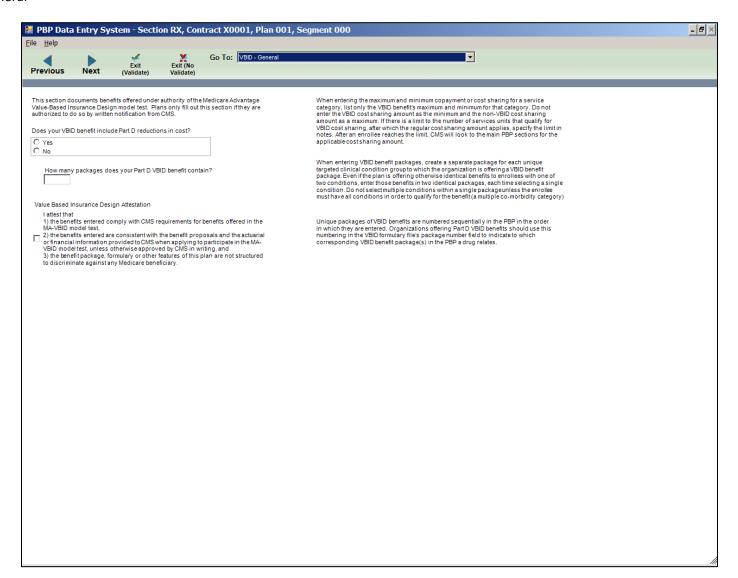
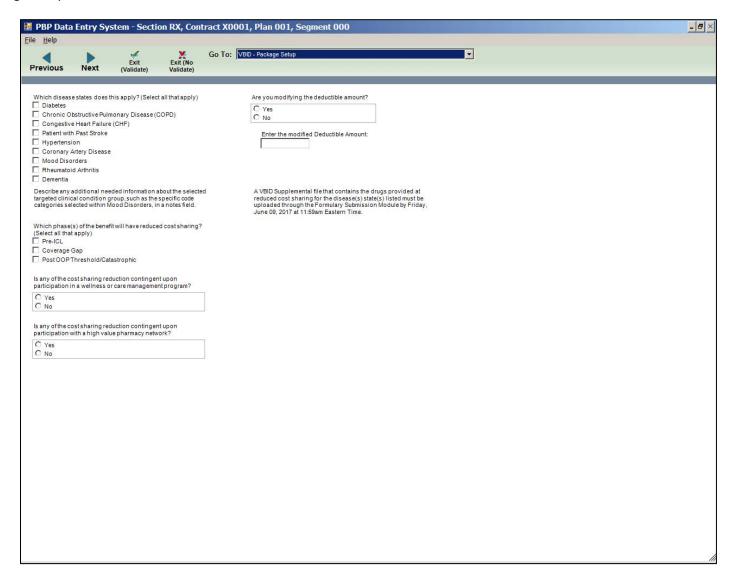
VBID - General

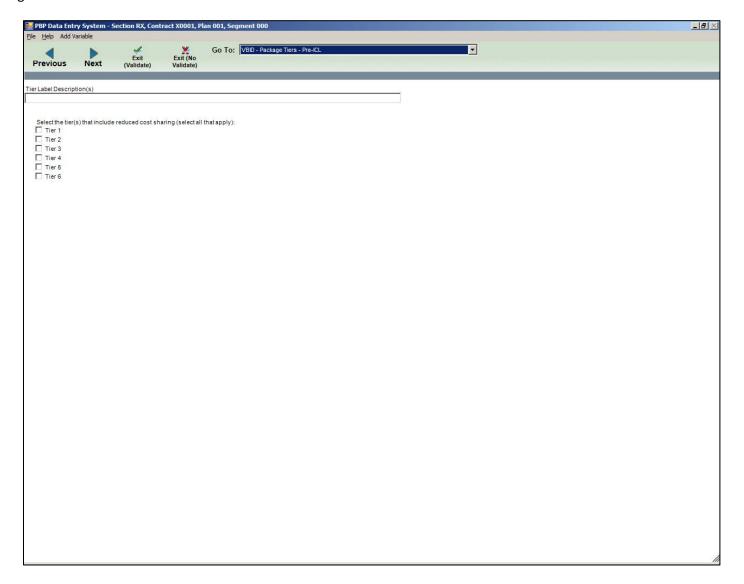
Fu Associates, Ltd.



