



2021 Summary of Benefits

January 1, 2021 – December 31, 2021

SilverScript SmartRx (PDP)

SilverScript Choice (PDP)

SilverScript Plus (PDP)



 **aetna**[™]
medicare solutions

Plans for a healthy you and a healthy budget

1

SilverScript® SmartRx (PDP)

Check out this plan if you're an active, healthy adult who takes generic maintenance drugs or no drugs.

- Average monthly premium of \$7.15
- \$0 deductible for Tier 1 drugs
- \$0 copay for Tier 1 drugs*
- Tier 1 drugs have been expanded to cover almost half of the CMS top 100 drug list

2

SilverScript Choice (PDP)

If you receive Extra Help, you may be able to enroll for a \$0 premium.

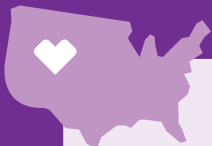
- Average monthly premium of \$28.49
- Below benchmark in 49 states and DC
- \$0 deductible for Tier 1 and Tier 2 drugs
- \$0 copay for Tier 1 drugs*

3

SilverScript Plus (PDP)**

Check out this plan for greater coverage, including more covered drugs, extras like some vitamins and minerals, and enhanced donut hole coverage.

- Average monthly premium of \$69.52
- \$0 deductible for all covered drugs
- \$0 Tier 1 and \$2 Tier 2 copays for a 30-day supply***
- \$0 copay for a 90-day supply of Tier 1 or Tier 2 drugs***



**You can be confident
you're covered, coast to coast.**













*At preferred pharmacies in the initial coverage phase.

**SilverScript Plus plan not available in Alaska.

***Available in the initial coverage and coverage gap phases at a preferred pharmacy.

Aetna Medicare Rx[®] (PDP)

Monthly plan premiums and cost sharing vary by plan and region.*

| | | SilverScript® SmartRx (PDP) | | | |
|---|---------------------------|--|--------|---------------------|--------|
| Prescription drug coverage | | | | | |
|  | Monthly plan premium | \$7.15 | | | |
|  | Annual drug deductible | \$445 (Tiers 2-5) | | | |
|  | Preferred pharmacies | More than 18,500 | | | |
|  | Network pharmacies | Over 43,000 | | | |
| Initial Coverage Phase | | | | | |
| | | Preferred pharmacies | | Standard pharmacies | |
| | | 30-day | 90-day | 30-day | 90-day |
|  | Tier 1 Preferred generic | \$0 | \$0 | \$19 | \$57 |
|  | Tier 2 Generic | \$19 | \$57 | \$20 | \$60 |
|  | Tier 3 Preferred brand | \$46 | \$138 | \$47 | \$141 |
|  | Tier 4 Non-preferred drug | 48% | | 50% | |
|  | Tier 5 Specialty | 25% | N/A | 25% | N/A |
| Coverage Gap Phase | | | | | |
|  | Tier 1 | 25% | | | |
|  | Tier 2 | | | | |
|  | Tier 3-5 | | | | |
| Catastrophic | | | | | |
| | | • You'll pay the greater of 5% of the cost of covered drugs on any tier, or \$3.70 copay for generic drugs (including brand drugs treated as generic) and \$9.20 copay for all other drugs | | | |

*Please see pages 8–13 of this document for exact costs for your area.

