

FREQUENTLY ASKED QUESTIONS

Learn more about the prescription drug plan offered to you by the State of Iowa. If you choose the Program N or Program F health plan, you may also choose the prescription drug plan option.

1. I already have Program N or Program F and the Group MedicareBlue Rx prescription drug plan \$5/\$10/20%/45%/33%. Do I have to fill out an application for 2026?

No. If you want to continue with group coverage with the \$5/\$10/20%/45%/33% plan for 2026, you do not need to fill out an application.

2. I already have Program N or Program F, but I do not want the \$5/\$10/20%/45%/33% plan for 2026. What do I need to do?

To find other prescription drug plans that fit your needs, you can contact a member of the Senior Health Insurance Information Program (SHIIP). Across Iowa there is a network of trained volunteers who can help you compare and analyze health and drug policies you are considering. These volunteers have been trained by people from the State of Iowa Division of Insurance. This free service is available through SHIIP. You may reach out to them for more information at 800-351-4664, 800-735-2942 (TTY), or shiip@iid.iowa.gov.

3. I already have Program N or Program F, but I want to change my health plan option for 2026. What do I need to do?

You can switch to the other health plan by completing an application form by Dec. 7, 2025, and submitting it to:

Department of Administrative Services
Human Resources Enterprise
Hoover Building, Level A
1305 E. Walnut Street
Des Moines, IA 50319-0150

4. How do the Group MedicareBlue Rx plans work?

Medicare Part D drug plans have two phases of coverage: the initial coverage stage and the catastrophic coverage stage.

During the initial coverage stage, you will pay copays (or coinsurance) for your drugs based on the plan design and tier on which your drug resides.

After your yearly out-of-pocket drug costs (including drugs you purchased through your retail pharmacy and through mail order) reach \$2,100, you enter the catastrophic coverage stage.

In the catastrophic coverage stage you pay \$0:

- During this payment stage, the plan pays the full cost for your covered Part D drugs. You pay nothing.

5. Who do I contact if I still have questions?

For enrolled members, please contact Group MedicareBlue Rx at 877-838-3827 from 8 a.m.–8 p.m., daily, Central Time (TTY 711). You may also call Wellmark Customer Service at 800-622-0043.

Program N and Program F are underwritten by Wellmark Blue Cross and Blue Shield, an independent licensee of the Blue Cross and Blue Shield Association.

Group MedicareBlueSM Rx (PDP) is a prescription drug plan with a Medicare contract. Enrollment in Group MedicareBlue Rx depends on renewal of the plan sponsor's contract with Medicare

This information is not a complete description of benefits. Contact 877-838-3827, 8 a.m.–8 p.m., daily, Central Time (TTY 711) for more information.

Coverage is available to members of an employer or union group and separately issued by one of the following plans: Wellmark Blue Cross and Blue Shield of Iowa*; Blue Cross and Blue Shield of Minnesota*; Blue Cross and Blue Shield of Montana*, a division of Health Care Service Corporation, a Mutual Legal Reserve Company; Blue Cross and Blue Shield of Nebraska*; Blue Cross Blue Shield of North Dakota*; Wellmark Blue Cross and Blue Shield of South Dakota*; and Blue Cross Blue Shield of Wyoming*.

* Independent licensees of the Blue Cross and Blue Shield Association