VBID - Package Setup



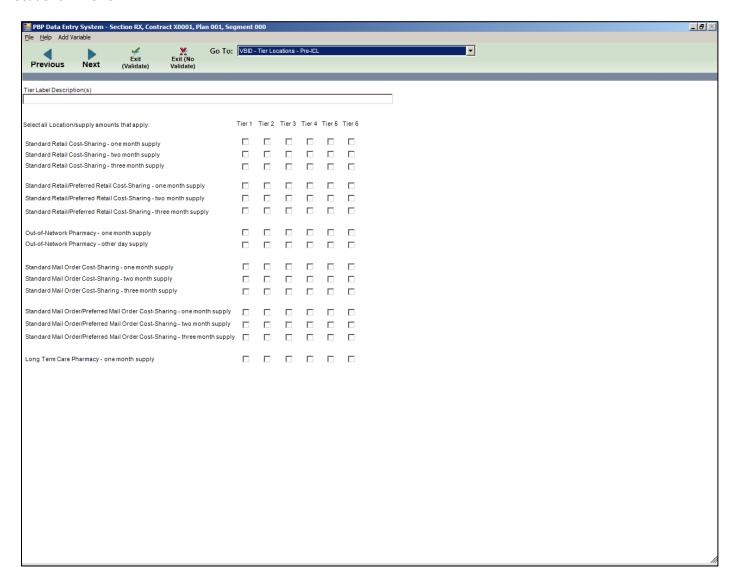
VBID - Package Tiers - Pre-ICL



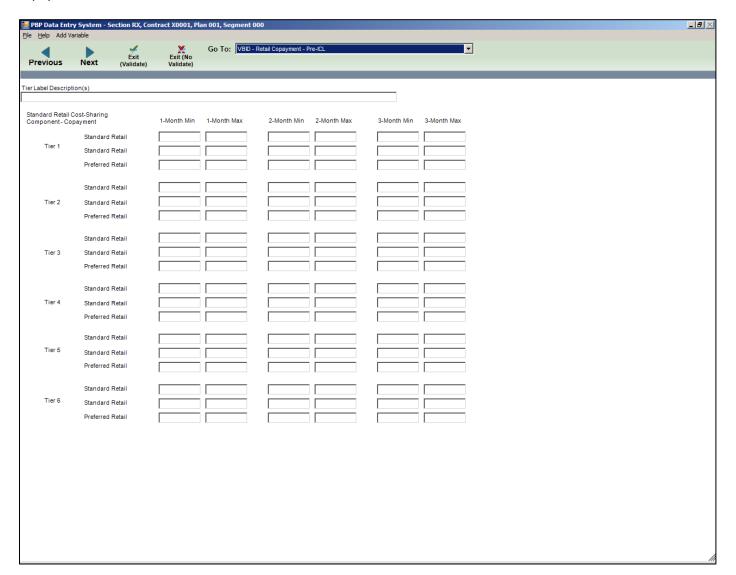
VBID - Tier Coverage - Pre-ICL

🚂 PBP Data Entr		ection RX, Contr	ract X0001, P	lan 001, Se	egment 00	0		
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TTCTTOUS	IVEAL	(Validate)	validate)					
Tier Label Descript	tion(s)							
Indicate the type (select only one f	of cost sharing for each tier):	g structure	Tier 1	Tier 2	Tier 3	Tier 4	Tier 5	Tier 6
Coinsurance			0	0	0	0	0	0
Copayment			0	0	0	0	0	0
Greater of Coins	surance and C	opayment	0	0	0	0	0	0
Lesser of Coins	urance and Co	payment	0	0	0	0	0	0
Which covered d	rugs have redu	uced cost sharing?	?					
Full Tier Covera	ige (All drugs (on the tier)	0	0	О	0	0	0
Partial Tier Cove	erage (Only so	ome drugs on the t	tier) C	0	0	0	0	0
For each tier that	is only partial	lly reduced, you mu	ust					
indicate whether	that reduction	is for brand drugs nd and generic dru	only.					
Brand Drugs On	nly		0	0	0	0	0	0
Generic Drugs C			0	0	0	0	0	0
Brand and Gene			0	0	0	0	0	0
Indicate the type	of drugs that h	nave reduced cost						
Part D Drugs Or			0	0	0	0	0	0
		ctile dysfunction d		0	0	0	0	0
Both Part D and			0	0	0	0	0	0
		-3-						

