



Dear Excelsior Plan Enrollee:

Starting on January 1, 2014, the New York State Health Insurance Program's Excelsior Plan Prescription Drug Program will be administered by CVS/caremark.

Enclosed is a one-time use card that you should take with you the first time you go to a retail pharmacy on or after January 1, 2014. This one-time use card contains information needed by your pharmacist to update your prescription billing records beginning January 1, 2014.

- 1. Please fill in the underlined areas with your name and NYSHIP ID number. (This information is needed by the pharmacist to process your prescriptions and is printed on your Excelsior Plan Benefit Card.)
- 2. Please present this temporary ID card to the pharmacist. This card can be used by all your covered dependents.

CVS/	caremark
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 RxBIN:
 004336

 RxPCN:
 ADV

 RxGRP:
 RX6027

 Issuer (80840):
 9151014609

ID:

NAME:

Present this Prescription Card to fill your prescription at any participating retail pharmacy.

For more information, visit

www.EmpirePlanRXProgram.com

or call a Customer Care representative toll-free

at 1-877-7-NYSHIP

Pharmacy Help Desk for Pharmacists: 1-800-364-6331

Submit paper claims to: CVS/caremark Claims Department

P.O. Box 52136, Phoenix, AZ 85072-2136

- 3. For questions or concerns, please call toll-free at 1-877-7-NYSHIP (1-877-769-7447) to speak to a Customer Care representative 24 hours a day, seven days a week. TTY users should call 1-800-863-5488.
- 4. Included with this one time use ID card is a new 2014 mail order form for home delivery of prescriptions. Please use this form for any <u>new</u> mail order (home delivery) requests beginning 1/1/2014. Note: your Excelsior Plan mail order prescriptions that have any refills available will automatically transfer from Express Scripts to CVS/caremark as of January 1, 2014. You will need to contact CVS/caremark to set up billing information prior to your first refill order.

Sincerely,

CVS/caremark

Enclosure: CVS/caremark Mail Order Form