**SilverScript[®] Plus (PDP) not offered in Alaska.

| SilverScript® Choice (PDP) | | | | SilverScript® Plus (PDP)** | | | |
|--|--------|---------------------|--------|--|--------|---------------------|--------|
| | | | | | | | |
| \$28.49 | | | | \$69.52 | | | |
| \$312 (Tiers 3-5) | | | | \$0 | | | |
| More than 23,000 | | | | More than 23,000 | | | |
| Over 65,000 | | | | Over 65,000 | | | |
| | | | | | | | |
| Preferred pharmacies | | Standard pharmacies | | Preferred pharmacies | | Standard pharmacies | |
| 30-day | 90-day | 30-day | 90-day | 30-day | 90-day | 30-day | 90-day |
| \$0 | \$0 | \$5 | \$15 | \$0 | \$0 | \$5 | \$15 |
| \$5 | \$15 | \$11 | \$33 | \$2 | \$0 | \$10 | \$30 |
| \$35 | \$105 | \$47 | \$141 | \$47 | \$120 | \$47 | \$141 |
| 41% | | 41% | | 50% | | 50% | |
| 27% | N/A | 27% | N/A | 33% | N/A | 33% | N/A |
| | | | | | | | |
| 25% | | | | \$0 | \$0 | \$5 | \$15 |
| | | | | \$2 | \$0 | \$10 | \$30 |
| | | | | 25% | | | |
| | | | | | | | |
| • You'll pay the greater of 5% of the cost of covered drugs on any tier, or \$3.70 copay for generic drugs (including brand drugs treated as generic) and \$9.20 copay for all other drugs | | | | • You'll pay the greater of 5% of the cost of covered drugs on any tier, or \$3.70 copay for generic drugs (including brand drugs treated as generic) and \$9.20 copay for all other drugs | | | |

Why millions like you trust Aetna

More than 7 million members count on us to help make their prescription drugs easier to afford.

Affordable

\$0 annual deductible

You'll start saving with your very first prescription on these covered drugs:

- Tier 1 drugs with SilverScript SmartRx
- Tier 1 and Tier 2 drugs with SilverScript Choice
- All covered drugs with SilverScript Plus*

Comprehensive

Extensive formularies (drug lists)

We cover nearly all the drugs most commonly prescribed to Medicare members.

Trusted

More than

7 million members

Our members count on us to help make their prescription drugs easier to afford.

And we're here for them with 24/7 customer care. It's like having your own personal Part D consultant — on call, anytime.



Value-driven

\$0 copay on:

- A 90-day supply for Tier 1 with SilverScript SmartRx and SilverScript Choice**
- A 90-day supply for Tier 1 and Tier 2*** with SilverScript Plus*
- SilverScript Plus* members save even more on a 90-day supply of Tier 2 drugs***

Convenient

Thousands of network pharmacies

This includes preferred pharmacies to help you get the most savings:

- **18,500+** for SilverScript SmartRx
- **23,000+** for SilverScript Choice and SilverScript Plus*

Stable

One of the nation's largest prescription drug plans

We're in our second decade of specializing in Medicare prescription drug plans — so you don't have to.

*SilverScript Plus plan not available in Alaska.

**At preferred pharmacies in the initial coverage phase.

***Available in the initial coverage and coverage gap phases at a preferred pharmacy. Copay for a 30-day supply of Tier 2 drugs is \$2.

Understanding drug payment phases



Deductible phase

During this phase, if your plan has a deductible, you'll pay the plan's negotiated lower cost up to the deductible limit.

Once you reach the deductible limit, you'll pay a copayment or coinsurance in the initial coverage phase.

Up to
\$4,130

Initial coverage phase

During this phase, the plan will pay its share of the cost and you'll pay a copayment or coinsurance (your share of the cost) for each prescription you fill until your total drug costs reach \$4,130.

Once you reach \$4,130, you'll enter the coverage gap or "donut hole."



Most people will remain in this phase.

Up to
\$6,550

Coverage gap phase

(Also known as the donut hole.)

During this phase, you'll receive limited coverage on certain drugs. For generics and brands, you'll pay 25% of the cost. This phase continues until your yearly out-of-pocket drug costs reach \$6,550.

Once your yearly out-of-pocket costs reach \$6,550, you'll move to catastrophic coverage.



Some people will move into this phase.

Through
the end
of the year

Catastrophic coverage phase

In this phase, you'll pay either a copayment or coinsurance amount for each prescription you fill.



Few people will reach this phase.