VBID – Tier Locations – Pre-ICL

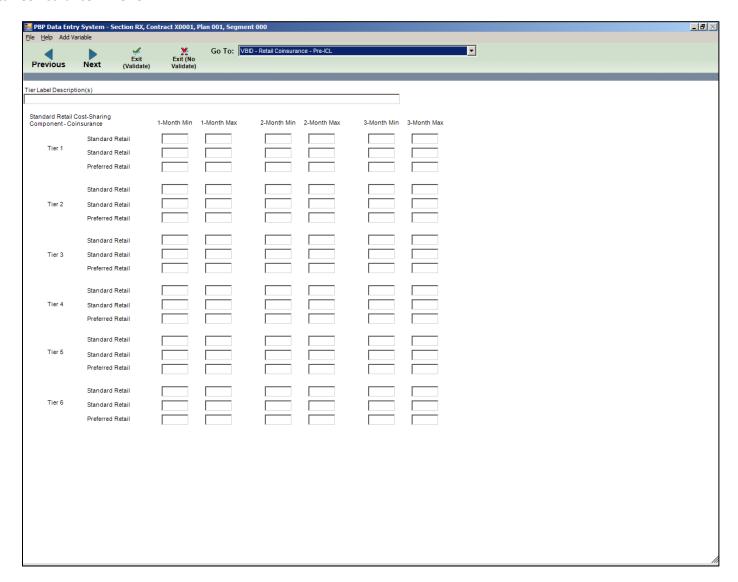


VBID - Retail Copayment - Pre-ICL

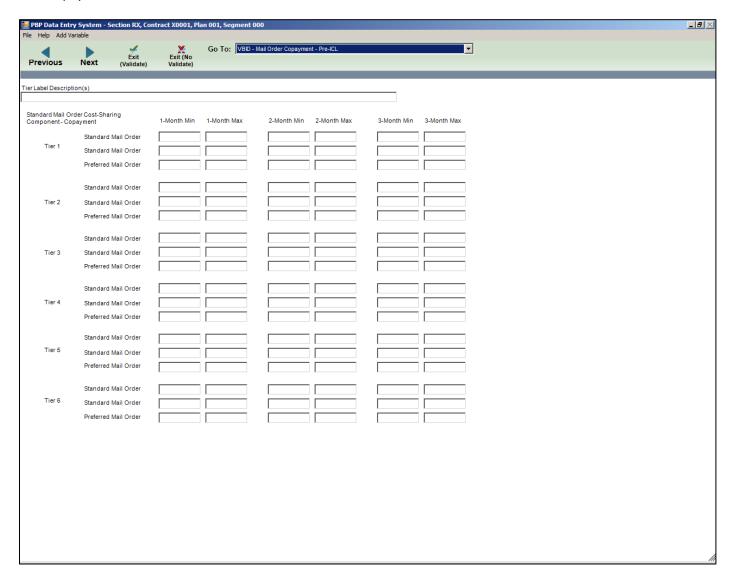


VBID - Retail Coinsurance - Pre-ICL

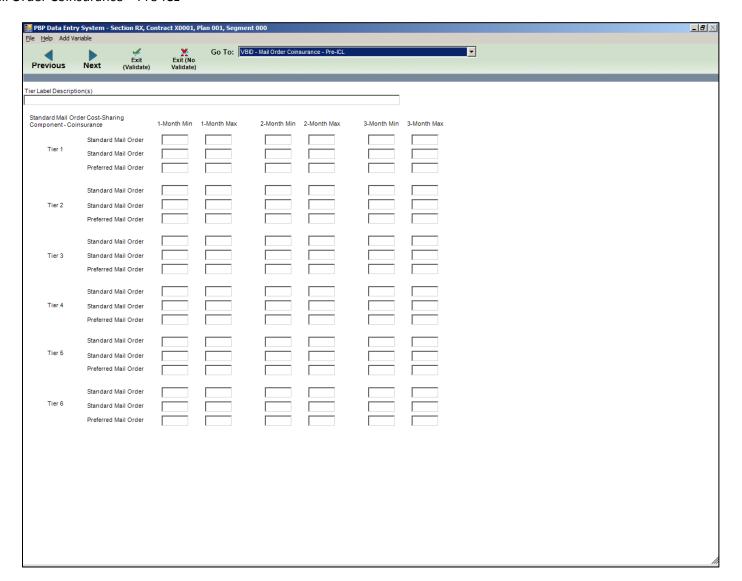
Fu Associates, Ltd.



