Class III: Major surgical services	20% coinsurance, after deductible	
Class IV: Major restorative services	20% coinsurance, after deductible	

# VISION HIGHLIGHTS



## An overview of the plan's vision coverage provided by Davis Vision

To find a vision provider, visit [carefirst.com/learn/groupma](https://carefirst.com/learn/groupma) and select *Find a Doctor* in the middle of the page. Then select the Medicare Advantage Vision (PPO) network.

### CAREFIRST BLUECROSS BLUESHIELD GROUP ADVANTAGE (PPO)

Vision Benefit	In-Network Member Cost	Out-of-Network Member Cost
Annual Routine Eye Exam w/ Dilation	\$15 copay	\$75 allowance
Frames	\$0 copay for Davis Collection \$45 annual allowance + 20% discount off balance for other frames	\$50 allowance
Clear Spectacle Lenses	\$0 copay	\$52–\$181 allowance depending on lens type
Contact Lenses (in lieu of eyeglasses)	\$0 copay for medically necessary contact lenses \$97 allowance for elective lenses + 15% discount off balance for contact lens materials	\$352 for medically necessary contact lenses \$97 allowance for elective lenses

# HEARING HIGHLIGHTS



## An overview of the plan's hearing coverage provided by NationsHearing

To find a hearing provider, visit [carefirst.com/learn/groupma](https://www.carefirst.com/learn/groupma) and select *Find a Doctor* in the middle of the page. Then select the Medicare Advantage Hearing (PPO) network.

### CAREFIRST BLUECROSS BLUESHIELD GROUP ADVANTAGE (PPO)

Hearing Benefit	Member Cost
Annual Routine Hearing Exam	\$0 copay
Annual Hearing Aid Fitting	\$0 copay
Hearing Aid Coverage	\$500–\$1,975 copay per hearing aid based on technology level
3 Follow Up Visits within First Year of Initial Fitting Date	\$0 copay
3-year Repair Warranty	Included
3 Years of Batteries	Included
One-time Replacement Coverage (for lost, stolen or damaged hearing aids)	Included
100% Money-back Guarantee	60 day
12- and 18-Month Financing Options	0% APR, no money down

# FITNESS BENEFITS PROGRAM

SilverSneakers® is an opportunity for you to improve your health, gain confidence and connect in your community.



## At home or on the go:

- SilverSneakers On-Demand™ fitness classes available 24/7
- SilverSneakers LIVE™ virtual classes and workshops
- SilverSneakers GO™ mobile app with workout plans and more
- SilverSneakers FLEX® classes, walking groups and more at parks, community centers



## In participating fitness locations:

- A large network of gyms including:
  - Planet Fitness Waldorf
  - LA Fitness Waldorf
  - CoreLife Waldorf
  - Method Fitness Waldorf
- Ability to enroll at multiple locations at any time
- Classes for all levels, taught by instructors trained in senior fitness



## In your community

- Group activities and classes offered outside the gym
- SilverSneakers.com online resources like a fitness location directory, articles and more

# BLUE365 DISCOUNT PROGRAM

This exclusive program offers you savings on health and wellness products and services from a number of retailers.

Reebok 

*SKECHERS*

AVIS®

**crocs™**

GARMIN.

 Expedia

**Hertz**

**chewy**

PHILIPS  
sonicare

! Sign up at [blue365deals.com/CareFirstBCBS](https://blue365deals.com/CareFirstBCBS)  
and check the site often as deals can change.



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Medicare Advantage

# CARE MANAGEMENT OUTREACH

CareFirst works with partners to provide other services to you at no cost.

Program	Partner(s)	Why take the call?
Medication adherence	 AdhereHealth ADHERENCE RESOLVED 	Get medication reminders
Medication review		Have a pharmacist review your medications to improve adherence and prevent drug-related risks
Home visits		Get in-home health assessment to identify care gaps, provide testing, support with appointment scheduling, and connect to community resources
Preventive screening and annual wellness visit reminders	CareFirst 	Get help with scheduling appointments, acquiring medical equipment, arranging transportation and more
Screening kits	 cologuard  Quest Diagnostics* CareFirst 	Get screening or testing kits mailed to your home

# WHOLE HEALTH APPROACH



Our additional benefits, preventive care, and behavioral health programs are front and center for the whole health concept.



