

TABITHA'S TIPS AND TALKS

Your weekly connection to education, events, and inspiration!

JANUARY 2026



THE JUST US EXPLAINER SERIES

This series is designed to explain how health insurance and healthcare actually work, step by step, **in real life**.

Each issue will focus on **one part of the system**, explain how it really works, and show how families usually experience it when they run into it. Starting with **medications**. This is one of the most common places people feel confused, annoyed, or caught off guard.



NOT THE SALES VERSION



NOT THE SIMPLIFIED VERSION



AND NOT THE VERSION PEOPLE ONLY LEARN AFTER SOMETHING GOES WRONG.

IF YOU HAVE EVER THOUGHT...

"I feel like I should understand how this works, but I don't."

You are not alone.

A QUICK GROUNDING MOMENT

The healthcare system is complicated. That is not your fault. Most people were never taught how medication coverage works. They learn pieces of it over time, usually when something changes. Even though it should be simpler, this is the system we have today.

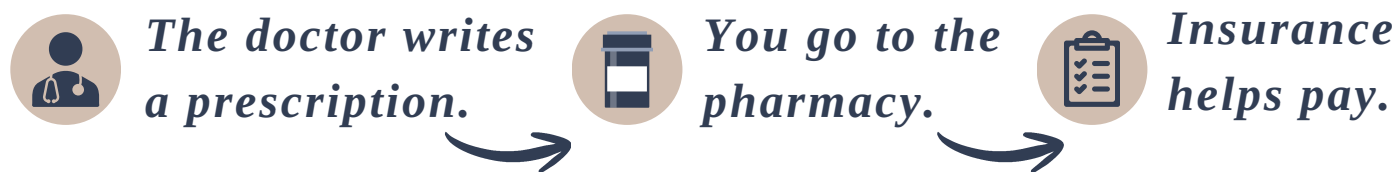
JUST US CANNOT REMOVE THE RULES...



But we can help you understand them so you can navigate them with fewer surprises.

WHAT MEDICATION COVERAGE ACTUALLY INVOLVES

Most people think medication coverage works like this:



Behind the scenes, **several things are happening at the same time.**

THE MAIN PIECES ARE:

DRUG CLASSES

DRUG TIERS

FORMULARIES

PRICING RULES

PHARMACY NETWORKS

You do not need to memorize these. But understanding them explains why coverage and costs can change.

DRUG CLASSES

WHAT THAT ACTUALLY MEANS

A drug class means medications are grouped by **what condition they treat or how they work in the body.**



FOR EXAMPLE...



Many medications treat high blood pressure



Many lower cholesterol



Many manage diabetes



Many treat acid reflux

INSURANCE COMPANIES:

From the insurance company's point of view, medications that treat the same condition are grouped together because they are trying to solve the same problem.

HERE'S THE KEY POINT...

Insurance assumes medications in the same class can often be substituted for one another.

Patients and doctors know that is not always true. But the system starts from that assumption.

That assumption drives formularies, tiers, and step therapy.

FORMULARIES

SHORT, CLEAR, AND IMPORTANT

A **formulary** is the insurance plan's **list of medications it agrees to cover**.

✓ *If a medication is on the formulary, it is covered*

✗ *If a medication is not on the formulary, it is not covered by default*

COVERED DOES NOT ALWAYS MEAN SIMPLE

Even if a medication is on the formulary, it may require:

PRIOR AUTHORIZATION

Where the doctor explains why this medication is needed

STEP THERAPY

Where the plan requires trying a lower-cost medication in the same drug class first

*If a medication is not on the formulary, a doctor can request a **plan exception**. An exception asks the insurance company to cover a medication that is not on the list, usually because: other medications in the same class **did not work, side effects occurred**, or there is a **medical reason alternatives are not appropriate**.*



Exceptions can be approved, denied, or approved temporarily.

DRUG TIERS

PRICING LEVELS THAT CHANGE

Once a medication is on the formulary, it is placed into a **tier**. A tier is simply a **pricing category**.



Lower tiers usually cost less.



Higher tiers usually cost more

WHAT MATTERS MOST IS THIS:

TIERS CAN CHANGE FROM YEAR TO YEAR

A medication that was **affordable last year** may **cost more this year**, even if nothing about the medication changed. This is one of the main reasons people are encouraged to **review their plan every year, even if their medications stay the same**.

PRICING RULES

WHY THE SAME MEDICATIONS COST DIFFERENT AMOUNTS

When people ask, “Why did this cost more than I expected,” the answer is usually in the **pricing rules**.

MEDICATION PRICING USUALLY DEPENDS ON A FEW DIFFERENT THINGS

DEDUCTIBLES

Some plans have a **drug deductible**. This means you may pay the full cost of medications until that deductible is met.

FOR EXAMPLE...

If your drug deductible is \$300 and your medication costs \$150 a month, you may pay the full \$150 in January and February before the plan starts helping.

