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Milwaukee Retiree Association (MRA)

Affiliated with the Milwaukee Area Labor Council (MALC), AFL-CIO

Since 1959, MRA has been Serving and Representing City of Milwaukee Employee Retirement System (CMERS)

Retirees and Spouses



2021 Plan Year Open Enrollment Information for City of Milwaukee Medicare Retirees and Spouses

Inside you'll find:

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MILWAUKEE RETIREE ASSOCIATION, INC.

P. O. Box 342055
MILWAUKEE, WI 53234-2055

To: City of Milwaukee Medicare-eligible Retirees (and spouses)

From: MRA Board and National Benefit Consultants, Inc.

Date: October 2020

Regarding: **2021 Medicare Advantage Health Plan(s) For Medicare-eligible Retirees**

The Milwaukee Retiree Association, Inc., (MRA), Milwaukee Area Labor Council (MALC), AFL-CIO, has been actively helping retirees for over 50 years. This is the 18th year the Milwaukee Retiree Association has sponsored a Group Medicare Advantage plan for over 1,200 City of Milwaukee retirees and their Medicare-eligible spouses/dependents. We are pleased to report that the Aetna Group Medicare Advantage Plan (Extended Service Area – PPO) will renew for the 2021 Plan Year with no benefit design changes. This plan offers the opportunity for significant premium savings over the City plan. This plan has benefits similar to those now offered by the City, but they are not exactly the same. Members have experienced comprehensive health coverage along with added features such as the SilverSneakers fitness benefit included with the Aetna plan.

If you are happy with your plan and do not intend to make changes to your plan election, no action on your part is needed. **Your plan will automatically update for the new plan year.**

2021 Premium

The 2021 premium for the Aetna Group Medicare Advantage Plan will be \$13 per member per month. The plan provides a substantial premium savings for members over the other two (2) City options.

Beyond cost savings, the Aetna Group Medicare Advantage plan is worth your review and consideration if you are not presently a member or will become Medicare-eligible in 2021. We'd like to share a little information about the Medicare Advantage plan, and give you an opportunity to learn more. If you are not presently a member and wish to find out more, you can request a plan kit or attend a virtual Open Enrollment Fair event. Information about Open Enrollment guidelines are contained in this annual mailing. A Decision Guide is included to help you compare your plan options.

2021 – Aetna Group Medicare Advantage Plan Option

The Aetna Group Medicare Advantage plan is an Extended Service Area Preferred Provider Organization (PPO), which allows you to access any Medicare provider or facility that accepts Medicare and agrees to bill the Aetna Medicare plan. This single group plan option is available to retirees residing in every state and county within the United States based on permanent U.S. residential address. The same member cost share for services applies regardless if you use in-network or out-of-network providers. This is an important feature of an extended-service area Group Medicare Advantage (PPO) plan.

The plan has co-pays and co-insurance for various services, however, you are protected with an annual out-of-pocket limit or out of pocket (OOP) medical plan maximum. The annual maximum out-of-pocket amount is \$5,100 per participant. The annual maximum out-of-pocket limit amount includes any co-payment or co-insurance that you pay. It will apply to all Medicare-covered medical expenses, except hearing aid reimbursement and Medicare prescription drug coverage. As an additional benefit, the Aetna Group Medicare Advantage plan coverage will include the SilverSneakers Fitness Program at participating health clubs. Go to www.SilverSneakers.com for participating fitness centers near you.

Medicare Advantage (Part C) General Overview

A Medicare Advantage plan is another Medicare health plan choice you may have as part of Medicare. Medicare Advantage plans, sometimes called “Part C” or “MA Plans or MA-PD,” are offered by private insurance companies approved by Medicare. If you join a Medicare Advantage plan, the plan will provide all of your Part A (Hospital Insurance) and Part B (Medical Insurance) coverage and Part D (Prescription) coverage. Medicare Advantage plans can offer extra coverage, such as wellness programs (SilverSneakers) and additional benefits to encourage wellness. Medicare pays a fixed amount for your care every month to the companies offering Medicare Advantage plans. These companies must follow rules set by Medicare. In addition to your Part B premium, you may have to pay a monthly plan premium to participate. Each Medicare Advantage plan can charge different out-of-pocket costs for services.

Additional Guidance

Finally, if you are a retiree and plan on returning to City of Milwaukee UnitedHealthcare Choice or Choice Plus coverage during Open Enrollment, you may plan to attend one of their virtual City of Milwaukee Open Enrollment Fair events or contact ERS for enrollment information. Be sure to respect the City’s deadlines for changes. City Open Enrollment has been extended by one (1) week this year.

