

Medicare Plan Finder Update

Office of External Affairs and Beneficiary Services

Website Project Management Group

Coalition Meeting, August 5, 2010

Medicare.gov Homepage

The screenshot shows the Medicare.gov homepage with several annotations. A white oval highlights the 'Resource Locator' button in the top navigation bar. A blue oval highlights the 'Drug and Health Plans' link in the 'Finding Plans' section. A white tooltip labeled 'Resource Locator' points to the 'Drug and Health Plans' link. The page layout includes a blue header with the Medicare.gov logo, a search bar, and various utility links. Below the header is a navigation bar with buttons for Home, Manage Your Health, Medicare Basics, Resource Locator, and Help & Support. The main content area features a 'Finding Plans' section with links to compare drug and health plans, compare Medigap policies, and join a plan. A vertical 'Resource Locator' menu is also present, listing various services like Drug and Health Plans, Medigap Policies, Doctors, Hospitals, Formulary Finder, Long-Term Care Planning, Home Health Agencies, and Your Medicare Coverage. A photograph of a doctor and an elderly patient is visible on the right side of the page.

Medicare.gov
The Official U.S. Government Site for Medicare

Sign In to MyMedicare.gov

Search Medicare.gov Search FAQ

Email Print Bookmark & Share RSS Español A A A

Home Manage Your Health Medicare Basics Resource Locator Help & Support

New to Medicare?

Health & Drug Plans

Facilities & Doctors

MyMedicare.gov

Finding Plans

[Compare Drug and Health Plans](#)

[Compare Medigap Policies](#)

[Join a Plan Now](#)

[Coverage Gap Information](#)

[Formulary Finder - 2010 Plan Data](#)

Drug and Health Plans

Medigap Policies

Doctors

Hospitals

Formulary Finder

Long-Term Care Planning

Home Health Agencies

Your Medicare Coverage

Resource Locator

Medicare Plan Finder Homepage

[Home](#) | [Manage Your Health](#) | [Medicare Basics](#) | [Resource Locator](#) | [Help & Support](#)

[Learn More About Plans](#) | [? Help](#) | [A-Z Glossary](#)

[Home](#) > Medicare Plan Finder

Medicare Plan Finder

Use this tool to search for and compare coverage options available in your area. A general plan search only requires your zip code. To personalize your search, enter your zip and complete Medicare information.

Find Your Medicare Plan!

Enter Your ZIP Code:

For a Personalized Search, Enter Your Medicare Information:

Enter Medicare Number:
Example: 123456789A
Where can I find this?

Last Name:

Effective Date for Part B:
Not Part B? [Click here.](#)

Date of Birth:

Do you have Medicare Supplement Health Insurance (Medigap)?: What is This?
 Yes No I don't know

This page is secured to protect your personal information.

[Find Plans](#)

Additional Tools

- [How to Use the Medicare Plan Finder](#)
- [Find and Compare Medigap Policies](#)
- [Find formularies in your area](#)
- [End Stage Renal Disease](#)
- [Military retiree benefits \(TRICARE\)](#)
- [Veteran benefits \(VA\)](#)
- [Federal Employee Retirement Benefits](#)
- [Helpful Contacts](#)
- [Download the Medicare Health Plan and Medigap Databases](#)
- [Click here to learn more about the 2010 one-time \\$250 rebate and additional savings in the coverage gap](#)

Step 2- Now Includes “Current Profile”

[Home](#) [Manage Your Health](#) [Medicare Basics](#) [Resource Locator](#) [Help & Support](#)

[Learn More About Plans](#) [? Help](#) [A-Z Glossary](#)

[Home](#) > [Medicare Plan Finder](#) > Enter Your Drugs

Step 2 of 4: Enter Your Drugs

To show accurate plan costs, we need to know which drugs you take, including quantities and dosages. This site does not show pricing for over the counter drugs or diabetic supplies.

