



T361 P1 42572 (270) 093367024680



CLAUDE A SIMON
71 TONJES RD
CALICOON, NY 12723-5729

Save Time, Save a Stamp!

Premium Pre-Payment Options:

QUARTERLY	ANNUAL
\$93.00	\$372.00

Note: You may pre-pay your account any amount at any time. You will not receive an invoice until you have an amount due.

AMOUNT DUE	DUEDATE	MEMBER ID
\$31.00	01/01/2024	GA2712679

- Visit **AetnaMedicare.com/PayYourPremium**, scan the QR code on the front of this page or call **1-866-535-8403** to set up automated one-time or reoccurring payments by credit/debit card or bank account.
- For general premium billing questions or to set up automatic payment from your Social Security/Railroad Retirement Board check, please call **1-855-651-4856 (TTY: 711)**. We're available 24 hours a day, 7 days a week.

Online Payment



Visit **AetnaMedicare.com/PayYourPremium** or scan this QR code with your mobile device camera.

Pay bill at CVS Pharmacy®

Take this invoice to any CVS Pharmacy® to pay with cash, credit card, or debit card. See full details on the back of this page.



799366205540006371683247349625

CVS Pharmacy associate instructions: Scan barcode above, enter amount customer wishes to pay and tender transaction as normal. (Amount must be between \$1.00 - \$999.00/day).

Please detach and send coupon with check payable to SilverScript® Insurance Company

BILLING FOR: CLAUDE A SIMON

DUE DATE: 01/01/2024 CT I01

PAYMENT ID	AMOUNT DUE	AMOUNT ENCLOSED
GA2712679	\$31.00	

Please include your **Payment ID** on your check or money order. **Do not send cash.**

If you would like to change your payment to automatic withdrawal from your bank account (ACH), please sign the back of this coupon and enclose your check payment.

SilverScript® Insurance Company
P.O. Box 504849
St. Louis, MO 63150-4849