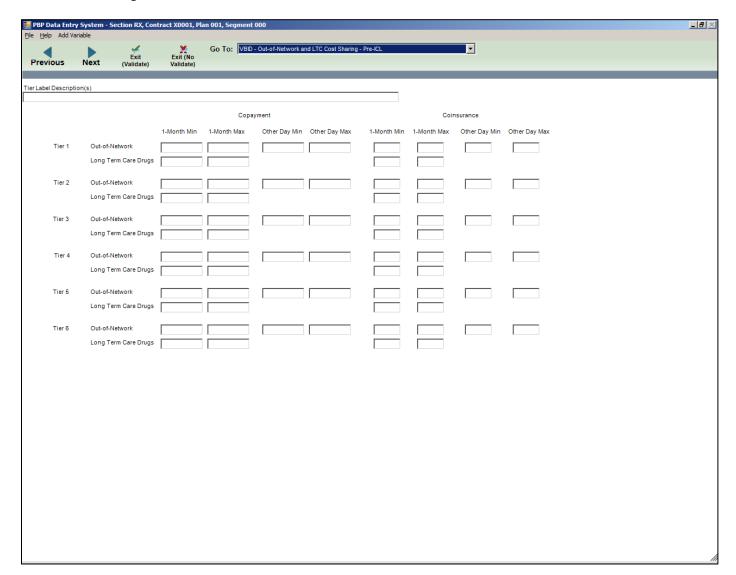
VBID - Mail Order Copayment - Pre-ICL



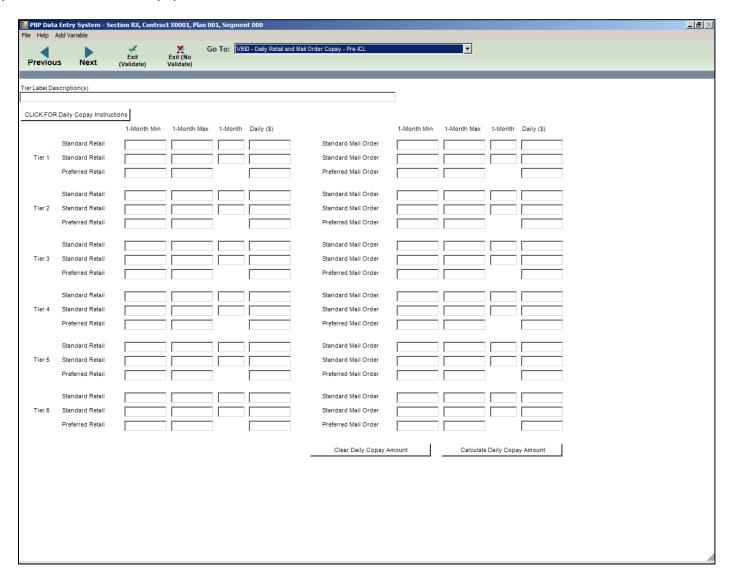
VBID - Mail Order Coinsurance - Pre-ICL



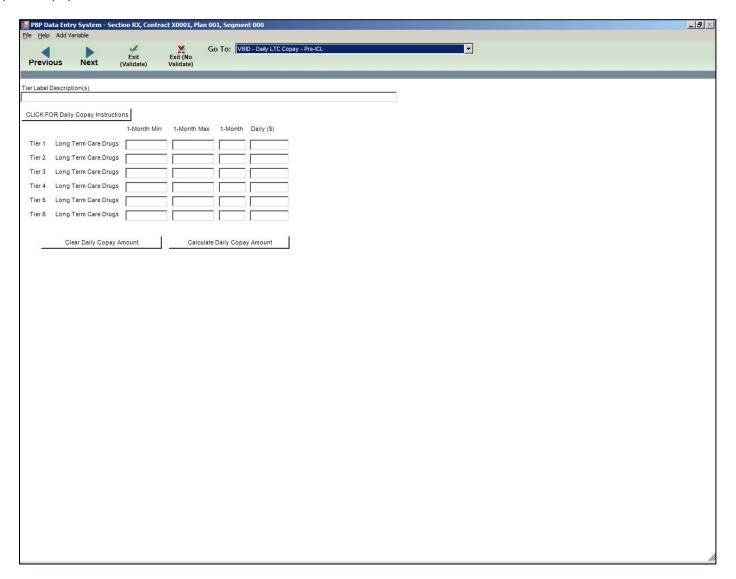
VBID - OON and LTC Cost Sharing - Pre-ICL



