



## **FREQUENTLY ASKED QUESTIONS (FAQs) About Your New Retiree Prescription Drug Plan (PDP)**

On January 1, 2017, SilverScript Employer PDP sponsored by Cincinnati Retirement System, referred to as “SilverScript” in most materials, will be the new prescription drug plan for the Cincinnati Retirement System plan participants who are eligible for Medicare and reside in the United States or its territories. These FAQs will answer many of the questions asked by retirees.

If you have any additional questions or need more information, contact:

- SilverScript Customer Care  
1-888-234-0927  
TTY: 711  
24 hours a day, 7 days a week  
[www.CRS.silverscript.com](http://www.CRS.silverscript.com)

If you have any questions about Medicare Part D or SilverScript, you would like to find out if your drug is covered, or to identify the locations of network pharmacies near where you live or are traveling.

- Cincinnati Retirement System

If you have questions about eligibility, how to enroll in the plan, or your premium.

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### **Q1: What is SilverScript Employer PDP sponsored by Cincinnati Retirement System?**

**A1:** SilverScript Employer PDP sponsored by Cincinnati Retirement System (SilverScript) is a group Medicare Part D prescription drug plan sponsored by the Cincinnati Retirement System with additional coverage sponsored by the Cincinnati Retirement System. It will provide prescription drug coverage for Medicare-eligible retirees and their covered Medicare-eligible spouses and/or their Medicare-eligible dependents in the Retiree Medical Insurance Plan.

The combination of the Medicare Part D benefit and the additional coverage from the Cincinnati Retirement System will be similar to the current prescription drug plan. It will provide more coverage than a standard Medicare Part D plan

**Q2: What does “Employer PDP” mean?**

**A2:** “Employer PDP” is the Medicare designation for an Employer-provided group Medicare Part D Prescription Drug Plan.

**Q3: Who administers SilverScript?**

**A3:** SilverScript<sup>®</sup> Insurance Company has a contract with Medicare, and administers the plan. It is affiliated with CVS Caremark<sup>®</sup>, the Cincinnati Retirement System’s pharmacy benefit manager.

**Q4: What is Medicare Part D?**

**A4:** Medicare Part D is Medicare prescription drug coverage that helps to cover the cost of prescription drugs for anyone who is eligible for Medicare Part A and/or enrolled in Medicare Part B. It is provided through private insurance companies, plans, or retiree plans, like the Cincinnati Retirement System.

**Q5: How do I qualify for a Medicare Part D plan?**

**A5:** To qualify for a Medicare Part D plan, you must

- Be eligible for Medicare Part A and/or enrolled in Medicare Part B, and
- Be a U.S. citizen or permanent resident of the United States, and
- Live in the plan’s service area which is the United States and its territories.

**Q6: Who may be covered by SilverScript?**

**A6:** To be eligible for SilverScript, you must:

- Be eligible for Medicare Part A and/or enrolled in Medicare Part B;
- Live in the SilverScript service area which is the United States and its territories, or live temporarily outside the service area for no more than 12 months;
- Be enrolled in the Cincinnati Retirement System plan, and
- Meet and maintain the Cincinnati Retirement System’s eligibility requirements for the plan.

**Q7: What happens if I live outside the service area or overseas?**

**A7:** The service area for this plan is the United States and the U.S. territories, the full area allowed by Medicare. If you live outside this service area, you are not eligible for Medicare Part D and cannot be enrolled in this plan. If you later return to the U.S. and are eligible to enroll, we will enroll you. You may move out of the U.S. multiples times and still be able to re-enroll whenever you return.

You may temporarily live outside this service area for up to 12 months. However, you will be disenrolled from SilverScript if you do not return to the service area after that time. Please contact Cincinnati Retirement System to let them know that you are living outside the service area.

**Q8. How does my prescription drug benefit work with Medicare Part D?**

**A8.** In the materials you receive from SilverScript, you will see information that shows the different stages or benefit levels for a standard Medicare Part D plan. You don't have to worry about the different stages.