For further information on the available Aetna Group Medicare Advantage program, contact National Benefit Consultants, Inc. Plan guides are available electronically through email or by U.S. mail.

**WATCH THE MAIL FOR IMPORTANT ANNUAL NOTICE INFORMATION YOU WILL RECEIVE
FROM YOUR HEALTH PLAN. NO ACTION IS NECESSARY IF YOU ARE NOT MAKING A PLAN CHANGE.**

**National Benefit Consultants, Inc.
208 E. Oak Crest Drive Wales, WI 53183
1-800-875-1505 (toll-free) or 1-262-201-4370 (local)
TTY: 711 or Email: info@nbcibiz**

[Central Standard Time (CST) – M-F 8:30 a.m. - 4:30 p.m. Closed at noon Fridays – Memorial Day to Labor Day]

**Visit MRA at www.milwaukeeeretired.org
P.O. Box 342055, Milwaukee, WI 53234-2055
Leave Messages – (414)-297-9215 Email: info-mra@milwaukeeeretired.org
Affiliated with the MILWAUKEE AREA LABOR COUNCIL, AFL-CIO Rev. 4/19**

**The City of Milwaukee Open Enrollment will take place
Monday, 10/26/2020 – Friday, 11/20/2020
City of Milwaukee Retiree Benefit Guide (2021) and Forms – available online**

Information about virtual online sessions is included in the City's open enrollment retiree mailing and will be posted on the ERS's website www.cmers.com.

Stay Connected, Stay Informed, Make a Difference

For important member updates refer to the MRA website www.milwaukeeetired.org

Group Medicare Advantage – MRA Board and Member Testimonials

"The saving in premium alone for one with Medicare is between \$3,000 and \$4,000 per year.

The total 12 month annual premium for one with the MRA Aetna Medicare Advantage Plan is \$156, while the total 12 month annual premium for the City's plan are either \$4,311 or \$3,681. The difference between the Aetna plan and the City plans are at least \$3,500 per year in 2021 for a single Medicare retiree.

The premium difference for a City retiree with the MRA Group Medicare Advantage plan rather than one of the City Medicare plans for the past 15-16 years (since 2005) is more than \$50,000 in total premium, and for two the premium difference with the MRA Group Medicare advantage plan for the same time period is well over \$100,000."*

- Mike Brady, *Former City of Milwaukee Benefit Director*
MRA Health Care Board Chair

"I have had the Medicare Advantage insurance plan for more than 15 years. I am very happy with my decision."

– Harriet Schlichting, Retired Health Department

"I am happy to give my strongest endorsement to the MRA-sponsored Aetna Medicare Advantage plan. It is superior, both as to costs and benefits."

-Stuart S. Mukamal, Retired Assistant City Attorney"

"Over the last couple of years I've had the experience of dealing with health issues. I am very satisfied from my standpoint. It has been gratifying to know that costs and services have been exceptional." – Roger Oldenburg
Retired, DPW

"I would recommend that this insurance program be considered as MRA members consider their health insurance options."

-Elizabeth Zelazek, Retired Health Department - Nursing
Member - MRA Health Committee

*Premium fact sheet. Historical Comparison, City Plans to MRA Group Medicare Advantage.
Found on www.milwaukeeetired.org/benefits.

National Benefit Consultants, Inc.

262.201.4370 | 800.875.1505 | Fax: 262.201.4383 | info@nbci.biz | www.nbci.biz

208 East Oak Crest Drive | Wales, WI 53183



Dear City of Milwaukee Retirees Turning 65 in 2021 and Prospective Retirees:

If you are becoming Medicare-eligible at age 65 or perhaps you may choose to retire in the calendar year 2021, we are pleased to include you in the informational mailing provided to current City of Milwaukee Medicare-eligible retirees.

National Benefit Consultants, Inc. and MRA are proud to offer an alternate group Retiree Health Insurance Plan Option for your consideration when you become eligible for Medicare. If you are interested in learning more about the plan available to City of Milwaukee retirees that are enrolled in Medicare Parts A and B, attend a Virtual Open Enrollment event (see page 3).

If you cannot attend one of these informational events or would prefer to learn about the Advantage plan closer to your actual Medicare entitlement and enrollment date, representatives are available throughout the year to assist you with your questions or your enrollment.

