SilverScript®
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NEW YORK STATE | NY Power Authority

2026 Summary of Benefits

SilverScript Employer PDP sponsored by New York Power Authority (SilverScript) for New York Power Authority UWUA Retired Post 2019

A Medicare Prescription Drug Plan (PDP) offered by SilverScript® Insurance Company with a Medicare contract

January 1, 2026 – December 31, 2026

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SECTION I – Introduction to Summary of Benefits

SilverScript Employer PDP sponsored by New York Power Authority (SilverScript) is a Medicare Part D prescription drug plan with additional coverage provided by New York Power Authority to expand the Part D benefits. "Employer PDP" means that the plan is an employer-provided Medicare Part D prescription drug plan. The plan is offered by SilverScript Insurance Company, which is affiliated with CVS Caremark®.

This *Summary of Benefits* document provides a summary of what SilverScript covers and what you will pay. It doesn't list every service that we cover or list every limitation or exclusion. To get a complete list of our services we cover, please call SilverScript and ask for the *Evidence of Coverage*.

You have choices about how to get your Medicare prescription drug benefits

New York Power Authority is offering you a plan not offered to the public. As a Medicare beneficiary, you can choose from different Medicare prescription drug coverage options:

- **SilverScript Employer PDP sponsored by New York Power Authority (SilverScript)**
- Coverage through another Medicare Part D prescription drug plan

You choose whether or not you want to be enrolled in SilverScript.

If you decide to opt out of SilverScript you and your spouse and/or covered dependents will lose both your medical and prescription coverage from NYPA, and you will lose your Medicare Part B reimbursement. If you opt out in error, you will have 30 days from disenrollment to notify NYPA Retiree Services of the error to have your medical and prescription drug coverage for yourself, spouse, and/or covered dependents re-instated.

Tips for comparing your Medicare choices

This *Summary of Benefits* document gives you a summary of what SilverScript covers and what you pay.

- If you want to compare SilverScript with other Medicare health plans, ask the other plans for their *Summary of Benefits* documents.
- You can also find information about Medicare plans in your area other than SilverScript by using the *Medicare Plan Finder* on the Medicare website. Go to www.medicare.gov/plan-compare and click "Find health & drug plans." There you can find information about costs, coverage and quality ratings for Medicare plans.
- If you would like to know more about the coverage and costs of Original Medicare, review your current *Medicare & You* handbook. You can also view a copy online at www.Medicare.gov or get a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.
- For more information about the Medicare Part D portion of your plan, please call SilverScript Customer Care and ask for the *Evidence of Coverage*.

Who can join?

To join SilverScript, you must:

- Be eligible for coverage provided by New York Power Authority, and
- Be entitled to Medicare Part A and/or enrolled in Medicare Part B, and
- Be a United States citizen or be lawfully present in the United States, and
- Live in our service area, which is the United States and its territories, and

- Meet any additional eligibility requirements for this plan established by New York Power Authority.

Which drugs are covered?

SilverScript will send you a list of prescription drugs selected by SilverScript and **covered under the Medicare Part D portion of the plan.** This list of drugs is called a *Formulary*.

The SilverScript *Formulary* does not include any drugs that may be available to you through the additional coverage provided by New York Power Authority. To find out if your drug is covered, or if you have any questions about the Formulary including any restrictions, call SilverScript Customer Care.

The formulary may change throughout the year. Drugs may be added or removed, or restrictions may be added or changed.

Restrictions on SilverScript coverage include:

Prior Authorization (PA)

For certain prescription drugs, you or your provider need to get approval from the plan *before* SilverScript will agree to cover the drug for you. This is called **"prior authorization."** If you do not get this approval, your prescription drug might not be covered by SilverScript.