The additional coverage sponsored by the Cincinnati Retirement System covers the gaps between Medicare Part D and your current coverage. You pay the **same coinsurance or copayment** you pay in the current plan design through all the Medicare Part D stages.

**Q9: How does a Medicare Part D plan work?**

**A9:** The **standard** Medicare Part D plan has four stages or benefit levels. In 2017, this is how the benefit works **without** the additional coverage sponsored by the Cincinnati Retirement System:

- **Stage 1** is the **Deductible stage**. This is when a person must pay a certain amount—\$400 in 2017—before the plan pays any part of the cost.
- **Stage 2** is the **Initial Coverage stage** that begins after a person meets the deductible. During this stage, a person pays 25% of the drug cost until he/she reaches \$3,700 in total drug costs. Total drug costs are equivalent to the combined total of the amount the person paid and the plan paid during the calendar year for covered drugs.
- **Stage 3** is the **Coverage Gap stage**, also called the “donut hole.” This is when a person pays a large portion of the cost, either 40% of the cost of brand name drugs or 58% of the cost of generic drugs and there is a 51% drug manufacturer discount on brand name drugs. The person stays in this stage until he/she has \$4,950 in Medicare out-of-pocket costs.
- **Stage 4** is the **Catastrophic Coverage stage** that begins after a person reaches \$4,950 in Medicare out-of-pocket costs. This is the stage when the plan pays most of the cost. The person pays the greater of 5% of the prescription drug cost or a minimum copayment of \$3.30 for generic drugs or \$8.25 for brand-name drugs.

Medicare's out-of-pocket costs include the amount the person paid, the amount others paid on the person's behalf, such as Extra Help or a State Pharmaceutical Assistance Program (SPAP), and any manufacturer discounts the person received in the Coverage Gap. It does not include the amount the plan paid.

**You do not have to worry about these different stages.** The additional coverage sponsored by the Cincinnati Retirement System covers the gaps between Medicare Part D and your current coverage.

Please be advised that **you pay the same coinsurance and copayment you currently pay** through all the Medicare Part D stages. **You have no deductible and no coverage gap or donut hole.**

Once you reach Medicare's out-of-pocket cost, you pay the lower of your current coinsurance or copayment or Medicare's catastrophic coverage coinsurance or copayment.

**Q10: What do I have to pay when I get my prescription filled?**

**A10:** You pay only your Cincinnati Retirement System coinsurance or copayment whenever you get your prescription filled at preferred or non-preferred network pharmacies.

If you use a SilverScript preferred network pharmacy, you can get a 90-supply of your maintenance medication for the same coinsurance or copayment as mail order, similar to the Maintenance Choice program through CVS Caremark.

If you use an out-of-network pharmacy, you may have to pay the full cost for your prescription and then submit a claim to SilverScript for reimbursement. You will be reimbursed for the plan's share of the cost.

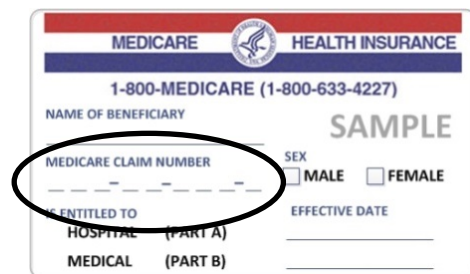
**Q11: How do I enroll in the plan?**

**A11:** You should not enroll in Medicare Part D on your own. You will automatically be enrolled in the plan by the Cincinnati Retirement System if you are enrolled in the plan and eligible for Medicare Part D.

**Q12: What information will the Cincinnati Retirement System need to enroll me in the plan?**

**A12:** You will be contacted if the Cincinnati Retirement System needs any information to enroll you in the plan, such as:

- Your Medicare Claim Number from your red, white and blue Medicare Insurance card. This number is also referred to as your Insurance Claim Number or HICN.
- A U.S. street address if your mailing address for the Cincinnati Retirement System is a P.O. Box. Medicare requires a street address for enrollment.