[I don't want to add drugs now](#)

My Current Profile

Zip Code: 93031
Current Plan: Original Medicare (H0001-001-0)
Current Subsidy: No Subsidy
Future Coverage: Today's Options Premier powered by CCRx (PFFS) (H5421-064-0)

Name of Drug:

[Find My Drug](#)

Or Browse A-Z:

[A](#) [B](#) [C](#) [D](#) [E](#) [F](#) [G](#) [H](#) [I](#) [J](#) [K](#) [L](#) [M](#) [N](#)
[O](#) [P](#) [Q](#) [R](#) [S](#) [T](#) [U](#) [V](#) [W](#) [X](#) [Y](#) [Z](#)

[Help with common drug abbreviations](#)
[Get help with your Drug List](#)

Retrieve My Saved Drug List:[?]

Your drug list ID isn't tied to your personal information. Medicare doesn't share the drug information you enter.

Drug List ID: What is this?

Password Date: What is this?
Aug | 2 | 2010

[Retrieve My Drug List](#)

Sort Pharmacies Alphabetically

Step 3 of 4: Select Your Pharmacies

[I don't want to add pharmacies now](#)

Pharmacies Sort
alphabetically

My Current Profile

Zip Code: 93031

Current Plan: Original Medicare (H0001-001-0)

Current Subsidy: No Subsidy

Future Coverage: Today's Options Premier powered by CCRx (PFFS) (H5421-064-0)

[Continue to Plan Results](#)

We found 25 pharmacies within 0.5 miles of 93031

[Search New Location](#)

Available Pharmacies

Add to Selected Pharmacies

APRIA PHARMACY NETWORK

2150 N Trabajo Dr
Ste A
Oxnard, CA 93030
(800) 346-3355

[Add pharmacy](#)

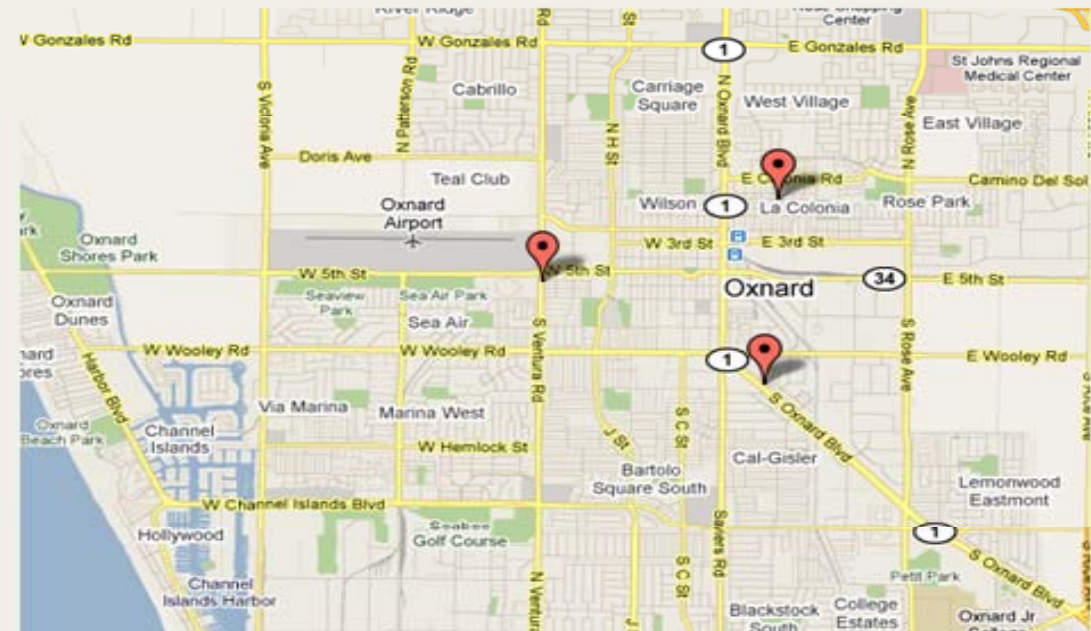
BUENA MEDICAL PHARMACY

629 Cooper Rd
Oxnard, CA 93030
(805) 483-1121

[Add pharmacy](#)

COSTCO PHARMACY

2001 E Ventura Blvd
Oxnard, CA 93030
(805) 983-6344



Add Drug List ID to Current Profile

Step 4 of 4: Refine Your Plan Results

- There are a total of 64 plans available in your area.

