CVS Caremark M3P Video 1
FINAL Video Script

VOICEOVER AND CAPTION	ON-SCREEN GRAPHIC TEXT
{TITLE SLIDE}	**{TITLE SLIDE}**
	Understanding the new Medicare Prescription Payment Plan
{SLIDE 1}	**{SLIDE 1}**
If you have high prescription drug costs, a new program under Medicare Part D may benefit you. Here's what you need to know.	{Video title and/or video clip(s)} [Do you have high prescription drug costs?] [Medicare Prescription Payment Plan] [Is it right for you?]
{SLIDE 2}	**{SLIDE 2}** **{ON-SCREEN GRAPHIC}**
Starting in 2025, you won't pay more than **$2,000 out-of-pocket** for covered Part D prescription drugs. But if you take high-cost Part D drugs, you might reach the spending cap and pay the full $2,000 early in the year. This is where the new Medicare Prescription Payment Plan might benefit you. If you sign up for the program, you will be able to spread your out-of-pocket costs across the remainder of the calendar year.	<Illustration of a 2025 calendar> <Illustration of a graph with an animated bar capped at $2K> **{ON-SCREEN TEXT}** [$2,000 out-of-pocket limit for covered Part D prescription drugs] **{ON-SCREEN GRAPHIC}** <$2K bar smooths to a more horizontal line to illustrate cost 'smoothing' when VO says "spread your OOP costs.">

{SLIDE 3}

Signing up for the program means you won't pay for your Part D prescription drugs at the pharmacy, or when they're shipped.

Instead, your plan will send you a bill each month **separate from your plan premium bill.**

{SLIDE 3}

{ON-SCREEN GRAPHIC}

<Video clip(s) or graphic that leverages the CVS branded pictograms to illustrate that the member does not pay at the pharmacy.>

{ON-SCREEN GRAPHIC TEXT}

[If you sign up for the program,] [<Y/y>ou won't pay at the pharmacy or when they're shipped]

[Instead,] [<Y/y>ou'll receive a monthly bill]

[The invoice is separate from your plan premium]

{Footnotes:}
[The Medicare Prescription Payment Plan applies to retail, mail-order and specialty pharmacies.]

{SLIDE 4}

Your monthly bill is based on the Part D prescription drugs filled that month, plus your previous month's balance, divided by the number of months left in the plan year. This amount may change monthly.

{SLIDE 4}

{ON-SCREEN FORMULA GRAPHIC}

Prescriptions filled that month
+
Previous month's balance
÷
Months left in the year

{On-screen footnotes:}
[Your invoice amounts are recalculated each month. Future payments might increase when you fill

a new Part D prescription or refill an existing prescription.]

{SLIDE 4}

Participation is optional, and there are no fees to sign up.

Keep in mind, this payment option might help you manage your expenses, but it **won't save you money or lower your drug costs**. **AND it's not** a good choice for everyone.

{SLIDE 4}

{ON-SCREEN GRAPHIC}

<Video clip(s) or graphic illustrating the VO.>

{ON-SCREEN GRAPHIC LIST}

[<BULLET>] [Optional]
[<BULLET>] [No fees] [to participate]
[<BULLET>] [Does not save you money]
[<BULLET>] [Does not lower your drug costs]
[<BULLET>] [It's not a good choice for everyone]

{SLIDE 5}

If you're likely to reach the $2,000 cap early in the year, **AND** you sign up early, before you fill many prescriptions, it might benefit you.

{ON-SCREEN TEXT}

[Are you likely to pay $2,000 out of pocket on Part D drugs early in the year?]

[The Medicare Prescription Payment Plan might be right for you]

{SLIDE 5}

It made sense for John. John takes a high-cost prescription drug for his chronic heart condition. If he begins filling his prescription in January, he'll reach the annual $2,000 out-of-pocket limit in April, meaning John won't pay anything for his covered drugs for the remainder of the year..