**Q13: What if I don't have a HICN?**

**A13:** If you do not have a HICN, you will need to enroll in Medicare Part A and/or Medicare Part B, when you become eligible, before you can be enrolled in Medicare Part D.

If you are not eligible for Medicare, you will not be enrolled in the SilverScript plan.

**Q14: When does my coverage in SilverScript start?**

**A14:** Your coverage in SilverScript will begin on **January 1, 2017**, if you are currently eligible for Medicare.

There will be **no interruption in your prescription drug coverage**. You will remain in your current plan through December 31, 2016. On January 1, 2017, your coverage through SilverScript begins.

**Q15: Will I get a new ID card?**

**A15:** Yes, you will get a new SilverScript ID card in December after your enrollment is accepted by Medicare. This ID card will have your unique ID number.

If your spouse is covered on the plan and eligible for Medicare, he or she will also get a new SilverScript ID card. His or her card will have a different ID number.

It is important that you each use your own ID card when filling your prescriptions.

**Q16: What if I don't receive my SilverScript ID card by January 1, 2017? How do I get my prescriptions filled?**

**A16:** At the top of the letter you will receive from SilverScript in October, you will see information that your pharmacist needs to fill your prescription. Or you can provide the information in the box to the right.

RxBIN: 000000 RxPCN: MEDDADV RxGrp: RXCVSD
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Please contact SilverScript and tell them that you have not received your card.

**Q17: Why are my spouse and I both receiving information from SilverScript?**

**A17:** Medicare is an individual benefit. That means that every person has his or her own account with Medicare. Each person in your family who is eligible for Medicare will each receive his or her own documents and his or her own ID card from SilverScript.

When you get your prescriptions filled, make sure to use your own ID card; your spouse needs to use his or her own ID card to get his or her prescriptions filled.

**Q18: What happens to my spouse or my child who is covered on my plan but is not eligible for Medicare?**

**A18:** Your covered spouse and/or your covered child who is not eligible for Medicare will continue to be covered on the current plan. He or she should continue to use the same prescription drug ID card that he or she is currently using.

**Q19: I am enrolled in a Medicare Part D plan through another provider. Could my enrollment in SilverScript affect my coverage in the other plan?**

**A19:** You can be enrolled in only one Medicare prescription drug plan at a time. If you are enrolled in another Medicare prescription drug plan or a Medicare Advantage plan with or without prescription drug coverage, you will be disenrolled from that plan when you are enrolled in SilverScript by the Cincinnati Retirement System.

Likewise, if you enroll in another Medicare prescription drug plan or a Medicare Advantage plan with or without prescription drug coverage after you have been enrolled in the SilverScript plan, you will be disenrolled from the Cincinnati Retirement System-sponsored SilverScript plan.

**If you are disenrolled from SilverScript, you will lose your prescription drug coverage from the Cincinnati Retirement System.** You will have the option to re-enroll in the SilverScript plan in the future, but you will have to show proof of continuous creditable prescription drug coverage if your break in coverage is more than 60 days. If you are the retiree and you are disenrolled, your covered spouse and any other covered dependents will also lose their prescription drug coverage.

**Q20: My spouse and I have Tricare for Life Medical Insurance. Is it possible to be enrolled in Tricare and SilverScript?**

**A20:** Yes, you can be enrolled in both programs but because the federal government does not allow you to receive benefits from more than one government program at the same time, your benefit from Tricare may be limited.

SilverScript cannot coordinate with Tricare. If you want any coverage under SilverScript, including the additional coverage provided by the Cincinnati Retirement System, you need to fill your prescription using your SilverScript ID card. Later, you can submit a claim to Tricare for reimbursement of any remaining amount that Tricare can or will cover.

