



A closer look at your Medicare drug coverage

Medicare Part B and Part D both cover prescription medications — but in different ways

In general, Medicare Part B (Medical Insurance) covers medical care, blood glucose testing supplies, and select prescription drugs, depending on what they are used for and how they are administered.

Medicare Part D (prescription drug coverage) covers most outpatient medications, like those you would get from your pharmacy.

Your Anthem Medicare Advantage plan covers certain medications and medical supplies, such as vaccines and blood glucose testing supplies, under the Medicare Part B program. This coverage is in addition to your Part D prescription drug plan.

Details on how your drug coverage works

Medicare Part B coverage usually includes:

- Drugs you would not give to yourself, including those administered by a healthcare professional in a doctor's office or other outpatient setting.
- Drugs to be used with an item of durable medical equipment (DME), such as insulin used in a pump.
- Medically necessary DME prescribed for home use, such as infusion pumps.
- Drugs that are part of an ongoing treatment plan, including certain chemotherapy drugs.

Medicare Part D coverage usually includes:

Drugs you give yourself (tablets, capsules, creams, and liquids) that are used to treat a range of common diseases and conditions. Most prescription drugs fall under Part D, including maintenance medications.



Comparing Part B and Part D coverage

	Usually covered under Medicare Part B	Usually covered under Medicare Part D
Diabetic services and supplies	Diabetes screenings, test strips, lancets, lancet devices, control solution, blood glucose testing supplies (such as monitors), infusion pumps, and insulin used with a pump	Anti-diabetic drugs, syringes, needles, alcohol wipes, insulin pens and supplies, and insulin administered in any other way than a pump
Shots (vaccinations)	Pneumococcal shots, flu shots (including H1N1), COVID-19 vaccines, hepatitis B vaccine for those at medium to high risk, and other vaccines when related directly to the treatment of an injury or illness such as tetanus	Hepatitis B vaccine for those at low risk and any other vaccines used to help prevent illness, including the shingles and RSV vaccines
Durable medical equipment (DME) supply drugs	Infused and inhalation drugs that may require a pump or nebulizer	Drugs administered without a nebulizer, such as metered-dose, dry powder, and nasal spray inhalers
Injectable and infused drugs	Drugs you generally cannot give yourself and need a doctor to administer	Drugs you can buy at the pharmacy and that are administered by you or your doctor

To maximize your benefits and ensure your claims are billed correctly, follow these two steps:

1. Bring your Anthem Medicare Advantage membership card and your Part D prescription drug plan card each time you pick up prescriptions, medical supplies, DME, or infusion drugs, or receive an infusion.
2. Remind your pharmacist, medical supplier, and infusion site administrator that your plan covers some prescriptions, medical supplies, DME, and infusions. If they have any questions, they can call the provider number on the back of your plan membership card.



You also have the option of using home-delivery with our CarelonRx[®] Pharmacy for some of your Part B drugs and supplies, including:

- Blood glucose testing supplies, such as monitors, test strips, lancets, lancet devices, and control solution.
- Insulin when used with an infusion pump.
- Certain oral chemotherapy drugs.



For more information on drug coverage with your Anthem Medicare Advantage plan, see the Benefits Chart in your *Evidence of Coverage*, available online at www.anthem.com/ca.



If you have questions, we are here to help

Please call Member Services at the number on the back of your plan ID card.

CarelonRx, Inc. is an independent company providing pharmacy benefit management services on behalf of your health plan.

Please refer to your plan's *Evidence of Coverage* for a complete listing of all plan benefits, conditions, limitations, and exclusions of coverage.

You have the right to get this information and help in your language for free. Call the Member Services number on your plan membership card for help. (TTY: 711).

We do not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, sex, age, or disability in our health programs and activities.

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