

Medicare Part D Creditable Coverage Determinations

Creditable/Non-Creditable Testing Results for Independence Blue Cross Commercial Pharmacy Plans

List of creditable plans

Standard Drug Program options

The following Standard Drug Program plan designs were determined to be *creditable*.

Retail copay or coinsurance – Single tier	
\$0	\$6
\$0.50	\$8
\$1	\$10
\$2	\$15
\$3	\$20
\$5	\$25
20%	30%

Retail copay — Two tier (generic/brand)			
\$1 / \$3	\$5 / \$10	\$8 / \$15	\$15 / \$25
\$2 / \$6	\$5 / \$15	\$9 / \$15	\$15 / \$30
\$2 / \$10	\$5 / \$20	\$10 / \$15	\$20 / \$30
\$3 / \$5	\$5 / \$25	\$10 / \$20	\$10 / \$35
\$3 / \$10	\$6 / \$10	\$10 / \$25	\$15 / \$35
\$4 / \$8	\$7 / \$15	\$10 / \$30	\$20 / \$35
\$4 / \$10	\$8 / \$14	\$15 / \$20	\$20 / \$40

Select Drug Program[®] options

The following Select Drug Program plan designs were determined to be *creditable*.

Retail copays — Three tier (generic formulary/brand formulary/non-formulary)			
\$0 / \$25 / \$50	\$5 / \$20 / \$35	\$10 / \$20 / \$35	\$15 / \$20 / \$35
\$5 / \$10 / \$25	\$5 / \$20 / \$50	\$10 / \$20 / \$40	\$15 / \$25 / \$35
\$5 / \$10 / \$35	\$5 / \$25 / \$50	\$10 / \$20 / \$50	\$15 / \$25 / \$50
\$5 / \$10 / \$50	\$5 / \$30 / \$50	\$10 / \$25 / \$40	\$15 / \$35 / \$50
\$5 / \$15 / \$25	\$5 / \$40 / \$60	\$10 / \$30 / \$50	\$20 / \$40 / \$60
\$5 / \$15 / \$30	\$7 / \$35 / \$50	\$10 / \$40 / \$60	
\$5 / \$15 / \$35	\$10 / \$15 / \$25	\$10 / \$40 / \$70	
\$5 / \$15 / \$50	\$10 / \$20 / \$30	\$10 / \$45 / \$75	

Retail copays — Three tier (with coinsurance for third tier non-formulary)	
\$5 / \$10 / 50%	\$10 / \$20 / 50%
\$5 / \$15 / 50%	\$10 / \$40 / 50%
\$5 / \$20 / \$50%	\$15 / \$40 / 50%

Retail cost-sharing — Upfront deductible and three-tier copay schedule (generic formulary/brand formulary/non-formulary)			
\$250/\$5/\$40/\$60	\$250/\$20/\$40/\$60	\$250/\$10/\$45/\$75	\$500/\$15/\$40/\$75

Deductible/Coinsurance Drug Program options

The following Deductible/Coinsurance Drug Program plan designs were determined to be *creditable*.

Coinsurance	Deductible	Calendar year OOP maximum
20%	\$100	\$2,000
20%	\$150	\$2,000
20%	\$200	\$2,000
20%	\$250	\$2,000
30%	\$150	\$3,000
30%	\$200	\$3,000

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Basic Drug Program options

The following Basic Drug Program plan design was determined to be *creditable*.

Retail copays — Two tier (with a copayment maximum for brand drugs)
\$7 / 50%, \$125 max member payment

Integrated Drug programs. Drug claims are processed under the medical benefit and are subject to the deductible and disappearing coinsurance or out-of-pocket maximum of the overall medical plan. For example, prescription drugs covered under Major Medical, Comprehensive Major Medical, or HSA-Qualified High Deductible Health Plans and the overall program benefits fall within these ranges.

The following Integrated Drug Programs plan designs were determined to be *creditable*.