SilverScript® SmartRx (PDP)

| Regional States | Premium | Deductible T2 – 5 | Preferred — 30-day supply (Retail/Mail Order ³) | | | |
|--------------------------------------|---------|----------------------|--|------|------|-----|
| | | | T1 | T2 | T3 | T4 |
| Northern New England (NH, ME) | \$7.10 | \$445 | \$0 | \$19 | \$46 | 49% |
| Central New England (CT, MA, RI, VT) | \$7.20 | \$445 | \$0 | \$19 | \$46 | 49% |
| New York | \$7.30 | \$445 | \$0 | \$19 | \$46 | 49% |
| New Jersey | \$7.30 | \$445 | \$0 | \$19 | \$46 | 49% |
| Mid-Atlantic (DE, DC, MD) | \$7.30 | \$445 | \$0 | \$19 | \$46 | 49% |
| Pennsylvania, West Virginia | \$7.30 | \$445 | \$0 | \$19 | \$46 | 49% |
| Virginia | \$7.30 | \$445 | \$0 | \$19 | \$46 | 49% |
| North Carolina | \$7.20 | \$445 | \$0 | \$19 | \$46 | 48% |
| South Carolina | \$7.30 | \$445 | \$0 | \$19 | \$46 | 48% |
| Georgia | \$7.30 | \$445 | \$0 | \$19 | \$46 | 48% |
| Florida | \$7.30 | \$445 | \$0 | \$19 | \$46 | 48% |
| Alabama, Tennessee | \$7.30 | \$445 | \$0 | \$19 | \$46 | 46% |
| Michigan | \$6.90 | \$445 | \$0 | \$19 | \$46 | 49% |
| Ohio | \$7.30 | \$445 | \$0 | \$19 | \$46 | 49% |
| Indiana, Kentucky | \$7.30 | \$445 | \$0 | \$19 | \$46 | 45% |
| Wisconsin | \$7.30 | \$445 | \$0 | \$19 | \$46 | 46% |
| Illinois | \$7.30 | \$445 | \$0 | \$19 | \$46 | 49% |
| Missouri | \$7.20 | \$445 | \$0 | \$19 | \$46 | 46% |
| Arkansas | \$7.30 | \$445 | \$0 | \$19 | \$46 | 46% |
| Mississippi | \$7.30 | \$445 | \$0 | \$19 | \$46 | 45% |
| Louisiana | \$7.20 | \$445 | \$0 | \$19 | \$46 | 45% |
| Texas | \$7.30 | \$445 | \$0 | \$19 | \$46 | 48% |
| Oklahoma | \$7.80 | \$445 | \$0 | \$19 | \$46 | 45% |
| Kansas | \$7.30 | \$445 | \$0 | \$19 | \$46 | 45% |
| Upper MW and N.Plains ¹ | \$7.30 | \$445 | \$0 | \$19 | \$46 | 46% |
| New Mexico | \$6.20 | \$445 | \$0 | \$19 | \$46 | 49% |
| Colorado | \$7.30 | \$445 | \$0 | \$19 | \$46 | 47% |
| Arizona | \$6.60 | \$445 | \$0 | \$19 | \$46 | 49% |
| Nevada | \$7.20 | \$445 | \$0 | \$19 | \$46 | 49% |
| Oregon, Washington | \$6.30 | \$445 | \$0 | \$19 | \$46 | 49% |
| Idaho, Utah | \$7.30 | \$445 | \$0 | \$19 | \$46 | 49% |
| California | \$7.20 | \$445 | \$0 | \$19 | \$46 | 48% |
| Hawaii | \$5.70 | \$445 | \$0 | \$19 | \$46 | 46% |
| Alaska | \$7.30 | \$445 | \$0 | \$19 | \$46 | 47% |

¹ IA, MN, MT, ND, NE, SD, WY

² Also applies to Long Term Care (LTC) and Home Infusion drugs. For LTC you'll get up to a 31 day supply.

