

# City of Albany

## Summary of Changes for 2025

### Anthem Medicare (with Senior Rx Plus)

This document provides a summary of the changes to your plan’s benefits and costs. This summary doesn’t list every service that we cover or list every limitation or exclusion. For more details about your benefits and services, please review your *Evidence of Coverage (EOC)*. You can access your *EOC* online, by logging into the member portal at [www.anthembluecross.com](http://www.anthembluecross.com) or you can call Member Services with any questions you may have. The number to call is listed inside.

### Changes to Prescription Drug Costs and Benefits

We are making changes to costs and benefits for certain pharmacy services next year. The information below describes these changes.

**Note:** If you are in a program that helps pay for your drugs (“Extra Help”), the information about costs for Part D prescription drugs may not apply to you. You will receive a separate notice about your costs, if applicable.

Description	2024 (this year)	2025 (next year)
True Out of Pocket	\$8,000	Not applicable
Drug Plan Maximum Annual Out of Pocket	Not applicable	\$2,000 per year

### Administrative Changes

Description	2024 (this year)	2025 (next year)
Medicare Prescription Payment Plan	Not applicable	The Medicare Prescription Payment Plan is a new payment option that works with your current Part D prescription drug coverage, and it can help you manage your Part D prescription drug costs by spreading them across <b>monthly payments that vary throughout the year</b> (January – December). This program does not apply to Part B. It also does not apply to Extra Covered Drugs if your plan includes this benefit. To learn more about this payment option, please contact Member Services or visit <b>www.medicare.gov</b> .

Description	2024 (this year)	2025 (next year)
Tier label	Preferred Brands	Preferred Drugs