

SPECIAL 4-PAGE PULL-OUT SECTION



A close look at Medicare drug coverage

Enrollment begins Wednesday for next year's Medicare drug coverage and ends Dec. 31. The program got off to a rocky start in 2006, with computer glitches, clogged telephone help lines, jammed Web sites, and billing and other mix-ups. Now about half of the 43 million older and disabled Americans in Medicare are getting help paying for their prescriptions, including about 800,000 of 1.8 million eligible Ohioans.

The program's second year has attracted almost

two dozen more drug plans to Ohio for coverage starting Jan. 1. Companies with contracts from Medicare have been approved to sell a total of 93 plans in the state. Some policies cover only drugs, while others include health insurance. This special section provides a consumer guide including the plan basics, some questions to ask before choosing a plan, a translation of the technical jargon companies use, and where to go for assistance.

Your guide to prescription drug plans in Northeast Ohio for 2007

SUSAN JAFFE | PLAIN DEALER AGING ISSUES REPORTER

Drugs only plans (if you don't want to join an HMO or PPO)

Unless noted, these plans may have prescription limits and require set pre-requisites along with the standard coverage gap. Coverage stops when a member and the plan have spent \$2,400 for drugs. It is the full price of the drug — and the member's share, or co-payment, is just a small part — that triggers the gap. Coverage resumes when the member alone has spent \$3,850. Then members pay 5 percent of each prescription or up to \$5.35, whichever is greater. Some plan features are described below. For more details, contact the companies.

Plan	Coverage area	Monthly premium	Annual deductible	Drug co-payment (see glossary)	Other features
Aetna Medicare 1-800-445-1796; www.aetnamedicare.com Members nationwide: 316,817					
Aetna Medicare Rx Essentials Plan	Statewide	\$27.50	\$200	Generics: \$5 retail, \$10 mail Preferred brand-name: \$35 retail, \$70 mail Specialty: 25% of prescription price	Mail order prices are higher if prescriptions are not purchased from Aetna's mail order pharmacy
Aetna Medicare Rx Plus Plan	Statewide	\$41.60	None	Generics: free Preferred brand-name: \$30 retail, \$60 mail Non-preferred brand-name: \$60 retail, \$120 mail Specialty: 33% of prescription price	
Aetna Medicare Rx Premier Plan	Statewide	\$69.70	None	Generics: free Preferred brand-name: \$20 retail, \$40 mail Non-preferred brand-name: \$40 retail, \$80 mail Specialty: 33% of prescription price	Generic coverage during gap Mail order prices are higher if prescriptions are not purchased from Aetna's mail order pharmacy
AmeriHealth Advantage 1-866-456-1695					
AmeriHealth Advantage Rx Option I	Approved by Medicare but the company canceled its Ohio plan for 2007				
Anthem Blue Cross and Blue Shield 1-866-803-5169; www.bmedicare.com Members nationwide: 1.6 million					
Blue Medicare Rx Value Plan	Statewide	\$23	\$250	Generic: \$5 retail, \$7.50 mail Preferred brand-name: \$27 retail, \$67.50 mail Non-preferred brand-name: \$60 retail, \$150 mail Specialty: 25% of prescription price	90-day retail available
Blue Medicare Rx Plus Plan	Statewide	\$28.20	None	Generic: \$10 retail, \$15 mail Preferred brand-name: \$30, \$75 mail Non-preferred brand-name: \$60 retail, \$150 mail Specialty: 30% of prescription price retail, 25% of prescription price mail	Generic benzodiazepines and barbiturates covered 90-day retail available
Blue Medicare Rx Premier Plan	Statewide	\$39.60	None	Generic: \$4 retail, \$10 mail Preferred brand-name: \$30 retail, \$75 mail Non-preferred brand-name: \$50 retail, \$125 mail Specialty: 30% of prescription price retail or mail	Generic coverage during gap Generic benzodiazepines and barbiturates covered 90-day retail available
CIGNA HealthCare 1-800-735-1459; www.cigna.com Members nationwide: 180,000					
CIGNATURE Rx Value	Statewide	\$29	\$265 brand-name, none for generic	Generic: free Preferred brand-name: \$20 retail, \$50 mail Non-preferred brand-name: \$60 retail, \$150 mail Specialty: 30% of prescription price retail or mail	Discounts on eyeglasses, hearing aids, herbal supplements, massages, other products
CIGNATURE Rx Plus	Statewide	\$37.90	None	Generic: \$4 retail, \$10 mail Preferred brand-name: \$30 retail, \$75 mail Non-preferred brand-name: \$50 retail, \$125 mail Specialty: 30% of prescription price retail or mail	
CIGNATURE Rx Complete	Statewide	\$49.70	None	Generic: \$4 retail, \$10 mail Preferred brand-name: \$30 retail, \$75 mail Non-preferred brand-name: \$50 retail, \$125 mail Specialty: 30% of prescription price retail or mail	
Coventry Health Care, Inc. Advantra Rx: 1-800-882-3822; www.AdvantraRx.com First Health: 1-800-588-3322; www.FirstHealthPartD.com Members nationwide: 675,000					
AdvantraRx Value	Statewide	\$23.80	None	Preferred generic: \$7 retail, \$14 mail Preferred brand-name: \$25 retail, \$50 mail Non-preferred generic brand-name: \$67 retail, \$134 mail Specialty: 25% of prescription price	No co-pay or coverage gap for Prilosec OTC or generic Claritin
AdvantraRx Premier	Statewide	\$36.20	None	Preferred generic: \$5 retail, \$10 mail Preferred brand-name: \$20 retail, \$40 mail Non-preferred generic or brand-name: \$50 retail, \$100 mail Specialty: 25% of prescription price	
AdvantraRx Premier Plus	Statewide	\$48.30	None	Preferred generic: \$1 retail, \$2 mail Preferred brand-name: \$22 retail, \$44 mail Non-preferred generic or brand-name: \$65 retail, \$130 mail Specialty: 25% of prescription price	Preferred generic and four brand-name drugs covered during gap, \$15 retail, \$30 mail Some Medicare-excluded drugs are covered No co-pay or coverage gap for Prilosec OTC or generic Claritin
First Health Part D Premier	Statewide	\$32.20	None	Preferred generic: \$5 retail Preferred brand-name: \$25 retail Non-preferred generic or brand-name: \$50 retail Specialty: 25% of prescription price	No co-pay or coverage gap for Prilosec OTC or generic Claritin
First Health Part D Select	Statewide	\$41.00	None	Preferred generic: \$5 retail Preferred brand-name: \$20 retail Non-preferred generic or brand-name: \$50 retail Specialty: 25% of prescription price	Preferred generic and three brand-name drugs covered during gap, \$22 retail No co-pay or coverage gap for Prilosec OTC or generic Claritin