Expanded
My Current
Profile by
default

My Current Profile
Additional Tools

Zip Code: 93031

Current Coverage: Original Medicare (H0001-001-0)

Current Subsidy: No Subsidy

Future Coverage: Today's Options Premier powered by CCRx (PFFS) (H5421-064-0)

Drug List ID: 8912980704

Password Date: 08/02/2010

Please Read Important Info Based on Your Current Plan

Refine Your Results	View Your Results		
<p>Update Plan Results</p> <p>Select Plan Types</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Medicare Health Plans without drug coverage <input checked="" type="checkbox"/> Medicare Health Plans with drug coverage <input checked="" type="checkbox"/> Prescription Drug Plans <p>Limit Your Monthly Premium</p> <p>Show me plans within the following monthly premium range</p> <p>\$0 \$151</p>	<p>Your Current Plan:</p> <p>Original Medicare Plan Type: Medicare Health Plan without Drug Coverage</p>	<p>Estimated Annual Health and Drug Costs</p> <p>\$4,800</p> <p>Includes \$1,858 for drug costs</p>	<p>Plan Ratings</p> <p>Health Rating Not Available</p> <p>Drug Rating Not Applicable</p>
	<p>Your Future Plan:</p> <p>Today's Options Premier powered by CCRx (PFFS) Plan Type:MAPD</p>	<p>Estimated Annual Health and Drug Costs</p> <p>\$4,200</p>	<p>Plan Ratings</p> <p>Health Rating Not enough data to calculate summary score</p> <p>Drug Rating ★★★ 2.5 out of 5 stars</p>

Step 4: Refine Your Plan Results

The screenshot shows a web-based interface for refining plan results. It features several filter panels on the left and a main content area on the right. The filters include:

- Select Plan Types:** Three checked options: Medicare Health Plans without drug coverage, Medicare Health Plans with drug coverage, and Prescription Drug Plans.
- Limit Your Monthly Premium:** A slider set to \$199, with a range from \$0 to \$199.
- Limit Your Annual Drug Deductible:** A slider set to \$310, with a range from \$0 to \$310.
- Change Health Status:** Radio buttons for Poor, Good (selected), and Excellent.
- Select Coverage Options:** Two unchecked checkboxes: offer nationwide coverage and allow me to see any doctor.
- Select Plan Options:** Three unchecked checkboxes: plans for people who are eligible for both Medicare and Medicaid, plans for people with certain chronic or disabling conditions, and plans for people in certain long-term care facilities.
- Select Drug Options:** Three unchecked checkboxes: have NO restrictions for my drugs, have all my drugs on formulary, provide coverage in the gap, and provide mail order pricing for drugs.
- Select Plans By Company:** One unchecked checkbox: I would like to pick from a list of companies.

An **Update Plan Results** button is located at the bottom right of the filter panels.

PDP search continued

Your Plan Results

[« Return to previous page](#)

You are currently viewing all available plans according to your filters. The estimated annual cost range for all available plans is **\$6,700 - \$9,700**

[My Current Profile](#) [Additional Tools](#)

Zip Code: 21043
Current Coverage: Original Medicare, SilverScript Value (PDP) (S5601-010-0)
Current Subsidy: No Subsidy
Drug List ID: 8847533472
Password Date: 07/16/2010

View Plans by Type

Show Plan Type:

- Prescription Drug Plans with Original Medicare
- Medicare Health Plans with drug coverage
- Medicare Health Plans without drug coverage
- All Plans

[Show Plans](#)

Or, refine your plan results

[+ Your Current Plan\(s\)](#)

[- Prescription Drug Plans](#)

Prescription Drug Plans offer only drug coverage (Part D)
There are 40 plans in 21043 that match your preferences.

