

From: "Cramer, Christine K." [REDACTED]
Date: November 13, 2015 at 8:06:32 AM CST
To: "Olstad, Jay" [REDACTED]
Subject: RE: KARE 11 Interview Request

Jay:

When we are made aware of an issue impacting one of our pharmacy benefit management members, we work directly with the member to address and resolve their issue. In this case, we will reach out to the member to answer any questions they may have about their plan design, the most cost effective way to fill their prescriptions and the paper claims reimbursement process.

As a pharmacy benefit manager, CVS/caremark is focused on providing our clients with opportunities to improve health outcomes for their members, while also managing costs. We work with our clients to develop plan designs that meet their needs and promote the use of clinically appropriate and cost effective medications for their members. In addition, CVS/Caremark provides our PBM clients with appropriate disclosures concerning the company's pricing strategies.

Finally, you asked about a law suit in California. It is important to clarify that this law suit involves our CVS/pharmacy retail pharmacy business, not the CVS/caremark PBM business. In this case, CVS has not overcharged patients for prescription co-pays, and we plan to vigorously defend against the baseless allegations in this lawsuit, which is completely without merit. In fact, the U.S. District Court of Massachusetts has dismissed a similar complaint.

Regards,
Chris

Christine K. Cramer | [CVS Health](#) | Senior Director, Public Relations | [REDACTED] | [REDACTED]