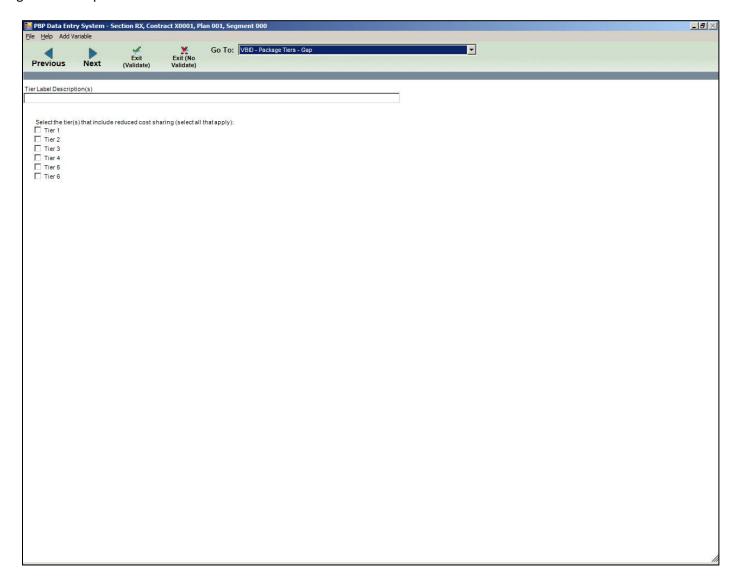
VBID - Daily Retail and Mail Order Copay - Pre-ICL