[View 10](#) [View 20](#) [View 50](#)

[Compare Plans](#) [»](#)

Sort Results By [Sort](#)

PrescribaRx Bronze (PDP) (S5597-239-0)

Estimated Annual Drug Costs:(?)	Monthly Premium:(?)	Deductibles:(?) and Drug Copay/Coinsurance:(?)	Drug Restrictions:(?)	Drug Coverage:(?)	Estimated Annual Health and Drug Costs:(?)	Health Plan Ratings:(?)	Drug Plan Ratings:(?)	Enroll
<input type="checkbox"/> \$4,038	\$26.40 Drug: \$26.40 Health: N/A	Annual Drug Deductible: \$310.00 Health Plan Deductible: N/A Drug Copay/Coinsurance: 25%	Yes	All Drugs on Formulary: No No Gap Coverage Lower Drug Costs	\$7,000 Includes \$2,963 for Original Medicare	Not Applicable	Drug Plan Ratings: (?) ★★★ 2.5 out of 5 stars	Enroll

Estimated Annual Drug Cost Column added to PDPs

Prescription Drug Plans

Prescription Drug Plans offer only drug coverage (Part D)
 There are 44 plans in 21043 that match your preferences. [View 10](#) [View 20](#) [View 50](#)

[Compare Plans](#)

Sort Results By **Lowest Estimated Annual Drug Cost** [Sort](#)

PrescribaRx Bronze (PDP) (S5597-239-0)

<input type="checkbox"/>	Estimated Annual Drug Costs:(?)	Monthly Premium:(?)	Deductibles:(?) and Drug Copay/ Coinsurance:(?)	Drug Restrictions:(?)	Drug Coverage:(?)	Estimated Annual Health and Drug Costs:(?)	Health Plan Ratings:(?)	Enroll
<input type="checkbox"/>	\$4,238	\$26.40 Drug: \$26.40 Health: N/A	Annual Drug Deductible: \$310.00 Health Plan Deductible: N/A Drug Copay/ Coinsurance: 25%	Yes	All Drugs on Formulary: No No Gap Coverage Lower Drug Costs	\$7,200 Includes \$2,963 for Original Medicare	Not Applicable Drug Plan Ratings: (?) ★★★ 2.5 out of 5 stars	Enroll

Community CCRx Basic (PDP) (S5803-074-0)

<input type="checkbox"/>	Estimated Annual Drug Costs:(?)	Monthly Premium:(?)	Deductibles:(?) and Drug Copay/ Coinsurance:(?)	Drug Restrictions:(?)	Drug Coverage:(?)	Estimated Annual Health and Drug Costs:(?)	Health Plan Ratings:(?)	Enroll
<input type="checkbox"/>	\$4,320	\$28.20 Drug: \$28.20 Health: N/A	Annual Drug Deductible: \$310.00 Health Plan Deductible: N/A Drug Copay/ Coinsurance: \$0, 25% - 65%	Yes	All Drugs on Formulary: No No Gap Coverage Lower Drug Costs	\$7,300 Includes \$2,963 for Original Medicare	Not Applicable Drug Plan Ratings: (?) ★★★ 3 out of 5 stars	Enroll

CIGNA Medicare Rx Plan One (PDP) (S5617-214-0)

<input type="checkbox"/>	Estimated Annual Drug Costs:(?)	Monthly Premium:(?)	Deductibles:(?) and Drug Copay/ Coinsurance:(?)	Drug Restrictions:(?)	Drug Coverage:(?)	Estimated Annual Health and Drug Costs:(?)	Health Plan Ratings:(?)	Enroll
<input type="checkbox"/>	\$4,415	\$31.60 Drug: \$31.60 Health: N/A	Annual Drug Deductible: \$310.00 Health Plan Deductible: N/A Drug Copay/ Coinsurance: \$3 - \$88, 25%	Yes	All Drugs on Formulary: No No Gap Coverage Lower Drug Costs	\$7,400 Includes \$2,963 for Original Medicare	Not Applicable Drug Plan Ratings: (?) ★★★ 3.5 out of 5 stars	Enroll

