Medicare Part D Cost Sharing Chart 2024

Part D Benefit Cost Periods	Costs and Who Pays	Beneficiary Pays (TrOOP)	Plan Pays	Total Amount Spent on Plan-Covered Drugs
Initial Deductible	Beneficiary pays 100%	Up to \$545	\$0	\$545 (Amount spent on deductible, before ICP begins)
Initial Coverage Period (ICP)	Costs of covered drugs are shared: 25% by beneficiary, 75% by plan	Up to \$1,257.50* *maximum an individual would pay if in plan with no deductible	\$3772.50	\$5,030 (Amount spent during ICP,including applicable deductible,before Coverage Gap begins)
Former Coverage Gap ("donut hole")	 While the Part D coverage gap ("donut hole") officially closed in 2020, that does not mean beneficiaries don't have to share a portion of costs after the ICP: The beneficiary will continue to pay 25% for both generic drugs and brand-name drugs, plus a small portion of the pharmacy dispensing fee (approx. \$1-\$3) The plan pays 75% of the cost of generic drugs and 5% for brand-name drugs. The drug manufacturer provides a 70% discount on brand-name drugs. Note about True Out-of-Pocket (TrOOP) costs: The total amount spent in this period (up to \$6,333.75) includes: The drug costs paid by the beneficiary, and The 70% discount on brand-name drugs provided by the drug manufacturer. Payments made by the plan during this period (75% on generics, 5% on brand-name drugs) do not count toward TrOOP. 			Up to \$6,333.75 (Total amount spent during the period between the end of the ICP and prior to the Catastrophic Benefit Period) \$12,447.11 (Total amount spent during both the ICP and this period, before Catastrophic Benefit Period begins)
Catastrophic Benefit Period	When an enrollee's total out-of- pocket spending reaches \$8,000, they hit the catastrophic benefits period. After this point, the beneficiary does not have to pay anything for their prescription drugs for the rest of the year.	\$0	100%	Beneficiary will remain in the Catastrophic Benefit Period through December 31, 2024. Part D benefit will reset on January 1, 2025, starting again with a deductible.

Source: 2024 Call Letter (pp. 140-142) at:

https://www.cms.gov/files/document/2024-announcement-pdf.pdf

