



Pfizer Retiree Webinar – Your Guide to SilverScript

October, 2015





Agenda Items

- **Introducing SilverScript®**
- **How to Enroll**
- **2016 Annual Enrollment**
- **SilverScript Plan Design**
- **Top FAQ's**
- **Contact Information**
- **Recap of Important Points**



Introducing SilverScript[®]

What's happening?

- Effective January 1, 2016, Pfizer will be enrolling its Medicare-eligible retirees into a Pfizer-sponsored Medicare Part D prescription drug plan provided by SilverScript[®] Insurance Company (affiliated with CVS/caremark).

Why the change?

- Pfizer has the opportunity to take advantage of favorable government subsidies by offering an employer-sponsored group Medicare Part D prescription drug plan. This move will enable Pfizer to better manage the increasing costs of providing prescription drug benefits.

The level of coverage you receive today will not change



SilverScript Retiree Prescription Drug Plan

As a Medicare-eligible retiree who is enrolled in the Pfizer prescription drug plan, you will have a comprehensive Medicare Part D prescription drug plan administered by SilverScript.

YOUR PRESCRIPTION DRUG PLAN CONSISTS OF TWO PARTS:

Medicare Part D Plan

Provides the same benefit coverage as the Medicare Part D program offered by the Federal Government.

Pfizer-sponsored additional coverage

Additional benefit provided by Pfizer, which covers the gaps in the Medicare Part D program to provide a benefit that is more comprehensive and the same level of coverage you receive today.



Part D Employer Group Wrap Plan (EGWP)

SilverScript is the Medicare Part D prescription drug plan that provides the primary coverage

Pfizer plan provides additional coverage to fill in the gaps including no cost for Pfizer drugs including Greenstone generics

Single ID Card

Seamless Transaction- No additional action needed by you

How the Plan Works

Member picks up prescription at local pharmacy. If not covered under the SilverScript Part D plan, the Pfizer plan will cover the cost of the medication, if it is currently covered under the CVS/caremark plan.

Eligibility Requirements

- You must be enrolled in both Medicare Part A and Part B*
- Health Insurance Claim Number (HICN)
- Must reside in the United States
- Must have physical street address (P.O. Box may be used as a secondary address only)
- Must not be enrolled in another Medicare Part D plan
- Medicare-eligible spouses/domestic partners and dependents are also eligible
 - Covered dependents who are not Medicare eligible will continue to have prescription drug coverage under the current administrator, CVS/caremark

*Failure to enroll to enroll in both Medicare Parts A and B will affect your eligibility to elect coverage under Pfizer's retiree medical program.



How To Enroll / Things To Do

**CURRENTLY ENROLLED
IN A PFIZER-SPONSORED
MEDICARE ADVANTAGE
PLAN**

You will be automatically enrolled in the Pfizer-sponsored SilverScript plan effective January 1, 2016 if you are currently enrolled in either the Pfizer-sponsored Medicare Advantage (MA) Base Plan or Medicare Advantage (MA) Buy-Up Plan

**CURRENTLY ENROLLED
IN PRESCRIPTION DRUG
ONLY OPTION**

If you are currently enrolled in the Prescription Drug-Only option or you have not yet enrolled in either the MA Base or MA Buy-Up option, you may receive a letter from *hrSource*, asking for information (such as your HICN or street address) that *hrSource* needs in order to enroll you in SilverScript

**CURRENTLY NOT
MEDICARE-ELIGIBLE**

You will be automatically enrolled in the Pfizer-sponsored SilverScript plan on the first of the month in which you reach age 65 or upon becoming eligible for Medicare if you are currently enrolled in a Pfizer non-Medicare-eligible retiree medical coverage option

If you are currently enrolled in an individual Medicare Part D, you will be automatically disenrolled from the individual plan when Pfizer enrolls you into the SilverScript plan

What if I don't want to be enrolled?

- If you are currently enrolled in Pfizer prescription drug coverage and are Medicare-eligible, Pfizer will automatically enroll you, your spouse/domestic partner, and/or disabled child in SilverScript effective 1/1/16.
- If you do not wish to be enrolled, you must contact the *hrSource* Center to opt out of your Pfizer retiree medical coverage.
- If you elect to opt out of your coverage, you will be able to re-enroll during Pfizer's next Annual Enrollment period, unless you have a mid-year qualified status change. You will need to provide proof of continuous creditable medical and prescription drug coverage to re-enroll.

