

SilverScript[®]

2018 Plan Decision Guide

Your guide to making an informed Medicare Part D choice



SilverScript is a Prescription Drug Plan with a Medicare contract offered by SilverScript Insurance Company. Enrollment in SilverScript depends on contract renewal. Y0080_12009_ACQ_2018 Accepted

All about prescriptions. All about you.

Since Medicare Part D began, SilverScript has had one focus—to deliver Medicare prescription drug coverage that works well every day, in every way.



Questions about SilverScript?

Please consult your certified SilverScript Agent for more information.

Specializing in Medicare Part D so you don't have to.

Whether you're new to Medicare Part D, or want better prescription drug coverage, SilverScript plans are well worth considering. Unlike some Medicare insurers, Part D is the only coverage we offer. So it isn't surprising that our name may not be familiar until you become eligible for Medicare. As you learn more about SilverScript plans, you'll understand why more than 5 million people with Medicare use SilverScript to protect their savings against the cost of prescriptions.

Making prescription drug coverage better.

A proud member of the CVS Health family, SilverScript is one of the largest¹ stand-alone Medicare Part D prescription drug plan sponsors. When you enroll with us, you're joining millions of people with Medicare who enjoy:

- Affordable coverage—new lower monthly premiums² in 2018, low copays and coinsurance, plus a \$0 annual deductible on all drugs.³
- Savings at preferred pharmacies—over 26,000, including CVS Pharmacy[®] and thousands of local independent pharmacies.
- 24/7 Customer Care—our commitment to always go the extra mile to ensure you have the peace of mind you want.

Supporting Medicare beneficiaries for more than 11 years.

SilverScript has been an approved sponsor of the Medicare Part D program since it began in 2006. With more than a decade of experience, SilverScript continues to work within the Medicare system to help people from all walks of life benefit from their Part D coverage.

LET'S SEE HOW SILVERSCRIPT WORKS FOR YOU—
FOR COST, COVERAGE AND CONVENIENCE



Prescription plans designed to meet your needs.

SilverScript **Choice (PDP)**

Comprehensive coverage with low copays, a nationwide network and savings at preferred pharmacies.

SilverScript **Plus (PDP)**⁴

Providing additional benefits in the Medicare Coverage Gap, even lower copays, and savings at a greater number of preferred pharmacies.



You'll have the confidence you're covered, coast to coast.

Why SilverScript may make sense for you.

Finding the right Medicare Part D plan isn't easy. You've done your research and looked at many coverage options. It's time to choose the plan that works best for your needs and your budget. It's time for SilverScript...

26,000

or more preferred network pharmacies. Helping you maximize your savings.

3,300

Medicare prescription drugs—brand name, generic and specialty.

24/7

Customer Care. Like having your own personal Part D consultant, on call anytime!

\$0

annual deductible.³ We start sharing costs with you on your very first prescription.

More ways we're looking out to protect your health and savings.

- New lower premiums² with SilverScript Choice—starting as low as \$16.40 a month (see page 7 for your state).
- Save 16% on your copays with 90-day prescriptions⁵—with SilverScript, it's easy to save the way you want, through CVS Caremark Mail Service Pharmacy or at a preferred pharmacy.
- Convenient CVS Caremark Mail Service Pharmacy with standard no-cost delivery for a 90-day supply.⁶
- \$0 copays from CVS Caremark Mail Service Pharmacy—get \$0 copays⁷ on Tier 1 drugs with Choice and on Tier 1 and 2 drugs with Plus.

NOW, LET'S SEE WHICH PLAN IS RIGHT FOR YOU



Questions about a plan that works best for you? Please consult your certified SilverScript Agent for more information.

Get your benefits sooner.

With a \$0 deductible, your benefits start on day one.

	Deductible	Copay & Coinsurance
Part D Plans with a Deductible	You pay <u>100%</u> of drug costs until you reach your deductible.	Your plan starts to share your cost.
SilverScript® \$0 deductible plan	You pay \$0 ³ <i>SilverScript immediately starts to share your cost.</i>	Your plan starts to share your cost.

What does \$0 deductible³ mean?