You may want to check with Tricare to find out what they will cover after payment has been made by a Medicare Part D plan. However, please note that Tricare may pay only the coinsurance for the drugs that Medicare doesn't cover which are covered through additional coverage sponsored by the Cincinnati Retirement System.

**Q21: What happens if I don't want to be enrolled in SilverScript? Can I keep my current retiree prescription drug coverage?**

**A21:** SilverScript is the prescription drug plan for members after January 1, 2017. The current plan will no longer be available for members who are eligible for Medicare.

You can choose to opt out of the plan by following the instructions in the mailing you will receive from SilverScript in October.

**If you are eligible for the SilverScript Employer PDP sponsored by Cincinnati Retirement System, and you decide not to be enrolled in the plan, you will lose your prescription drug coverage from the Cincinnati Retirement System.** If you choose to opt out, you will have the option to re-enroll in the SilverScript plan in the future, but you will have to show proof of continuous creditable prescription drug coverage if your break in coverage is more than 60 days. If you are the retiree and you opt out of SilverScript, your covered spouse and any other covered dependents will also lose their prescription drug coverage.

**Q22: Which pharmacies can I use?**

**A22:** SilverScript has a network of about 66,000 pharmacies. You must use a SilverScript network retail pharmacy or the plan's mail order pharmacy, CVS Caremark Mail Service Pharmacy.

SilverScript has over 7,000 **preferred** pharmacies, where you can get up to a 90-day supply of your maintenance medications for the same coinsurance or copayment as mail order, similar to CVS Caremark's Maintenance Choice program. Current preferred network pharmacies include CVS Pharmacy<sup>®</sup>, Longs Drugs (operated by CVS Pharmacy) and Navarro.

You may also get up to a 90-day supply of your medication at a non-preferred network pharmacy, but your coinsurance or copayment will be higher than at a preferred pharmacy.

To find a pharmacy near your home or another location in the United States or U.S. territories, you may use the pharmacy locator tool at [www.CRS.silverscript.com](http://www.CRS.silverscript.com) or call SilverScript Customer Care.

**Q23: May I continue to get my prescriptions filled at a Veterans Affairs (VA) pharmacy?**

**A23:** No. VA pharmacies cannot be included in Medicare Part D plan networks. The federal government does not allow you to receive benefits from more than one government program at the same time.

If you are eligible for VA benefits, you may still use VA pharmacies under your VA benefits. However, the cost of those medications and what you pay out-of-pocket will not count toward your Medicare out-of-pocket costs or Medicare total drug costs. Each time

you get a prescription filled, you can compare your Cincinnati Retirement System benefit through SilverScript to your VA benefit to determine the best option for you.

**Q24: May I get my prescriptions filled at a pharmacy that is not part of SilverScript's pharmacy network?**

**A24:** Yes, but prescriptions should be filled at out-of-network pharmacies only in an emergency or in a non-routine circumstance, such as having no network pharmacies within a reasonable driving distance.

If you use an out-of-network pharmacy within the service area, you may have to pay the full cost for your prescription and submit a paper claim and your itemized receipt to SilverScript for reimbursement. You will be reimbursed the plan's share of the cost.

If you have any questions about whether or not your prescription will be covered at an out-of-network pharmacy, please call SilverScript Customer Care at 1-888-234-0927. TTY users should call 711.

**Q25: I regularly travel overseas. Will I be able to get my prescriptions filled before I leave?**

**A25:** Yes. If you will need to get your prescription filled while you are traveling outside the country, contact SilverScript Customer Care **before** you leave the U.S. You can request a vacation override for up to a 90-day supply of your medication and get the prescription filled before you leave the country.

**Q26: What happens if I need to get a prescription filled while I am out of the country?**

**A26:** If you are traveling and need to fill a prescription, you should pay for the medication and save the receipt. Currently, Medicare Part D does not offer drug coverage outside of the United States or U.S. territories. Prescriptions filled outside this service area will continue to be covered under your medical plan.

