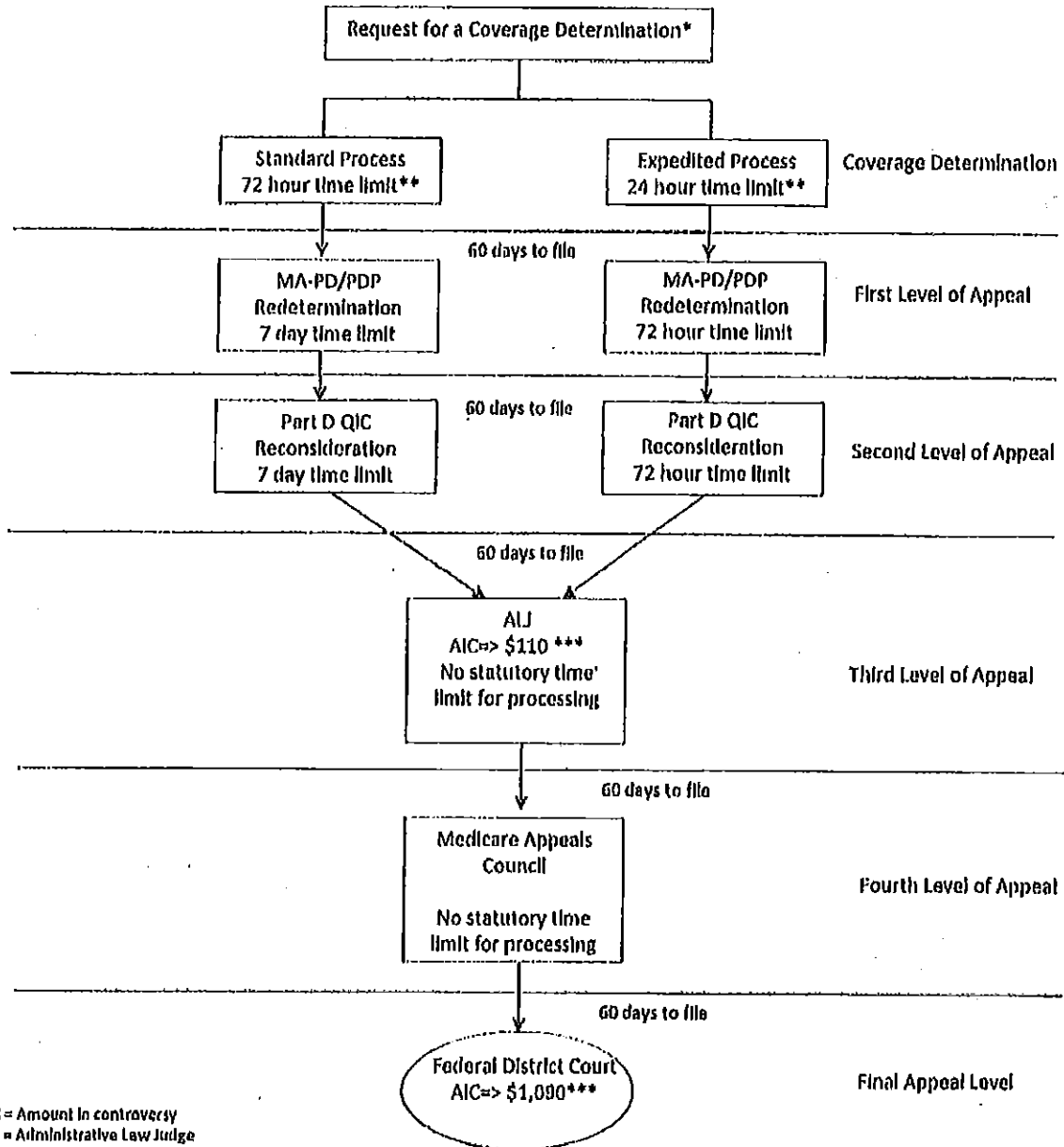


Medicare Part D Appeal Process

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AIC = Amount in controversy
 ALJ = Administrative Law Judge
 IRE = Independent Review Entity
 MA-PD = Medicare Advantage plan that offers Part D benefits
 PDP = Prescription Drug Plan

*A request for a coverage determination includes a request for a tiering exception or a formulary exception. A request for a coverage determination may be filed by the enrollee, the enrollee's appointed representative, or the enrollee's physician.