- Part D plans with a deductible can charge you up to \$405; with SilverScript you skip this cost.
- No upfront deductible means you have more consistent monthly expenses, unless you reach the Coverage Gap (Donut Hole).

? **Questions about SilverScript?**
Please consult your certified SilverScript Agent for more information.

New lower premiums in 2018.²

To keep your budget in a healthy state.

No matter where you live, you'll find a SilverScript plan with Medicare prescription drug coverage that helps meet your needs. Use the charts below to see how affordable SilverScript is in your state this year.

SilverScript Premium Costs

Your premium may be lower if you qualify for Extra Help. See page 18 for more information.

Your State	SilverScript Choice Monthly Premium	SilverScript Plus Monthly Premium	Your State	SilverScript Choice Monthly Premium	SilverScript Plus Monthly Premium
AK	\$53.30	N/A	MS	\$20.50	\$46.30
AL	\$25.40	\$46.20	MT	\$28.80	\$66.40
AR	\$16.40	\$47.80	NC	\$26.40	\$62.30
AZ	\$28.50	\$74.00	ND	\$28.80	\$66.40
CA	\$28.50	\$79.70	NE	\$28.80	\$66.40
CO	\$29.90	\$75.70	NH	\$29.60	\$52.20
CT	\$29.40	\$63.80	NJ	\$34.30	\$84.60
DC	\$29.50	\$77.60	NM	\$18.50	\$39.80
DE	\$29.50	\$77.60	NV	\$38.10	\$68.30
FL	\$26.40	\$71.40	NY	\$29.80	\$72.00
GA	\$19.60	\$46.20	OH	\$24.00	\$46.30
HI	\$23.90	\$57.90	OK	\$23.90	\$68.00
IA	\$28.80	\$66.40	OR	\$30.40	\$69.10
ID	\$32.70	\$76.30	PA	\$27.80	\$72.00
IL	\$23.40	\$81.50	RI	\$29.40	\$63.80
IN	\$23.40	\$46.30	SC	\$20.70	\$46.30
KS	\$24.50	\$72.20	SD	\$28.80	\$66.40
KY	\$23.40	\$46.30	TN	\$25.40	\$46.20
LA	\$23.10	\$54.90	TX	\$23.50	\$46.40
MA	\$29.40	\$63.80	UT	\$32.70	\$76.30
MD	\$29.50	\$77.60	VA	\$26.00	\$46.20
ME	\$29.60	\$52.20	VT	\$29.40	\$63.80
MI	\$29.10	\$66.50	WA	\$30.40	\$69.10
MN	\$28.80	\$66.40	WI	\$34.60	\$68.50
MO	\$24.10	\$46.20	WV	\$27.80	\$72.00
			WY	\$28.80	\$66.40

Two comprehensive Part D plans.

Both designed to protect your health and your savings.

Everyone's needs are different. That's why SilverScript gives you different coverage options, Choice and Plus. Both plans have a formulary that covers over 3,300 drugs. And both plans have a \$0 deductible³, so you can immediately take advantage of your benefits on day one.

SilverScript Choice

You get lower premiums², low copays, additional savings at preferred pharmacies and the convenience of a nationwide pharmacy network.

ANNUAL DEDUCTIBLE

\$0 DEDUCTIBLE³

INITIAL COVERAGE

SilverScript Choice is a \$0 deductible plan, meaning your Initial Coverage stage begins the day your plan takes effect.

YOUR COPAYS (\$) AND COINSURANCE (%)*

DRUG TIERS	Preferred Pharmacy		Standard Pharmacy		CVS Caremark Mail Service Pharmacy
	30-day	90-day	30-day	90-day	90-day
	Tier 1	\$3–\$9	\$7.50– \$22.50	\$6–\$10	\$18–\$30
Tier 2	\$10–\$19	\$25– \$47.50	\$19–\$20	\$57–\$60	\$25–\$47.50
Tier 3	\$34–\$46	\$85–\$115	\$44–\$47	\$132–\$141	\$85–\$115
Tier 4	34%–49%	34%–49%	44%–50%	44%–50%	34%–49%
Tier 5	33%	N/A	33%	N/A	N/A

COVERAGE GAP (DONUT HOLE)

You leave the Initial Coverage stage and enter the Medicare Coverage Gap when you have reached \$3,750 in total yearly drug costs (not including monthly premiums).