**Q27: What is a formulary?**

**A27:** A formulary is a list of drugs covered by the plan. In the case of SilverScript, it is the list of drugs covered by the Medicare Part D portion of the plan. It includes both brand name and generic drugs selected by the plan with the help of doctors and pharmacists.

**Q28: What if my drug is not in the formulary?**

**A28:** Through the additional coverage sponsored by the Cincinnati Retirement System, you are covered for drugs that are not on the SilverScript *Abridged Formulary* but are currently covered on the formulary. If your drug is not listed in the SilverScript *Abridged Formulary* that you will receive in your Welcome Kit in December, you can call SilverScript Customer Care at 1-888-234-0927 to find out if it is covered. TTY users should call 711.



**Q29: What should I do if I get a letter saying that I am taking a drug not covered by SilverScript?**

**A29:** Call SilverScript Customer Care to find out if your drug is covered by the additional coverage sponsored by the Cincinnati Retirement System.

If your drug is not on the SilverScript *Abridged Formulary*, SilverScript is required by Medicare to send you a letter, even if your medication is covered by the Cincinnati Retirement System.

**Q30: What is Extra Help?**

**A30:** Extra Help is a Medicare program that helps individuals who have low income and resources to pay for prescription drug costs. For 2016, you may qualify if you have

- No more than \$17,655 in income or \$13,640 in resources for an individual
- No more than \$23,895 in income or \$27,250 in resources for a married couple

**Q31: How do I know if I am eligible for Extra Help from Medicare?**

**A31:** If Medicare identifies you as a person that qualifies for Extra Help to pay for your prescription drug costs, you will receive a letter from Medicare or the Social Security Administration.

Some people automatically qualify for Extra Help; for instance, if they have full Medicaid coverage, get help from Medicaid to pay their Part B premiums, or if they receive Supplemental Security Income (SSI) benefits.

To see if you qualify for Extra Help, you can:

- Call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. Assistance is available 24 hours a day, 7 days a week.
- Visit [www.medicare.gov](http://www.medicare.gov).
- Call the Social Security Office at 1-800-772-1213 between 7 a.m. and 7 p.m., Monday through Friday. TTY users should call 1-800-325-0778.
- Visit [www.socialsecurity.gov/prescriptionhelp](http://www.socialsecurity.gov/prescriptionhelp).

**Q32: How does Extra Help work with my Cincinnati Retirement System coverage?**

**A32:** If you qualify for Extra Help, your share of the cost will be reduced. Extra Help copayments range from \$0 up to the plan copay. The Low Income Subsidy (LIS) Rider, which will be included with your SilverScript ID card, will tell you the exact amount of your copayment or coinsurance in 2017.

You will pay the lower of:

- Your Extra Help copayment or coinsurance; or
- Your Cincinnati Retirement System copay

**Q33: What is the Late Enrollment Penalty?**

**A33:** The Late Enrollment Penalty (LEP) is the amount that Medicare requires a person to pay if he/she:

- Did not enroll in a Medicare prescription drug plan when first eligible for Medicare
- Did not have creditable prescription drug coverage —coverage at least as good as Medicare’s standard plan
- Had a break in coverage of more than 63 consecutive days

**Q34: I have been covered on the Cincinnati Retirement System’s retiree medical plan since I retired. Do I have to worry about the late enrollment penalty?**

**A34:** No, the Cincinnati Retirement System’s retiree prescription drug coverage has always met or exceeded Medicare Part D coverage standard and has therefore been considered creditable coverage.

**Q35: What happens if I am contacted by SilverScript about a late enrollment penalty?**

**A35:** If SilverScript contacts you, they may need information about your past prescription drug coverage to send to Medicare. Please make sure you provide the information requested in the notice. You may also ask that any decision about your late enrollment penalty be reconsidered.

**Q36: Will my income affect what I have to pay for my Medicare coverage?**

**A36:** If your modified adjusted gross income (MAGI) reported on your federal tax return is above a certain amount, Medicare requires that you pay an extra amount for your Medicare coverage. It is called an Income-Related Monthly Adjustment Amount or IRMAA. For Medicare Part D, it is referred to as “D-IRMAA.”