MEDICARE PLANS CONTINUE ON THE FOLLOWING THREE PAGES
GET ONLINE INFORMATION AT  CLEVELAND.COM/MEDICARE

Questions to ask before you choose

SUSAN JAFFE
Plain Dealer Reporter

Millions of older and disabled Americans in Medicare sorted through a confusing collection of drug plans last year, and starting on Wednesday, they will have to do it again.

That's when enrollment opens for 2007 coverage, and it closes Dec. 31.

But before making a decision, take a close look at the choices — 93 plans are available in Ohio from 35 companies. Even if you have one now, don't assume it will be the same next year.

Seven plans in Ohio were canceled for next year, and more than two dozen were added. An additional 29 HMO plans offer drug and medical coverage in Northeast Ohio. Prices, on average, are higher.

One of the big changes for next year is that more plans cover generic and brand-name drugs in the coverage gap. Most plans will include the standard gap: Coverage stops when the plan and the member spend \$2,400 on drugs and resumes when the member alone has spent a total of \$3,850.

Fourteen drug-only plans and nine HMOs will offer some generic or brand-name drug coverage in the gap.

Nine of next year's plans have free generic drugs — no co-payments or additional charges for members.

Is that a good deal when some chain pharmacies are selling some generic prescription drugs for \$5 or less with no monthly premiums or deductibles?

Determining which plan is best for you can require some detective work. Here are some things you will need to know to choose a plan:

Q: Does the plan cover my drugs and the drugs I might need in the future?

Q: Does the plan have a participating pharmacy across the country?

Q: Can I be assured the drugs I use will not be dropped from the plan in 2007? (Plans cannot discontinue or reduce coverage for a drug you are already taking.)

Q: Are there restrictions on any of my drugs, like a quantity limit? Is prior authorization (see glossary) required? Must I try certain drugs before the one I need will be covered?

Q: Are any drugs that I expect to need in the future covered?

Q: Is there a coverage gap for any of my drugs? (See "coverage gap" in glossary) How will I know when coverage stops and resumes? Do you cover any drugs in the gap?

Q: Is the plan offered in my county?

Q: Are my local pharmacies part of the plan's network? Can I go to a pharmacy outside the network? How much more will I pay?

Q: How much does the plan cost? What are the monthly premiums? What is the full price of the drug — since that amount triggers the start of the coverage gap? How much of that price will I pay before the gap, during and after?

Q: What is the deductible? If I qualify for financial assistance, will this plan charge me for premiums or deductibles?

Q: If I have both Medicare and Medicaid and was randomly assigned to a plan, can I switch into another plan? Can I switch without paying anything extra?

Other issues to consider

Q: If I have drug coverage from my former employer, is it better than any of these plans?

Q: To get this drug plan, do I have to join an HMO or PPO, which limit my choice of doctors and hospitals?

Q: Can I stick with original Medicare and my doctors and also sign up for this drug plan?

Q: If I belong to an HMO, do I have to use its drug plan? (If you sign up for an outside drug plan, you can lose your HMO medical benefits.)

Q: Does this plan cost more than what I would pay if I used a drug discount card or joined a drug maker's patient-assistance program for free medicine if I'm eligible?

Q: Is it cheaper than buying my drugs from a Canadian pharmacy or Web site? Is it cheaper than getting drugs from the VA if I'm eligible? Is it cheaper than the \$4 or \$5 prescriptions available at Kmart, Wal-Mart, Costco or a local discount pharmacy?

Q: Can I get help to pay for a drug plan? (People with low incomes and limited assets may qualify for financial assistance, including a waiver of monthly premiums and other costs. Contact the Greater Cleveland Access to Benefits Coalition at 866-885-1650.)