{ON-SCREEN TEXT}

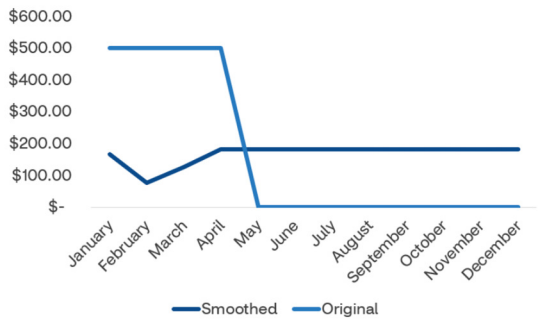
[John]

[Chronic heart condition]

{ON-SCREEN GRAPHIC}

<Animated chart illustrating John's payments.>

But if John signs up for the payment plan in January, he will be able to spread his Part D drug costs over the year.



{Footnote}

[John reaches the annual $2,000 out-of-pocket limit in April.]

{SLIDE 7}

This payment plan might **not** be a good choice for **you** if:

- Your out-of-pocket prescription **costs are less than $2,000 per year**,
- Your drug costs are similar each month,
- You sign up later in the plan year,
- You get Extra Help from Medicare,
- You're enrolled in a Dual-Eligible Special Needs Plan or other program, like Medicaid, that assists with your drug costs, or
- You don't want to change how you pay for your prescriptions.

{SLIDE 7}
{ON-SCREEN GRAPHIC TEXT}

[Who might NOT benefit from the program?]

{ON-SCREEN GRAPHIC LIST TO ALIGN WITH VO}.

[<BULLET>] [You] [<P/p>ay less than $2,000 per year out of pocket [on prescription drugs]]

[<BULLET>] [Your] [<D/d>rug costs are similar each month]

[<BULLET>] [You] [<S/s>ign up late in the plan year]

[<BULLET>] [You] [<G/g>et Extra Help] [from Medicare]

[<BULLET>] [You] [<H/h>ave a D-SNP or Medicaid plan]

[<BULLET>] [You] [<D/d>on't want to change how you pay for your prescriptions]

{SLIDE 8}

Laura decided the program **didn't** make sense for her.

She mostly takes lower cost generic drugs, and her monthly prescription costs range from $100 to $160. Even with a few unplanned prescriptions, Laura won't reach the $2,000 out-of-pocket limit.

So, this program **won't benefit her**. In fact, her monthly payments would **increase** as she continues to pick up prescriptions with fewer months left in the year.

Remember, this payment option might not be the best choice for you, depending on your Part D drug costs.

{SLIDE 9}

A) Caremark version:

To learn more about the Medicare Prescription Payment Plan and determine if it makes sense for your situation, [<C/c>all the number] on the back of your member ID card [or] [Visit your plan's website].

B) Client branded version:

To learn more about the Medicare Prescription Payment Plan and determine if it makes sense for your situation, [<C/c>all the number] call

{SLIDE 8}

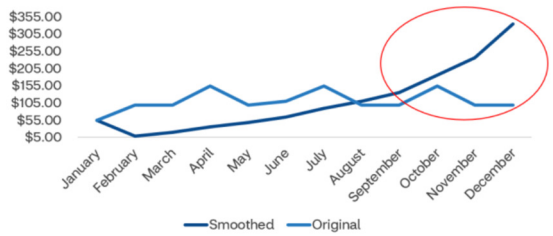
{ON-SCREEN TEXT}

[Most of her Part D drugs are generic]

[The program won't benefit her]

{ON-SCREEN GRAPHIC}

<Animated chart showing Laura's payments if she signs up for the Medicare Prescription Payment Plan versus if she doesn't.>



{SLIDE 9}

{ON-SCREEN GRAPHIC TEXT}

A) Caremark version:

<CVS Caremark logo>

To learn more about the Medicare Prescription Payment Plan, [call <the number on [the back of] your member ID card> [or] [visit <your plan's website>].

{DISCLAIMERS}

the number on the screen [or] [Visit our website].

{B) Client branded version:}

<Client logo>

To learn more about the Medicare Prescription Payment Plan, [Please call <the number on [the back of] your member ID card> [or] [visit <your plan's website>].

{Disclaimers}

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. 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 <x> days. You can call <phone number/TTY/hours of op> 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.]

Y0001_NR_3914128_2025_C

©2024 CVS Caremark. All rights reserved.

*Reviewed and approved by CVS Health Medicare Compliance