Memo

To: All PDPs and MAPDs (excluding Employer and PACE plans)

From: Vikki Oates, Director, Division of Clinical and Economic Performance

Date: March 2, 2006

Re: Response Required - Plan survey regarding point of sale prescription costs

---

In order to ensure plan pricing is accurately reflected on the Medicare Prescription Drug Plan Finder, CMS is requiring a response to this memo from each plan no later than 4 PM EST on Friday, March 10, 2006.

Please respond to this memo via email to plancompare@destinationrx.com, Thomas.dudley@cms.hhs.gov, and stacy.matheny@cms.hhs.gov using the following format:

Subject Line:
"HXXXX or SXXXX (Your Contract ID) - Response to Point of Sale Cost Survey"

Message Field:
List your Contract and Plan ID(s) and the statement below that most accurately reflects common practices at the point of sale prescription costs under your plan(s):

1. Our members are always charged the lesser of the cost of the prescription drug or the co-pay/coinsurance for the drug.

2. Our members will be charged the full co-pay/coinsurance for a drug regardless of the cost of the drug.

3. Our members will sometimes be charged the full co-pay/coinsurance for a drug regardless of the cost of the drug.

Contact Information:
Please include the name, title, telephone number and email address for the individual completing the survey.

Please feel free to contact Tom Dudley at 410 786-1442 or Stacy Matheny at 410-786-6865 if you have questions about this survey.