

2026
EDITION



Actor portrayals.

Open Enrollment Information for Patients

Help with understanding your health plan coverage options >>

What is open enrollment?

The annual open enrollment period is the time of year you may reconsider your insurance coverage and make changes or choose a new plan.



Actor portrayals.

Understanding open enrollment in 2026

The annual Medicare open enrollment period for changing your 2026 Medicare coverage is October 15 to December 7, 2025. If you have Original Medicare you can switch to a Medicare Advantage plan, switch between Medicare Advantage plans, or switch to Original Medicare. You can also change your prescription drug coverage (Medicare Part D).

If you'll have commercial health insurance in 2026, open enrollment usually ends late November 2025, but you should check with your plan for details.

Your health plan coverage can determine your out-of-pocket costs. That's why Tanabe Pharma America is providing this brochure to help you review your health insurance options for the coming year and make informed choices during open enrollment.

This brochure is provided for your background information only. It is **not** intended as a complete listing or description of health plan options. Please always contact your health insurance company and/or [Medicare.gov](https://www.medicare.gov) for information specific to you.



Contact your health plan representative or visit [Medicare.gov](https://www.medicare.gov) for help reviewing your plan options.

What is open enrollment? (cont'd)

Getting ready for your open enrollment

» STEP 1

Review information in this brochure that aligns with the type of health insurance you'll have in 2026.

Commercial (private) health insurance includes plans provided by employers and unions or plans through the Health Insurance Marketplace. Everyone is eligible for these plans. **If you'll have commercial health insurance in 2026, review pages 4 and 5 in this brochure.**

Medicare and Medicare Advantage includes coverage offered through programs provided by the state or federal government. Individuals eligible for these plans include:

- People aged 65 years or older
- People with ALS
- Certain younger people disabled for more than 24 months
- People with end-stage renal disease

If you'll have Medicare in 2026, review pages 6 through 8 in this brochure.

» STEP 2

List all the medications you and the family members on your plan are taking.

This can help give you an idea of your costs for next year.

» STEP 3

Contact your health plan representative and evaluate your options for 2026.

Find out about your medical and prescription plan insurance benefits and out-of-pocket costs for your medications and treatment administration.

» STEP 4

Check with your prescription drug's website or your HCP to see if there is an out-of-pocket assistance program available.

This can help you save on your deductible, co-pay, and co-insurance costs for your medication and treatment.

Consider these questions as you review your health plan options:

- What is your premium?
- What is your deductible?
- What is your co-pay or co-insurance?
- If you have an out-of-pocket maximum, what is it?



Contact your health plan representative or visit [Medicare.gov](https://www.Medicare.gov) for help reviewing your plan options.

If you will have commercial or private insurance in 2026

Open enrollment calendar

Insurance type	Enrollment dates
Commercial (Private)	Usually ends late November 2025 (check with your plan)
Health Insurance Marketplace	November 1-December 7, 2025, in many states (check with your plan)



Pharmacy benefit

Typically covers prescription medications from a retail or specialty pharmacy that you can take at home.^a

Call your health insurance plan to make sure you have coverage for your medication.

Ask your plan about:

- ☐ Annual deductible
- ☐ Coverage of your medication
- ☐ Co-pay or co-insurance

Check to see if there is an out-of-pocket assistance program associated with your medication.

A program representative from the manufacturer may be able to help you determine your eligibility and discuss available support options.

^aSome plans require medication to be covered under the Pharmacy benefit, even if given by a healthcare professional. Check your health insurance plan for specific information.



Contact your health plan representative or visit [Medicare.gov](https://www.Medicare.gov) for help reviewing your plan options.

Checking your pharmacy benefit

ENTER YOUR HEALTH PLAN COST INFORMATION BELOW to guide discussions and get an idea of your costs for 2026. Call your health plan representative to obtain cost information.^a

Does your plan include the following?	If so, what is the amount per year?
A separate pharmacy benefit premium (not part of your medical benefit premium) Does not count toward your out-of-pocket maximum.	Premium: \$ _____
Deductible	Deductible: \$ _____
Co-pay OR co-insurance for your medication	Co-pay: \$ _____ OR Co-insurance: _____%
Specialty pharmacy Does your plan require you to get your medication from a specialty pharmacy?	Specialty pharmacy name _____

^aTanabe Pharma America, Inc. does not assume any responsibility or liability for the accuracy of the cost information provided by your health plan, which you may enter in the table on this page. Please consult your health plan representative to confirm the accuracy of the information they have provided, and any calculations resulting from entry of the cost information provided by your health plan.

About co-pay adjustment policies

Some health plans have co-pay adjustment policies that may impact how a co-pay assistance program benefit is applied to the health plan's annual deductible or out-of-pocket maximum.

With these policies:

- It may take longer to reach the health plan annual deductible or out-of-pocket maximum
- The potential out-of-pocket costs for prescriptions may increase during the year

A health plan representative may be able to tell you about any co-pay adjustment policy in place.



Contact your health plan representative or visit [Medicare.gov](https://www.Medicare.gov) for help reviewing your plan options.