Add "Print My Drug List" to Compare Page

Overview	Health Plan Benefits	Drug Costs & Coverage	Plan Ratings
Amerivantage Classic + Rx (HMO) (H5896-008) Plan Type: HMO	PrescribaRx Bronze (PDP) (S5597-239) Plan Type: PDP	Medco Medicare Prescription Plan - Access (PDP) (S5660-175) Plan Type: PDP	
Estimated Annual Cost: [?] \$4,500	Estimated Annual Cost: [?] \$5,050	Estimated Annual Cost: [?] \$5,450	
Coverage: Provides health and drug coverage	Coverage: Provides drug coverage only. NOTE: Health Plan Benefits are based on Original Medicare	Coverage: Provides drug coverage only. NOTE: Health Plan Benefits are based on Original Medicare	
Enroll	Enroll	Enroll	
+ Fixed Costs			
+ Annual Drug Costs			
+ Monthly Drug Costs			
- Drug Coverage Information			
1 out of 2 of your drugs are covered on the plan's formulary. [?] Caduet TAB 5MG/10MG No restrictions Tier: 4 Fosamax Plus D TAB 70-5600 No restrictions NOT ON FORMULARY ¹⁵	1 out of 2 of your drugs are covered on the plan's formulary. [?] Caduet TAB 5MG/10MG Quantity Limit [?] Tier: 2 ³ Fosamax Plus D TAB 70-5600 No restrictions NOT ON FORMULARY ¹⁵	1 out of 2 of your drugs are covered on the plan's formulary. [?] Caduet TAB 5MG/10MG Quantity Limit [?] Tier: 2 ³ Fosamax Plus D TAB 70-5600 No restrictions NOT ON FORMULARY ¹⁵	
Print My Drug List ³ This drug may be subject to prior authorization, step therapy or quantity limits. View plan details or contact the plan for more information. ¹⁵ Any amount you spend for a non-formulary drug is not counted towards the deductible, initial coverage limit or out-of-pocket costs UNLESS the plan approves a formulary exception. If an exception is approved, the non-formulary drug will be covered. The drug cost displayed is only estimate and actual cost may vary. Please contact the plan for more information.			

Print My Drug List Pop-Up

Medicare Plan Finder

My Drug List

Your Name: _____

Date: 8/2/2010

Drug List ID: 6559704320

Password Date: 7/23/2010

Zipcode: 21043

Medicine Name	Quantity	Frequency	Generic Options
Caduet TAB 5MG/10MG	30	Every 1 Month	Generic Not Available
Effexor TAB 37.5MG	60	Every 1 Month	venlafaxine hcl
Fosamax TAB 70MG	4	Every 1 Month	alendronate sodium
Zetia TAB 10MG	30	Every 1 Month	Generic Not Available
Synthroid TAB 100MCG	30	Every 1 Month	levothyroxine sodium

Add Drug Benefit Summary to Compare Page

Overview		Health Plan Benefits		Drug Costs & Coverage		Plan Ratings	
Amerivantage Classic + Rx (HMO) (H5896-008) Plan Type: HMO		PrescribaRx Bronze (PDP) (S5597-239) Plan Type: PDP		Medco Medicare Prescription Plan - Access (PDP) (S5660-175) Plan Type: PDP			
Estimated Annual Cost: [?] \$7,000		Estimated Annual Cost: [?] \$7,200		Estimated Annual Cost: [?] \$7,900			
Coverage: Provides health and drug coverage		Coverage: Provides drug coverage only. NOTE: Health Plan Benefits are based on Original Medicare		Coverage: Provides drug coverage only. NOTE: Health Plan Benefits are based on Original Medicare			
Enroll		Enroll		Enroll			
+ Costs							
- Additional Information							
Drug Plan Ratings: [?] ★★★★ 3.5 out of 5 stars		Drug Plan Ratings: [?] ★★★ 2.5 out of 5 stars		Drug Plan Ratings: [?] ★★★★★ 4.5 out of 5 stars			
View plan website Plan Type: HMO Plan Status: Approved by Medicare Area: Central Maryland		View plan website Plan Type: PDP Plan Status: Not available Area: Not available		View plan website Plan Type: PDP Plan Status: Not available Area: Not available			
View Drug Benefit Summary		View Drug Benefit Summary		View Drug Benefit Summary			

View Drug Benefit Summary Pop-up

Amerivantage Classic + Rx (HMO)

(Contract ID:H5896, Plan ID:008)