Our care management team can help you get back on your feet after a hospital stay, navigating a new diagnosis, or help coordinate your care.



Members can access support through multiple channels— websites, mobile app, phone.

## What our members are saying...

"I love that Porter is helping members with preventive care. I really enjoyed speaking with Julia, her knowledge and thoroughness. She was just wonderful. 10/10."

"Finally! Someone that I felt was truly interested in me physically as well as emotionally. She listened, understood and answered my questions."

"I was so glad Jennifer helped me. I might not be here if it wasn't for her. Thanks again for having my back."

# 24-HOUR NURSE ADVICE LINE

You can call 833-968-1773 for general questions about health issues or where to go for care.



Staffed by registered nurses 24/7.



Needs or symptoms can include cough, cold, rashes and medication questions.



Included as part of your plan at no added cost.





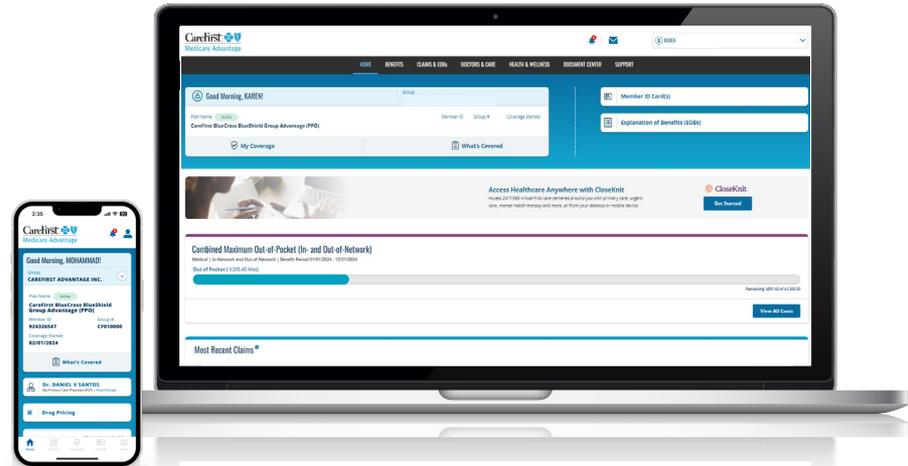
# RESOURCES

# AND REMINDERS

# MY ACCOUNT MEMBER PORTAL

You have access to a secure personalized account where you can:

- View claims and Explanation of Benefits (EOBs)
- Find a doctor, facility or pharmacy
- Check your benefits
- View, order and print ID cards
- Estimate medical expenses
- Confirm drugs are covered and check pricing at local pharmacies
- Email CareFirst directly with questions



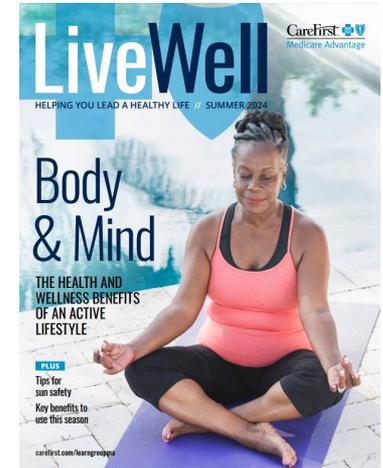
# MEMBER COMMUNICATIONS

Each new member is sent materials that describe how to use your plan benefits.

## These include:

- Welcome package that includes a robust booklet
- An electronic newsletter hosted on [carefirst.com/learngroupma](https://carefirst.com/learngroupma) with healthy tips for members
- A personalized member ID card

You can visit [carefirst.com/learngroupma](https://carefirst.com/learngroupma) year-round for more information.



