

Managing OOP Costs for Patients' Medicare Part D Prescriptions in 2026,^{1,2} Including ORGOVYX



Actor portrayal.

How will your patients' out-of-pocket (OOP) drug costs change in 2026?

\$2,100 OOP MAXIMUM*

No patient pays more than **\$2,100** for all of their covered Part D prescriptions (branded and generic), including ORGOVYX

\$0 OOP COSTS

\$0 costs for covered prescriptions, including ORGOVYX, **after** your patients reach the yearly OOP maximum of \$2,100

PAYMENT PLAN OPTION

Patients may be able to **split their annual OOP costs (\$2,100) into monthly installments**

Patients can consider managing drug costs with the Medicare Prescription Payment Plan^{†‡§||}

Free, no-interest program allows patients to pay OOP costs in monthly installments through the end of the plan year.



Opt in during Medicare open enrollment or any time during the year. Opting in during open enrollment allows patients to pay in monthly installments for 12 months (Jan-Dec 2026)

\$0

May pay as little as \$0 at the pharmacy (including mail order or specialty pharmacies)



Receive a bill from their health plan or Part D drug plan each month (instead of paying the pharmacy)



Starting in 2026, participants in a Medicare Prescription Payment Plan will be **automatically re-enrolled** each year, unless they opt out.

Do your patients need more information?

- Patients can contact their health plan or Part D plan by using the phone number on the back of their member ID card or visiting the plan website
- They can also visit [Medicare.gov](https://www.Medicare.gov)

*OOP maximum for 2026 plan year.

†This plan only applies to drugs covered by Medicare Part D. Most medications patients get from a pharmacy and take at home are covered by Part D. Please have patients contact their health plan if they are unsure if their medication is covered by their Part D plan.

‡There is no fee to join the plan.

§This plan does not cover a patient's monthly premium.

||Patients may leave the plan at any time during the plan year.

This resource is for informational purposes only. Contact your patients' health plan or Part D plan directly for more information about their prescription drug benefit.

Sumitomo Pharma America and Pfizer make no guarantees of coverage or reimbursement.

ORGovyX[®]
(relugolix) 120 mg tablets

How could your patients' monthly Part D OOP costs change in 2026?*



Meet Michael: Michael has a Part D plan and is taking ORGOVYX and other covered medications which, together, cost about \$3,000 each month.*

Michael is an example patient for illustrative purposes only and is not based on an actual patient.

IF MICHAEL OPTS IN TO THE MEDICARE PRESCRIPTION PAYMENT PLAN...

If Michael opts in to the payment plan in January, he pays his Part D plan about \$175/month (Jan-Dec) for ALL of his Part D-covered prescriptions.

Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
\$175	\$175	\$175	\$175	\$175	\$175	\$175	\$175	\$175	\$175	\$175	\$175
\$2,100											

If Michael has no prescription drug spend before June 2026, he will pay his Part D plan about \$300/month (Jun-Dec) for ALL of his Part D-covered prescriptions.

Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
					\$300	\$300	\$300	\$300	\$300	\$300	\$300
\$2,100											

IF MICHAEL DOES NOT OPT IN TO THE MEDICARE PRESCRIPTION PAYMENT PLAN...

Michael reaches the \$2,100 OOP maximum in 3 months and then pays \$0 for ORGOVYX, as well as ALL other Part D-covered prescriptions, for the rest of the year.

Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
\$\$\$	\$\$\$	\$	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$2,100											



Patients who are enrolled in Medicare's Extra Help may not benefit from the Medicare Prescription Payment Plan because their OOP drug costs are likely below the \$2,100 annual maximum.

In 2026, patients who are enrolled in Extra Help pay a \$0 premium, a \$0 deductible, a \$12.65 copay for brand-name drugs, and a \$5.10 copay for generic drugs.¹

Please contact the Part D plan, or visit [Medicare.gov](https://www.medicare.gov) or ssa.gov/extrahelp for more information.

*Coverage example costs are based on calculations by Sumitomo Pharma America, Inc.: \$2,100/12 months=\$175 and \$2,100/7 months=\$300.
†The timeframe to reach the \$2,100 OOP maximum and begin paying \$0 for covered prescriptions depends on individual plan benefits and monthly medication costs.
‡Monthly payments may vary based on individual plan design and when the patient opts in to the payment plan.
§The information contained in this document is provided for informational purposes only. Accurate completion of reimbursement- or coverage-related documentation is the responsibility of the healthcare provider and patient. Pfizer and Sumitomo Pharma America, Inc. make no guarantee regarding reimbursement for any service or item. Current as of September 2025.
References: 1. Centers for Medicare and Medicaid Services. Announcement of calendar year (CY) 2026 Medicare Advantage (MA) capitation rates and Part C and Part D payment policies. April 7, 2025. Accessed September 2, 2025. <https://www.cms.gov/files/document/2026-announcement.pdf> 2. PAN Foundation. Understanding the Medicare Prescription Payment Plan. Accessed September 2, 2025. <https://www.panfoundation.org/understanding-the-medicare-prescription-payment-plan/>



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