Q: If I don't sign up for a plan for 2007, will I pay more in monthly premiums if I join later?

(You will pay a penalty — forever — if you wait to sign up, and choose a plan that is better than your previous coverage. The penalty is an extra 1 percent of the average monthly premium in your area for each month you were in Medicare but delayed signing up. If you were eligible in May 2006 but didn't sign up then, you will pay an extra 7 percent in 2007 — representing the seven months in 2006 when you were not enrolled. If you don't sign up for 2007, you will pay an extra 19 in 2008, and so on.)

To reach this Plain Dealer reporter:
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Drugs only plans (if you don't want to join an HMO or PPO)

Plan	Coverage area	Monthly premium	Annual deductible	Drug co-payment (see glossary)	Other features
Elder Health Insurance Co., Inc. 1-877-504-7252; www.elderhealth.com Members nationwide: 26,100					
Bravo Rx I	Statewide	\$33.20	None	Generic: \$5 retail, \$10 mail Preferred brand-name: \$30 retail, \$60 mail Non-preferred brand-name: \$60 retail, \$120 mail Specialty: 25% of prescription price	
Bravo Rx II	Statewide	\$24.30	\$265	Generic: 25% of prescription price retail and mail Brand-name: 25% of prescription price retail and mail Specialty: 25% of prescription price retail and mail	
EnvisionRx Plus 1-866-250-2005; www.envisionrxplus.com Members nationwide: new plan					
EnvisionRx Plus Standard	Statewide	\$41.50	\$265	Generic: 25% of prescription price retail, 25% of prescription price mail Preferred brand-name: 25% of prescription price retail or mail Non-preferred brand-name: 25% of prescription price retail or mail Specialty: 25% of prescription price retail	
EnvisionRx Plus Gold	Statewide	\$60	None	Generic: \$8 retail, free mail Preferred brand-name: \$25 retail, \$60 mail Non-preferred brand-name: \$40 retail, \$105 mail Certain specialty: 25% of prescription price retail	Generic coverage during gap from Costco pharmacies 90-day retail available: Generic: \$24; preferred brand-name: \$75; non-preferred brand-name: \$120 Special prices at Costco pharmacies: Generic: free; preferred brand-name: \$20 retail, \$60 mail; non-preferred brand-name: \$35 retail, \$105 mail; certain specialty: 25% of prescription price retail
Express Scripts Insurance Co. 1-800-605-9208; www.samascript.com Members nationwide: new plan					
SAMAscript	Statewide	\$47.20	\$265	Generic and brand-name: 25% of prescription price	
Health Net 1-800-903-0944; www.healthnet.com Members nationwide: 291,000					
Health Net Orange Option 1	Statewide	\$24.30	\$265	Preferred generic: \$0 retail, \$0 mail Preferred brand-name: \$32 retail, \$64 mail Specialty: 25% of prescription cost	
Health Net Orange Option 2	Statewide	\$29	None	Preferred generic: \$5 retail, \$10 mail Preferred brand-name: \$28 retail, \$56 mail Non-preferred brand-name and some generic: \$56 retail, \$140 mail Specialty: 33% of prescription cost	
Health Net Orange Option 3	Statewide	\$44.10	None	Preferred generic: \$7 retail, \$14 mail Preferred brand-name: \$28 retail, \$56 mail Non-preferred brand-name and some generic: \$56 retail, \$140 mail Specialty: 33% of prescription price	Generic coverage during gap
◆ Humana 1-800-372-2147; www.humana-medicare.com Members nationwide: 3.5 million					
Humana PDP Standard	Statewide	\$16	\$265	25% of prescription price	Free wellness program including exercise and cooking classes, health screenings, and other activities Discount on computer program to improve memory and mental agility
Humana PDP Enhanced	Statewide	\$25.20	None	Preferred generic: \$5 retail, \$12.50 mail Preferred brand-name: \$30 retail, \$75 mail Non-preferred brand-name: \$60 retail, \$150 mail Specialty: 25% of prescription price retail or mail	Preferred generic and some brand-name drug coverage in the gap Free wellness program including exercise and cooking classes, health screenings, and other activities Discount on computer program to improve memory and mental agility
Humana PDP Complete	Statewide	\$85	None		
Medco Health Solutions, Inc. 1-800-758-3605; www.yourxplan.com Members nationwide: 430,000					
Medco YOURx PLAN	Statewide	\$36.80	\$100 for brand-name drugs only	Generic: \$5 retail, \$5 mail Preferred brand-name: \$34 retail, \$85 mail Non-preferred brand-name: 75% of prescription price retail and mail Specialty: 30% of prescription price retail and mail	
Medical Mutual of Ohio 1-800-613-2583; www.medmutual.com Members nationwide: new plan					
Advantage Plan Standard Drug	Statewide	\$37	None	Generic: \$5 retail, \$10 mail Formulary preferred brand-name: \$33 retail, \$80 mail Non-preferred brand-name: 75% of prescription price retail and mail Specialty: 33% of prescription price retail and mail	
Advantage Plan Premium Drug	Statewide	\$50.50	None		Generic coverage during gap
MemberHealth 1-866-684-5353; www.communitycarerx.com Members nationwide: 1 million					