Quantity Limits (QL)

For certain prescription drugs, SilverScript limits the amount of the prescription drug that you can get each time you fill your prescription. For example, if it is normally considered safe to take only one pill per day for a certain drug, we may limit coverage for your prescription to no more than one pill per day. This is called **"quantity limits."**

Step Therapy (ST)

In some cases, SilverScript requires you to first try a certain drug to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B treat the same medical condition and Drug A is just as effective as Drug B, the plan may require you to try Drug A first. If Drug A does not work for you, the plan will then cover Drug B. This requirement to try a different drug first is called **"step therapy."**

Non-Extended Days Supply (NDS)

For high-cost or specialty prescription drugs, SilverScript may limit the amount of the drug that can be received at one time. These drugs have "NDS" next to the drug name in your formulary.

In most cases, this restriction will not apply to you because of the additional coverage provided by NYPA.

How will I determine my drug costs?

SilverScript groups each medication into one of three tiers.

- **Generic drugs (Tier 1)** – cost-effective drugs to buy. The active ingredients in generic drugs are exactly the same as the active ingredients in brand drugs whose patents have expired. They are required by the Food and Drug Administration (FDA) to be as safe and effective as the brand drug.
- **Preferred Brand drugs (Tier 2)** – brand drugs that do not have a generic equivalent and are included on a preferred drug list. They are usually available at a lower cost than Non-Preferred Brand drugs.

- **Non-Preferred Brand drugs (Tier 3)** – brand drugs that are not on a preferred drug list and usually are a high cost.

You will need to use your formulary to find out the tier your drug is on to determine how much it will cost you. The amount you pay depends on the drug's tier and whether you are in the Deductible (if any), Initial Coverage, or Catastrophic Coverage Stage. As you move from stage to stage, the amount you and the plan pay for your drugs may change. If the actual cost of a drug is less than the normal copayment or coinsurance for that drug, you will pay the actual cost, not the higher copayment or coinsurance.

For more information about formulary tiers and drug payment stages, please see the formulary and the *Evidence of Coverage*, or contact SilverScript Customer Care.

Please note: New York Power Authority provides additional coverage that may cover prescription drugs not included in your Medicare Part D benefit. If you are unsure about your share of the cost for a drug or which drugs may or may not be covered, please call Customer Care.

Additional coverage provided by New York Power Authority

NYPA provides additional coverage to cover drugs that are not covered on the SilverScript formulary, as well as certain medications that are not normally covered under Medicare Part D.

These non-Part D drugs include:

- Prescription drugs when used for anorexia, weight loss or weight gain
- Prescription drugs when used for the symptomatic relief of cough or cold
- Prescription vitamins and mineral products not covered by Part D
- Prescription drugs when used for the treatment of sexual or erectile dysfunction

The cost of these drugs will not count toward your Medicare Part D total drug costs or Medicare Part D total out-of-pocket costs. However, your copayment will count toward your NYPA annual prescription drug out-of-pocket maximum. Please call SilverScript Customer Care for additional information about specific drug coverage and your copayment.

Which pharmacies can I use?

The plan has a network of pharmacies, including retail, mail-order, long-term care and home infusion pharmacies.

SilverScript has preferred network retail pharmacies where you can get up to a 90-day supply of your maintenance medications for the same copayment or coinsurance as mail order. You will also be able to get up to a 90-day supply of your maintenance medication at standard network retail pharmacies, but the copayment will be three times the retail 30-day supply copayment. **Due to recent changes in Arkansas law, you will be able to utilize any network pharmacy within the state of Arkansas to fill maintenance medications.**

Please note: After the mail-order pharmacy receives an order, it typically takes up to 10 days for you to receive your prescription drug. You have the option to sign up for automated mail-order delivery.

The pharmacies in our network can change at any time. To find a network pharmacy near your home or where you are traveling in the United States or its territories, call SilverScript Customer Care.

You must use a network pharmacy to have your copayments count toward your Medicare Part D total drug costs and Medicare Part D out-of-pocket costs, except in an emergency or non-routine circumstance.

If you use an out-of-network pharmacy, you may have to pay the full cost of the drug at the pharmacy. In this case, you must complete a paper claim form and send it to the plan to request reimbursement. You will be reimbursed the plan's share of the cost.

Whether you use a network pharmacy or an out-of-network pharmacy, your deductible (if any), copayment and/or coinsurance will be applied toward your New York Power Authority annual prescription drug out-of-pocket maximum of $1,000.