Important Medicare Enrollment Reminder: It is your responsibility to call Social Security at 1-800-772-1213 or visit your local Social Security office if you have questions regarding your Medicare Part A and Part B entitlement, eligibility and enrollment. Retirees and plan dependents must be enrolled in both Medicare Part A and Part B when participating in retiree health insurance plan coverage.

Enrolling in Medicare is not automatic for all beneficiaries. If you prefer, online enrollment for Medicare is available at SSA.gov. Plan ahead! Social Security is the Federal Agency that handles Medicare enrollment.

We wish you a wonderful fall season and all the best in 2021! Please call or email us if you have any questions.

Regards,

A handwritten signature in black ink, appearing to read 'Kerry Leist'.

Kerry Leist, President

E: Kleist@nbci.biz

T: 262-201-4370

City of Milwaukee Over 65 Retiree Options 2021 - Medicare Retirees and/or Spouses

City Plans Benefit Comparison to MRA Group Medicare Advantage Plan (ESA-PPO)

	UHC Choice city-sponsored (w/25% subsidy)	UHC Choice Plus city-sponsored (w/25% subsidy)	Aetna Group Medicare Advantage MRA-sponsored (no city subsidy)
Single premium (Monthly/Annual):	\$359.25 / \$4,311.00	\$306.75 / \$3,681.00	\$13.00/\$156.00
Two Person premium (Monthly/Annual):	\$717.00 / \$8,604.00	\$579.00 / \$6,948.00	\$26.00/\$312.00
Type of Plan:	Self-funded (EPO)	Self-funded (PPO)	Group Medicare Advantage Extended Service Area PPO
Insurance Co. Provider Network:	National Network (1)	National Network (1)	National Network
Plan Availability/Residency based:	Nation-wide	Nation-wide	Nation-wide
<div style="border: 1px solid black; padding: 5px;"> <p>* IMPORTANT 2021 CITY PLAN UPDATE Medicare Coordination Strategy: Medicare is the <u>primary</u> and <u>first payer</u> of Medicare-covered, eligible healthcare services for retirees 65+ enrolled in Medicare Part A (hospitalization) and Part B (medical). The City of Milwaukee Choice and Choice Plus plans coordinate (integrate) coverage by paying after Medicare for eligible city plan benefits. The Medicare coordination style will be updated in 2021. The city plans will no longer consider Medicare's payments as credit toward the plan member's satisfaction toward the deductible and member out of pocket maximum responsibilities. See the City's Retiree Benefits Guide (2021) for more detailed information.</p> </div>			
Deductible In-Network	\$1,500 S*/\$3,000 F*	\$3,000 S*/\$6,000F*	\$0
Deductible Out-Of-Network	No coverage - emergencies only*	\$6,000 S*/\$12,000 F*	\$0
Office Visit (1)	T1 - Member pays 20% Non T1 - Member pays 40%	T1 - Member pays 20% Non T1 - Member pays 40%	\$15 Primary/\$40 Specialist
 In-Network	after deductible*	after deductible*	each visit
Office Visit	No coverage*	Member pays 40% after	\$15 Primary/\$40 Specialist
 Out-Of-Network		deductible*	each visit
Co-Insurance (1)	T1 - Member pays 20% Non T1 - Member pays 40%	T1 - Member pays 20% Non T1 - Member pays 40%	<i>Varies -see plan summary</i>
 In-Network	after deductible*	after deductible*	
Co-Insurance	No coverage -	Member pays 40% after	same as in-network
 Out-Of-Network	emergencies only*	deductible*	
Emergency Room	\$250 co-pay applies**	\$250 co-pay applies**	\$80 co-pay waived if admitted within 24 hours
Inpatient Hospital	Member pays 20%	Member pays 20%	\$200 per day: days 1-7
 In-Network	after deductible*	after deductible*	<i>per admission</i>
Inpatient Hospital	No coverage -	Member pays 40% after	\$200 per day: days 1-7
 Out-Of-Network	emergencies only*	deductible*	<i>per admission</i>

