# Understanding Your Pharmacy (Part D) Explanation of Benefits



#### What is an Explanation of Benefits (EOB)?

As a member of ATRIO Health Plans, you receive an EOB statement in the mail each month you utilize your prescription drug benefit. This is required by Medicare. Your EOB includes billing details for your covered prescription drugs that were received during the previous month. Your EOB explains what costs ATRIO covered and any costs you paid or need to pay. You will also see how close you are to meeting your deductible (if applicable) and out-of-pocket maximum, which indicate when you enter the Coverage Gap (or donut hole).

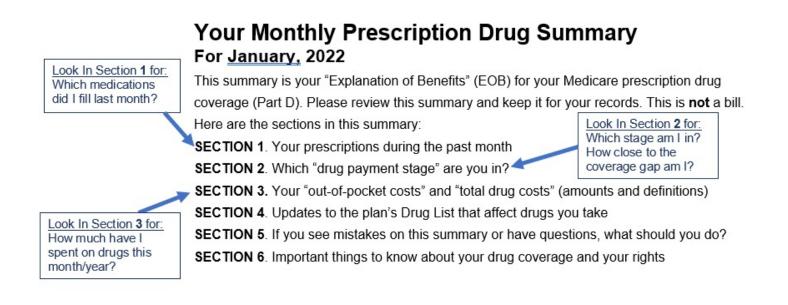
You will receive a separate EOB for your medical health care services and items.

Note: The EOB is NOT a bill. It is simply a statement showing details on how you and your plan will share costs.

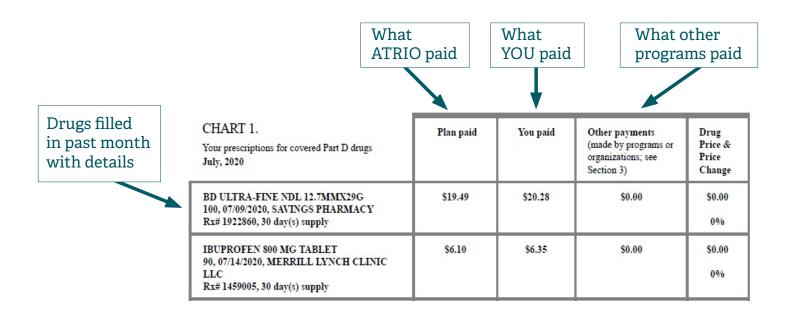
#### What to look for in your Part D EOB

The Part D EOB will tell you how much you and your plan paid for prescriptions in the last month. It breaks down your out-of-pocket costs and your total drug costs to help you understand which drug payment stage you are in.

#### Front Page Summary includes a summary of the pages that follow



## Section 1



### Section 2

This section will let you know which stage you are in based off your drug spend. The stage you are in will be highlighted and say "You are in this stage:" at the top.

	You are in this Stage		
STAGE 1 Yearly Deductible	STAGE 2 Initial Coverage	STAGE 3 <b>Coverage Gap</b>	STAGE 4 Catastrophic Coverage
This section will tell you how much you have paid toward your deductible (if applicable)	This section will tell you how much you have spent in out-of- pocket costs for drugs, and how close you are to entering the Coverage Gap Stage. Once you have paid a certain amount, you move on to Stage 3, and receive discounts.	This section will tell you how much you have spent in out-of- pocket costs for drugs, and how close you are to entering the Catastrophic Coverage Stage. Again, once you have paid a certain amount, you move to Stage 4 and receive discounts.	If you enter this stage, the plan will pay for most of your covered drugs for the rest of the year.

### Section 3

This section will summarize your monthly and yearly out-of-pocket costs and your total drug costs. It also provides a bit more information about what counts toward each.

\$6.85 month of January, 2022 \$6.85 year-to-date (since January, 2022)

#### **Your "total drug costs"** \$8.10 month of January, 2022 \$8.10 year-to-date (since January, 2022)

#### Section 4,5 & 6

These sections provide a lot of helpful information about the Plan and other programs available.

## **Additional pages**

Formulary Change Notice – We may include this notice with your EOB if there is a formulary change with a drug, such as a tier change, a prior authorization is needed, a quantity limit is added, or something else. We will let you know the reason and try to provide alternatives.

You also get extra pages with your EOB that include the multi-language and non-discrimination statements required by the U.S. Office for Civil Rights.



You can find a lot of helpful benefit information by registering on our Prescription Drug Portal at atriohp.com, and select 'Members', then 'Member Portal'. You will find the link/button to the Prescription Drug Portal.

# Questions about your EOB?

Contact Customer Service at **1-877-672-8620 (TTY 711)** Daily from 8 a.m. to 8 p.m. local time.