³ You will typically receive your mail order shipment within 10 days from the time of your order.

| | Standard — 30-day supply ² (Retail/Mail Order ³) | | | | | 90-day supply (Retail/Mail Order ³) | Donut Hole Coverage |
|-----|--|------|------|-----|-----|---|------------------------|
| T5 | T1 | T2 | T3 | T4 | T5 | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | Tiers 1 – 4 3x Copay Tier 5 – N/A | 25% Brand / Generic |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 48% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 50% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 49% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 47% | 25% | | |
| 25% | \$19 | \$20 | \$47 | 48% | 25% | | |

SilverScript® Choice (PDP)

| Regional States | Premium | Deductible | Preferred — 30-day supply (Retail/Mail Order ³) | | | |
|--------------------------------------|---------|------------|--|-----|------|-----|
| | | T2 – 5 | T1 | T2 | T3 | T4 |
| Northern New England (NH, ME) | \$26.30 | \$305 | \$0 | \$5 | \$35 | 44% |
| Central New England (CT, MA, RI, VT) | \$32.90 | \$225 | \$0 | \$5 | \$35 | 41% |
| New York | \$35.00 | \$290 | \$0 | \$5 | \$35 | 40% |
| New Jersey | \$33.60 | \$300 | \$0 | \$5 | \$35 | 40% |
| Mid-Atlantic (DE, DC, MD) | \$28.20 | \$400 | \$0 | \$5 | \$35 | 40% |
| Pennsylvania, West Virginia | \$32.90 | \$345 | \$0 | \$5 | \$35 | 40% |
| Virginia | \$26.70 | \$380 | \$0 | \$5 | \$35 | 41% |
| North Carolina | \$25.10 | \$330 | \$0 | \$5 | \$35 | 40% |
| South Carolina | \$22.90 | \$355 | \$0 | \$5 | \$35 | 42% |
| Georgia | \$24.30 | \$335 | \$0 | \$5 | \$35 | 41% |
| Florida | \$24.80 | \$305 | \$0 | \$5 | \$35 | 40% |
| Alabama, Tennessee | \$26.70 | \$290 | \$0 | \$5 | \$35 | 40% |
| Michigan | \$26.20 | \$265 | \$0 | \$5 | \$35 | 40% |
| Ohio | \$26.20 | \$445 | \$0 | \$5 | \$35 | 47% |
| Indiana, Kentucky | \$26.20 | \$325 | \$0 | \$5 | \$35 | 40% |
| Wisconsin | \$36.00 | \$205 | \$0 | \$5 | \$35 | 42% |
| Illinois | \$24.70 | \$340 | \$0 | \$5 | \$35 | 45% |
| Missouri | \$26.80 | \$245 | \$0 | \$5 | \$35 | 40% |
| Arkansas | \$24.30 | \$265 | \$0 | \$5 | \$35 | 40% |
| Mississippi | \$24.10 | \$250 | \$0 | \$5 | \$35 | 40% |
| Louisiana | \$30.60 | \$215 | \$0 | \$5 | \$35 | 40% |
| Texas | \$18.10 | \$405 | \$0 | \$5 | \$35 | 40% |
| Oklahoma | \$26.70 | \$235 | \$0 | \$5 | \$35 | 40% |
| Kansas | \$29.80 | \$285 | \$0 | \$5 | \$35 | 43% |
| Upper MW and N.Plains ¹ | \$33.90 | \$240 | \$0 | \$5 | \$35 | 46% |
| New Mexico | \$23.30 | \$320 | \$0 | \$5 | \$35 | 43% |
| Colorado | \$29.70 | \$370 | \$0 | \$5 | \$35 | 41% |
| Arizona | \$31.00 | \$445 | \$0 | \$5 | \$35 | 39% |
| Nevada | \$23.10 | \$445 | \$0 | \$5 | \$35 | 36% |
| Oregon, Washington | \$31.30 | \$260 | \$0 | \$5 | \$35 | 43% |
| Idaho, Utah | \$34.30 | \$250 | \$0 | \$5 | \$35 | 43% |
| California | \$29.50 | \$250 | \$0 | \$5 | \$35 | 39% |
| Hawaii | \$23.80 | \$445 | \$0 | \$5 | \$35 | 31% |
| Alaska | \$49.70 | \$230 | \$0 | \$5 | \$35 | 40% |

¹ IA, MN, MT, ND, NE, SD, WY

² Also applies to Long Term Care (LTC) and Home Infusion drugs. For LTC you'll get up to a 31 day supply.

