



## Advantra Rx Premium Renewal for State of Kansas

For an Effective Date of January 1, 2016

### Prescription Drug (Part D) Coverage (per Member per Month)

Current Plan	
<b>Renewal Rate Effective 1/1/16</b>	<b>\$176.00</b>
<i>Deductible</i>	\$0
<b>Retail (up to 60-day supply)</b>	
<i>Tier 1 - Generic</i>	25% with \$30 max
<i>Tier 2 - Preferred Generic</i>	25% with \$30 max
<i>Tier 3 - Preferred Brand</i>	25% with \$100 max
<i>Tier 4 - Non-preferred Brand</i>	50% with \$150 max
<i>Tier 5 - Specialty*</i>	33% with \$100 max
<b>Retail (61-90 day supply)</b>	
<i>Tier 1 - Generic</i>	25% with \$45 max
<i>Tier 2 - Preferred Generic</i>	25% with \$45 max
<i>Tier 3 - Preferred Brand</i>	25% with \$150 max
<i>Tier 4 - Non-preferred Brand</i>	50% with \$225 max
<i>Tier 5 - Specialty</i>	Not Available
<i>Gap Coverage (&gt; \$3,310 Total Drug Spend)</i>	Full coverage in the gap
<i>Catastrophic Coverage (&gt; \$4,850 Member Out of Pocket)</i>	Greater of: \$2.95 Generic or Pfd Multi Source & \$7.40 Other or 5% Coinsurance
<b>Mail Order (up to 90-day supply)</b>	
<i>Tier 1 - Generic</i>	25% with \$45 max
<i>Tier 2 - Preferred Generic</i>	25% with \$45 max
<i>Tier 3 - Preferred Brand</i>	25% with \$150 max
<i>Tier 4 - Non-preferred Brand</i>	50% with \$225 max
<i>Tier 5 - Specialty</i>	Not Available

\* Specialty medications are only available on a 30 day fill and not available through mail order.