Cost sharing Information

Copay/Coinsurance Detail - Initial Coverage Limit

PHARMACY TYPE	TIER NAME	Copay/Coinsurance Amounts	
		RETAIL (30-DAY SUPPLY)	MAIL-ORDER (90-DAY SUPPLY)
Preferred Pharmacies	Tier: 1	\$0	\$0
Preferred Pharmacies	Tier: 2	\$7	\$14
Preferred Pharmacies	Tier: 3	\$45	\$90
Preferred Pharmacies	Tier: 4	\$80	\$160
Preferred Pharmacies	Tier: 5	33%	33%
Network Pharmacies	Tier: 1	\$0	\$0
Network Pharmacies	Tier: 2	\$7	\$14
Network Pharmacies	Tier: 3	\$45	\$90
Network Pharmacies	Tier: 4	\$80	\$160
Network Pharmacies	Tier: 5	33%	33%

Copay/Coinsurance Detail - Formulary Exceptions

Formulary Exceptions*:

Tier: 4

*Note: Any amount you spend for a non-formulary drug is not counted towards the deductible, initial coverage limit or out-of-pocket costs UNLESS the plan approves a formulary exception. If an exception is approved, the non-formulary drug will be covered in this Tier. Please contact the plan for more information.

Close

Additions to the Plan Details Page

Overview
Health Plan Benefits
Drug Costs & Coverage
Plan Ratings

Amerivantage Classic + Rx (HMO)
(H5896-008-0)
Plan Type: HMO

AMERIGROUP Maryland, Inc.,
7550 Teague Road, Suite 500, Hanover, MD 21076

Members: 1-866-805-4589 1-800-855-2880 (TTY/TDD) **Non**
Members: 1-866-805-4589 1-800-855-2880 (TTY/TDD)

Health Plan Ratings: (?)
Not enough data to calculate summary score

Estimated Annual Cost: (?)
\$4,500

[Enroll](#)

[+ Fixed Costs](#)

[+ Annual Drug Costs](#)

[+ Monthly Drug Costs](#)

[- Drug Coverage Information](#)

SELECTED DRUGS	TIER (FORMULARY STATUS) [?]	Restrictions		
		PRIOR AUTHORIZATION [?]	QUANTITY LIMITS [?]	STEP THERAPY [?]
Caduet TAB 5MG/10MG	Tier: 4			
Fosamax Plus D TAB 70-5600	NOT ON FORMULARY ¹⁵			

[Add/Edit Drugs](#)

[Print My Drug List](#)

[View Drug Benefit Summary](#)

¹⁵ Any amount you spend for a non-formulary drug is not counted towards the deductible, initial coverage limit or out-of-pocket costs UNLESS the plan approves a formulary exception. If an exception is approved, the non-formulary drug will be covered at Tier 4. The drug cost displayed is only estimate and actual cost may vary. Please contact the plan for more information.

[- Pharmacy & Mail Order Information](#)

Mail Order is available.

Pharmacy Network [?]

7 network pharmacies in your ZIP code

Add Plan Website to Plan Details Page

Overview	Health Plan Benefits	Drug Costs & Coverage	Plan Ratings	
Amerivantage Classic + Rx (HMO) (H5896-008-0) Plan Type: HMO	AMERIGROUP Maryland, Inc., 7550 Teague Road, Suite 500, Hanover, MD 21076	Members: 1-866-805-4589 1-800-855-2880 (TTY/TDD) Non Members: 1-866-805-4589 1-800-855-2880 (TTY/TDD)	Health Plan Ratings: (?) Not enough data to calculate summary score Drug Plan Ratings: (?) ★★★★ 3.5 out of 5 stars	
Estimated Annual Cost: (?) \$4,500 Enroll				
+ Costs				
- Additional Information				
Health Plan Ratings (?)		Not enough data to calculate summary score		
Drug Plan Ratings (?)		★★★★ 3.5 out of 5 stars		
View plan website Plan Type: HMO				
Plan Status: Approved by Medicare				
Area: Central Maryland				
The plan offers national in-network prescription coverage. This means that you will pay the same amount for your prescription drugs if you get them at an in-network pharmacy outside of the plan's service area (for instance when you travel).				
View Drug Benefit Summary				
Provider Network:		1001-1500 physicians and providers. View provider and physician network website		
View a chart on how an independent sales agent or broker would be compensated if they were to enroll you in a plan for 2010				