	UHC Choice	UHC Choice Plus	Aetna Group Medicare Advantage
Outpatient Hospital In-Network	Member pays 20% after deductible*	Member pays 20% after deductible*	\$185 co-pay
Outpatient Hospital Out-Of-Network	No coverage - emergencies only*	Member pays 40% after deductible*	\$185 co-pay
Prescription Drugs			
Retail Pharmacy - 30 day supply	Member pays 20% co-insurance Max: \$75- 30 days	Member pays 20% co-insurance Max: \$75- 30 days	\$2/\$10/\$40/35%/33% CMS Minimum Gap Coverage
Dental	not included	not included	not included
Silver Sneakers	not included	not included	included
Medical Annual Max OOP in-network	\$3,000 S*/\$6,000 F*	\$6,000 S*/\$12,000 F*	\$5,100 (in and out of network)
Medical Annual Max OOP out-of-network	No coverage*	\$12,000 S*/\$24,000 F*	
Annual Max OOP for Prescriptions	\$3,600	\$3,600	No OOP Max - prescriptions

OPEN ENROLLMENT - PLAN SELECTIONS: You only need to complete an application during Open Enrollment if you intend to change plans. If you would like to remain in your current City of Milwaukee-sponsored (Choice or Choice Plus retiree plan) or the MRA-sponsored Aetna Group Medicare Advantage for 2021, you do not have to do anything.

This is a high-level comparison and not intended to be a legal contract. Current and prospective members should request a full plan kit for complete plan details of the medical and pharmacy plan. The City of Milwaukee plans are outlined in the annual **City of Milwaukee Retiree Benefits Guide**. The Aetna Group Medicare Advantage is outlined in the **Information Packet** (2021). The Aetna Group Medicare Advantage Plan Annual Maximum Out-Of-Pocket (OOP) does not include outpatient drugs. Applicable medical cost-share applies to the OOP. See Plan's Summary and other plan communications for complete details on medical and pharmacy benefits including 90 days retail and mail order costs. Medicare Part B/mo: Amount varies. Standard Part B premium for 2020 is \$144.60 or more based on income and Medicare enrollment date. This amount must be paid no matter which plan is chosen. The Medicare Part B 2021 Medicare premium has not been announced as of the time of this publication.

(1) City of Milwaukee UnitedHealthcare (UHC) Choice and Choice Plus plans illustrated in this chart feature Tier 1 provider coinsurance amounts: For important information about UHC Premium Tier 1 providers, please go to www.myuhc.com or call the number for UHC [1-800-841-4901]. Refer to the City of Milwaukee Retiree Benefits Guide for complete details on the UHC Choice and Choice Plus plans.

This Medicare Advantage group plan is listed for information only. The City does not offer or sponsor this plan in any way and has no contract with respect to this plan. MRA (MALC AFL-CIO) group plan is available on a voluntary basis. There are other Medicare supplement plans for retirees over 65. Call the State of Wisconsin Board on Aging and Long Term Care 1-800-242-1060 <TTY:711> for further assistance. Benefit Comparison prepared in part by City of Milwaukee Employee Benefits, rev. 10.08.2020.

DECISION GUIDE

FOR MEDICARE-ELIGIBLE CITY OF MILWAUKEE RETIREES AND SPOUSES

This Decision Guide is a tool to help Medicare retirees (and spouses) analyze their plan choices and the associated coverage costs. We encourage you to make use of the many resources available to you to evaluate your insurance on an annual basis.

All those Medicare retirees participating in the City of Milwaukee Employees' Retirement System have the opportunity to consider the retiree group plan available through the MRA.

City of Milwaukee health insurance-eligible retirees have the opportunity to consider plans offered by the City (with a City subsidy of only 25% of premium) and the MRA plan. For those eligible to participate in City insurance, retirees 65 and older who leave City coverage must maintain insurance under a Medicare plan to be eligible to return to the City's insurance during the yearly open enrollment period. This provides an annual opportunity to consider the plan that is right for you.

In making an informed decision on which plan is most appropriate for you, two (2) key considerations are the **Annual Plan Premium** and **Anticipated Annual Out-of-Pocket Costs**.

The annual plan premium is a fixed cost and easy to consider. Your anticipated out-of-pocket costs are based on your expected utilization, so you have to estimate the health care you and/or your spouse expect to receive. To help you with this, the MRA health committee has developed a Decision Guide worksheet you may find helpful to compare plan costs.

The attached **Plan Options Chart** illustrates the various plans offered by the City and the Retiree Association.

The **Decision Guide** worksheet provides space to compare the premium and lists the most common categories of out-of-pocket costs. In determining which plan is most suitable for you and your spouse, calculate your anticipated 2021 total annual premium, if any, and annual out-of-pocket costs under each offered plan using the **Decision Guide** worksheet. Adding these together gives you a ball park estimate of your anticipated health care costs. Keep in mind that plan availability may be based on where you live and may affect your premium, out-of-pocket maximums and other benefits.

