



Helping Missourians Stay Healthy

Missouri Rx Plan

Missouri Department of Social Services / MO HealthNet Division
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Matt Blunt
Governor

<Date>

<FirstName> <LastName>

<Address 1>

<Address 2>

<City>, <State> <Zip>

This letter contains important information about your prescription drug coverage

Dear <FirstName> <LastName>:

You are receiving this letter because you are enrolled in the Missouri Rx Plan (MoRx). The purpose of this letter is to notify you of an upcoming change in your Medicare Part D plan assignment.

MoRx is working for you to get the best possible help with your prescription drug costs. To ensure you continue to receive high quality, affordable prescription drug coverage, MoRx is automatically enrolling you in <NewPlanName>. Your prescription drug coverage with <NewPlanName> will begin August 1, 2008. <NewPlanName> is a MoRx preferred plan. This means you will have easier access to a broader drug formulary with fewer medication restrictions.

Because you are eligible for both Medicare and Medicaid ("dual eligible") you are able to switch prescription drug plans at any time by contacting the Medicare Part D plan of your choice, or by calling Medicare at **1-800-633-4227**. Your MoRx benefit will not change if you decide to enroll in a different plan. However, <NewPlanName> will most likely offer you better drug coverage.

Please contact us at 1-800-375-1406 if you have questions. Persons with hearing and speech disabilities may contact our TTY number at 1-800-375-1493.

Sincerely,

George L. Oestreich, PharmD, MPA
Deputy Division Director

<DCN>