Simply Prescriptions Copay Plan
Prepared for Genesee Area Healthcare Plan
Effective: 01/01/2027

Plan Feature Highlights	Simply Prescriptions Copay Plan
Type of Care/Plan Benefits	**In-Network**
Prescription drug coverage	Prior Authorization and Step Therapy apply. Quantity Limits Apply. Deductible: $0 Initial Coverage: 30 day supply: $10/$30/$50 90 day supply: Subject to 3 times the copay Annual Out-Of-Pocket costs will be capped at $2,400 for Medicare Part D Drugs Catastrophic Coverage: The member pays $0 copays for all Medicare Part D Drugs once the $2,400 Annual Out-Of-Pocket is reached. Out of network: Covered at in network cost sharing in emergency situations only.

This is not a contract. It is intended to highlight the coverage of this plan. Benefits are determined by the terms of the Evidence of Coverage (contract).