If you opt-out, you will lose BOTH your Pfizer-sponsored medical and prescription drug coverage



2016 Annual Enrollment

- **The 2016 Annual Enrollment Period will be held from October 13th through October 30th. (Refer to your enrollment materials for information about making election changes after October 30th)**
- **Within the Annual Enrollment package, you will receive a number of items including:**
 - *Summary of Benefits* detailing information about the coverage and plan provided by SilverScript
 - Letter detailing the option to opt-out of the plan as required by Medicare
- **Once your enrollment in SilverScript is accepted by Medicare, you will receive the following mailings:**
 - SilverScript Welcome Kit (includes abridged formulary, evidence of coverage booklet, and pharmacy directory)
 - SilverScript ID Card and Confirmation of Enrollment Letter

Ensure your address is current with *hrSource*

2016 SilverScript Plan Design for Pfizer Medicare-Eligible Retirees

| Tier | Pfizer-sponsored SilverScript plan | | |
|---|--|---|---|
| | Up to a 30-day supply at a retail network pharmacy** | Up to a 90-day supply at a <u>preferred*</u> retail network pharmacy or through the mail order pharmacy** | Up to a 90-day supply at a <u>non-preferred</u> retail network pharmacy** |
| Pfizer drugs including Greenstone generics | \$0 | \$0 | \$0 |
| For Non-Pfizer Drugs: | | | |
| Tier 1 Generic | 20% of the cost. Minimum \$10 Maximum \$125 | 20% of the cost. Minimum \$30 Maximum \$375 | 20% of the cost. Minimum \$30 Maximum \$375 |
| Tier 2 Preferred Brand | 20% of the cost. Minimum \$10 Maximum \$125 | 20% of the cost. Minimum \$30 Maximum \$375 | 20% of the cost. Minimum \$30 Maximum \$375 |
| Tier 3 Non-Preferred Brand | 20% of the cost. Minimum \$10 Maximum \$125 | 20% of the cost. Minimum \$30 Maximum \$375 | 20% of the cost. Minimum \$30 Maximum \$375 |

****When you use a preferred network pharmacy, the cost of your drug may be lower, making your coinsurance lower, up to the per-prescription maximum***

*****If the total cost of the prescription is less than the minimum coinsurance amount, you continue to pay the lesser of either the minimum amount or the cost of the prescription.***

SilverScript Plan Highlights

- 1. The Pfizer out-of-pocket maximum will change to a single, lower individual maximum of \$3,400, a decrease from the current \$3,500 out-of-pocket maximum. Family out-of-pocket maximum will no longer apply**
- 2. Pfizer drugs including Greenstone generics will continue to be covered at no cost (\$0 copay)**
- 3. Diabetic Testing Strips – In addition to your current coverage:**
OneTouch test strips will be covered at a \$0 cost through the SilverScript plan. All other diabetes testing supplies will be covered at your normal co-insurance
- 4. All Preventive Immunizations and Vaccines will be covered at a \$0 cost**



Prior Authorizations and Quantity Limits

PRIOR AUTHORIZATIONS

Medicare requires a prior authorization be applied to certain drugs to ensure they are being taken appropriately.

Examples include: Lidocaine patches, Androgel pump, Axiron, Testim gel, Fortesta pump gel

If you are taking a drug that will require a prior authorization under the SilverScript plan, a letter will be sent in December to notify you. To begin the prior authorization process, you can contact SilverScript Customer Care after January 1st, 2016.

QUANTITY LIMITS

Medicare requires quantity limits be applied to certain drugs to ensure they are being taken safely.

Examples include: Hydrocodone, Oxycodone, Tramadol, Vicodin, Norco

If you require more than the quantity limit, you can call SilverScript Customer Care after January 1st, 2016 for information on requesting an exception.



