

UNDERSTANDING MEDICARE PART D

Did you know almost half of all Medicare Part D patients have employer-subsidized or low-income subsidy (LIS) coverage?¹ **Continue reading to learn more.**

Please see full [Prescribing Information](#) for ORGOVYX.

ORGOVYX[®]
(relugolix) 120 mg
tablets



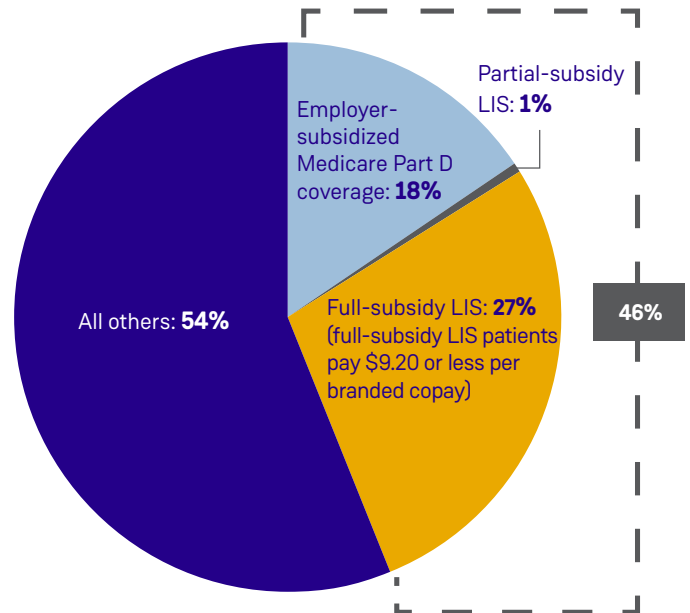
WHAT IS MEDICARE PART D?

Medicare Part D can help cover the cost of certain prescription drugs, such as ORGOVYX® (relugolix).

Part D is offered in 2 different ways²:

- As a stand-alone plan that can be added to a patient's Medicare coverage
- Included in a Medicare Advantage plan with prescription drug coverage

In 2020, over 48 million people were enrolled in Medicare Part D¹



Approximately half of all Medicare Part D patients have LIS or employer-subsidized coverage, with reduced out-of-pocket costs.¹

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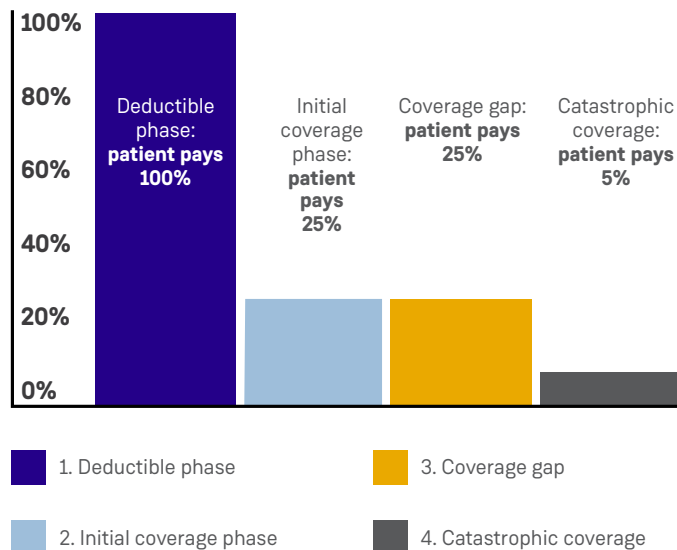
HOW MEDICARE PART D WORKS

There are 4 phases of Medicare Part D coverage for patients. During each phase, patients are responsible for a different percentage of the cost of their prescription drugs, in addition to their plan's monthly premiums. The deductibles, coverage limits, and coinsurance in each phase may vary from year to year for each patient, and may change when they change plans.³

THE 4 PHASES OF MEDICARE PART D

The following phases apply to all covered prescription drugs, including ORGOVYX. The cost estimates for each phase may vary by plan.

Standard Medicare Part D coverage^{3,10}



1: Deductible phase^{3,4,10}

During this phase, the patient pays 100% of the deductible. Depending on which Part D plan the patient chooses, the deductible may be up to **\$445** for 2021. In 2022, this number is **\$480**.

Patient pays 100%

2: Initial coverage phase^{3,4,10}

After a patient meets their deductible, the patient and their insurance plan will split the prescription drug costs. The patient's part will be a copay or coinsurance. Most patients will pay a 25% copay or coinsurance. The initial coverage phase lasts until total spending by the patient and their health plan equals **\$4,130** (including deductible). In 2022, this number is **\$4,430**.

Patient pays 25% • Plan pays 75%

3: Coverage gap^{3,4,5,10}

After the initial coverage phase is met, the patient enters the coverage gap. During this phase, the patient, the manufacturer, and the insurance plan may split the prescription drug costs. Patients may pay a 25% copay or coinsurance. This phase lasts until the patient's out-of-pocket costs (including costs in the deductible and initial coverage phases), health plan, and manufacturer's payment add up to **\$6,550**. In 2022, this number is **\$7,050**.

Patient pays 25% • Manufacturer pays 70% • Plan pays 5%

4: Catastrophic coverage^{3,4,6,10}

After the patient has exited the coverage gap, they will be in a final phase called catastrophic coverage. During this phase, patients pay significantly lower copays or coinsurance for their covered drugs for the remainder of the year. Patients will pay 5% of the cost of covered branded drugs.