³ You will typically receive your mail order shipment within 10 days from the time of your order.

| Standard — 30-day supply ² (Retail/Mail Order ³) | | | | | | 90-day supply (Retail/Mail Order ³) | Donut Hole Coverage |
|--|------|------|------|-----|-----|---|------------------------|
| T5 | T1 | T2 | T3 | T4 | T5 | | |
| 27% | \$5 | \$10 | \$47 | 44% | 27% | Tiers 1 – 4 3x Copay Tier 5 – N/A | 25% Brand / Generic |
| 29% | \$5 | \$10 | \$47 | 41% | 29% | | |
| 27% | \$5 | \$10 | \$47 | 40% | 27% | | |
| 27% | \$5 | \$10 | \$47 | 40% | 27% | | |
| 25% | \$5 | \$10 | \$47 | 40% | 25% | | |
| 26% | \$5 | \$10 | \$47 | 40% | 26% | | |
| 26% | \$5 | \$10 | \$47 | 41% | 26% | | |
| 27% | \$5 | \$10 | \$47 | 40% | 27% | | |
| 26% | \$5 | \$10 | \$47 | 42% | 26% | | |
| 27% | \$5 | \$10 | \$47 | 41% | 27% | | |
| 27% | \$5 | \$10 | \$47 | 40% | 27% | | |
| 27% | \$5 | \$10 | \$47 | 40% | 27% | | |
| 28% | \$5 | \$10 | \$47 | 40% | 28% | | |
| 25% | \$10 | \$20 | \$47 | 47% | 25% | | |
| 27% | \$5 | \$10 | \$47 | 40% | 27% | | |
| 29% | \$5 | \$10 | \$47 | 42% | 29% | | |
| 26% | \$5 | \$10 | \$47 | 45% | 26% | | |
| 28% | \$5 | \$10 | \$47 | 40% | 28% | | |
| 28% | \$5 | \$10 | \$47 | 40% | 28% | | |
| 28% | \$5 | \$10 | \$47 | 40% | 28% | | |
| 29% | \$5 | \$10 | \$47 | 40% | 29% | | |
| 25% | \$5 | \$10 | \$47 | 40% | 25% | | |
| 28% | \$5 | \$10 | \$47 | 40% | 28% | | |
| 28% | \$5 | \$10 | \$47 | 43% | 28% | | |
| 28% | \$5 | \$10 | \$47 | 47% | 28% | | |
| 27% | \$5 | \$10 | \$47 | 43% | 27% | | |
| 26% | \$5 | \$10 | \$47 | 41% | 26% | | |
| 25% | \$5 | \$14 | \$47 | 39% | 25% | | |
| 25% | \$10 | \$12 | \$47 | 36% | 25% | | |
| 28% | \$5 | \$10 | \$47 | 43% | 28% | | |
| 28% | \$5 | \$12 | \$47 | 43% | 28% | | |
| 28% | \$5 | \$10 | \$47 | 39% | 28% | | |
| 25% | \$10 | \$20 | \$47 | 31% | 25% | | |
| 29% | \$5 | \$10 | \$47 | 40% | 29% | | |

