



OVER/UNDER 65 RETIREE 2026 MEDICARE RX RATE SHEET

UHC 5 TIER STANDARD PLAN

INITIAL COVERAGE PERIOD

Tier 1 - Preferred Generic	\$0
Tier 2 - Generic	\$10
Tier 3 - Preferred Brand	\$35
Tier 4 - Non-preferred Brand	33%
Tier 5 - Specialty	25%

CATASTROPHIC (Coverage Limit \$2,100)

Tier 1 - Preferred Generic	\$0
Tier 2 - Generic	\$0
Tier 3 - Preferred Brand	\$0
Tier 4 - Non-preferred Brand	\$0
Tier 5 - Specialty	\$0

MAIL ORDER

Tier 1 - Preferred Generic	\$0
Tier 2 - Generic	\$25
Tier 3 - Preferred Brand	\$87.50
Tier 4 - Non-preferred Brand	33%
Tier 5 - Specialty	25%

STANDARD RETAIL

Tier 1 - Preferred Generic	\$0
Tier 2 - Generic	\$30
Tier 3 - Preferred Brand	\$105
Tier 4 - Non-preferred Brand	33%
Tier 5 - Specialty	25%

PREMIUM

\$169.81

UHC 4 - TIER LOW PLAN

UHC 4 - TIER HIGH PLAN

INITIAL COVERAGE PERIOD

Tier 1 - Generic	\$10	\$7
Tier 2 - Preferred Brand	\$45	\$30
Tier 3 - Non-preferred Brand	\$75	\$60
Tier 4 - Specialty	32%	\$75

CATASTROPHIC (Coverage Limit \$2,100)

Tier 1 - Generic	\$0	\$0
Tier 2 - Preferred Brand	\$0	\$0
Tier 3 - Non-preferred Brand	\$0	\$0
Tier 4 - Specialty	\$0	\$0

MAIL ORDER

Tier 1 - Generic	\$20	\$14
Tier 2 - Preferred Brand	\$90	\$60
Tier 3 - Non-preferred Brand	\$150	\$120
Tier 4 - Specialty	32%	\$150

STANDARD RETAIL

Tier 1 - Generic	\$30	\$21
Tier 2 - Preferred Brand	\$135	\$90
Tier 3 - Non-preferred Brand	\$225	\$180
Tier 4 - Specialty	32%	\$225

PREMIUM

\$163.00

\$351.92