Medicare Part B vs Part D Determinations

- **Some medications may be covered by either Medicare Part B or Medicare Part D depending on various factors including diagnosis, location of the member and how and where the drug is dispensed. B vs D determinations are required by Medicare as part of the Medicare Part D plan.**

Examples of medications that require B vs D determinations include but are not limited to:

- Drugs used for nausea and vomiting
 - Methotrexate
 - Immunosuppressants
 - Nebulizer solutions
- **In most cases, the determination can be made while you are at the pharmacy. However, there are times when it may be necessary to contact your doctor to obtain additional information.**
 - **For drugs determined to be Part B, Pfizer will cover eligible medications through the additional benefit that will be provided**
 - **If you are taking a drug that may be impacted, you will receive a letter in December. You can call SilverScript Customer Care to start the Part B or Part D determination process after January 1st, 2016.**



ReadyFill[®] at Mail Program

- ReadyFill at Mail is a voluntary program that allows members to automatically refill and/or renewal mail order prescriptions with the exception of controlled substances, compounded and specialty medications at CVS/caremark mail service pharmacy.
- Members can participate in the program by enrolling a mail prescription through Caremark.com or by calling SilverScript Customer Care. Members can disenroll from the program at any time.
- Members can sign up for either the AutoRefill or AutoRenew, or both
 - Automatic refill: CVS Caremark Mail Service Pharmacy automatically sends prescription refills when due. The plan participant has the opportunity to cancel the refill order if needed
 - Automatic renewal: Caremark Mail Service Pharmacy initiates request for a new prescription with the doctor when a prescription is about to expire or when the last refill has been dispensed.
- AutoRefill and AutoRenew features are combined into one option when enrolling through Caremark.com, although members can choose one or the other when enrolling through SilverScript Customer Care.
- If you are already enrolled in this program, your enrollment will continue under SilverScript. You do not need to re-enroll. The only change will be the requirement to provide consent prior to the shipment of any prescription order.
- **Please Note:** AutoRefills and AutoRenews that are non-member initiated (doctor phone, fax, eRx) require member consent prior to the shipment of the medication. This is a Medicare requirement to ensure that the medication is still needed. If the Mail Service Pharmacy is unable to reach the member after 3 days, the prescription will be placed on hold and an information letter will be sent.



Top FAQs

QUESTION

Will all of my current medications be covered?

Will I need to change pharmacies in 2016?

What are preferred network retail pharmacies?

ANSWER

Yes, if your medications are currently covered they will remain covered. In rare cases, a medication may not be covered under the Part D plan, however, the additional benefit provided by Pfizer will cover the medication.

In almost all cases, you will not need to change pharmacies. SilverScript's pharmacy network includes over 68,000 pharmacies and is similar to the CVS/caremark pharmacy network. You will need to use your new SilverScript ID card when you pick up your prescription.

SilverScript's pharmacy network includes over 7,000 preferred network retail pharmacies. If you use one of the preferred network retail pharmacies to fill your non-specialty maintenance prescription, you can receive the benefit of mail order pricing at the retail pharmacy.

Top FAQs, cont.

| QUESTION | ANSWER |
|----------|--------|
| | |
| | |



Contact Information

SILVERSCRIPT CUSTOMER CARE

Call toll-free at 1-844-774-2273 (TTY users dial 711)
Hours of Operation: 24 hours a day, 7 days a week
<http://pfizer.silverscript.com>

HRSOURCE CENTER

If you have questions about eligibility, enrollment or your contribution, call *hrSource* Center at 1-877-208-0950, Monday through Friday, from 8:30 a.m. to midnight, Eastern time.

OTHER RESOURCES

www.socialsecurity.gov
www.medicare.gov
www.pfizerplus.com

Recap of Important Points

Respond immediately to any requests for a HICN, street address, name change, or any other information to avoid a delay in enrollment

If you opt out of Pfizer coverage through SilverScript you will be opting out of all Pfizer retiree medical and prescription drug coverage

If you are enrolled in an individual Medicare Prescription drug plan, you will be automatically disenrolled from that plan when Pfizer enrolls you into SilverScript

You do not have to enroll directly with Medicare for Part D coverage

Open enrollment begins October 13th and ends October 30th

New plan begins January 1, 2016



Questions?

Thank you for your time today!