Obtain a plan informational kit for complete plan detail.

Annual Open Enrollment

Please remember that you can leave the City of Milwaukee insurance plan **at any time** as a Medicare-eligible retiree. However,

- **You must notify the Pension Office in writing.** City-sponsored enrollment and cancellation forms can be found on the CMERS website: www.cmers.com/Library/Forms
- **You must maintain continuous coverage under a Medicare Advantage program or a Medicare supplement or you will not be able to return to the City's health insurance at a later date.**
- **Retirees can re-enroll, if you choose, in the City's plans during the annual City of Milwaukee Open Enrollment period held in the fall of each year or based on an eligible qualified event.** The City's coverage will begin January 1st. You will need to **request** the open enrollment information from the **Pension Office 1-414-286-3557** if you have left City coverage.
- For further information on the group program which is available to ERS and MRA members throughout the year, contact **National Benefit Consultants, Inc. (NBCI) 1-262-201-4370.**
- If you are a City retiree who was not eligible for City health insurance at retirement or have dropped City insurance, you may still want to contact **National Benefit Consultants, Inc. (NBCI) 1-262-201-4370** to see if they have a plan that may be right for you.

NOT A MEMBER? READY TO LEARN MORE? READY TO ENROLL IN THE AETNA GROUP MEDICARE ADVANTAGE PLAN?

1. Call Aetna at 1-800-307-4830 (TTY: 711) to enroll:
 - ⇒ Refer to the Aetna assigned plan sponsor group number: AE467081.
 - ⇒ Have your Medicare ID card available.
2. Follow any instructions from your plan sponsor for cancelling any prior coverage.
3. Make note of the telephone enrollment confirmation number.
4. Call National Benefit Consultants, Inc. (NBCI) with your enrollment confirmation number at 1-262-201-4370.

ADDITIONAL TOOLS & RESOURCES

- Attend Virtual Open Enrollment Fairs
- 2021 City of Milwaukee Retiree Benefits Guide
- Employees' Retirement System website www.cmers.com
- City Benefit's Website – *Just Click on the Benefits tab*
- www.city.milwaukee.gov/der
- <https://www.medicare.gov>

How to Determine What Health Insurance Plan to Purchase - Decision Guide

Compare 2021 Plan Premiums





- Write what you would pay each month under your current coverage and then write what you would pay with the new plan. Multiply your monthly amount by 12 to find the annual amount*.
- **NOTE:** The required Medicare part B premium does not have to be figured in your calculations because it would be the same amount no matter which retiree plan you have.

	MONTHLY PREMIUMS	
	<u>Your 2021 Plan</u>	<u>New Plan Considered</u>
City Plan*	\$ _____	\$ _____
MRA Available Retiree Plan*		
Medicare Advantage	\$ _____	\$ _____
Medicare Supplement	\$ _____	\$ _____
Prescription Drug Plan <i>(If not included in plan premium)</i>	\$ _____	\$ _____
A) Total the amounts above	\$ _____	\$ _____
B) Then multiply each column by:	(A x 12)	(A x 12)
⇒ 2021 ANNUAL PLAN PREMIUM	= \$ _____	= \$ _____
<p>*For the City and MRA plan this annual premium amount is calculated for you. See the blue-colored Retiree Options chart.</p>		

Things to Consider: Medicare Advantage plans usually have specific service areas in which you have to reside to enroll in the plan. Be sure you reside within the service area, especially if you may move during the year.

Evaluating Your TOTAL 2021 Health Insurance Plan Costs

- Evaluate your Total Health Insurance Plan costs by entering your estimated annual amounts. Determine your medical and drug costs (Use Work Space provided, if necessary). Do the same for your spouse's estimate.
- **Value Adds to Consider:** Are there any other plan benefits (such as fitness memberships, dental or vision coverage included), non-covered benefits or unique medical needs that factor in my plan selection?

