Power up your portfolio with Aetna and Coventry Medicare Part D!

We offer three PDPs in all 50 states and D.C.: Aetna Saver, First Health Value Plus, and First Health Premier Plus. All of our PDP plans are fully commissionable. And the Aetna Saver plan is below the LIS benchmark in every state except for Florida.

PDP referral program
Through our referral program, you can earn a one-time referral payment for each referred client who chooses to enroll in an Aetna or Coventry PDP. To participate in the referral program, you must be contracted with Aetna, but you don’t have to complete the annual certification process.

Aetna’s family of prescription drug plans will give you additional opportunities in 2017. Here are some highlights of our exciting PDP portfolio:

- 3-plan PDP product portfolio available in all 50 states and D.C.
- Saver plan with $32 average premium projected to below the low-income subsidy benchmark everywhere except for Florida
- Value Plus plan with $40 average premium, $0 deductible, and gap coverage
- Premium Plus plan with $103 average premium, $0 deductible, and enhanced gap coverage
- Saver and Premier Plus plans offer $1 tier 1 preferred generic copays at over 20,000 preferred pharmacies
- Simplified network structure including 60k pharmacies with more than 20,000 preferred options
- Formularies with enhanced generic coverage
### Benefit designs

All three plans are eligible for new business and renewal commissions in 2017.

<table>
<thead>
<tr>
<th>Why You Should Sell This Plan</th>
<th>Aetna Medicare Rx Saver (PDP)</th>
<th>First Health Part D Value Plus (PDP)</th>
<th>First Health Part D Premier Plus (PDP)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Offers essential Part D coverage for beneficiaries to meet their prescription drug needs while enjoying low monthly plan premiums and cost-sharing</td>
<td>Delivers the value demanded for predictable out-of-pocket costs and more robust coverage</td>
<td>Offers our highest level of medication coverage, protecting members against skyrocketing drug costs for unexpected illness</td>
</tr>
</tbody>
</table>

### Monthly Plan Premium (plan premiums vary by CMS region)

<table>
<thead>
<tr>
<th>Monthly Premium</th>
<th>Aetna Medicare Rx Saver (PDP)</th>
<th>First Health Part D Value Plus (PDP)</th>
<th>First Health Part D Premier Plus (PDP)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly Premium</td>
<td>$32.18²</td>
<td>$39.71¹</td>
<td>$103.04²</td>
</tr>
</tbody>
</table>

### Deductible: The amount the member pays before the plan begins to pay

<table>
<thead>
<tr>
<th>Deductible</th>
<th>Aetna Medicare Rx Saver (PDP)</th>
<th>First Health Part D Value Plus (PDP)</th>
<th>First Health Part D Premier Plus (PDP)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$400²</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

### Initial Coverage: Once the deductible is reached, member cost-share is paid for drugs until the member’s total drug expenditure (regardless of who pays) reaches $3,700

#### 30 day retail copay/coinsurance (preferred cost-share pharmacies/standard cost-share pharmacies)

<table>
<thead>
<tr>
<th>Tier</th>
<th>Preferred Generic</th>
<th>Generic</th>
<th>Preferred Brand</th>
<th>Non-Preferred Brand</th>
<th>Specialty</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$1/$7</td>
<td>$2/$10</td>
<td>$1/$10</td>
<td>$2/$15²</td>
<td>$34</td>
</tr>
<tr>
<td>2</td>
<td>$2/$15²</td>
<td>$5/$20</td>
<td>$47²</td>
<td>$50%</td>
<td>50%</td>
</tr>
<tr>
<td>3</td>
<td>30%</td>
<td>$47²</td>
<td>T1, T2 coverage at ICL cost-share</td>
<td>33%</td>
<td>50%</td>
</tr>
<tr>
<td>4</td>
<td>35%</td>
<td>33%</td>
<td>All remaining formulary drugs</td>
<td>33%</td>
<td>40%</td>
</tr>
<tr>
<td>5</td>
<td>25%</td>
<td>33%</td>
<td>51% Generic Drugs</td>
<td>T1, T2 partial T4 coverage at ICL cost-share</td>
<td>40%</td>
</tr>
</tbody>
</table>

### Coverage Gap: Member remains in this phase until their yearly true out-of-pocket drug costs reaches $4,950

| 51% Generic Drugs | T1, T2 coverage at ICL cost-share | T1, T2 and partial T4 coverage at ICL cost-share |
| 40% Brand Drugs   | All remaining formulary drugs     | All remaining formulary drugs |

### Catastrophic Coverage: After member true out-of-pocket costs exceed $4,950 a small copay or coinsurance is required for each covered prescription

Greater of 5% coinsurance, or $3.30 for Generic Drugs (including brand drugs dispensed as generic) or $8.25 for Brand Drugs

### Network

Greater than 60,000 retail pharmacies with more than 20,000 preferred options

### Footnotes

¹ available in all 50 states and District of Columbia
² Premiums and member deductible/copays/coinsurance vary by CMS region

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Over 60,000 retail pharmacies with more than 20,000 preferred

Albertsons, including:
- ACME Pharmacy®
- Osco
- Sav-on®
- Shaws®
- Star Market®
- United Supermarkets of Texas
BL-LO Pharmacy, including:
- Harveys®
- Winn-Dixie
Brookshire Grocery Company, including:
- Super 1 Foods
Cardinal MCC, including:
- Brookshire Brothers
- Discount Drug Mart
- Fred’s Pharmacy®
- Fruth Pharmacy
- Hen House
- House Calls
- Market 32
- Price Chopper®
- Ritzman
- Weis Market

Coborn’s
Costco
Giant Eagle
Harmon’s Whole Health
H-E-B
Hy-Vee
Kmart
Kroger, including:
- Baker’s
- City Market®
- Copps
- Dillons
- Fred Meyer
- Harris Teeter
- King Soopers
- Kroger Sav-on
- Mariano’s
- QFC
- Pick ‘n Save
- Ralph’s®
- Roundy’s
- Smith’s®

Meijer
Publix
QuickChek
Safeway, including:
- Carrs
- Pavilions
- Randalls
- Tom Thumb
- Vons
Sam’s Club
Save Mart
SUPervalu, including:
- Cub
- Farm Fresh
- Shop ‘n Save
- Thrifty White®
Walgreens, including:
- Duane Reade
- Eaton Apothecary
- Walmart
- Wegmans

*Not all pharmacies with this name are part of the preferred chain. Please consult the online directory.