2027 Summary of Benefits

Includes Enrollment Information

January 1, 2027 – December 31, 2027

SilverScript Choice (PDP)

a prescription drug plan

aetna.com/medicare

aetna®

Aetna® Medicare for a healthy you

Our SilverScript Choice (PDP) plan offers

- Wide coverage of popular generic and brand medications.
- Pay no more than $0 at a network pharmacy for Tier 1 drugs after meeting your plan's deductible.
- Large national pharmacy network consisting of chains and local pharmacies.

We want to keep you healthy

- $0 copay for many Part D vaccines at any network pharmacy, vaccines such as Shingrix (helps prevent Shingles) and Varivax (helps prevent Chicken Pox).*
- Pay no more than a $35 copay at a network pharmacy on covered insulins filled for a one-month supply, even if you haven't met your deductible.

SilverScript Choice (PDP)

Premiums and cost-sharing may vary by state

	SilverScript Choice (PDP)	
Monthly plan premium	See the next page for the premium in your state	
Annual deductible	$700	
Network pharmacies	Same cost-sharing at network pharmacies—go where it's convenient	
Initial coverage phase		
	30-day supply	90-day supply
Tier 1 Preferred generic	$0	
Tier 2 Generic	$7	$21
Tier 3 Preferred brand	23%	
Tier 4 Non-preferred drug	32% - 35% **	
Tier 5 Specialty	25%	N/A
Catastrophic phase		
	You pay $0 for Part D covered drugs during this phase.	

*** Check the Formulary (drug list) for a list of covered vaccines and insulins. For more information, visit AetnaMedicare.com/formulary.**
**** See the next page for the Tier 4 coinsurance in your state.**

SilverScript Choice (PDP)

State	Premium	T1	T2	T3	T4	T5	90-day supply
Alabama	$148.80	$0	$7	23%	34%	25%	**Tiers 1 and 2** 3x copay **Tiers 3 and 4** Applicable Coinsurance **Tier 5** N/A
Alaska	$132.90	$0	$7	23%	34%	25%	
Arizona	$152.70	$0	$7	23%	35%	25%	
Arkansas	$124.10	$0	$7	23%	34%	25%	
Delaware	$100.60	$0	$7	23%	34%	25%	
Dist. of Columbia	$100.60	$0	$7	23%	34%	25%	
Florida	$126	$0	$7	23%	34%	25%	
Georgia	$145.70	$0	$7	23%	34%	25%	
Illinois	$120.90	$0	$7	23%	35%	25%	
Kansas	$131.30	$0	$7	23%	34%	25%	
Maryland	$100.60	$0	$7	23%	34%	25%	
Michigan	$100.50	$0	$7	23%	34%	25%	
Mississippi	$122.30	$0	$7	23%	35%	25%	
Missouri	$119.20	$0	$7	23%	33%	25%	
Nevada	$140	$0	$7	23%	35%	25%	
New Jersey	$120.50	$0	$7	23%	33%	25%	
New Mexico	$86.50	$0	$7	23%	35%	25%	
New York	$166.60	$0	$7	23%	32%	25%	
North Carolina	$143.50	$0	$7	23%	34%	25%	
Ohio	$127.40	$0	$7	23%	35%	25%	
Tennessee	$148.80	$0	$7	23%	34%	25%	
Texas	$111.40	$0	$7	23%	35%	25%	
Virginia	$100.80	$0	$7	23%	35%	25%	

Aetna® Medicare Part D: Reliable Coverage, Simple Choices

Need help with your Medicare Part D drug coverage?

Extra Help is a Medicare program that helps people with limited income and resources pay for some Medicare prescription drug coverage (Part D) costs, such as:

- Monthly plan premium
- Yearly deductible
- Coinsurance
- Copays

To see if you qualify for Extra Help, complete an application online at **https://secure.ssa.gov/i1020/start**. You can also call Social Security toll-free at **1-800-772-1213** (TTY: **1-800-325-0778**).

Comprehensive Formulary (drug list)

We cover the most commonly prescribed Part D drugs. Our formulary guides are easy to read, navigate and provide:

- Tier placement and cost-sharing details
- Insulin and Vaccine coverage under the Inflation Reduction Act
- How to find a network pharmacy
- Resources available to help you with coverage determinations and more

Nationwide network of retail pharmacies

A strong network of pharmacies including CVS, Walmart, Costco and local neighborhood pharmacies.

CVS Caremark® Mail Service Pharmacy

Use mail-order to get a 90-day supply of your prescriptions delivered to you. Most mail-order prescriptions arrive no more than 10 days from the time we receive your order.

- Free standard shipping to your home or location of choice
- Medicines arrive in unmarked, secure packaging to protect your privacy
- Automatic refill reminders so you don't run out

For more information, visit **AetnaMedicare.com/MailOrder**.

CVS Specialty® Pharmacy

Specialty medicines for complex medical conditions often require special shipping or storage. Whether you'd like to refill your prescription online or need one-on-one support, we're here to help. That's why CVS Specialty® Pharmacy Services gives you safe and reliable prescription delivery. For more information, visit **CVSSpecialty.com**.

Understanding drug payment phases

$700	**Deductible phase** The amount you pay before you begin to receive benefits from the plan. You'll pay the discounted cost of the drug.
Up to $2,400	**Initial coverage phase** During this phase, you pay a copayment or coinsurance (your share of the cost) for the discounted price of each prescription.
Through the end of the year	**Catastrophic coverage phase** You pay $0 for Part D covered drugs during this phase. You'll stay in this phase through the end of the plan year.