Community Care Rx Basic	Statewide	\$27	\$265 for brand-name drugs only	Generic: free Preferred brand-name: 25% of prescription price retail, 20% of prescription price mail Non-preferred brand-name: 50% of prescription price retail, 40% of prescription price mail	90-day retail available: Generic: free; preferred brand-name: 20% of prescription price; non-preferred brand-name: 40% of prescription price
Community Care Rx Choice	Statewide	\$34.90	None	Generic: free Preferred brand-name: \$20 retail Non-preferred brand-name: \$45 retail Specialty: 25% of prescription price retail	Gap begins at \$2,000 and ends at \$3,850 90-day retail available: Generic: free; preferred brand-name: \$50 retail; non-preferred brand-name: \$112.50 retail; specialty: 25% of prescription price
Community Care Rx Gold	Statewide	\$41.20	None	Generic: \$5 retail Preferred brand-name: \$25 retail Non-preferred brand-name: \$50 retail Specialty: 25% of prescription price retail	Generic coverage during gap 90-day retail available: Generic: \$12.50 retail; preferred brand-name: \$62.50 retail; non-preferred brand-name: \$125 retail; specialty: 25% of prescription price
*NMHC Group Solutions Insurance, Inc. 1-866-443-1095; www.nmhcrx.com Members nationwide: new plan					
NMHC Medicare PDP Gold	Ohio	\$32.33	None	Generic: \$11 retail or mail Preferred brand-name: 33% of prescription price retail, \$85 mail Non-preferred brand-name: 55% of prescription price retail, \$157 mail Specialty: 33% of prescription price mail	90-day supplies available at some pharmacies
Prescription Pathway 1-800-978-9500; www.rxpathway.com Members nationwide: 440,000					
◆ Prescription Pathway Bronze Plan	Statewide	\$25	\$265	Generic, brand-name and specialty: 25% of prescription price retail or mail	
Prescription Pathway Gold Plan	Statewide	\$23	None	Generic: \$7 retail, \$14 mail Preferred brand-name: \$37 retail, \$74 mail Specialty: 33% of prescription price	
Prescription Pathway Platinum Plan	Statewide	\$43.50	None	Generic: \$7 retail, \$14 mail Preferred brand-name: \$31 retail, \$62 mail Non-preferred brand-name: \$60 retail, \$120 mail Specialty: 33% of prescription price	Generic coverage during gap
RxAmerica 1-800-429-6686; www.Meds4Medicare.com Members nationwide: 205,000					
Advantage Star Plan	Statewide	\$29.30	\$265	Generic: \$5 retail, \$10 mail Brand-name: 25% of prescription price retail or mail Specialty: 25% of prescription price retail or mail	No co-pay or coverage gap for Prilosec OTC or Loratadine OTC
Advantage Freedom Plan	Statewide	\$34	\$265	Generic: \$5 retail, \$10 mail Preferred brand-name: \$20 retail, \$50 mail Non-preferred brand-name: \$40 retail, \$100 mail Specialty: 25% of prescription price retail or mail	No co-pay or coverage gap for Prilosec OTC or Loratadine OTC Any Medicare-covered drug that is not listed as a generic or preferred brand-name will be covered as a non-preferred brand-name
Sierra Health & Life Insurance Co., Inc. 1-866-789-0560; www.sierrarx.com Members nationwide: 182,351					
Sierra Rx Basic	Statewide	\$29.70	\$265	Preferred generic, preferred brand-name and specialty: 25% of prescription price	No coverage for non-preferred drugs
Sierra Rx Plus	Statewide	\$95.90	None	Preferred generic: \$5 retail, \$15 mail Non-preferred generic: \$60 retail, no mail Preferred brand-name: \$30 retail, \$90 mail Specialty: 30% of prescription price retail or mail	Preferred and non-preferred generic and brand-name drugs covered during gap
SilverScript Insurance Co. 1-866- 552-6106; www.silverscript.com Members nationwide: 450,000					
SilverScript	Statewide	\$29.30	\$265	Generic: \$5 retail, \$10 mail Brand-name: \$39 retail, \$78 mail Specialty: 25% of prescription price retail or mail	Discounts on vision and dental care and hearing aids
SilverScript Plus	Statewide	\$39.60	None	Generic: \$10 retail, \$18 mail Brand-name: \$25 retail, \$60 mail Non-preferred brand-name: \$70 retail, \$192 mail Specialty: 33% of prescription price retail	
SilverScript Complete	Statewide	\$46.20	None	Generic: \$5 retail, \$10 mail Brand-name: \$40 retail, \$87 mail Specialty: 33% of prescription price retail	Generic coverage during gap Discounts on vision and dental care and hearing aids
Sterling Life Insurance Co. 1-888-909-1713; www.Sterlingplans.com Members nationwide: 32,565					
Sterling Rx	Statewide	\$30.30	\$100	Generic: \$10 retail, \$20 mail Preferred brand-name: \$31 retail, \$62 mail Non-preferred brand-name: \$46 retail, \$92 mail Specialty: 25% of prescription price retail or mail	
Sterling Rx Plus	Statewide	\$59.00	\$100 for brand-name only	Generic: free Preferred brand-name: \$25 retail, \$50 mail Non-preferred brand-name: 25% of prescription price retail or mail Specialty: 25% of prescription price retail or mail	Free generic drug coverage during gap

◆ = These plans will not charge members extra if they qualify for full financial assistance, which is available to seniors with limited income and assets. Also, people who receive both Medicare and Medicaid will be automatically enrolled in one of these plans and are restricted to them if they want to switch.