Major Medical options

Coinsurance	Deductible	Lifetime maximum	Disappearing coinsurance
20%	\$100	unlimited	Unlimited
20%	\$100	unlimited	\$10,000
20%	\$100	unlimited	\$2,000
20%	\$100	unlimited	\$5,000
20%	\$250	unlimited	\$10,000
20%	\$250	unlimited	\$2,000
20%	\$250	unlimited	\$4,000
20%	\$250	unlimited	\$5,000
20%	\$50	unlimited	\$10,000
20%	\$50	unlimited	\$2,000
20%	\$100	unlimited	\$0
20%	\$100	unlimited	\$10,000
20%	\$100	unlimited	\$2,000
20%	\$100	unlimited	\$5,000
20%	\$250	unlimited	\$10,000
20%	\$500	unlimited	\$10,000
20%	\$500	unlimited	\$2,000
20%	\$500	unlimited	\$5,000
20%	\$500	unlimited	\$10,000
20%	\$100	unlimited	Unlimited
20%	\$100	unlimited	\$10,000
20%	\$100	unlimited	\$2,000
20%	\$100	unlimited	\$5,000
20%	\$100	unlimited	\$0
20%	\$100	unlimited	\$10,000
20%	\$100	unlimited	\$2,000
20%	\$100	unlimited	\$5,000
20%	\$100	unlimited	\$0
20%	\$200	unlimited	\$10,000
20%	\$250	unlimited	\$0
20%	\$250	unlimited	\$0
20%	\$250	unlimited	\$10,000
20%	\$250	unlimited	\$2,000
20%	\$250	unlimited	\$2,500
20%	\$250	unlimited	\$5,000
20%	\$250	unlimited	\$0
20%	\$250	unlimited	\$10,000
20%	\$50	unlimited	\$10,000
20%	\$50	unlimited	\$10,000
20%	\$500	unlimited	\$0
20%	\$500	unlimited	\$0
20%	\$500	unlimited	\$2,000
20%	\$500	unlimited	\$0

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The following Integrated Drug plan designs were determined to be *creditable*.

Personal Choice® HSA-Qualified High Deductible Health Plan

Coinsurance	Deductible	Lifetime maximum	Out-of-pocket maximum
20%—INN	\$2,500 indiv/\$5,000 family	Unlimited	\$5,000 indiv/\$10,000 family
50%—OON	\$5,000 indiv/\$10,000 family	Unlimited	\$10,000 indiv/\$20,000 family
20%—INN	\$3,000 indiv/\$6,000 family	Unlimited	\$5,000 indiv/\$10,000 family
50%—OON	\$5,000 indiv/\$10,000 family	Unlimited	\$10,000 indiv/\$20,000 family
\$5 / \$20 / \$45 —INN	\$1,500 indiv/\$3,000 family	Unlimited	\$5,6000 indiv/\$11,200 family
50%—OON	\$5,000 indiv/\$10,000 family	Unlimited	\$10,000 indiv/\$20,000 family
\$5 / \$20 / \$45 —INN	\$2,000 indiv/\$4,000 family	Unlimited	\$5,6000 indiv/\$11,200 family
50%—OON	\$5,000 indiv/\$10,000 family	Unlimited	\$10,000 indiv/\$20,000 family
\$5 / \$20 / \$45 —INN	\$2,500 indiv/\$5,000 family	Unlimited	\$5,6000 indiv/\$11,200 family
50%—OON	\$5,000 indiv/\$10,000 family	Unlimited	\$10,000 indiv/\$20,000 family
\$5 / \$20 / \$45 —INN	\$3,000 indiv/\$6,000 family	Unlimited	\$5,6000 indiv/\$11,200 family
50%—OON	\$5,000 indiv/\$10,000 family	Unlimited	\$10,000 indiv/\$20,000 family
\$20 / \$40 / \$60 —INN	\$1,500 indiv/\$3,000 family	Unlimited	\$5,6000 indiv/\$11,200 family
50%—OON	\$5,000 indiv/\$10,000 family	Unlimited	\$10,000 indiv/\$20,000 family
\$20 / \$40 / \$60 —INN	\$2,000 indiv/\$4,000 family	Unlimited	\$5,6000 indiv/\$11,200 family
50%—OON	\$5,000 indiv/\$10,000 family	Unlimited	\$10,000 indiv/\$20,000 family
\$20 / \$40 / \$60 —INN	\$2,500 indiv/\$5,000 family	Unlimited	\$5,6000 indiv/\$11,200 family
50%—OON	\$5,000 indiv/\$10,000 family	Unlimited	\$10,000 indiv/\$20,000 family
\$20 / \$40 / \$60 —INN	\$3,000 indiv/\$6,000 family	Unlimited	\$5,6000 indiv/\$11,200 family
50%—OON	\$5,000 indiv/\$10,000 family	Unlimited	\$10,000 indiv/\$20,000 family

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List of creditable plans

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The following Integrated Drug plan designs were determined to be *creditable*.

Comprehensive Major Medical options

Coinsurance	Deductible	Lifetime maximum	Out-of-pocket maximum
20%	\$100	unlimited	\$400
20%	\$250	unlimited	\$1,000
20%	\$500	unlimited	\$2,000
20%	\$1,000	unlimited	\$4,000

List of *non-creditable* plans

Coinsurance Drug Program option

The following Coinsurance Drug program plan design was determined to be *non-creditable*.

Coinsurance — Single tier
50%

Basic Drug Program options

The following Basic Drug Program plan design was determined to be *non-creditable*.

Retail - one tier (with brand discount)
\$4 generic/brand discount

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Independence Blue Cross offers products directly and through its subsidiaries Keystone Health Plan East and QCC Insurance Company and with Highmark Blue Shield, independent licensees of the Blue Cross and Blue Shield Association.