Patient pays 5% • Government pays 80% • Plan pays 15%

Keep in mind, patients on multiple prescription drugs may reach the catastrophic coverage phase early, with a copay of 5%.

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PART D LOW-INCOME SUBSIDY (LIS) Program, or Extra Help, may help reduce medication costs

The Part D Low-Income Subsidy (LIS) program, also known as Extra Help, is a federal program that will pay part of the costs for prescription medications to lower the out-of-pocket costs and premiums for eligible Medicare Part D patients who have limited income and resources. To receive LIS benefits, the patient must use prescriptions that are covered under the plan and pharmacies that are in the plan's network.⁷⁻⁹

Full-subsidy LIS patients pay no more than **\$9.20*** per ORGOVYX® (relugolix) prescription.¹⁰

Estimated out-of-pocket (OOP) costs for patients with Part D LIS

If your patient qualifies for Part D LIS, they can potentially pay a lower OOP for their prescription drugs. Eligibility for coverage is dependent on income and other resources.⁴

Maximum OOPs for patients with full or partial Part D LIS benefit ^{10†}		
	Full	Partial
Annual deductible	\$0 (2021) \$0 (2022)	\$92 (2021) \$99 (2022)
Copay/coinsurance	\$9.20 branded (2021) \$9.85 branded (2022) \$3.70 generic (2021) \$3.95 generic (2022)	15% coinsurances (2021) 15% coinsurances (2022)
Copay above the OOP threshold	\$0 (2021) \$0 (2022)	\$9.20 branded (2021) \$9.85 branded (2022) \$3.70 generic (2021) \$3.95 generic (2022)

*2021.

†These are estimated costs. The cost of medications may vary.

Who qualifies for LIS?

- Some patients get Part D Extra Help automatically
- Patients who are enrolled in both Medicaid and Medicare (often called dual eligible)
- Patients who qualify for a Medicare Savings Program
- Patients receiving Supplemental Security Income (SSI)

Patients who are not already enrolled in the benefits noted above must apply to Social Security to receive Extra Help.

HOW PATIENTS CAN DETERMINE IF THEY ARE ELIGIBLE for Part D LIS

If you think your patient may be interested in applying for LIS, you can direct them to the following organizations for help:

The Social Security Administration allows patients with Medicare to apply directly through their website: SSA.gov/benefits/medicare/prescriptionhelp.html

Medicare can also help eligible patients sign up for LIS. For more information, call 1-800-MEDICARE (1-800-633-4227) or visit Medicare.gov

BenefitsCheckUp has a direct link to submit LIS applications to the Social Security Administration. Visit BenefitsCheckUp.org/medicare-rx-extra-help-application

State Health Insurance Assistance Programs (SHIPs) are federally funded to provide free assistance to people with Medicare and their families. To help your patient find their local SHIP, call 1-877-839-2675 or visit SHIPHelp.org

ORGOVYX SUPPORT PROGRAM

Your Medicare Part D patients may qualify for additional financial support resources, if they meet eligibility requirements.

Learn more by calling 1-833-ORGOVYX (1-833-674-6899) Monday-Friday, 8 AM-8 PM ET.

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Support to help your patients get started and stay on track.

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REFERENCES: **1.** Centers for Medicare & Medicaid Services. 2020 annual report of the boards of trustees of the federal hospital insurance and federal supplementary medical insurance trust funds. Accessed August 18, 2021. <https://www.cms.gov/files/document/2020-medicare-trustees-report.pdf> **2.** How to get prescription drug coverage. Medicare website. Accessed August 18, 2021. <https://www.medicare.gov/drug-coverage-part-d/how-to-get-prescription-drug-coverage> **3.** Phases of Part D coverage. Medicare Interactive website. Accessed August 18, 2021. <https://www.medicareinteractive.org/get-answers/medicare-prescription-drug-coverage-part-d/medicare-part-d-costs/phases-of-part-d-coverage> **4.** Centers for Medicare & Medicaid Services. Announcement of calendar year (CY) 2022 Medicare Advantage (MA) capitation rates and Part C and Part D payment policies. Accessed August 18, 2021. <https://www.cms.gov/files/document/2022-announcement.pdf> **5.** Costs for Medicare drug coverage. Medicare website. Accessed August 18, 2021. <https://www.medicare.gov/drug-coverage-part-d/costs-for-medicare-drug-coverage> **6.** US Department of Health and Human Services: Office of Inspector General. High-price drugs are increasing federal payments for Medicare Part D catastrophic coverage. Accessed August 18, 2021. <https://oig.hhs.gov/oei/reports/oei-02-16-00270.pdf> **7.** Find your level of Extra Help (Part D). Medicare website. Accessed August 18, 2021. <https://www.medicare.gov/your-medicare-costs/get-help-paying-costs/find-your-level-of-extra-help-part-d> **8.** Lower prescription costs. Medicare website. Accessed August 18, 2021. <https://www.medicare.gov/your-medicare-costs/get-help-paying-costs/lower-prescription-costs> **9.** Extra Help basics. Medicare Interactive website. Accessed August 18, 2021. <https://www.medicareinteractive.org/get-answers/cost-saving-programs-for-people-with-medicare/the-extra-helplow-income-subsidy-lis-program/extra-help-basics> **10.** Medicare prescription drug coverage (Medicare Part D). Accessed August 18, 2021. <https://aging.ny.gov/system/files/documents/2021/07/21mod6f.pdf>

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