A picture containing font, text, graphics, logo

Description automatically generated

P.O. Box 30006, Pittsburgh, PA 15222-0330

**Important Plan Information**

<Member First Name> <Member Last Name>

<Mailing Address 1>

<Mailing Address 2>

<City>, <State> <ZIP>

<Date>

**NOTICE OF PRESCRIPTION DRUG COVERAGE CHANGE**

Dear <Member First Name> <Member Last Name>:

Thank you for placing your trust in SilverScript Employer PDP sponsored by the Motion Picture Industry Health Plan (SilverScript) for your Medicare Part D coverage. Our records indicate that you currently have coverage for the prescription drug(s) in the table below through your enhanced benefit provided by the Motion Picture Industry Health Plan. **If you are no longer taking the medication listed below, you can disregard this letter.** If you are currently taking this medication, please review this letter for important information that you should know.

|  |
| --- |
| **Drug Name** |
| <DRUG NAME> |
| <DRUG NAME> |

**What is changing?**

The medication you are taking is no longer covered on your enhanced benefit.

**What should you do next?**

Talk to your doctor to see if another drug will work for you. If not, your doctor can work with us to ask for an exception. Please note that your out-of-pocket costs may be different as a result of this change. Remember, **you should not stop taking your medication unless directed by your doctor**.

**Have additional questions?**

We appreciate your relying on us for your prescription drug coverage. We’re always here to help and look forward to continuing to keep you on your path to better health. If you have additional questions, please call Customer Care at **1-833-958-2660 (TTY: 711)**, 24 hours a day, 7 days a week.

See Evidence of Coverage for a complete description of plan benefits, exclusions, limitations, and conditions of coverage. Plan features and availability may vary by service area.

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

©2024 SilverScript Insurance Company

Y0001\_GRP\_4088955\_2024\_C