VBID - Daily LTC Copay - Pre-ICL



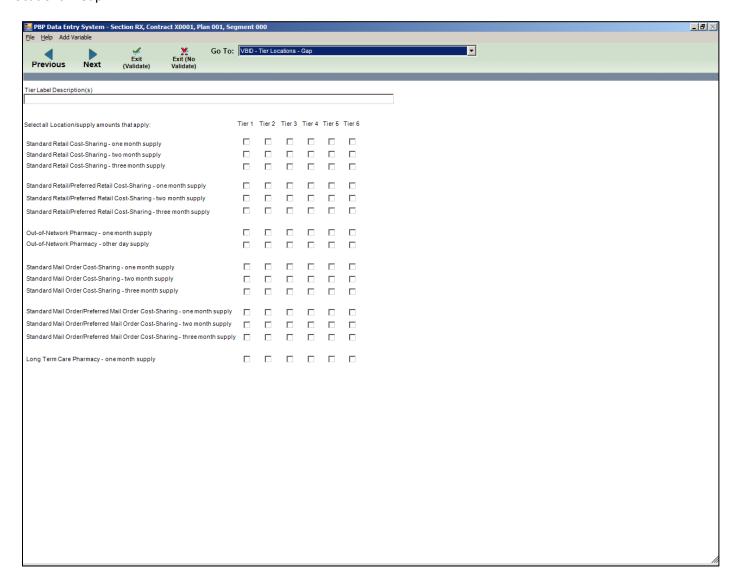
VBID - Package Tiers - Gap



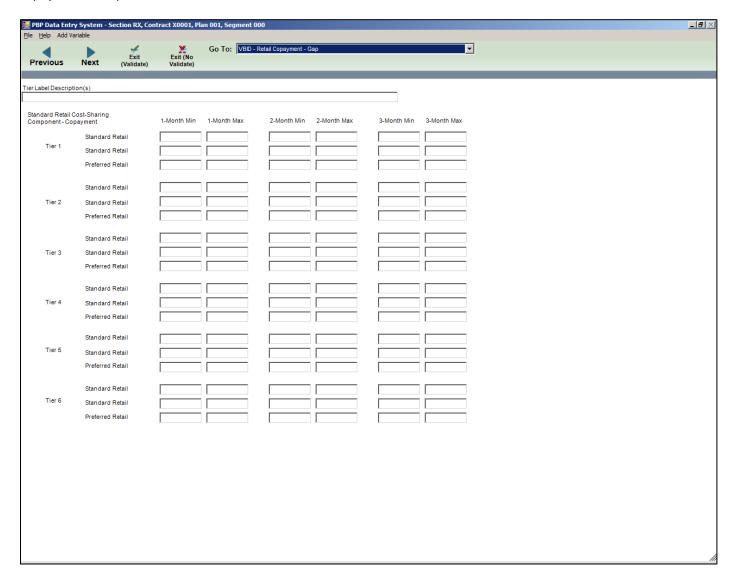
VBID – Tier coverage – Gap

<mark>::</mark> PBP Data Ent r File <u>H</u> elp Add V		ection RX, Contr	act X0001, P	lan 001, S	egment 00	10		
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Tier Label Descript	tion(s)							
Indicate the type	of cost sharin	g structure	Tier 1	Tier 2	Tier 3	Tier 4	Tier 5	Tier 6
(select only one f	for each tier):		0	0	0	0	0	О
Copayment			0	0	0	0	0	0
Greater of Coins	surance and C	opayment	0	0	0	0	0	0
Lesser of Coins	urance and Co	payment	0	0	0	0	0	0
Which covered d	rugs have redi	uced cost sharing?						
Full Tier Covera		on the tier) ome drugs on the ti	ier) O	0	0	0	0	0
Tartar Fior Cove	orage (oraș se	mio drago ori are a	,					
For each tier that	is only partial	ly reduced, you mu	ust					
indicate whether generic drugs on	that reduction ly, or both brar	is for brand drugs nd and generic dru	only, igs.					
Brand Drugs On	nly		0	0	0	0	0	0
Generic Drugs (0	0	0	0	0	0
Brand and Gene	eric Drugs		О	0	О	0	0	0
Indicate the type	of drugs that h	avereduced cost						
Part D Drugs Or	nly		0	0	0	0	0	0
Excluded Drugs	Only (e.g. ere	ctile dysfunction d		0	0	0	0	0
Both Part D and	Excluded Dru	igs	0	0	0	0	0	0