* = Toll free number not active until Nov. 15

Drugs only plans (if you don't want to join an HMO or PPO)

Plan	Coverage area	Monthly premium	Annual deductible	Drug co-payment (see glossary)	Other features
Unicare Life & Health Insurance Co. 888-949-5384; www.medicarerxrewards.com Members nationwide: 1.2 million					
◆ MedicareRx Rewards Value	Statewide	\$23.10	\$265	Formulary generic: \$5 retail, \$7.50 preferred mail, \$15 non-preferred mail Formulary preferred brand-name: \$29 retail, \$72.50 preferred mail, \$87 non-preferred mail Specialty and non-specialty: 25% of prescription price retail or mail	
MedicareRx Rewards Premier	Statewide	\$43.50	None	Formulary generic: \$10 retail, \$15 mail preferred mail, \$30 non-preferred mail Formulary preferred brand-name: \$30 retail, \$75 preferred mail, \$90 non-preferred mail Formulary non-preferred brand-name: \$60 retail, \$150 preferred mail, \$180 non-preferred mail Specialty and non-specialty: 30% of prescription price retail, 25% of prescription price mail	Formulary generic coverage during gap Retail prices available only at in-network pharmacies Some generic benzodiazepines and generic barbiturates covered
United American Insurance Co. UA Medicare Part D: 1-866-524-4169; www.uamedicarepartd.com Members nationwide: 200,000 UA Medicare Part D Silver: 1-866-299-3406; www.uapartdsilver.com Members nationwide: new plan					
UA Medicare Part D Prescription Drug Coverage	Statewide	\$42.30	None	Generic: \$9 retail, \$18 mail Formulary preferred brand-name: \$30 retail, \$60 mail Formulary non-preferred brand-name: \$30 retail, \$120 mail Specialty: 33% of prescription price	Retail co-pay is for a 34-day supply
UA Medicare Part D SILVER Prescription Drug Coverage	Statewide	\$32.80	\$265	25% of prescription price	
United HealthCare Insurance Co. AARPMedicareRx: 1-888-867-5564; www.AARPMedicareRx.com Members nationwide: 3.2 million UnitedHealthRx: 1-888-867-5561; www.UnitedHealthRx.com Members nationwide: 1.3 million					
AARP MedicareRx Plan	Statewide	\$29.70	None	Generic: \$6 retail, \$6 preferred mail, \$18 non-preferred mail Preferred brand-name: \$28 retail, \$69 preferred mail, \$84 non-preferred mail	
AARP MedicareRx Plan Enhanced	Statewide	\$48.60	None	Non-preferred brand-name: \$62.20 retail, \$171.60 preferred mail, \$186.60 non-preferred mail Specialty: 33% of prescription price	Generic coverage during gap Some Medicare-excluded drugs are covered, including benzodiazepines and prescription-strength vitamins
◆ AARP MedicareRx Plan Saver	Statewide	\$20.10	None	Generic: \$5 retail, \$5 preferred mail, \$15 non-preferred mail Preferred brand-name: \$20 retail, \$45 preferred mail, \$60 non-preferred mail Non-preferred brand-name: \$46.15 retail, \$123.45 preferred mail, \$138.45 non-preferred mail Specialty: 33% of prescription price	
UnitedHealthRx Basic	Statewide	\$31.40	None	Generic: \$7 retail, \$7 preferred mail, \$21 non-preferred mail Preferred brand-name: \$20 retail, \$45 preferred mail, \$60 non-preferred mail Non-preferred brand-name: \$46.15 retail, \$123.45 preferred mail, \$138.45 non-preferred mail Specialty: 33% of prescription price	
UnitedHealthRx Extended	Statewide	\$43.90	None	Generic: \$5 retail, \$5 preferred mail, \$15 non-preferred mail Preferred brand-name: \$25 retail, \$60 preferred mail, \$75 non-preferred mail Non-preferred brand-name: \$50 retail, \$135 preferred or non-preferred mail, \$138.45 non-preferred mail Specialty: 33% of prescription price	Some Medicare-excluded drugs are covered, including benzodiazepines and prescription-strength vitamins
UPMC Health Plan 1-877-381-3765; www.upmchealthplan.com Members nationwide: 85					
UPMC for Life Prescription Drug Plan	Statewide	\$30.50	None	Generic: \$5 retail, \$15 mail Preferred brand-name: \$32 retail, \$96 mail Non-preferred brand-name: \$64 retail, \$192 mail Specialty: 25% of prescription price	Free Prilosec OTC and Loratadine OTC Any Medicare-covered drug that is not covered as a generic or preferred-brand-name will be covered as a non-preferred-brand-name Retail co-pay is for a 31-day supply
WellCare Health Plans, Inc. 1-888-547-5252; www.wellcarepdp.com Members nationwide: 900,000					
◆ Signature	Statewide	\$28.20	None	Generic: free Preferred brand-name: \$57 retail; \$171 mail Non-preferred brand-name: \$80 retail; \$240 mail Specialty: 33% of prescription price retail or mail	
◆ Classic	Statewide	\$20.70	\$265	Generic: \$2 retail; \$6 mail Preferred brand-name: 33% of prescription price retail or mail Non-preferred brand-name: 33% of prescription price retail or mail Specialty: 25% of prescription price retail or mail	
Complete	Statewide	\$53.40	None	Generic: free Preferred brand-name: \$20 retail; \$60 mail Non-preferred brand-name: \$70 retail; \$210 mail Specialty: 30% of prescription price retail or mail	Generic coverage during gap, \$10 retail or \$30 mail