Generic Drugs You pay 44% of the cost

Brand Drugs You pay 35% of the cost

CATASTROPHIC COVERAGE (AFTER DONUT HOLE)

You enter the Catastrophic Coverage stage when you have spent \$5,000 out of pocket (not including monthly premiums).

Generic Drugs You pay the greater of 5% coinsurance or \$3.35 copay

All Other Drugs You pay the greater of 5% coinsurance or \$8.35 copay

*Alaska Choice Plan has a \$405 deductible and copays/coinsurance of \$1/\$4/17%/36%/25% (Tiers 1–5). Hawaii Choice Plan has a \$100 deductible on Tiers 3–5, preferred copays/coinsurance of \$3/\$13/\$41/45%/31% (Tiers 1–5), and standard copays/coinsurance of \$7/\$20/\$47/50%/31% (Tiers 1–5). Arizona Choice Plan has a \$100 deductible on Tiers 3–5, preferred copays/coinsurance of \$3/\$16/\$41/45%/31% (Tiers 1–5), and standard copays/coinsurance of \$7/\$20/\$47/50%/31% (Tiers 1–5).

SilverScript Plus⁴

You get everything the Choice plan offers, plus enhanced coverage for Medicare's "Donut Hole" and even lower Preferred Pharmacy pricing.

ANNUAL DEDUCTIBLE

\$0 DEDUCTIBLE

INITIAL COVERAGE

SilverScript Plus is a \$0 deductible plan, meaning your Initial Coverage stage begins the day your plan takes effect.

YOUR COPAYS (\$) AND COINSURANCE (%)

DRUG TIERS	Preferred Pharmacy		Standard Pharmacy		CVS Caremark Mail Service Pharmacy
	30-day	90-day	30-day	90-day	90-day
	Tier 1	\$1 or \$2	\$2.50 or \$5	\$10	\$30
Tier 2	\$5 or \$8	\$12.50 or \$20	\$20	\$60	\$0
Tier 3	\$35 or \$40	\$87.50 or \$100	\$47	\$141	\$70 or \$80
Tier 4	40% or 46%	\$40 or \$46	50%	50%	40% or 46%
Tier 5	33%	N/A	33%	N/A	N/A

COVERAGE GAP (DONUT HOLE)

You leave the Initial Coverage stage and enter the Medicare Coverage Gap when you have reached \$3,750 in total yearly drug costs (not including monthly premiums).

	30-day	90-day	30-day	90-day	90-day
Tier 1	\$1 or \$2	\$2.50 or \$5	\$10	\$30	\$0
Tier 2	\$5 or \$8	\$12.50 or \$20	\$20	\$60	\$0

Tiers 3, 4 and 5

Generic Drugs You pay 44% of the cost

Brand Drugs You pay 35% of the cost

CATASTROPHIC COVERAGE (AFTER DONUT HOLE)

You enter the Catastrophic Coverage stage when you have spent \$5,000 out of pocket (not including monthly premiums).

Generic Drugs You pay the greater of 5% coinsurance or \$3.35 copay

All Other Drugs You pay the greater of 5% coinsurance or \$8.35 copay

Discover the SilverScript plan that's right for you.

SilverScript Choice

Our most popular plan with a nationwide network offering flexibility and low copays.



Up to 57% savings with preferred copays⁸.

More than 26,000 Choice preferred pharmacies offer you the lowest Choice copays, including CVS Pharmacy nationwide and thousands of local preferred pharmacies.



Nationwide network of 67,000 pharmacies.

No matter where in the U.S. your travels take you, you can still get your prescriptions at any of the 67,000 pharmacies in the Choice standard and preferred network, including Walgreens, Walmart, Rite Aid and many more.



\$0 copays by mail on Tier 1 drugs⁷.

By filling 90-day prescriptions through CVS Caremark Mail Service Pharmacy, you can reduce the time you spend while saving your dollars for what you love most—it's a win-win.



Questions about SilverScript?

Please consult your certified SilverScript Agent for more information.