	2021 TOTAL ANNUAL COSTS	
	<u>Your 2021 Plan</u>	<u>New Plan Considered</u>
 2021 Annual Plan Premium (Use space above)	\$ _____	\$ _____
 Medical Costs (Use worksheet on page 10)	\$ _____	\$ _____
 Prescription Costs (Use worksheet on page 11)	\$ _____	\$ _____
 Your Total Estimated Plan Costs for the Year	\$ _____	\$ _____

How to Determine What Health Insurance Plan to Purchase - Decision Guide

[Work Space - Use For Estimating Medical Costs]

Your 2021 MEDICAL costs

Things to Consider:

- What are your plan deductibles, co-pays, co-insurances? Plan benefits can change from year to year! Do not assume you will have the same benefits as this past year.
- Are your doctors and hospitals network providers? Using in-network providers typically costs less. Some plans may not cover out-of-network services unless it is a medical emergency.
- What happens if you require medical care outside the network while traveling?
- If you travel or vacation for extended periods or you move, can you keep your coverage? For answers, check with the plan.
- What is the Annual Out-Of-Pocket (OOP) Maximum Limit on the plan that limits your expenses during the plan year? Is there a combined or separate limit for network and non-network services? Is the Annual Out-of-Pocket Maximum amount based on Single (Individual) or Family coverage type?

ANNUAL OUT-OF-POCKET MEDICAL COSTS*

	<u>Your 2021 Plan</u>	<u>New Plan Considered</u>
Annual Plan Deductible	\$ _____	\$ _____
Doctor's Visits	\$ _____	\$ _____
Inpatient Hospital	\$ _____	\$ _____
Skilled Nursing Facility (SNF) Care	\$ _____	\$ _____
Home Health	\$ _____	\$ _____
Diagnostic Tests, Labs, X-rays	\$ _____	\$ _____
Emergency Room - Urgent Care - Ambulance	\$ _____	\$ _____
Durable Medical Equipment (wheelchair, walker, etc.)	\$ _____	\$ _____
Other Covered Costs	\$ _____	\$ _____

⇒ **Total to find YOUR ESTIMATED
ANNUAL OUT-OF-POCKET (OOP)
MEDICAL COSTS**

\$ _____

\$ _____

*For the City and MRA plan this annual out-of-pocket plan maximum (if applicable) is calculated for you on the blue-colored Retiree Options chart.

**Annual Out-of-Pocket
(OOP) Maximum**

\$ _____

**Annual Out-of-Pocket
(OOP) Maximum**

\$ _____

How to Determine What Health Insurance Plan to Purchase - Decision Guide

[Work Space - Use For Estimating Prescription Costs]

Your 2021 Outpatient PRESCRIPTION Drug costs

- Write the names of the drugs you take now or expect to take.
- Will your prescription drugs be covered by the plan (on the Plan's formulary or list of covered drugs) and what are your co-pays or co-insurance amounts for them?
- Multiply the monthly cost by the number of months you will fill the prescription to find your estimated cost per year.
- Does an annual out-of-pocket maximum limit apply on the prescription drug plan coverage?
- Does the plan have a Mail Order program that results in a co-pay or co-insurance (cost) savings?
- Important: How will outpatient prescription drugs be covered by the Plan I am considering once I reach the Initial Coverage Limit (ICL)? In other words, after I reach \$4,130 (the Coverage Gap Stage or "Donut Hole") of Total Drug Expenditures in 2021, how much will I be expected to pay for my drugs before Part D Catastrophic Coverage begins? Review the plan details. Ask questions.

2021 ANNUAL OUT-OF-POCKET DRUG COSTS

Medication Name	Your Current Plan(s)					The New Plan You Are Considering				
	Covered?		Cost Month	# /Months	Cost Year	Covered?		Cost Month	# /Months	Cost Year
_____	Yes	No	\$ _____	x _____	= \$ _____	Yes	No	\$ _____	x _____	= \$ _____
_____	Yes	No	\$ _____	x _____	= \$ _____	Yes	No	\$ _____	x _____	= \$ _____
_____	Yes	No	\$ _____	x _____	= \$ _____	Yes	No	\$ _____	x _____	= \$ _____
_____	Yes	No	\$ _____	x _____	= \$ _____	Yes	No	\$ _____	x _____	= \$ _____
_____	Yes	No	\$ _____	x _____	= \$ _____	Yes	No	\$ _____	x _____	= \$ _____
_____	Yes	No	\$ _____	x _____	= \$ _____	Yes	No	\$ _____	x _____	= \$ _____
_____	Yes	No	\$ _____	x _____	= \$ _____	Yes	No	\$ _____	x _____	= \$ _____
_____	Yes	No	\$ _____	x _____	= \$ _____	Yes	No	\$ _____	x _____	= \$ _____

TOTAL the "Cost Per Year" numbers to find											
YOUR ESTIMATED ANNUAL OUT-OF-POCKET DRUG COSTS.					\$ _____		\$ _____				