Are you looking for more than just prescription drug coverage?

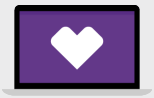
- Instead of paying Part D premiums, have you looked at our $0 premium Medicare Advantage plans which include prescription coverage? Often times drug coverage within our Medicare Advantage plans can be richer than standalone Part D plans like Choice, even at $0 premiums. For more information and to find out if there is a $0 Medicare Advantage plan in your state, visit **aetna.com/medicare**.
- Have Medicare and Medicaid? We also offer Dual Eligible Special Needs Plans (D-SNPs) in some states with $0 premium and low or zero dollar cost sharing based on your level of eligibility. They provide Medicare Advantage benefits, prescription drug coverage, plus additional benefits.
- We offer Special Needs Plans (C-SNPs) designed for members with certain chronic conditions, with benefits and support tailored to your health needs.

Questions about Medicare Part D?

We've got answers...

Visit our Questions about Medicare page, **https://www.aetna.com/medicare/faq.html**, to check out our FAQ pages and to learn about everything from costs and copays to prescriptions and coverage.

Ways to enroll



Online

This method is the easiest and quickest way to apply. Visit **aetna.com/medicare** or **Medicare.gov**.

By telephone

If you want to talk to one of our friendly Customer Care representatives or licensed agents from the convenience of your home, we can be reached at **1-844-509-6254** (**TTY: 711**),
7 days a week October 1 through March 31, Monday through Friday April 1 through September 30, 8 AM to 8 PM, local time.

In person

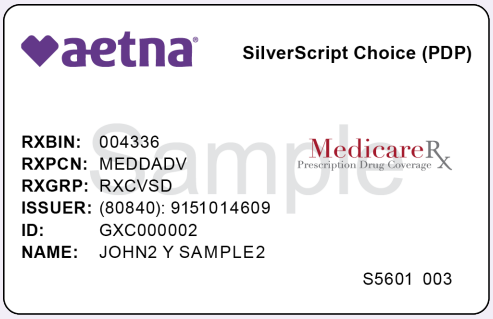
If you prefer speaking to someone face-to-face, call us to request an appointment.

Next steps after enrolling

As soon as Medicare approves your application, we will send you your new member plan materials.

Your plan materials include:

- **Confirmation of Enrollment Letter** – This letter confirms Medicare has approved your enrollment.
- **Member ID Card** – The card you present at the pharmacy to access your plan benefits.
- **Get Started Guide** – A guide that introduces the resources, tools and information that will be helpful for new Aetna Medicare members.
- **Online Document Notice** – Instructions on electronically accessing essential plan documents, such as *Evidence of Coverage* (EOC), *Pharmacy Directory* and *Formulary*.



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 **1-844-509-6254** (**TTY: 711**), 7 days a week October 1 through March 31, Monday through Friday April 1 through September 30, 8 AM to 8 PM, local time.

Understanding the benefits

- ☐ The *Evidence of Coverage* (EOC) provides a complete list of all coverage and services. It is important to review plan coverage, costs, and benefits before you enroll. Visit **AetnaMedicare.com/formulary** or call **1-844-509-6254** (**TTY: 711**) to view a copy of the EOC.
- ☐ Review the *Pharmacy Directory* to make sure the pharmacy you use for any prescription medicine is in the network. If the pharmacy is not listed, you will likely have to select a new pharmacy for your prescriptions.
- ☐ Review the *Formulary* to make sure your drugs are covered.

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, 2028.
- ☐ **Effect on Current Coverage.** If you are currently enrolled in a Medicare Advantage plan or a Part D Prescription Drug Plan (PDP), your current coverage will end once your new PDP coverage starts. If you have TRICARE, your coverage may be affected once your new PDP coverage starts. Please contact TRICARE for more information. If you have a Medigap plan, you may want to keep your Medigap policy because your Medigap can continue to provide medical coverage.

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 **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**.

To join one of our prescription drug plans, you must be entitled to Medicare Part A and/or be enrolled in Medicare Part B, be a United States citizen or be lawfully present in the United States and live in our service area. Our service area includes 22 states and the District of Columbia.

Plan features and availability may vary by service area.

The formulary and/or pharmacy network may change at any time. You will receive notice when necessary.

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

Aetna and CVS Caremark® are part of the CVS Health® family of companies.

Participating health care providers are independent contractors and are neither agents nor employees of SilverScript. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change.

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/formulary** or call us and we'll send you a copy. You can find our contact information on the last page of this booklet.

Other pharmacies are available in our network.

For mail-order, you can get prescription drugs shipped to your home through the network mail-order delivery program. Typically, mail-order drugs arrive within 10 days. You can call **1-866-235-5660**, 24 hours a day, 7 days a week, TTY users call **711**, if you do not receive your mail-order drugs within this timeframe. Members may have the option to sign up for automated mail-order delivery.

Customer care

Method	Contact Information
Call	**1-844-509-6254** (prospective members) 7 days a week October 1 through March 31, Monday through Friday April 1 through September 30, 8 AM to 8 PM, local time **1-866-235-5660** (current members) 24 hours a day, 7 days a week Calls to these numbers are free. Customer Care also has free language interpreter services available for non-English speakers.
TTY	**711** 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	**aetna.com/medicare**

Thank you

For considering Aetna Medicare for your prescription drug plan needs. We believe you will be happy with the services and coverages Aetna provides you.

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