

EXHIBIT D. Definitions for TrOOP and Total Drug Costs for a plan that offers Supplemental Drug Coverage

The language below shows definitions of Out-of-Pocket Costs and Total Drug Costs for a fictional plan that offers Supplemental Drug Coverage. This language appears immediately after Chart 2 to help enrollees understand what their monthly and yearly totals do and do not include.

Out-of-Pocket Costs include:

- What you paid when you fill/refill a covered Part D prescription
- Any payments for your drugs made by family or friends
- Any payments made for your drugs by Extra Help from Medicare, employer or union health plans, TRICARE, Indian Health Service, AIDS drug assistance programs, charities, and most State Pharmaceutical Assistance Programs (SPAPs)

Out-of-Pocket Costs DON'T include payments made for:

- Plan premiums
- Drugs not covered by our plan
- Non-Part D drugs (like drugs you get during a hospital stay)
- Drugs covered by certain other programs, such as the Veteran's Administration or Worker's Compensation
- Manufacturer Discount Program
- Selected drug subsidy
- Drugs covered by our plan's Supplemental Drug Coverage listed in Chart 1A

Total Drug Costs

This is the total of all payments made for your covered Part D drugs. It includes:

- What the plan pays
- What you pay
- What other programs or organizations pay for your drugs