Note: HealthSpring offers statewide coverage, but did not provide requested information and is not included on this list.

HMO or PPO plans (if you want medical and drug benefits)

Plan	Coverage area	Monthly premium	Annual deductible	Drug co-payment (see glossary)	Other features
**Aetna Medicare 1-800-445-1796; www.aetnamedicare.com Membership nationwide: 101,771					
Aetna Medicare Golden Medicare Value	Cuyahoga, Summit and other selected counties	None	None	Generic: \$11 retail, \$22 preferred mail, \$33 non-preferred mail Brand-name: \$40 retail, \$80 preferred mail, \$120 non-preferred mail Specialty: 33% of prescription price retail, preferred or non-preferred mail	Discounts on vision care, eyewear, vitamins, herbal and nutritional supplements. Retail co-pay is for a 31-day supply Mail order prices are higher if prescriptions are not purchased from Aetna's mail-order pharmacy
Aetna Medicare Golden Standard		\$43	None	Generic: free retail, preferred or non-preferred mail Preferred brand-name: \$25 retail, \$50 preferred mail, \$75 non-preferred mail Non-preferred brand-name: \$55 retail, \$110 preferred mail, \$165 non-preferred mail Specialty: 33% of prescription price retail, preferred or non-preferred mail	Generic coverage during gap Discounts on vision care, eyewear, vitamins, herbal and nutritional supplements. Retail co-pay is for a 31-day supply Mail order prices are higher if prescriptions are not purchased from Aetna's mail-order pharmacy
Aetna Medicare Golden Premier		\$78	None		
Anthem Blue Cross and Blue Shield 1-888-811-2095; www.anthem.com Members nationwide: 211,000					
Anthem Senior Advantage Basic	Cuyahoga, Geauga, Lake, Lorain, Medina, Portage, Summit, and other selected counties	None	None	Generic: \$8 retail, \$12 mail Preferred brand-name: \$30 retail, \$75 mail Non-preferred brand-name: \$60 retail, \$150 mail Specialty and non-specialty: 30% of prescription price retail, 25% of prescription price mail	Generic coverage during gap Generic benzodiazepines and barbiturates covered Free fitness club membership 90-day retail available
Anthem Senior Advantage Enhanced		None	None		
Anthem Medicare Preferred Standard		\$15	None		Generic coverage during gap Generic benzodiazepines and barbiturates covered Free fitness club membership Out-of-network medical deductible: \$250
Anthem Medicare Preferred Premier		\$30	None	Generic: \$7 retail, \$10.50 mail Preferred brand-name: \$27 retail, \$67.50 mail Non-preferred brand-name: \$60 retail, \$150 mail Specialty and non-specialty: 30% of prescription price retail, 25% of prescription price mail	Generic coverage during gap Generic benzodiazepines and barbiturates covered Free fitness club membership Out-of-network medical deductible: \$250
Blue Medicare Access Standard	Statewide	\$15		Generic: \$8 retail, \$12 mail Preferred brand-name: \$30 retail, \$75 mail Non-preferred brand-name: \$60 retail, \$150 mail Specialty and non-specialty: 30% of prescription price retail, 25% of prescription price mail	Generic benzodiazepines and barbiturates covered Free fitness club membership Out-of-network physician co-pay available
Blue Medicare Access Premier	Statewide	\$41		Generic: \$7 retail, \$10.50 mail Preferred brand-name: \$27 retail, \$67.50 mail Non-preferred brand-name: \$60 retail, \$150 mail Specialty and non-specialty: 30% retail, 25% mail	Generic coverage during gap Generic benzodiazepines and barbiturates covered. Free fitness club membership Out-of-network medical deductible: \$250
Humana 1-800-372-2147; www.humana-medicare.com Members nationwide: 1 million					
Humana Gold Choice PFFS (H1804)	Cuyahoga, Geauga, Lake, Lorain, Medina, Portage, Summit and selected counties	\$69	None	Preferred generic: \$4 retail, \$10 mail Preferred brand-name: \$30 retail, \$75 mail Non-preferred brand-name: \$60 retail, \$150 mail Specialty: 25% of prescription price	Free fitness center membership Discount on vision care, on non-prescription drugs including cough, cold and allergy medicine Brain fitness computer program to improve memory and mental agility
Humana Gold Choice PFFS (H1804)		\$89	None	Preferred generic: \$4 retail, \$10 mail Preferred brand-name: \$30 retail, \$75 mail Non-preferred brand-name: \$60 retail, \$150 mail Specialty: 25% of prescription price	
HumanaChoice PPO (R5826)	Statewide	\$70	\$500 Out of network only	Preferred generic and some brand-name: \$5 retail, \$12.50 mail Preferred brand-name: \$35 retail, \$82.50 mail Non-preferred brand-name: \$65 retail, \$162.50 mail Specialty: 25% of prescription price	Free fitness center membership Discount on vision and dental care, non-prescription drugs including cough, cold and allergy medicine Nutritional supplements, alternative medicine covered Brain fitness computer program to improve memory and mental agility Prescriptions cost more at non-network pharmacies
HumanaChoice PPO (H3619)	Cuyahoga, Lake, Lorain, Medina, Portage, Summit	\$59	None	Network pharmacies: Preferred generic: \$5 retail, \$12.50 mail Preferred brand-name: \$35 retail, \$82.50 mail Non-preferred brand-name: \$70 retail, \$165 mail Specialty: 25% of prescription price	Free fitness center membership Discount on vision and dental care, non-prescription drugs including cough, cold and allergy medicine Nutritional supplements, alternative medicine covered Brain fitness computer program to improve memory and mental agility Prescriptions cost more at non-network pharmacies