SilverScript® Plus (PDP)

| Regional States ¹ | Premium | Deductible | Preferred — 30-day supply (Retail/Mail Order ⁴) | | | |
|--------------------------------------|---------|------------|--|-----|------|-----|
| | | T2 – 5 | T1 | T2 | T3 | T4 |
| Northern New England (NH, ME) | \$66.80 | \$0 | \$0 | \$2 | \$47 | 50% |
| Central New England (CT, MA, RI, VT) | \$72.00 | \$0 | \$0 | \$2 | \$47 | 45% |
| New York | \$76.60 | \$0 | \$0 | \$2 | \$47 | 48% |
| New Jersey | \$83.80 | \$0 | \$0 | \$2 | \$47 | 48% |
| Mid-Atlantic (DE, DC, MD) | \$65.90 | \$0 | \$0 | \$2 | \$47 | 50% |
| Pennsylvania, West Virginia | \$72.80 | \$0 | \$0 | \$2 | \$47 | 50% |
| Virginia | \$63.50 | \$0 | \$0 | \$2 | \$47 | 50% |
| North Carolina | \$61.60 | \$0 | \$0 | \$2 | \$47 | 50% |
| South Carolina | \$76.00 | \$0 | \$0 | \$2 | \$47 | 50% |
| Georgia | \$63.80 | \$0 | \$0 | \$2 | \$47 | 50% |
| Florida | \$62.70 | \$0 | \$0 | \$2 | \$47 | 49% |
| Alabama, Tennessee | \$56.70 | \$0 | \$0 | \$2 | \$47 | 50% |
| Michigan | \$65.10 | \$0 | \$0 | \$2 | \$47 | 50% |
| Ohio | \$74.50 | \$0 | \$0 | \$2 | \$47 | 50% |
| Indiana, Kentucky | \$58.70 | \$0 | \$0 | \$2 | \$47 | 50% |
| Wisconsin | \$52.20 | \$0 | \$0 | \$2 | \$47 | 50% |
| Illinois | \$82.40 | \$0 | \$0 | \$2 | \$47 | 50% |
| Missouri | \$57.10 | \$0 | \$0 | \$2 | \$47 | 50% |
| Arkansas | \$53.20 | \$0 | \$0 | \$2 | \$47 | 50% |
| Mississippi | \$58.50 | \$0 | \$0 | \$2 | \$47 | 50% |
| Louisiana | \$76.20 | \$0 | \$0 | \$2 | \$47 | 50% |
| Texas | \$69.20 | \$0 | \$0 | \$2 | \$47 | 50% |
| Oklahoma | \$88.60 | \$0 | \$0 | \$2 | \$47 | 50% |
| Kansas | \$62.10 | \$0 | \$0 | \$2 | \$47 | 50% |
| Upper MW and N.Plains ² | \$70.20 | \$0 | \$0 | \$2 | \$47 | 50% |
| New Mexico | \$62.90 | \$0 | \$0 | \$2 | \$47 | 50% |
| Colorado | \$85.20 | \$0 | \$0 | \$2 | \$47 | 50% |
| Arizona | \$84.10 | \$0 | \$0 | \$2 | \$47 | 49% |
| Nevada | \$63.00 | \$0 | \$0 | \$2 | \$47 | 50% |
| Oregon, Washington | \$75.00 | \$0 | \$0 | \$2 | \$47 | 50% |
| Idaho, Utah | \$67.50 | \$0 | \$0 | \$2 | \$47 | 50% |
| California | \$81.60 | \$0 | \$0 | \$2 | \$47 | 45% |
| Hawaii | \$84.70 | \$0 | \$0 | \$2 | \$47 | 50% |

¹ SilverScript® Plus (PDP) not offered in Alaska.

² IA, MN, MT, ND, NE, SD, WY

³ Also applies to Long Term Care (LTC) and Home Infusion drugs. For LTC you'll get up to a 31 day supply.

⁴ You will typically receive your mail order shipment within 10 days from the time of your order.

⁵ At preferred pharmacies in the initial coverage phase.

Ways to enroll



Online

This method is the easiest and quickest way to apply, taking ten to thirty minutes.
AetnaMedicare.com or **visit medicare.gov**



By telephone

If you want to talk to a human but from the convenience of your home.
1-866-235-5660 (TTY 711)



In person

If your situation is complicated, you don't wish to mail important documents, or you prefer speaking to someone face-to-face.
Call 1-866-235-5660 (TTY 711) to request an appointment.