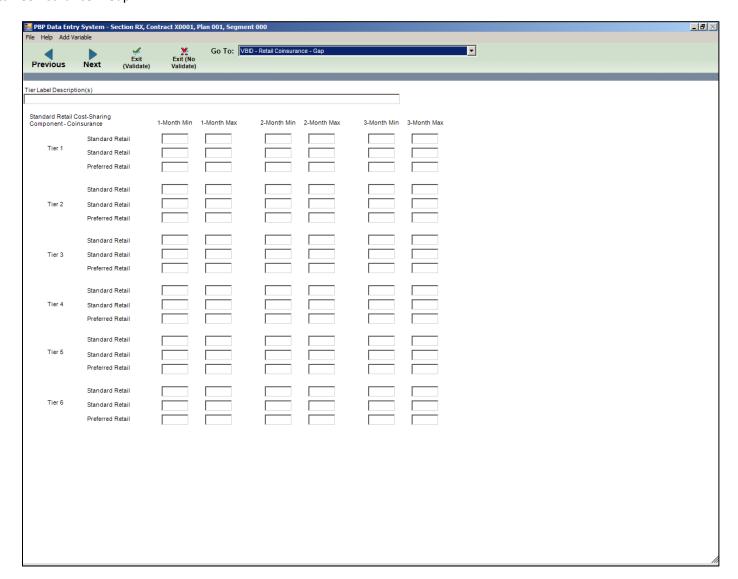
VBID - Tier Locations - Gap



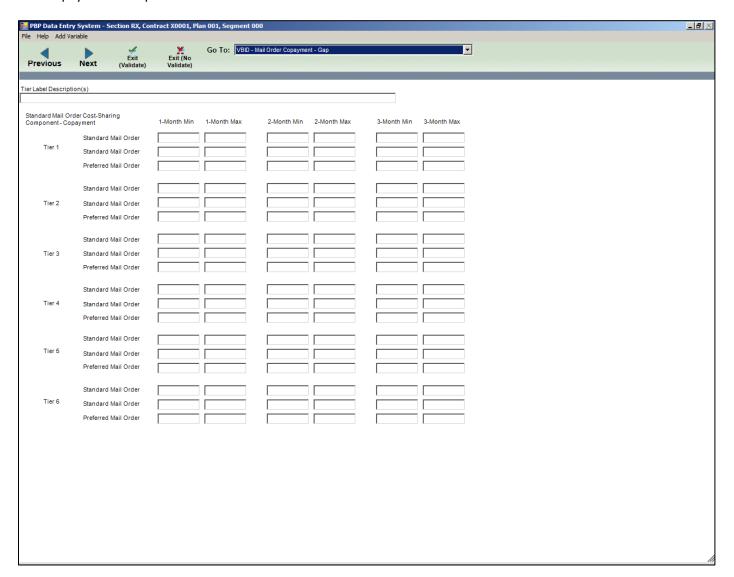
VBID - Retail Copayment - Gap



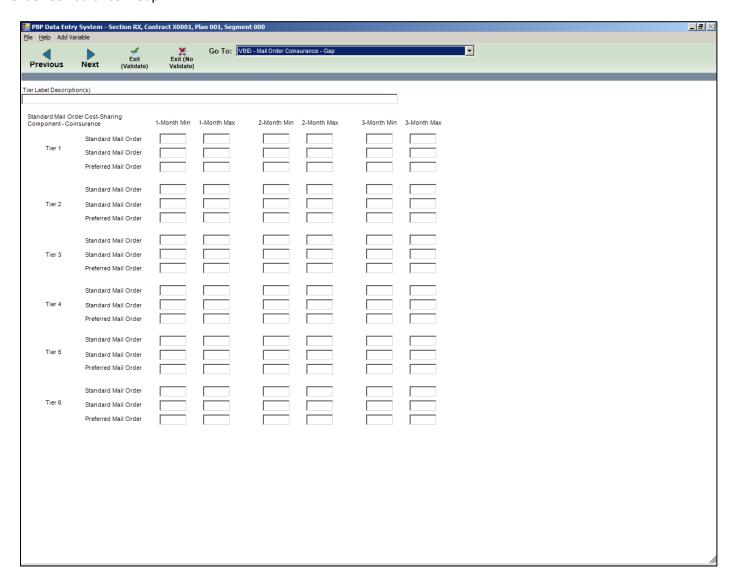
VBID - Retail Coinsurance - Gap



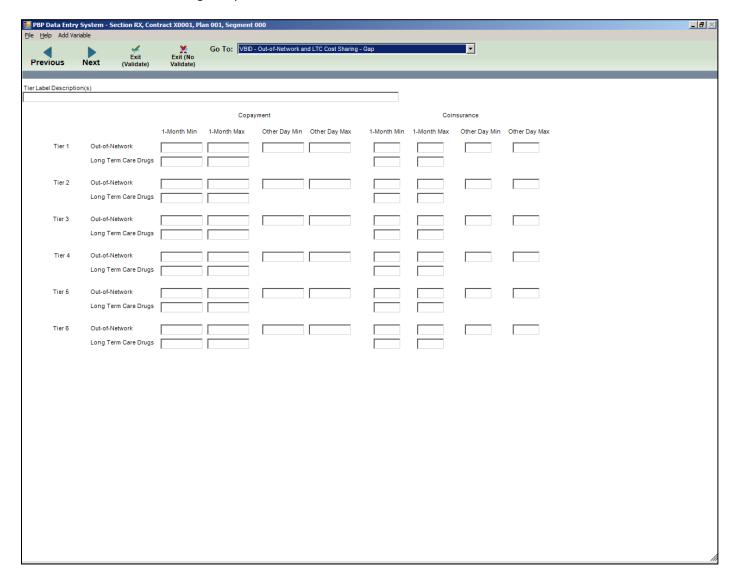
VBID - Mail Order Copayment - Gap



VBID - Mail Order Coinsurance - Gap



VBID – Out-of-Network and LTC Cost Sharing – Gap



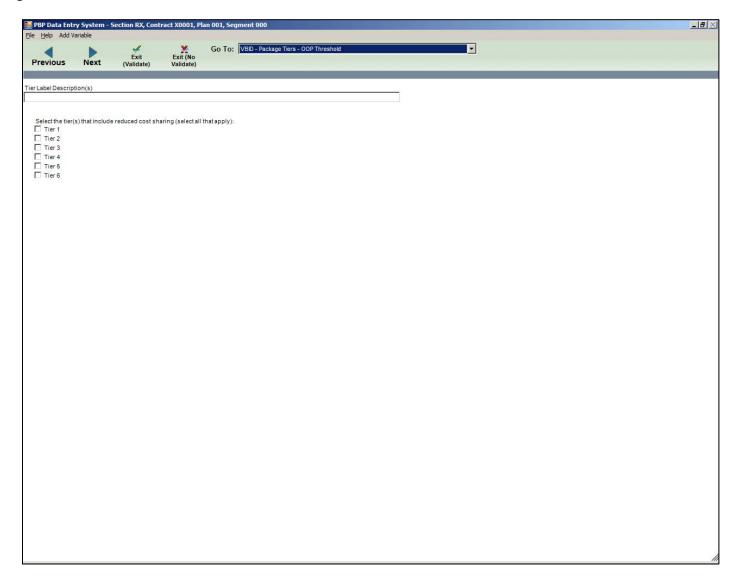
VBID – Daily Retail and Mail Order Copay – Gap