Alaska Choice plan does not have preferred pharmacies. SilverScript Choice PDP pharmacy network offers limited access to pharmacies with preferred cost sharing in rural areas of AK and OK. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including pharmacies with preferred cost sharing, please call Customer Care at 1-800-790-6326 (TTY:711) 24 hours a day, 7 days a week or consult the online pharmacy directory at SilverScript.com.

SilverScript Plus⁴

Get more flexibility and convenience with a larger preferred network that offers you our lowest copays.



Up to 89% savings with preferred copays⁸.

Get copays as low as \$1 when filling your prescriptions at one of the 35,000 Plus preferred pharmacies, including CVS Pharmacy, Walgreens and thousands of local drug stores.



Expanded preferred pharmacy network.

More than 35,000 Plus preferred pharmacies give you more flexibility when filling your prescriptions—all for our lowest preferred pricing. Plus, you still get access to the additional 32,000 standard pharmacies in the Plus network.



Extend your \$0 copay by mail to Tier 1 and Tier 2 drugs⁷.

Only with Plus, get \$0 copays on more drugs. Fill your Tier 1 and 2 prescriptions at CVS Caremark Mail Service Pharmacy for a \$0 copay with no-cost standard delivery⁶.

Refills by mail are easy!



Can't always get to the pharmacy? We have you covered with CVS Caremark Mail Service Pharmacy.⁶ The medications you take regularly can be delivered by mail. They arrive in tamper-resistant packaging as you need them so that your medications are always on hand. And don't worry, standard deliveries are no cost to Choice and Plus members.

Medicare and Part D.

How they work. And how to make them work better for you.

Medicare is the federal health insurance program for people ages 65 and older, and younger individuals who qualify under special circumstances, like those with a disability. Different parts of the Medicare program cover different costs. **Part A is hospital insurance** and includes inpatient stays, skilled nursing and home healthcare. **Part B is medical insurance** for doctor services, lab tests, outpatient and preventive care. And **Part D is prescription drug insurance** to help you manage your prescription drug costs.



PART A
HOSPITAL

Important coverage options to consider:

The right coverage for you depends on your health needs and your budget...

- You can choose Original Medicare by itself (Parts A and B).
- You can add a Medicare Supplement (Medigap) plan to help pay for things not covered by Original Medicare, like copayments, coinsurance and deductibles. Plus, get the freedom to use any doctor or hospital that accepts Medicare.

KEEP IN MIND: Original Medicare and Medigap plans do not include Part D prescription drug coverage.



PART B
MEDICAL



PART D
PRESCRIPTION
DRUG COVERAGE

Complete your coverage:

Add a stand-alone Medicare Part D prescription drug plan like SilverScript to help save on your prescription drug costs. It's affordable, comprehensive and easy to enroll.

When can I enroll in Medicare Part D?

INITIAL ENROLLMENT PERIOD

TURNING 65: You're eligible to enroll in Medicare because you're turning age 65. It's a seven-month window that opens three months before your birthday month and closes three months afterwards.⁹

DISABLED: If you're under 65 you are eligible to enroll in Medicare if you have a qualifying disability. You will have a seven-month enrollment window that opens three months before your 25th month of receiving Social Security or Railroad Retirement Board benefits and ends three months afterwards.

..... OR

ANNUAL ENROLLMENT PERIOD

You want to enroll in Medicare or change existing coverage. It happens each year between October 15 and December 7.

..... OR

SPECIAL ENROLLMENT PERIOD

You need to change coverage due to a special circumstance, like moving to a new home in another state. It could apply anytime of the year. Call us for more details.



PLEASE NOTE: MEDICARE PART D HAS A LATE ENROLLMENT PENALTY.

You may owe a Part D Late Enrollment Penalty if, at any time after your initial enrollment period is over, there's a period of 63 or more days in a row when you don't have Part D or other creditable prescription drug coverage (e.g., prescription drug coverage in an employer or union health plan). Medicare will add a recurring Part D Late Enrollment Penalty to your monthly premium once you do enroll.

NOW IT'S TIME TO COMPARE COVERAGE



For more information on options to consider, please consult your certified SilverScript Agent.

Part D Coverage Comparison

See how SilverScript compares to your current coverage.