If you may need to get your prescription filled while you are traveling outside the country, contact SilverScript Customer Care **before** you leave the U.S. You can request a vacation override for up to a 90-day supply of your medication.

Please note: Veterans Affairs (VA) pharmacies are not permitted to be included in Medicare Part D pharmacy networks. The federal government does not allow you to receive benefits from more than one government program at the same time.

If you are eligible for VA benefits, you may still use VA pharmacies under your VA benefits. However, the cost of those medications and what you pay out-of-pocket will not count toward your Medicare Part D out-of-pocket costs or Medicare Part D total drug costs. Each time you get a prescription filled, you can compare your New York Power Authority benefit through SilverScript to your VA benefit to determine the best option for you.

For more information

You can call us 24 hours a day, 7 days a week.

SilverScript phone numbers and website

Call SilverScript Customer Care toll-free at 1-844-449-0370, 24 hours a day, 7 days a week. TTY users should call 711.

Go to Caremark.com for more information about your plan.

SECTION II – Summary of Benefits

January 1, 2026 – December 31, 2026

How Medicare Part D Stages Work

The **standard Medicare Part D plan** has three stages or benefit levels. Below is information on how these stages work in 2026.

Stage	Standard Medicare Part D Plan	SilverScript with your additional coverage provided by New York Power Authority This is what you pay
Deductible	$615	$0
Initial Coverage	After meeting the deductible, a person pays 25% of the drug cost until a person reaches $2,100 in total drug costs.	Since you have no deductible, you start in this stage and pay your New York Power Authority copayment and/or coinsurance.
Catastrophic Coverage	After reaching $2,100 in Medicare Part D out-of-pocket costs, a person pays nothing for their Part D covered drugs.	During the Catastrophic Coverage stage, **you will have $0 copayment for covered drugs included on the SilverScript formulary.** After you reach the NYPA annual prescription drug out-of-pocket maximum of $1,000, you will have no copayment for the remainder of the calendar year.

In 2026, the standard Medicare Part D plan out-of-pocket cost of $2,100 includes the deductible, if any, any amount you have paid for your copayment and/or coinsurance, and any amount paid by Extra Help or other governmental or assistance organizations on your behalf.

The Medicare Part D out-of-pocket cost does not include the monthly premium, if any, the cost of any prescription drugs not covered by Medicare, any amount paid by SilverScript, or any amount paid through the additional coverage provided by New York Power Authority.

Important to note: For individuals who are prescribed very costly drugs, it is possible that the Medicare annual out-of-pocket amount of $2,100 can be reached before the New York Power Authority individual annual prescription drug out-of-pocket maximum of $1,000.

Your Prescription Drug Benefits – Monthly Premium, Deductible, and Limits on How Much You Pay for Covered Services

How much is the monthly premium?

This benefit is provided as part of your NYPA retiree health care coverage. If you have any questions, contact NYPA Retiree Services at 1-914-287-3114, Monday through Friday, 8:00 a.m. to 4:00 p.m. Eastern Time, or email Retirees@nypa.gov. TTY users should call 711.

Part D premium for high income retirees (Part D-IRMAA)

If your individual income is over a certain amount, you will be required to pay an income-related monthly premium to the federal government in order to maintain your Medicare prescription drug coverage. This premium is adjusted based on your income. Note: If your income is below these amounts, there is no Part D premium.

You will receive a letter from Social Security letting you know if you have to pay this amount, which is called the **Part D Income Related Monthly Adjustment Amount (Part D-IRMAA).** This letter will explain how they determined the Part D-IRMAA amount you must pay.

If you are responsible for the Part D-IRMAA, it will be deducted automatically from your Social Security check. If your Social Security check is not enough to cover this premium, Medicare will send you a bill. You do not pay this amount to New York Power Authority or SilverScript. You send your payment to Medicare.

For more information about the withholdings from your Social Security check, visit https://www.ssa.gov/medicare/mediinfo.html, or call 1-800-772-1213, 8 a.m. to 7 p.m., Monday through Friday, or visit your local Social Security office. TTY users should call 1-800-325-0778.