**The adjudication timeframe generally begins when the request is received by the plan sponsor. However, if the request involves an exception request, the adjudication timeframe begins when the plan sponsor receives the physician's supporting statement.

***Starting in 2005, the AIC requirement for an ALJ hearing and Federal District Court will be required in accordance with the medical care component of the consumer price index.

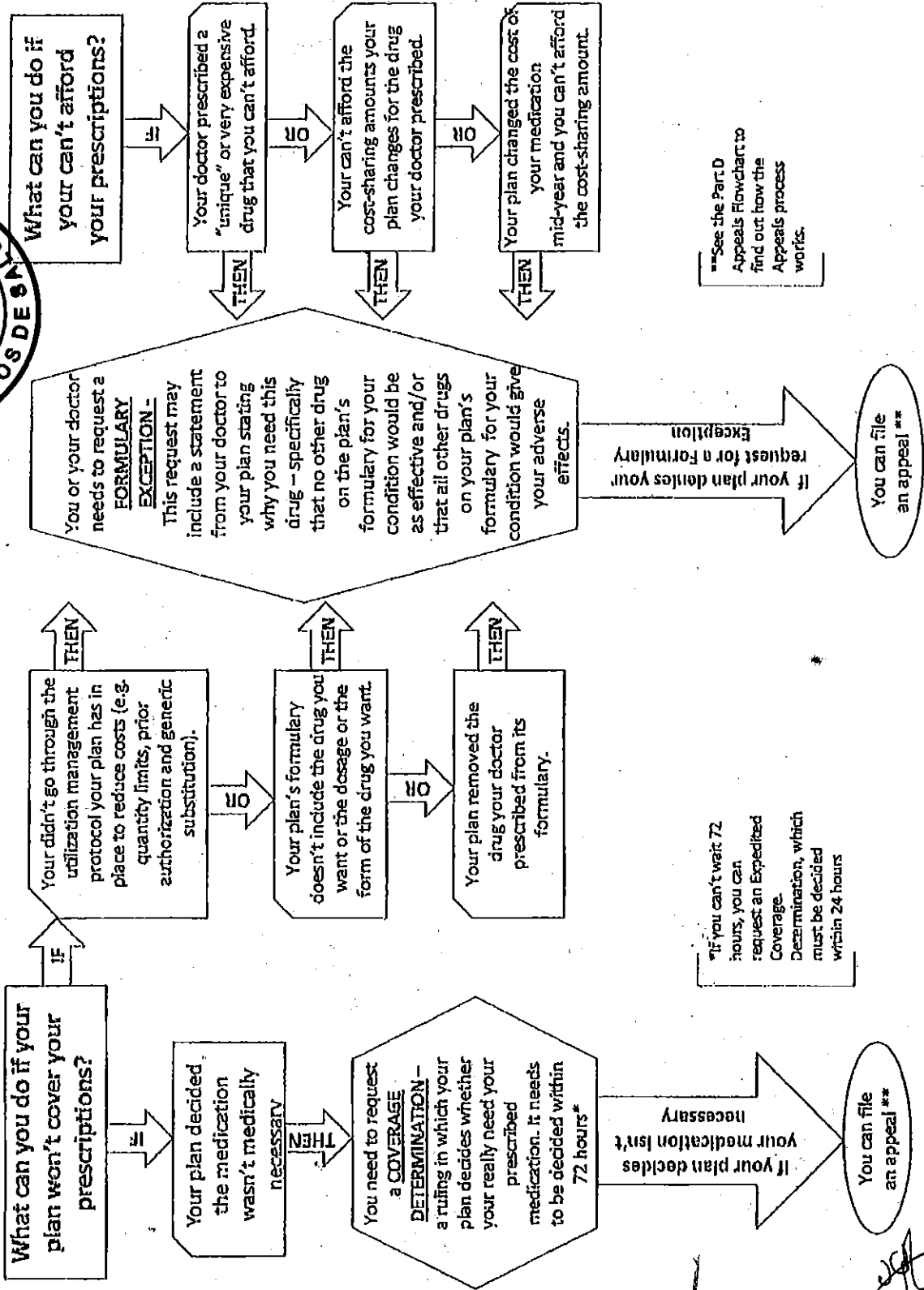


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The Medicare Part D Exceptions Process



**See the Part D Appeals Flowchart to find out how the Appeals process works.

*If you can't wait 72 hours, you can request an Expedited Coverage Determination, which must be decided within 24 hours

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