For 2017, if your MAGI from 2014 is over \$85,000 for an individual or \$170,000 for a married couple filing jointly, you must pay this D-IRMAA. You will be notified by Social Security if you have to pay this additional amount.

If you are responsible for an additional premium, the extra amount will be deducted automatically from your Social Security payment. If you do not receive Social Security or your Social Security payment is not enough to cover the additional premium, Medicare will send you a bill. You must send your payment to Medicare; you do not pay this D-IRMAA to the plan.

**It is important that you make the payment, if required.** If not, Medicare will notify SilverScript that it must stop your prescription drug coverage and you will be disenrolled from the plan.

**Q37: When do I need to get a prior authorization (PA)?**

**A37:** You may need to get a new prior authorization from SilverScript if

- You currently are taking a prescription drug that required a prior authorization through CVS Caremark, or
- There is a “PA” next to your drug in the *Abridged Formulary (List of Covered Drugs)* that you will receive in your Welcome Kit in December.

If you are currently taking a drug that will require a prior authorization, you will receive a letter from SilverScript in December with instructions on how to obtain the prior authorization. If you have any questions, please contact SilverScript Customer Care at 1-888-234-0927. TTY users should call 711.

**Q38: What do I need to do if my drug can be covered under Part B or Part D?**

**A38:** Certain drugs may be covered under Part B for some medical conditions and under Part D for other medical conditions. If you take a drug that may be covered under Medicare Part B or Medicare Part D, you will have to obtain a Part B or Part D determination (a special kind of prior authorization) before the drug can be filled after January 1, 2017. This process is required in order to determine which coverage—Part B or Part D—covers that use of the drug, based on your medical condition.

In the *Abridged Formulary (List of Covered Drugs)*, if your drug has a “B/D” next to it, you will need to obtain a Part B or Part D determination. You will receive a letter in December if you are taking a drug that may be covered by Part B or Part D with instructions on how to obtain the Part B or Part D determination. If you have any questions, contact SilverScript Customer Care at 1-888-234-0927. TTY users should call 711.

**Q39: I take a maintenance medication and have refills that will continue after January 1, 2017. What do I need to do?**

**A39:** Any eligible mail-order prescriptions with refills remaining will be transferred automatically to SilverScript. If you have filled your maintenance medications at a retail pharmacy, you just need to go to your pharmacy and show your pharmacist your new SilverScript ID card after January 1, 2017.

If you want to use different network pharmacy, the new pharmacy will call the current pharmacy to have the records transferred.

**Q40: What is Medication Therapy Management?**

**A40:** Medicare requires Medicare prescription drug plans to offer an optional, free service called Medication Therapy Management (MTM). If you take multiple medications, have a chronic condition or high drug costs, you may be invited to participate in a MTM program designed for your specific issue. You may choose not to participate, but you should carefully consider taking advantage of this free service.

**Q41: Can I use a manufacturer copay coupon with SilverScript?**

**A41:** No, Medicare Part D is a government program and the use of manufacturers' assistance programs would constitute a violation of the anti-kickback statute. Drug manufacturers who have contracted out with Medicare offer a 50% discount on brand name drugs purchased by members when in the Coverage Gap. These discounts, combined with other subsidies, will reduce future costs and therefore reduce retirees' share of the premium. While you cannot use a manufacturer's coupon for a particular drug, you will benefit both from lower copayments due to the 50% discount available while in the Coverage Gap and from the cost savings that the realizes through the reduction in future premium increases.

However, you may choose to use the coupon and not have the drug covered under the plan if you believe that financially you would be better off doing so. Keep in mind that if you choose to do this, your out-of-pocket expenses will not be counted toward your Medicare maximum out-of-pocket or \$4,950, and you will have to pay the full cost of the drug at the pharmacy.