◆ = These plans will not charge members extra if they qualify for full financial assistance, which is available to seniors with limited income and assets. Also, people who receive both Medicare and Medicaid will be automatically enrolled in one of these plans and are restricted to them if they want to switch.

** = Two other plans available outside Northeast Ohio

Glossary of drug plan terms

Some definitions of terms used in Medicare drug plans:

Brand-name: A drug that is sold by a particular manufacturer and typically costs more than a generic drug.

Co-payment: What you pay for each prescription. Prices listed in the chart are the co-payments for a month's supply at retail pharmacies and may cost more at non-approved pharmacies. Most plans offer a mail-order option for a 90-day supply at a lower rate.

Coverage gap: Medicare's basic drug benefit has a gap in coverage. You may pay a deductible of up to \$265 in drug costs. Then you pay a portion of the full drug price of each prescription, either as a co-payment or a percentage. When you and the plan have spent \$2,400, calculated with the full price of drugs, coverage stops. During the gap, you pay that full price for each prescription. Coverage resumes when you have spent \$3,850 on drugs — including any deductible but excluding monthly premiums. Then you pay 5 percent of each prescription or up to \$5.35, whichever is greater. Some plans may shrink the gap, reduce the deductible, or, under some conditions, increase the gap.

Deductible: Amount you pay for prescriptions before the plan coverage begins.

Formulary: The list of drugs a plan covers, with some rare exceptions. The co-payments in the chart are for formulary drugs.

Generic: A drug that has ingredients similar to a brand-name medication but that typically costs less.

HMO: A health maintenance organization generally restricts members to certain doctors, hospitals and other providers in the plan's provider network. Members may pay extra for services that Medicare doesn't cover.

Nonpreferred: Typically more-expensive brand-name drugs on the formulary list.

Preferred: Drugs on the formulary list that the plans prefer members use. They usually cost less.

PPO: A preferred provider organization charges members less if they use certain doctors and other health-care providers in the plan's network. Members can go to providers outside the network but are charged more if they do.

Prior authorization: The Medicare drug plan must give you or your doctor approval for certain drugs before the plan will pay for them.

Specialty: Expensive, often injectable drugs, used for cancer treatment and other diseases.

Private fee-for-service: A health plan that pays providers fees for specific services, instead of the set reimbursement from Medicare. The plan also determines how much each member pays.

— Susan Jaffe

Where to go for help

Greater Cleveland Access to Benefits Coalition:
1-866-885-1650 (to apply for financial assistance with drug plan costs for seniors with limited income and assets)

Medicare:
1-800-633-4227 or
www.medicare.gov

Medicare Rights Center drug plan appeals hot line:
1-888-466-9050

Ohio Senior Health Insurance Information Program:
1-800-686-1578

Social Security Administration (to also apply for the financial assistance):
1-800-772-1213 or
www.socialsecurity.gov

About this section

The Medicare consumer guide was written and compiled by Susan Jaffe,



Susan Jaffe

The Plain Dealer's aging-issues reporter, who contacted each insurance company to verify plan information. Metro News secretaries Cheryl McDaniel and Gayle Powell assisted, and Medical and Washington Editor Robert J. McAuley edited the project. Andrea Levy produced the cover illustration. Jaffe's "Aging Matters" column runs every other Saturday and offers news and consumer tips. It is also available at cleveland.com/news/plaindealer/seniors/

HMO or PPO plans (if you want medical and drug benefits)