Compare your answers in Steps 1 and 2. Are you getting all the value and savings that a SilverScript Part D plan offers you? If not, it's time to switch to a \$0 deductible³ SilverScript plan and start saving!

Step 1: Enter plan information

Step 2: Compare SilverScript plans

	Your current Part D coverage	SilverScript Choice	SilverScript Plus ⁴
ANNUAL DEDUCTIBLE	\$ _____	\$0	\$0
MONTHLY PREMIUM x 12	\$ _____	\$ _____	\$ _____
		See page 7 for the premium in your state and multiply that amount by 12.	
Prescription / Dosage / Frequency	Copays / Coinsurance	Copays / Coinsurance	Copays / Coinsurance
1. _____	\$ _____	\$ _____	\$ _____
2. _____	\$ _____	\$ _____	\$ _____
3. _____	\$ _____	\$ _____	\$ _____
4. _____	\$ _____	\$ _____	\$ _____
Available savings	<input type="checkbox"/> NO <input type="checkbox"/> YES _____%	YES, preferred pharmacy pricing and \$0 copays⁷ by mail on Tier 1.	YES, lower preferred pharmacy pricing and \$0 copays⁷ by mail on Tier 1 and Tier 2.
		Use the Drug Search and Pricing tool on SilverScript.com to find your costs.	
Local pharmacy in network	<input type="checkbox"/> NO <input type="checkbox"/> YES	67,000+ network pharmacies, including more than 26,000 preferred locations	67,000+ network pharmacies, including more than 35,000 preferred locations
		Use the Pharmacy Locator tool on SilverScript.com.	
24/7 Customer Care	<input type="checkbox"/> NO <input type="checkbox"/> YES	YES	YES



If you need assistance, please consult your certified SilverScript Agent for more information.



All about quality, reliability and trust.

Millions of Medicare beneficiaries choose SilverScript year after year for the coverage, copays, convenience and customer care.



Dedicated to Medicare
Part D and
your peace of mind.

All about making it easy for you.

Your Certified SilverScript Agent can answer your questions and help you choose the SilverScript plan that will meet your health needs. As a member, SilverScript provides you with many helpful resources... whenever the time is right for you.



Website Tools and Resources

The SilverScript website is a member-friendly resource center for learning more about your coverage.

- Visit anytime to review general benefit information, learn how your plan works, access forms and use our online tools.
- On our website you can find a network pharmacy, pay your premium online, print a document or request a form, establish email reminders, learn if you qualify for our Medication Therapy Management (MTM) program, and even research your prescription drugs.
- Our website lets you view your copays and coinsurance amounts, review your true-out-of-pocket costs, and order/refill and track your mail service medications.



Customer Care Representatives

Should you have questions or need assistance as a member, you can call our service center to speak with a trained and certified Customer Care representative.

- Our team is available around the clock because we know that our members have questions at every time of the day.
- Your Welcome Kit and Member ID card will contain toll-free numbers so you can reach us when you need us.

Do you need Extra Help paying for a Medicare plan?

People with limited resources and incomes can get Extra Help, available from Medicare, to pay all or some of their Medicare Part D prescription drug costs.

To find out if you qualify, call the Social Security Administration at 1-800-772-1213 (TTY 1-800-325-0778) between 8:00 a.m. and 7:00 p.m. EST, Monday through Friday; or visit the Social Security website at www.socialsecurity.gov; or visit your local Social Security office.

If you are eligible for Medicare, Medicaid and Extra Help, you may qualify for a **\$0 monthly premium plan¹⁰** from SilverScript—**Copays as low as \$1.25** with Extra Help.

Glossary of Terms

Coinsurance: An amount you may be required to pay as your share of the cost for prescription drugs after you pay any deductibles.

Coinsurance is usually a percentage of the cost, e.g., 20%.

Copayment (Copay): An amount you may be required to pay as your share of the cost for a prescription drug. A copay is usually a set dollar amount, e.g., \$10.

Cost Sharing: Any combination of deductible, copay and/or coinsurance (not including premiums) that you may need to pay for covered prescriptions.

Deductible: An amount you are required to pay before a plan begins to share the cost of covered prescriptions.