# IMPORTANT ELIGIBILITY REMINDERS

## To be eligible for a Group Medicare Advantage plan, you must:

- ✓ Be retired from the group and meet all employer eligibility guidelines
- ✓ Be enrolled in Medicare (Parts A & B) and continue to pay your Part B premium as well as any Part B or Part D income related monthly adjustment amount
- ✓ Live in CareFirst's Group Medicare Advantage service area, which includes all 50 United States, DC, and all U.S. territories
- ✓ Provide a physical address within the service area to establish permanent residence (cannot be a PO Box)

**!** **You can only be in one Medicare Advantage plan at a time.** Medicare will automatically terminate you from this plan if you enroll in any other Medicare Advantage plan or standalone Part D prescription drug plan.

# NEXT STEPS

- ❑ Review all the information in your 2025 Healthcare Benefit Guide that was mailed to you.
- ❑ Search the provider directory and formulary on [carefirst.com/learngroupma](https://www.carefirst.com/learngroupma) to check that your doctors and medications are covered.
- ❑ Call RetireeFirst if you have any questions at 301-200-5542 or toll-free at 855-246-2157.
- ❑ **There is nothing you need to do to enroll in the plan.**
- ❑ In early December, you will start receiving communications from CareFirst confirming your enrollment in the plan – and you will receive your Welcome Kit and your new member ID card in the mail.

# RETIREEFIRST MEMBER ADVOCACY

## We partner with RetireeFirst to support our members.

RetireeFirst was founded in 2006 with a mission to simplify retiree healthcare. CareFirst and RetireeFirst work together to ensure a smooth transition for you.



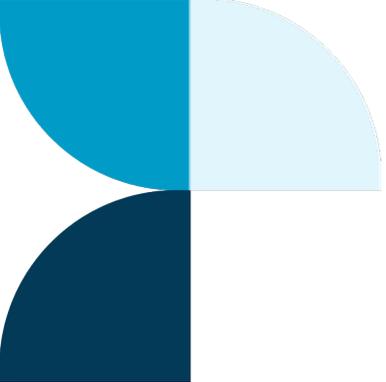
**Member education  
and communication**



**Open enrollment  
engagement session  
support**



**Dedicated retiree  
advocates available  
to support you**



RetireeFirst



# Charles County Public Schools Post-65 Retiree Presentation



Diane Mucci, Client Service Manager  
Kelly Hartnett, Vice President of Client Relations



Retiree**First**

# About RetireeFirst

Founded in 2006 with a mission to simplify the retiree experience by providing dedicated advocacy to navigate Medicare benefits provided by Charles County Public Schools

Commitment to compliance and data protection - AHIP Certified, URAC Accredited and CMS Certified

**375+**  
CLIENTS  
36 in  
Maryland

**99.9%**  
RETENTION

**90+**  
Net Promoter  
Score

**325k+**  
MEDICAL &  
PHARMACY LIVES

RetireeFirst works as an extension of CareFirst to offer a US based white glove concierge service and serve as a liaison between the insurance carrier, provider's office, and pharmacy.

# Retirees Come First

*Our Retiree Advocacy Services are our true hallmark.*

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- Our team of 140+ in-house, US-based Retiree Advocates creates a seamless benefits experience and delivers on the promise of improving the health and happiness of the people we serve
- Advocates are available Monday through Friday from 8 am–5 pm; we have an emergency line available after hours
- Members receive a dedicated group phone number—toll free and local; each call routes to the Advocate with case history first, then dedicated team second
- Many Advocates are bi-lingual and can partner with a HIPAA-compliant service offering translation in 300+ languages
- Average speed of answer from a live Advocate is under 15 seconds, which is why we don't use call menus
- Advocates:
  - Host kick-off and one-on-one meetings to help members understand plan changes
  - Provide real-time Pharmacy and Physician assistance to members
  - Interface directly with governmental agencies to solve problems on the member's behalf
  - Troubleshoot issues and make completion calls to close the loop and ensure resolution
  - Work to close gaps in care (diabetic eye exams, mammograms colonoscopies) and schedule house calls and annual wellness visits



# How RetireeFirst Supports You

## How can we help?

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- Outreach to providers
- Medical prior authorizations
- Medical reimbursements
- Medical billing/Benefits questions
- Pharmacy outreach
- Mail order assistance
- Formulary lookup
- Prescription prior-authorization/step therapy
- Prescription billing/benefits questions

## Some common questions

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- “I received a bill, and I’m unsure if these services should be covered.”
- “I need help finding a specialist.”
- “I need help making an appointment.”
- “What does this benefit mean for me and how can I take advantage of it?”
- “I need to know if a specific drug my doctor prescribed is covered.”
- I’m at the pharmacy and my medication costs more than normal.”