COPAYS

A copay is a **flat dollar amount**, like \$10, \$35, or \$75. Copays depend on the drug's tier, and whether the pharmacy is preferred.

FOR EXAMPLE...

A Tier 2 medication might have a \$35 copay at a preferred pharmacy and a \$65 copay at a standard pharmacy.

COINSURANCE

Coinsurance means you pay a percentage of the medication's cost. This is common for higher-tier or specialty drugs.

FOR EXAMPLE...

If a medication costs \$800 and your coinsurance is 25 percent, you pay \$200.

PHARMACIES

WHY WHERE YOU FILL MATTERS

Most people assume all pharmacies work the same way.

They do not. Insurance plans make pricing agreements with pharmacies. Those agreements affect what you pay.

WHAT THIS LOOKS LIKE IN REAL LIFE:

A **preferred pharmacy** has agreed to lower pricing.

A **standard pharmacy** has not agreed to the same discounts.

An **out-of-network pharmacy** may not be covered at all.

Plans usually divide pharmacies into categories:



Preferred pharmacies



Standard pharmacies



Out-of-network pharmacies

FOR EXAMPLE...

The same generic medication might cost:

\$8 at a **preferred pharmacy**

\$22 at a **standard pharmacy**

\$90 at an **out-of-network pharmacy**

Nothing about the medication changed, only the contract did.

WHEN PHARMACY CHANGES USUALLY HAPPEN

Pharmacy networks usually change once a year, when plans renew. This means:

A pharmacy that was preferred last year may not be this year

A pharmacy may move from preferred to standard

Pricing may change even if the pharmacy stays in-network

Insurance companies do send notices about these changes. They are often included with many other plan documents. Most people do not read them closely, especially if everything seemed fine before.

WHY THIS MATTERS FOR ANNUAL REVIEWS

This is one reason annual plan reviews matter, even when: medications have not changed, doctors have not changed, pharmacies have not changed

Plans change their pricing rules and pharmacy agreements.

WHEN PEOPLE SAY...

*“Nothing changed, but it costs more,” they are usually right. **The plan changed.***

WHY JUST US IS EXPLAINING THIS

We explain this because medication coverage is one of the biggest sources of **confusion and unnecessary cost** for families. When people understand how drug classes work, what formularies actually control, why tiers can change from year to year, and why pharmacy choice matters, they are **far better equipped to avoid surprise costs, prepare for annual plan changes, and have more productive conversations with their doctors and pharmacies.** This is not about mastering insurance or memorizing fine print. It is about **being prepared, informed, and confident** enough to make smarter decisions during plan reviews and throughout the year.

COMING NEXT...

Medication coverage cannot be explained in one issue. Next, we will cover:

- *prior authorizations in more detail*
- *step therapy and how it plays out in real life*
- *what to do when a medication is denied*
- *what options families realistically have*

This builds directly from what you learned here.

IF YOU'RE READING THIS...

*If parts of this were new to you, that does not mean you missed something. It means no one explained it this way before. **This series exists so you can learn without being in a crisis.***

ONE LAST THING...

You do not need to understand every rule.

You just need enough understanding to ask better questions and plan ahead.

That makes a real difference.

TABITHA SAYS:

Medication coverage is not about what works best for one person. It is about how the system manages cost across millions of people. My role, and Just Us's role, is to help you understand that system so you can make calmer, more informed decisions for yourself and the people you care about. We will keep walking through this together.



STAY IN TOUCH

Below are some ways you and your loved ones can stay up to date with our upcoming events, educational seminars, and webinars. You can find our funny Tiktok's posted here as well!



[WV MEDICARE QUESTIONS](#)

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[JUST US RETIREMENT SOLUTIONS](#)

Click above to see our Just Us Retirement Facebook page where we keep you up to date on educational content and events



[OUR YOUTUBE](#)

Click above to see our Just Us Retirement YouTube, where we frequently post our funny videos and webinars.



TABITHA SAYS:

If you're not following us on social media yet, you're missing out! We post valuable Medicare tips, behind-the-scenes insights, and updates to help you stay informed and empowered in your journey. Our goal is to make complex topics simple and give you the tools to make the best decisions for your future.

FIVE-STAR REVIEW



Grant and his staff do a wonderful job. So very helpful getting me all the benefits available. I would definitely recommend them.

Kamey S.



WE ARE HERE FOR YOU!

We know that planning for the future—whether it's healthcare, retirement, or long-term care—can feel overwhelming. These are big decisions, and sometimes, they're not the easiest to talk about. But you don't have to navigate them alone.

We're here to support you every step of the way. Whether you have questions, concerns, or just need guidance on where to start, our team is always ready to help. No pressure, no obligation—just honest, straightforward support tailored to your needs.



OFFICE LOCATIONS



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IF YOU'D LIKE AN APPOINTMENT, FEEL FREE TO GIVE US A CALL , OR VISIT OUR WEBSITE

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