Plan	Coverage area	Monthly premium	Annual deductible	Drug co-payment (see glossary)	Other features
Kaiser Permanente 1-800-551-5353; www.kaiserpermanente.org Membership nationwide: 835,000					
Medicare Plus I	Cuyahoga, Geauga, Lake, Lorain, Medina, Portage, Summit	\$129.90	None	Generic: \$9 retail, \$18 mail Brand-name: \$35 retail, \$70 mail	Generic coverage during gap
◆ Medicare Plus II		\$59.90	None		
Medicare Plus III		\$19.90	None		
Medical Mutual of Ohio 1-800-613-2583; www.medmutual.com Members nationwide: new plan					
Advantage Plan Standard	Cuyahoga, Geauga, Lake, Lorain, Medina, Portage, Summit and other selected counties	\$25.00	None	Generic: \$5 retail, \$10 mail Preferred brand-name: \$33 retail, \$80 mail Non-preferred brand-name: 75% of prescription price retail and mail Specialty: 33% of prescription price	
Advantage Plan Value		\$55.00	None	Generic: \$5 retail; \$10 mail	Generic coverage during gap
Advantage Plan Premium		\$80.00	None	Preferred brand-name: \$33 retail; \$80 mail Non-preferred brand-name: 75% of prescription price retail or mail Specialty: 33% of prescription price retail	
Pyramid Life Insurance Co. 1-800-486-7613; www.todaysoptions.com Members nationwide: new plan					
Today's Options Premier Plus	Statewide	Varies by county \$80 in Cuyahoga, Geauga, Lake, Medina, Portage, Summit, and \$117 in Lorain	None	Generic: \$7 retail, \$14 mail Preferred formulary brand-name: \$31 retail, \$62 mail Non-preferred formulary brand-name: \$61 retail, \$122 mail Specialty: 30% of prescription cost retail or mail	Generic coverage during gap Generic benzodiazepines, generic barbiturates and generic Prilosec are covered for generic co-pay
Today's Options Value Plus	Statewide	Varies by county \$44 in Cuyahoga, Geauga, Lake, Medina, Portage, Summit and \$80 in Lorain	None	Generic: \$7 retail; \$14 mail Preferred formulary brand-name: \$31 retail; \$62 mail Non-preferred formulary brand-name: \$61 retail; \$122 mail Specialty: 30% of prescription cost retail or mail	
SummaCare 1-888-464-8440; www.summacare.com Members statewide: 10,000					
◆ SummaCare Secure Silver Plus	Cuyahoga, Medina, Portage, Summit and other selected counties	None	None	Generic: \$3 retail, \$7.50 mail Formulary brand-name: \$30 retail, \$75 mail Non-formulary brand-name: \$60 retail, \$180 mail Specialty: 25% of prescription price	Generic coverage during gap Free Prilosec OTC and Claritin OTC
◆ SummaCare Secure Gold Plus		\$65	None		Generic coverage during gap For other drugs, gap begins when plan and member have spent \$3,200 and ends when member alone has spend \$3,850 Free Prilosec OTC and Claritin OTC
**United Healthcare 1-866-477-3966; www.securehorizons.com Members nationwide: 1.2 million					
Evercare 1-866-323-7568; www.evercarehealthplans.com					
◆ SecureHorizons Medicare Complete Plan 1	Cuyahoga and other selected counties	None	None	Generic: \$4 retail, \$8 mail Preferred brand-name: \$28 retail, \$74 mail Non-preferred brand-name: \$58 retail, \$164 mail Specialty: 33% of prescription price	90-day retail supply available
◆ SecureHorizons Medicare Complete Plan 2	Cuyahoga, Summit and other selected counties	None	None		
◆ SecureHorizons Medicare Complete Plus Plan 1	Summit and selected counties	None	None		
◆ Evercare Plan IH	Lake, Lorain and selected counties	\$26 for drugs only	None	Generic: \$5 retail, \$10 mail Preferred brand-name: \$28 retail, \$74 mail Non-preferred brand-name: \$65 retail, \$185 mail Specialty: 33% of prescription price	90-day retail supply available Limited to nursing home residents
◆ Evercare Plan DH	Cuyahoga, Summit and other selected counties	\$25.90 for drugs only	None	Generic: \$5 retail, \$10 mail Preferred brand-name: \$35 retail, \$95 mail Non-preferred brand-name: \$65, \$185 mail Specialty: 33% of prescription price	90-day retail supply available \$75 discount on eyeglasses every two years
◆ Evercare Plan IP		\$28.50 for drugs only	None	Generic: \$5 retail, \$10 mail Preferred brand-name: \$28 retail, \$74 mail Non-preferred brand-name: \$65 retail, \$185 mail Specialty: Brand co-pay - 33% of prescription price	
WellCare Health Plans, Inc. 1-866-238-9898; www.wellcarepffs.com Membership nationwide: new plan					
Concert	Cuyahoga, Lake, Summit and other selected counties	\$81 (Cuyahoga, Lake, Summit)	None	Generic: free Preferred brand-name: \$28 retail Non-preferred brand-name: \$58 retail Specialty: 33% of prescription price	
Summit	Cuyahoga and other selected counties	\$211	None		

◆ = These plans will not charge members extra if they qualify for full financial assistance, which is available to seniors with limited income and assets. Also, people who receive both Medicare and Medicaid will be automatically enrolled in one of these plans and are restricted to them if they want to switch.

** = Other plans available outside Northeast Ohio

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- **\$0 Primary Care Physician Copay.**
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Why Choose Any Other Plan?



Source: U.S. News & World Report, November 6, 2006.

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* SummaCare is a health plan with a Medicare contract. Prescription drug coverage subject to limitations. You must continue to pay your Medicare Part B Premium. You will pay more out-of-pocket if you use non-plan providers. Non-plan providers must accept Medicare.

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