What you'll need



Your primary address

This is the place you consider your normal home — the one used on your tax form and driver's license — even if you live part of the year in another state.



Whether you have (or had) other drug coverage

Medicare requires this information to ensure that your other benefits can be coordinated with Part D, so that the pharmacist knows what to charge you and who to bill for the balance.



How you want to pay your premiums

You must choose one of three options: having the plan bill you directly; having the premiums deducted automatically from your Social Security check; or arranging for the premiums to be sent to the plan automatically by electronic funds transfer from your bank account.

If you want to know more about the coverage and costs of Original Medicare, look in your current **"Medicare & You"** handbook. View it online at <https://www.medicare.gov> or get a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Pre-enrollment checklist

Before making an enrollment decision, it is important that you fully understand our benefits and rules. If you have any questions, you can call and speak to a Customer Care representative at 1-866-235-5660 (TTY: 711), October 1 – March 31, 7 days/week, 8 AM – 8 PM, local time; April 1 – September 30, 5 days/week (M – F), 8 AM – 8 PM, local time.

Understanding the benefits

- ✓ Review the full list of benefits found in the Evidence of Coverage (EOC), especially for those services that you routinely see a doctor. Visit [AetnaMedicare.com](https://www.AetnaMedicare.com) or call 1-866-235-5660 (TTY: 711), October 1 – March 31, 7 days/week, 8 AM – 8 PM, local time; April 1 – September 30, 5 days/week (M – F), 8 AM – 8 PM, local time, to view a copy of the EOC.
- ✓ Review the pharmacy directory to make sure the pharmacy you use for any prescription medicines is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.

Understanding important rules

- ✓ In addition to your monthly plan premium, you must continue to pay your Medicare Part B premium. This premium is normally taken out of your Social Security check each month.
- ✓ Benefits, premiums, and/or copayments/coinsurance may change on January 1, 2022.

The pharmacy network may change at any time. You will receive notice when necessary.

Customer care

| Method | Contact information |
|---------|--|
| Call | 1-866-235-5660 (current members) 24 hours a day, 7 days a week 1-833-526-2445 (prospective members) October 1 – March 31, 7 days/week, 7 AM – 11 PM CST April 1 – September 30, 5 days/week (M – F), 7 AM – 11 PM CST Calls to these numbers are free. Customer Care also has free language interpreter services available for non-English speakers. |
| TTY | 711 This number requires special telephone equipment and is only for people who have difficulties with hearing or speaking. Calls to this number are free, 24 hours a day, 7 days a week. |
| Fax | 1-866-552-6205 |
| Write | SilverScript Insurance Company P.O. Box 30016 Pittsburgh, PA 15222-0330 |
| Website | AetnaMedicare.com |



SilverScript is a Prescription Drug Plan with a Medicare contract marketed through Aetna Medicare. Enrollment in SilverScript depends on contract renewal.

This Summary of Benefits doesn't list every service we cover or every limitation or exclusion. To get our full list of services, download a copy of the Evidence of Coverage from our website at [AetnaMedicare.com/PlanDocuments](https://www.aetna.com/PlanDocuments) or call us and we'll send you a copy. You can find our contact information on the back cover of this booklet.

The SilverScript SmartRx pharmacy network includes limited lower-cost, preferred pharmacies in rural: Arkansas, Iowa, Kansas, Minnesota, Mississippi, Missouri, Montana, Nebraska, North Dakota, Oklahoma, South Dakota, Wisconsin and Wyoming. 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 whether there are any lower-cost preferred pharmacies in your area, please call 1-866-235-5660 (TTY: 711) or consult the online pharmacy directory at [AetnaMedicare.com/pharmacyhelp](https://www.aetna.com/pharmacyhelp).

©2020 Aetna Inc.

Y0080_52001_SB_2021_M