

Dear Pharmacist/Owner:

SilverScript® Insurance Company (SilverScript) is pleased to introduce our 2015 Medicare Part D Prescription Drug Plans: SilverScript Choice (PDP) and SilverScript Plus (PDP). These plans were designed with your patients in mind and feature comprehensive, yet affordable options for coverage. The following information includes:

- A brief overview of the 2015 plan designs;
- A description of communications your current SilverScript patients have received;
- Information on how you can order SilverScript informational and enrollment materials; and
- A quick reminder of Centers for Medicare & Medicaid Services (CMS) provider guidelines.

SilverScript 2015 Prescription Drug Plans – A Brief Overview

As CMS continues to refine guidance on the differentiation of Plan offerings, SilverScript has consolidated plan offerings for 2015, offering one “basic alternative” and one “enhanced” plan. Key updates include:

NEW SilverScript Choice

Our 2014 SilverScript Basic (PDP) and Choice (PDP) plans have been consolidated to create a new basic alternative plan that retains the “SilverScript Choice” name. This plan features a \$0 deductible and low monthly premiums. (Plan differs in Alaska.)

SilverScript Plus

SilverScript Plus remains our enhanced plan offering and provides members additional coverage in the Coverage Gap. This plan also features a \$0 deductible and monthly premiums that are an average of 25-30% lower nationwide. (SilverScript Plus not available in Alaska.)

Two Plan-Specific Pharmacy Networks

For 2015, each plan will be supported by an individual, plan-specific pharmacy network.

- SilverScript Choice – Standard Pharmacy Network
- SilverScript Plus – Standard and Preferred Pharmacies

Please refer to your CVS/caremark Medicare Part D Network Enrollment Forms for additional information regarding your participation in the SilverScript networks. If you have questions, please contact CVS/caremark Network Services at 1-866-488-4708.

Member Communications – What have your SilverScript patients received?

By September 30th all SilverScript members will have their Annual Notice of Change (ANOC). This package includes the ANOC document that describes plan changes from 2014 to 2015, an Evidence of Coverage (EOC), an abridged formulary and a Pharmacy Directory listing network pharmacies in their area that were contracted with us as of July 30, 2014.

-For pharmacist reference ONLY, not to be shared with your patients-

SilverScript Enrollment Information – How do I order informational or enrollment materials?

If you would like to have SilverScript informational or enrollment materials on hand, we're making ordering easy for you with the attached Pharmacy Materials Order Form. The following are available for order:

- SilverScript Enrollment Kits – Five kits per packet. Order up to five packets per request (25 kits)
- SilverScript Tri-fold Brochures – 10 brochures per packet. Order up to three packets per request (30 brochures)

To order, please use the SilverScript Materials Order Form on page 4 of this document. Please fax your completed request to the number indicated on the order form. Your request will be processed shortly and then should arrive within the next 5-7 business days.

If you or your patients have questions about SilverScript or our 2015 Plan Designs, please feel free to contact SilverScript Customer Care at **1-866-693-4620**, 24 hours a day, 7 days a week. TTY users call **1-866-552-6288**.

Thank you for the expert care you deliver to your Medicare patients every day. We look forward to continuing to work together for the health and well-being of our members and your patients.

Sincerely,
SilverScript Insurance Company

SilverScript is a Prescription Drug Plan with a Medicare contract offered by SilverScript Insurance Company. Enrollment in SilverScript depends on contract renewal.

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Centers for Medicare & Medicaid Services (CMS) Provider Marketing Guidelines

For Pharmacies and Pharmacists

SilverScript Insurance Company requires all of its contracted providers to be aware of and comply with CMS' Provider Marketing rules and regulations. This summary of Medicare guidelines governs how you can and cannot inform or educate patients about enrollment and plan information. CMS allows you to assist a beneficiary in providing an objective needs assessment along with potential plan options that may meet those needs. However, CMS is concerned that providers may not be fully aware of all plan benefits and costs, and that beneficiaries may be confused if they perceive their pharmacist is acting on behalf of a plan instead of in the patient's best interest. For comprehensive information, visit <http://www.cms.gov/Medicare/Health-Plans/ManagedCareMarketing/FinalPartCMarketingGuidelines.html>

 PROVIDERS CAN	 PROVIDERS CANNOT
Distribute CMS-approved Plan Finder information. You may also share information with patients from these resources: • CMS website, www.cms.gov • Medicare website, www.medicare.gov • Have patients call 1-800 MEDICARE	Direct, urge, persuade, steer or offer inducements to join a particular plan.
Make available printed information provided by a contracted plan sponsor to your patients, as long as there is no "ranking," "highlighting" or comparison of specific plans. If you accept/display these types of materials, you must do so for ALL plans with which you participate that have requested and provided you with such materials.	Compare plan benefits with other health plans, unless the materials were written or approved by CMS. This includes information generated through CMS' Plan Finder available via a computer terminal intended for beneficiary access.
Provide the names of plan sponsors with which you contract and/or participate.	Make plan information or PDP enrollment forms available at the pharmacy counter or anywhere where patient care is delivered (i.e., within an exam room setting).
Make available and/or distribute plan marketing materials and enrollment applications.	Collect or accept Medicare enrollment applications of any kind.
Use direct mail and/or email to announce a new plan affiliation — but only once and within 30 days of the affiliation. Additional communications must include ALL plans with whom you are affiliated.	Seek or accept compensation for conducting enrollment or marketing activities.
Provide information and assistance to your patients applying for Medicare's low income subsidy.	Suggest that a particular plan is approved, endorsed or authorized by Medicare.
	Offer sales/appointment forms.
	Conduct health screenings.
	Mail marketing materials on behalf of plan sponsors.

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Pharmacy Materials Order Form

If you would like to order additional 2015 SilverScript Enrollment Kits or SilverScript Tri-fold Brochures, simply fill out the information below and fax to **1-612-284-7860**. If you have questions about the materials, please email us at Silverscript.pharmacykits@cenveo.com and include NCPDP# and owner name. Thank you.

Enrollment Kits are available in packs of 5 with a limit of 5 packs per order.

Please tell us how many packs you would like to order: _____

SilverScript Tri-fold Brochures are available in packs of 10 with a limit of 3 packs per order.

Please tell us how many packs you would like to order: _____

Your order will be mailed to the address you provide below.

Thank you,

SilverScript Insurance Company

Please provide the following:

Owner Name:	
Pharmacy Name:	
Ship to Address:	
City:	
State:	
Zip:	
Phone #:	
NCPDP#	

Please fax this form to 1-612-284-7860.

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