

2025 Prescription Drug (Part D) Copay Table VNS Health EasyCare (HMO)

Part D Spending		No Part D LIS			LIS 3	LIS 2	LIS 1
		Up to 30 Days Supply	Up to 60 Days Supply	Up to 90–100 Days Supply	Up to 30 – 100 Days Supply	Up to 30–100 Days Supply	Up to 30 – 100 Days Supply
Deductible		\$145 Deductible does not apply for Tier 1, Tier 6 and insulins.	\$145 Deductible does not apply for Tier 1, Tier 6 and insulins.	\$145 Deductible does not apply for Tier 1, Tier 6 and insulins.	\$0	\$0	\$0
Initial Coverage Phase (Begins once deductible is met until \$2,000 out-of-pocket threshold is met)	TIER 1 Preferred Generic Drugs	\$0	\$0	\$0	\$0	\$0	\$0
	TIER 2 Generic Drugs	\$20	\$40	\$60	\$0	\$1.60	\$4.90
	TIER 3 Preferred Brand Drugs	\$47 \$35 for insulins	\$94 \$70 for insulins	\$141 \$105 for insulins	\$0	\$4.80	\$12.15
	TIER 4 Non-Preferred Brand Drugs	\$100 \$35 for insulins	\$200 \$70 for insulins	\$300 \$105 for insulins	\$0	\$4.80	\$12.15
	TIER 5 Specialty	\$31 \$35 for insulins	60 days supply not available	90 – 100 days supply not available	\$0 (up to 30 days supply at a time only)	\$1.60 or \$4.80 (up to 30 days supply at a time only)	\$4.90 or \$12.15 (up to 30 days supply at a time only)
	TIER 6 SelectCare Drugs	\$0	\$0	\$0	\$0	\$0	\$0
Catastrophic Coverage Phase (Begins once \$2,000 out-of-pocket threshold is met)	TIER 1-6 All Drugs on any Tier	\$0	\$0	\$0	\$0	\$0	\$0

LIS – Refers to Low Income Subsidy

VNS Health Medicare is a Medicare Advantage organization with Medicare and Medicaid contracts, offering HMO D-SNP and HMO plans. Enrollment in VNS Health Medicare depends on contract renewal.