Medicare Part D Prescription Drug Plan – PDP EGWP offered by VibrantRx

Beginning January 1, 2027, under its FEHB Plan Options, TakeCare offers a Medicare Employer Group Waiver Plan (EGWP) Prescription Drug Plan (PDP) to its annuitants/retirees and their covered family members who are also covered by Medicare. The PDP EGWP is provided by VibrantRx, which is contracted by Medicare, and sponsored by TakeCare Insurance Company.

The PDP EGWP is a Medicare Part D plan and is actuarially equal to or better than the FEHB standard prescription drug benefits through TakeCare, meaning the member will generally pay less for prescription drugs. By design, the program will lower a plan's prescription costs. Covered drugs are subject to formularies approved by the Centers for Medicare and Medicaid Services (CMS), VibrantRx, and TakeCare.

There are advantages to being enrolled in VibrantRx

- Member cost-shares for covered drugs, medications, and supplies are lower than the cost-shares available in TakeCare's FEHB prescription coverage with a $2,400 out-of-pocket max.
- The drugs, medications, and supplies covered are the same as those covered in TakeCare's regular FEHB prescription drug coverage.
- Member monthly 2027 FEHB premium rate remains unchanged.

Who Will Be Enrolled in This Plan?

TakeCare members are eligible to be enrolled in VibrantRx as long as they meet all these conditions:

- Covered by Medicare Part A or Medicare Part B, or both A and B, and
- Residing in our geographic service area of Guam or the CNMI, and
- A United States citizen or lawfully present in the United States, and
- An FEHB annuitant or an annuitant's dependent covered by one of TakeCare's FEHB Plans effective January 1, 2027.

Benefit Comparison

On the next page is a comparison of TakeCare's 2027 FEHB High Option prescription drug coverage compared to the PDP EGWP coverage offered by VibrantRx for this Plan.

Benefit Description	You Pay	
Covered medications and supplies for up to a 30 day supply at In-network pharmacies	**TakeCare High Option**	**PDP EGWP offered by VibrantRx**
Preventive Medications (Tier 0)	Nothing	Nothing
Generic formulary (Tier 1)	$10 copayment	$5 copayment
Brand formulary (Tier 2)	$25 copayment	$20 copayment
Non-formulary (Tier 3)	$70 copayment	$60 copayment
GLP-1 medication prescribed for weight loss (Tier 3)	$70 copayment	GLP-1 medications prescribed for weight loss are not covered by this PDP-EGWP. Instead, Medicare directly covers certain GLP-1 drugs for weight loss under the Medicare GLP-1 Bridge program. To learn more and check to see if you qualify, go to medicare.gov/glp-1bridge. You can also call 1-800-MEDICARE (1-800-633-4227), TTY users can call 1-877-486-2048.
Preferred Specialty drugs (Tier 4)	$100 copayment	$75 copayment
Non-Preferred Specialty drugs (Tier 5)	$200 copayment	$150 copayment
Catastrophic Protection Out-of-Pocket Maximum Note: An individual under Self Plus One or Self and Family enrollment will never have to satisfy more than what is required for the out-of-pocket maximum limit under a Self Only enrollment.	Self Only: $2,000 Self Plus One: $4,000 Self and Family: $6,000	Self Only: $2,400 Self Plus One: $4,800 Self and Family: $7,200

Automatic Enrollment

If an annuitant/retiree or their family member is enrolled in a TakeCare FEHB Plan Option and is also enrolled in either 1) Medicare Part A or B or, 2) Parts A and B and, 3) not enrolled in a Medicare Advantage Plan (Part C), they will be automatically enrolled in the PDP EGWP during open season or later upon becoming Medicare-eligible while remaining enrolled in their chosen FEHB plan option for medical benefits. There is no need for these individuals to take action to enroll. Members are encouraged to notify TakeCare as soon as possible if they are already enrolled in a Medicare Part D Plan. Enrollment in our PDP EGWP will cancel their enrollment in another Medicare Part D plan.

Will you receive a new/separate prescription ID card?

New members will receive a VibrantRx member ID card to use at the pharmacy in a separate mailing.

Opt Out or Disenrollment Feature

Individuals covered in the PDP EGWP program have the choice to opt out of or disenroll from the PDP EGWP at any time by notifying TakeCare at (671) 647-3526 or via email at customerservice@takecareasia.com.

While enrollment is automatic, continued participation in the PDP EGWP is voluntary and members can decide to disenroll from the PDP EGWP at any time by requesting a **Notice of Disenrollment** form.

Once a signed **Notice of Disenrollment** form is received, TakeCare passes along this information to VibrantRx which initiates its process of notifying Medicare. If the disenrollment decision occurs after the first of the month, the disenrollment date will be effective the first of the following month.

Under FEHB, disenrolling from the PDP EGWP returns the member to Rx coverage under their chosen FEHB plan option for prescription drug benefits.

Note: If you choose to opt out of or disenroll from the PDP EGWP, your monthly FEHB premium will not change, and you may have to wait to re-enroll during Open Season or for a qualifying life event (QLE) to occur. If you do not maintain creditable coverage, re-enrollment in our PDP EGWP may be subject to a late enrollment penalty.

Income-Related Monthly Adjustment Amount (IRMAA)

TakeCare pays the Medicare premium for this Part D drug plan coverage except any additional premium imposed due to a member exceeding the income threshold as defined by the Social Security Administration such as Income-Related Monthly Adjustment Amount (IRMAA). IRMAA is an amount the member pays for their monthly Medicare Part D prescription drug plan premiums and your monthly Medicare Part B premiums. Social Security makes this determination based on the member's income. This additional premium is assessed only to those with higher incomes and is adjusted based on the income reported on the member's income tax return. The member doesn't make any IRMAA payments to TakeCare. Members are asked to refer to the Part D-IRMAA section of the Medicare website at https://www.medicare.gov/drug-coverage-part-d/costs-for-medicare-drug-coverage/monthly-premium-for-drug-plans, to see if they will be subject to this additional premium.

Need more information?

For more information about PDP-EGWP coverage, see **Section 9** of TakeCare's 2027 FEHB Plan Brochure or contact VibrantRx Member Services at 844-826-3451 (TTY 711) - hours are 24 hours a day, 365 days a year, or go to www.MyVibrantRx.com/TakeCare.

This is a brief description of the features of TakeCare Insurance Company's FEHB health plans. Before making a final decision, please read TakeCare's 2027 FEHB Plan Web Page. All benefits are subject to the definitions, limitations, and exclusions set forth in the Plan Brochure