It is important that you make the payment, if required. If you do not, Medicare will notify SilverScript that it must stop your prescription drug coverage and you will be disenrolled from the plan.

For more information about Part D premiums based on income, call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

How much is the deductible?

This plan does not have a deductible.

Initial Coverage Stage

You pay the following amounts until your total yearly drug costs reach $2,100. Total yearly drug costs are the total drug costs for Part D drugs paid by both you and the plan.

You may get your drugs at network retail pharmacies and through the mail-order pharmacy. Our network includes preferred network retail pharmacies, which may offer you lower costs than other network pharmacies.

Your share of the cost when you get a *one month* supply of a covered Part D prescription drug:			
	Network Retail Pharmacy (Up to a 31-day supply available at **any** network pharmacy)	**Mail-Order Pharmacy** (Up to a 31-day supply)	**Long-Term Care (LTC) Pharmacy** (Up to a 31-day supply)
Tier 1: Generic	$10.00	$10.00	$10.00
Tier 2: Preferred Brand	$30.00	$30.00	$30.00
Tier 3: Non-Preferred Brand	$45.00	$45.00	$45.00
Your share of the cost when you get a *long-term* supply (up to 90 days) of a covered Part D prescription drug:			
	Preferred Network Retail Pharmacy (Up to a 90-day supply)	**Standard Network Retail Pharmacy** (Up to a 90-day supply)	**Mail-Order Pharmacy** (Up to a 90-day supply)
Tier 1: Generic	$20.00	$30.00	$20.00
Tier 2: Preferred Brand	$60.00	$90.00	$60.00
Tier 3: Non-Preferred Brand	$90.00	$135.00	$90.00

New York Power Authority retirees have $0 copayment for insulin.

Catastrophic Coverage Stage

During the Catastrophic Coverage stage, **you will have $0 copayment for covered drugs included on the SilverScript formulary.**

After you reach the NYPA annual prescription drug out-of-pocket maximum of $1,000, you will have no copayment for the remainder of the calendar year.

The formulary and/or pharmacy network may change at any time. You'll receive notice when necessary.

See *Evidence of Coverage* for a complete description of plan benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by service area.

Participating health care providers are independent contractors and are neither agents nor employees of SilverScript. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change.

For mail-order, you can get prescription drugs shipped to your home through the network mail-order delivery program. Typically, mail-order drugs arrive within 10 days. Specialty pharmacies fill high-cost specialty drugs that require special handling. Although specialty pharmacies may deliver covered medicines through the mail, they are not considered “mail-order pharmacies.” Therefore, most specialty drugs are not available at the mail-order cost share. Enrollees have the option to sign up for automated mail-order delivery.

SilverScript Employer PDP is a Prescription Drug Plan. This plan is offered by SilverScript Insurance Company, which has a Medicare contract. Enrollment depends on contract renewal.

Due to legislation in Arkansas, effective January 1, 2026, you may not be able to utilize the following services within the state of Arkansas, unless a court takes action: CVS Retail, CVS Caremark Mail Service, CVS Specialty, and OMNI Care long term pharmacies.

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Important Plan Information
Información Importante Sobre el Plan

SilverScript Customer Care

Call	1-844-449-0370 Calls to this number are free, 24 hours a day, 7 days a week. Customer Care also has free language interpreter services available for non-English speakers.
TTY	711 This number requires special telephone equipment and is only for people who have difficulties with hearing or speaking. Calls to this number are free, 24 hours a day, 7 days a week.
Fax	1-866-552-6205
Write	SilverScript Insurance Company P.O. Box 30016 Pittsburgh, PA 15222-0330
Website	Caremark.com

NYPA Retiree Services

If you need to update your information or you have questions regarding enrollment, eligibility or your premium, please contact:

NYPA Retiree Services
1-914-287-3114, Monday through Friday, 8:00 a.m. to 4:00 p.m. Eastern Time, or email Retirees@nypa.gov. TTY users should call 711.