Formulary: List of prescription medications approved by Medicare to be covered in a Part D plan.

Pharmacy Network: Pharmacies that contract with a Part D plan to provide prescription drugs to its members.

Premium: A periodic payment (usually monthly) paid by a member to Medicare or a Medicare-approved insurer for coverage.

¹ CMS, Monthly Enrollment by Contract report, July, 2017. <http://go.cms.gov/mapddata>

² 2018 Choice monthly premiums lower in all states except Arkansas and Hawaii.

³ Choice Plan in AK has a \$405 deductible, and Choice Plans in AZ and HI have a \$100 deductible on Tiers 3–5.

⁴ Plus Plan not available in Alaska.

⁵ Save 16% on 90-day supplies for Tier 1, 2, and 3 drugs in the Initial Coverage Stage at all Choice and Plus preferred network pharmacies. Plus members also save on Tier 1 and 2 drugs in the Coverage Gap at all Plus preferred network pharmacies. Members in Alaska save 16% on Tier 2 and 3 drugs at Choice network pharmacies. Cost savings may be lower for those who receive Extra Help.

⁶ The typical number of days after the mail order pharmacy receives an order to receive your shipment is up to 10 days. Enrollees have the option to sign up for automated mail order delivery.

⁷ \$0 copays on 90-day supplies available on Choice Plan Tier 1 drugs and Plus Plan Tiers 1 & 2 in the Initial Coverage stage through CVS Caremark Mail Service Pharmacy. In Alaska, \$0 copay on Tier 1 drugs available on a 90-day supply in the Initial Coverage Stage at all Choice network pharmacies.

⁸ Percent savings based on SilverScript preferred vs standard pharmacy copays. Savings may vary based on state, drug tier and coverage stage. Call Customer Care for copays on your specific medications.

⁹ If your birthday falls on the first day of any month, your 7-month Initial Enrollment Period (IEP) begins and ends one month sooner. For example, if your

birthday is July 1, your 7-month IEP is the same as if you were born in June—beginning in March and ending in September.

¹⁰ You must qualify for Medicare, Medicaid and Extra Help from Medicare to be eligible for \$0 premiums on your prescription drug coverage. Note: \$0 premium plans are not available in Alaska and Nevada.

Benefits Reminders

- This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments and restrictions may apply. Benefits, premiums and/or copayments/coinsurance may change on January 1 of each year.
- The Formulary and Pharmacy network may change at any time. You will receive notice when necessary. You must continue to pay your Medicare Part B premium.
- Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.
- SilverScript Insurance Company complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-866-235-5660 (TTY: 711) 24 hours a day, 7 days a week. ATENCIÓN: Si usted habla español, tenemos servicios de asistencia lingüística disponibles para usted sin costo alguno. Llame al 1-866-235-5660 (TTY: 711), las 24 horas del día, los 7 días de la semana. 小贴士: 如果您说中文, 欢迎使用免费语言协助服务。请拨1-866-235-5660 (TTY: 711), 一周7天, 每天24小时随时受理。

An Important Message From Your Agent

As you consider Part D plans, you'll find that not all plans cost the same, offer the same range of benefits or provide the same services that help simplify your coverage and take the worry out of filling your prescriptions.

Remember that the coverage you choose should be right for you now, yet comprehensive enough to protect your health and your budget should your medication needs change. As a Medicare agent, I can provide guidance that will ensure value, protect your budget and provide peace of mind with every prescription.

You can rely on me.

As a licensed SilverScript Agent, I am certified to help you calculate your estimated annual costs and evaluate your prescription drug plan options.

My job is to know Part D plans and get to know you.

I'll take the time to learn about the medications you take, your pharmacy needs, whether you'll need coverage in the Part D Coverage Gap, and the services you want, such as mail service pharmacy, online medication management and automatic payment options.

Your satisfaction is my goal.

I make my living working for you, and your peace of mind is my success.

Call me today. I'm ready to go to work for you.