If you will have Medicare prescription coverage in 2026

Open enrollment calendar

Insurance type	Enrollment dates and actions you may take	
Medicare	October 15-December 7, 2025	
	Choose or change a Medicare Advantage plan	OR Choose or change a Medicare Part D prescription plan
Medicare Advantage	January 15-March 7, 2026	
	Switch to a different Medicare Advantage plan	OR Return to Medicare and join a Part D prescription plan

Federally funded health insurance coverage includes Medicare Part D (prescription drug coverage). Your costs may change in 2026. Visit [Medicare.gov](https://www.medicare.gov) to find out more.



Prescription drug coverage (Medicare Part D and Medicare Advantage with Part D)

These prescription drug plans typically cover prescription medications, including:

- Medications given by a healthcare professional at home (only the medication cost)
- Medications you get from a retail or specialty pharmacy and take at home

Ask your plan about:

☐ Annual deductible

☐ Copay or co-insurance costs

☐ Medication costs after you pay the annual deductible

Medicare and Medicaid dual eligibility

For eligible people, Medicare pays for covered medical services first, and Medicaid prescription drug coverage may then pay some out-of-pocket costs Medicare doesn't. **A Dual Eligible Special Needs Plan (D-SNP)** may coordinate care. Talk with your health plan representative about D-SNP benefits and requirements in your state.

Learn about dual eligibility requirements and coverage options at [Medicaid.gov](https://www.Medicaid.gov).

If you have applied for Social Security Disability Insurance (SSDI), and if there is a support program associated with your medication, a program representative may be able to provide information to help you understand the transition to Medicare coverage.

Visit ssa.gov/disability to learn more about Medicare and SSDI.



Contact your health plan representative or visit [Medicare.gov](https://www.Medicare.gov) for help reviewing your plan options.

Checking your prescription drug coverage

Call your health insurance company to make sure you have coverage for your medication (Medicare Part D).

Find a plan that works for you.

- Understand that out-of-pocket costs for prescription medications may vary depending on the plan you choose
- Consider all the prescription medications you are taking
- Look at total out-of-pocket medication costs, not just premiums and deductibles

The “Extra Help” program may assist with medication costs. Need help paying for deductibles and out-of-pocket expenses? Some people with limited resources and income may qualify for the Low-Income Subsidy (LIS) program, also known as “Extra Help.” Visit ssa.gov/medicare/part-d-extra-help to learn more.

Important 2026 Medicare Part D details

New out-of-pocket cost cap

Starting January 1, 2026, out-of-pocket costs for prescription medications will be capped at \$2100. After reaching the spending cap of \$2100, you will go directly into “catastrophic coverage” and pay \$0 in out-of-pocket costs for the rest of the plan year.^a

Calculate out-of-pocket costs for Medicare Part D coverage in 2026

Monthly premium	Deductible	Out-of-pocket cap	Total 2026 costs
\$ _____ x 12	+ \$ 615	+ \$ 2100	= \$ _____

The Medicare Prescription Payment Plan

As of 2025, you have the option to pay your out-of-pocket prescription drug costs in the form of capped monthly payments instead of all at once at the pharmacy. This is also called “smoothing.” **If you enrolled in 2025, your participation will automatically continue in 2026 and in later years. You can opt out to stop participating.**

To enroll in or opt out of the [Medicare Prescription Payment Plan](#), visit your health plan’s website or call your health plan at any time during the calendar year.

^aYou will still be responsible for paying your premium. A new benefit verification needs to be run each year to determine annual costs.

Check your Medicare Advantage plan’s support for your treatment.

Does your Medicare Advantage plan include prescription drug coverage? If not, you may also need to enroll in a Medicare Part D prescription drug plan.



Contact your health plan representative or visit [Medicare.gov](https://www.Medicare.gov) for help reviewing your plan options.

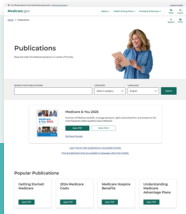
More helpful Medicare information and resources

If you have questions about what your coverage includes, contact your Medicare insurance plan representative.

State Health Insurance Assistance Program (SHIP)

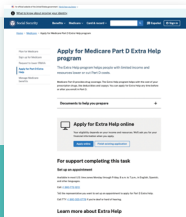
Your local SHIP may be able to provide in-depth, objective counseling and assistance for people with Medicare, their families, and caregivers, and may be able to help find a plan that's right for you. To find a SHIP in your area, visit shiphelp.org or call [1-877-839-2675](tel:1-877-839-2675).

Pharmacy benefit



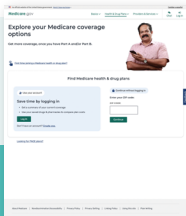
Your Guide to Medicare Prescription Drug Coverage

[Medicare.gov/publications](https://www.medicare.gov/publications) (Select Medicare Prescription Drug Coverage from the Category drop down)



Extra Help with Medicare Prescription Drug Plan Costs

ssa.gov/benefits/medicare/prescriptionhelp



Medicare Plan Finder

Search tool enabling users to compare Medicare Part D prescription drug plans and Medicare Advantage plans in their local area)

[Medicare.gov/plan-compare](https://www.medicare.gov/plan-compare)



Check with your health plan to get the answers you need.

If there is a manufacturer-sponsored out-of-pocket support program associated with your medication, a representative of the manufacturer's support program may be able to help you determine your eligibility and discuss support options that may be available.



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