# Member Journey to Resolution



# Testimonials

“My Advocate, Ashley, is a skilled professional who always answers my questions and supports me with complex billing issues. Without her support during stressful times, I don't know what me and my husband would do.”

—County's Administrative Officer

“My Advocate, Julianne, consistently provides excellent service from initial contact through resolving issues. I never had a representative who was so attentive, conscientious, and interested in helping me while being very friendly the whole time. What a pleasure!”

—Renee, Alaska Laborers Local 341 and 942



Wall of Appreciation at  
Offices in Mt. Laurel, NJ



RetireeFirst

Questions?





# RetireeFirst

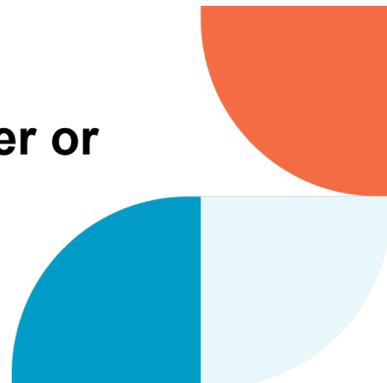
**Charles County Public Schools  
Dedicated Retiree Line:**

**301-200-5542 (TTY 711)**

**Toll free 855-246-2157 (TTY 711)**

**Monday-Friday, 8am-5pm EST**

**Please have the following information ready for provider or  
medication inquiries:**

- List of current providers including phone number
  - List of current medications
- 



THANK YOU

CareFirst BlueCross BlueShield Medicare Advantage is a PPO plan with a Medicare contract. Enrollment in CareFirst BlueCross BlueShield Medicare Advantage depends upon contract renewal. CareFirst BlueCross BlueShield Medicare Advantage is the business name of CareFirst Advantage, Inc., an independent licensee of the Blue Cross and Blue Shield Association. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

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Medicare Advantage

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# APPENDIX

# RETAIL PHARMACY BENEFITS

These are the copays you will pay at a retail pharmacy.

Note: Part D cost-sharing does not count toward the overall medical out-of-pocket maximum (MOOP) for your PPO plan.

CAREFIRST BLUECROSS BLUESHIELD GROUP ADVANTAGE (PPO)			
	30 Day Supply	60 Day Supply (2x copay)	90 Day Supply (2x copay)
<b>Tier 1—Preferred Generic</b>	\$10 copay	\$20 copay	\$20 copay
<b>Tier 2—Generic</b>	\$10 copay	\$20 copay	\$20 copay
<b>Tier 3—Preferred Brand</b>	\$15 copay	\$30 copay	\$30 copay
<b>Tier 4—Non-Preferred Drug</b>	\$30 copay	\$60 copay	\$60 copay
<b>Tier 5—Specialty</b>	\$30 copay	Not covered	Not covered

# MAIL ORDER PHARMACY BENEFITS

These are the copays you will pay through your mail order benefit for qualifying drugs.

Note: Part D cost-sharing does not count toward the overall medical out-of-pocket maximum (MOOP) for your PPO plan.

CAREFIRST BLUECROSS BLUESHIELD GROUP ADVANTAGE (PPO)			
	30 Day Supply	60 Day Supply (1x copay)	90 Day Supply (1x copay)
<b>Tier 1—Preferred Generic</b>	\$10 copay	\$10 copay	\$10 copay
<b>Tier 2—Generic</b>	\$10 copay	\$10 copay	\$10 copay
<b>Tier 3—Preferred Brand</b>	\$15 copay	\$15 copay	\$15 copay
<b>Tier 4—Non-Preferred Drug</b>	\$30 copay	\$30 copay	\$30 copay
<b>Tier 5—Specialty</b>	\$30 copay	Not covered	Not covered