PBP Data Entry System - Section RX, Contract X0001, Plan 001, Segment 000 File Help Add Variable										
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CLICK FOR	Daily Copay Instru	ctions								
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	Standard Retail					Standard Mail Order				
Tier 1	Standard Retail					Standard Mail Order				
	Preferred Retail					Preferred Mail Order				
	Standard Retail					Standard Mail Order				
Tier 2	Standard Retail					Standard Mail Order				
	Preferred Retail					Preferred Mail Order				
	Standard Retail		1			Standard Mail Order				
Tier 3	Standard Retail					Standard Mail Order				
	Preferred Retail			_ '		Preferred Mail Order				
	Standard Retail					Standard Mail Order				
Tier 4	Standard Retail			_		Standard Mail Order				
	Preferred Retail					Preferred Mail Order				
	Standard Retail					Standard Mail Order				
Tier 5	Standard Retail					Standard Mail Order				
	Preferred Retail					Preferred Mail Order				
	Standard Retail					Standard Mail Order				
Tier 6	Standard Retail					Standard Mail Order				
	Preferred Retail			=		Preferred Mail Order				
							1			1
						Clear Daily Copay An	ount	Calculate	Daily Copa	ay Amount

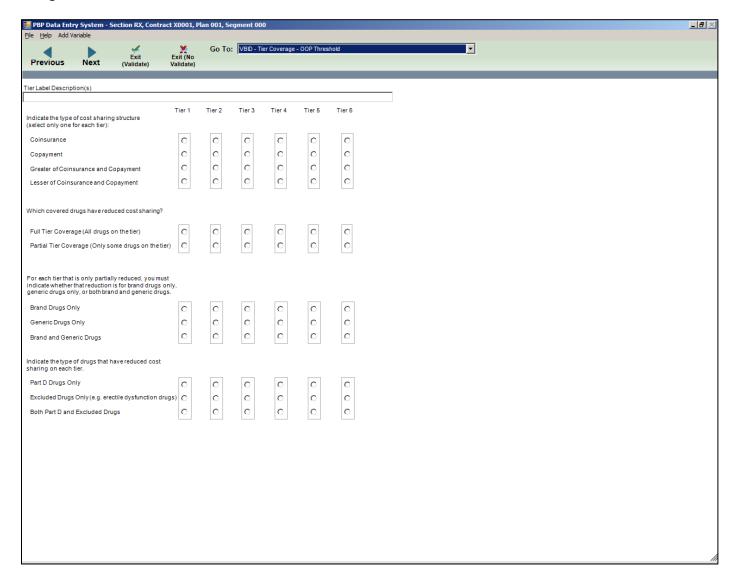
VBID - Daily LTC Copay - Gap

	ita Entry System - Sec	tion RX, Contra	ct X0001, Plan	001, Seg	ment 000	_ 6 ×
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Tier Label [Description(s)					
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Tier 3	Long Term Care Drugs					
Tier 4	Long Term Care Drugs					
Tier 5	Long Term Care Drugs					
Tier 6	Long Term Care Drugs					
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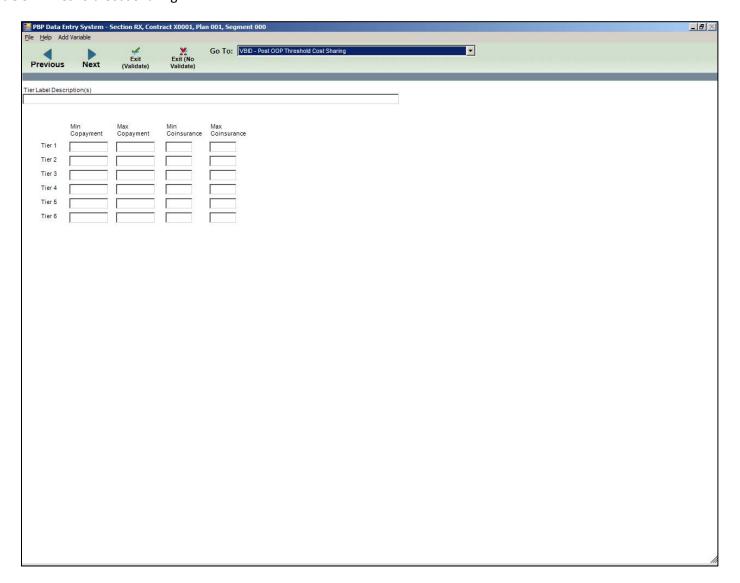
VBID - Package Tiers - OOP Threshold



VBID - Tier Coverage - OOP Threshold



VBID - Post OOP Threshold Cost Sharing



VBID - Package notes