Charles H. Bradshaw

Agent name

(888) 549-1110

Phone

charlesbradshaw@medicareanswercenter.com

Email



YOUR ENROLLMENT CHECKLIST

- YOUR RED, WHITE AND BLUE MEDICARE CARD**
(or the letter you received from either the Social Security Administration or Railroad Retirement Board)
- YOUR MEDICAID NUMBER**
(if you have Medicaid)
- AN UP-TO-DATE LIST OF ALL PRESCRIPTION DRUGS YOU TAKE**
- INFORMATION ABOUT OTHER HEALTH COVERAGE YOU OR YOUR SPOUSE HAVE, INCLUDING:**
 - Group health plan information
 - Employment information
 - Dates of coverage

SilverScript®

SilverScript® Insurance Company complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. SilverScript Insurance Company does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

SilverScript Insurance Company:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)

- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need written information in other formats or free language services, please contact Customer Care. This number can be found on the back of your member ID card or on the letter that accompanied this notice.

If you believe that SilverScript Insurance Company has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: SilverScript Insurance Company, Grievance Department, P.O. Box 53991, Phoenix, AZ 85072-3991. Fax: 1-866-217-3353.

You can file a grievance by mail, or by fax. If you need help filing a grievance, the SilverScript Grievance Department is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 1-800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

ENGLISH

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-866-235-5660 (TTY: 711).

SPANISH

ATENCIÓN: Si usted habla español, tenemos servicios de asistencia lingüística disponibles para usted sin costo alguno. Llame al 1-866-235-5660 (TTY: 711).

CHINESE

小贴士：如果您说普通话，欢迎使用免费语言协助服务。请拨1-866-235-5660 (TTY: 711)。

VIETNAMESE

CHÚ Ý: Nếu quý vị nói tiếng Việt, thì có sẵn các dịch vụ trợ giúp ngôn ngữ miễn phí dành cho quý vị. Hãy gọi số 1-866-235-5660 (TTY: 711).

KOREAN

알림: 한국어를 하시는 경우 무료 통역 서비스가 준비되어 있습니다. 1-866-235-5660 (TTY: 711)로 연락주시기 바랍니다.

TAGALOG

Pansinin: Kung nagsasalita ka ng Tagalog, mga serbisyo ng tulong sa wika, nang walang bayad, ay magagamit sa iyo. Tawagan ang 1-866-235-5660 (TTY: 711).

RUSSIAN

ВНИМАНИЕ: Если вы говорите на русском языке, вам будут бесплатно предоставлены услуги переводчика. Звоните по телефону: 1-866-235-5660 (телетайп: 711).

ARABIC

ملاحظة: إذا كنت تتحدث العربية، تتوفر خدمات المساعدة اللغوية مجاناً من أجلك. اتصل بالرقم 1-866-235-5660 (الهاتف النصي: 711).

FRENCH CREOLE

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-866-235-5660 (TTY: 711).

FRENCH

ATTENTION : Si vous parlez français, des services gratuits d'interprétation sont à votre disposition. Veuillez appeler le 1-866-235-5660 (TTY: 711).

POLISH

UWAGA: Dla osób mówiących po polsku dostępna jest bezpłatna pomoc językowa. Zadzwoń pod numer 1-866-235-5660 (TTY: 711).

PORTUGUESE

ATENÇÃO: Se fala português, estão disponíveis serviços gratuitos de assistência linguística na sua língua. Telefone para 1-866-235-5660 (TTY: 711).

ITALIAN

ATTENZIONE: Se lei parla italiano, sono disponibili servizi gratuiti di assistenza linguistica nella sua lingua. Chiami 1-866-235-5660 (TTY: 711).

JAPANESE

お知らせ: 日本語での対応を望まれる方には、無料で通訳サービスをご利用になれます。電話番号1-866-235-5660 (TTY: 711) までお問い合わせ下さい。

GERMAN

BITTE BEACHTEN: Wenn Sie Deutsch sprechen, stehen Ihnen unsere Dolmetscher unter der Nummer 1-866-235-5660 (TTY: 711) kostenlos zur Verfügung.

FARSI

توجه: چنانچه به زبان فارسی صحبت می‌کنید، خدمات کمک زبانی، به صورت رایگان، در اختیار شما قرار خواهد گرفت. با شماره 1-866-235-5660 (TTY: 711) تماس بگیرید.