



# Employer Roundtable Series

Savitz invites you to participate in the next of our continuing series of employer educational roundtables:  
**Lifting the Veil of Secrecy on Your Rx Plan.**

This roundtable is designed to help plan sponsors understand:

- Rx trends in the marketplace;
- Latest creative Rx plan design features;
- How to analyze your Rx contract and decide if it is right for you
- Plan Cost- beyond discounts and dispensing fees
- Rebates - What is the story?

Included below is a brief survey. Please fill it out and fax it back by **September 17<sup>th</sup>**. We'll compile the survey results, compare the roundtable participants' responses to national and regional information and present them at the roundtable. Feel free to attach an extra sheet if needed.

The roundtable will be held on **September 23<sup>rd</sup>** in our offices located at **1845 Walnut St., 12<sup>th</sup> Floor, Training Room, Philadelphia, PA**. Registration and continental breakfast begin at **8:00 am**. The roundtable will run from **8:30 am - 10:30 am**. Parking is available in the garage located in the same building as our offices.

Registration will be accepted by email, fax or telephone. Please include the name, title, organization, telephone number and email address for each attendee. **Please RSVP by September 17<sup>th</sup>** either by email to [JillStill@savitz.com](mailto:JillStill@savitz.com), by fax to ATTN: Jill Still at 215.563.9943 or by telephone at 215.825.4035.

---

### **MINI -SURVEY - Fax back to Attn: Jill Still at 215.563.9943**

1. Is your prescription drug plan part of your medical plan? (\_\_\_) Stand alone plan with a PBM? (\_\_\_)
2. Is the plan fully insured? (\_\_\_) Self funded? (\_\_\_)
3. How many co-pay tiers does your plan have? \_\_\_\_\_
4. Does your plan cover over the counter medications? \_\_\_\_\_
5. What cost control features are in place in your prescription plan?  
\_\_\_\_\_
6. Do you anticipate making any changes to your prescription plan for 2009? \_\_\_\_\_ If so, what changes are you planning?  
\_\_\_\_\_
7. Do you have a traditional PBM contract or a fully transparent pass-through contract with your PBM?  
\_\_\_\_\_  
\_\_\_\_\_

**Please note whether you will attend and fill in your contact information below:**

I will ( ) will not ( ) be attending the Roundtable.

Name: \_\_\_\_\_ Organization: \_\_\_\_\_  
email: \_\_\_\_\_ Phone: \_\_\_\_\_