

Medicare Plan Finder Training Entering Information (9/6/12)

1. Go to the Medicare website, www.medicare.gov.
 - Click on “Compare Drug & Health Plans”



The screenshot shows the Medicare.gov homepage. At the top, there are links for "Español", "A A A", "Email", and "Print". On the right, there are links for "About Us", "FAQ", "Glossary", "CMS.gov", and "MyMedicare.gov Login". A search bar is located in the top right corner with the placeholder text "type search term here" and a "Search" button. Below the search bar is a link that says "Learn about your health care options". A navigation menu contains several buttons: "Sign Up / Change Plans", "Your Medicare Costs", "What Medicare Covers", "Drug Coverage (Part D)", "Supplements & Other Insurance", "Claims & Appeals", "Manage Your Health", and "Help & Resources". The main content area features a large heading "Is your test, item, or service covered?" with a search input field below it containing the placeholder "type your test, item, or service here" and a "Go" button. Below this are two yellow buttons: "Find health & drug plans" and "Apply for Medicare". A "MyMedicare.gov login" button is also visible. A yellow banner at the bottom of the main content area reads "Announcing the new Medicare.gov: making Medicare information clearer & simpler" with a "Learn more" link. At the very bottom, there are three sections: "Lost / incorrect Medicare card?" with a dropdown menu for "Select your card issue..." and a "Go" button; "Information for people like me" with a dropdown menu for "Select your situation..." and a "Go" button; and "Find someone to talk to" with a dropdown menu for "Select your state..." and a "Go" button.

PICK TYPE OF SEARCH

2. You can do a Personalized Search or a General Search. You will need the Medicare card information and the individual's birthday to use the Personalized Search. The personalized comparison will tell you the individual's present drug plan and also if s/he receives extra financial assistance.

The General Search is used when you do not have the necessary information to do a personalized search.

TIP: Sometimes you will enter the information for the Personalized Search and the Plan Finder Tool will not accept your search. Re-enter the information. If it doesn't work the second time, go to the General Search.

OPTION I: BEGIN PERSONALIZED SEARCH

We will go through a Personalized Search first.

3. This is the first screen for a personal search.

provide you with more accurate cost estimates and coverage information. To begin your plan search, please choose from one of these options below.

General Search

A general plan search only requires your zip code.

ZIP Code:

[Find Plans](#)

By clicking on this button you are agreeing to the terms and conditions of the [User Agreement](#)

or

Personalized Search

A personalized plan search requires your zip code and complete Medicare information. This page is secured to protect your personal information. If you don't want to enter your Medicare information, you may use the general search option above.

ZIP Code:

Medicare Number:
Example: 123456789A

Where can I find this?

Last Name:

Effective Date for Part A: Month Year
Not Part A? [Click here.](#)

Date of Birth: Month Day Year

[Find Plans](#)

Resources

- ◆ [How to Use the Medicare Plan Finder](#)
- ◆ [Find and Compare Medigap Policies](#)
- ◆ [Search by Plan Name or ID](#)
- ◆ [Enroll Now](#)
- ◆ [Find formularies in your area](#)
- ◆ [Medicare Complaint Form](#)
- ◆ [Extra Help Paying for Medicare Prescription Drug Coverage](#)
- ◆ [Helpful Contacts](#)
- ◆ [Five Ways to Lower Your Costs During the Coverage Gap](#)
- ◆ [Find out about your Medicare Choices](#)
- ◆ [Download the Medicare Health Plan Compare and Medigap Compare Databases](#)

- The zip code should be filled in with the zip code on record with Medicare. You will run into this when they live part of the year in Iowa and part of the year in another state.
- Enter the individual's Medicare number from the Medicare card. Do not leave any spaces between numbers or letters. If the individual is a Railroad Retiree, the number will begin with a letter, rather than having the letter at the end of the number

Last Name:
Effective Date for Part A:
Not Part A? [Click here.](#)
Date of Birth:
 JR
 SR
 I
 II
 III
 IV
 V
 VI
 VII

- Enter the individual's last name as found on the Medicare card. Use the drop down box to indicate any suffix which appears with the individual's last name on the Medicare card
- Fill in the effective date for Medicare Part A, found on the Medicare card. If the individual does not have Part A, click on Not Part A? and the screen will change to give you the option to enter the Part B effective date instead.

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

- Enter the individual's birth date.

Date of Birth:

- Click Find Plans at the bottom of the box

4. The next screen explains the individual's current coverage and their level of subsidy, if any, in the "My Current Profile" section.

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: 50131
Current Coverage: Community CCRx Basic (PDP)
(S5803-094-0)
Current Subsidy: Full Dual
Future Subsidy: Full Dual

Name of 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?](#)
Oct 11 2010

OPTION 2: BEGIN GENERAL SEARCH

As mentioned previously, if you do not have the information necessary to do a Personalized Search, or you cannot get the Personalized Search to work, go ahead with a General Search.

5. You will start with the same screen to do a General Search as you used for the Personalize Search.

The screenshot shows the Medicare Plan Finder interface. At the top, the title "Medicare Plan Finder" is displayed. Below the title, a paragraph explains that users can choose between a general or personalized search. The "General Search" section is highlighted with a green border and contains a text input field for the ZIP code, which is filled with "50319". Below the input field is a "Find Plans" button with a right-pointing arrow. A note below the button states: "By clicking on this button you are agreeing to the terms and conditions of the [User Agreement](#)". Below the "General Search" section is the word "or" in orange. The "Personalized Search" section is partially visible below, with a green border and text indicating it requires more information. On the right side of the page, there are two blue-bordered boxes: "Additional Tools" and "Resources". The "Additional Tools" box lists: "How to Use the Medicare Plan Finder", "Find and Compare Medigap Policies", "Search by Plan Name or ID", "Enroll Now", "Find formularies in your area", and "Medicare Complaint Form". The "Resources" box lists: "Extra Help Paying for Medicare Prescription Drug Coverage", "Helpful Contacts", and "Five Ways to Lower Your Costs During the Coverage Gap".

- Enter the zip code.
- Click Find Plans at the bottom of the box.

6. The next screen, “Step 1 of 4: Enter Information”, asks for general information because you did not enter personalized individual information. The answer to the first question will not affect the comparison so you can check “I don’t know.”

You can also answer “I don’t know,” for the second question unless the individual is eligible for Part D extra help. Instructions for a person receiving extra help are found at the end of this tutorial.

Click on the [Continue to Plan Results](#) button.

Step 1 of 4: Enter Information

All fields on the page are required unless noted as Optional.

How do you get your Medicare coverage?

- Original Medicare [?]
- Medicare Health Plan (such as an HMO, PPO, or Private-Fee-for-Service plan) [?]
- I don't have any Medicare coverage yet
- I don't know what coverage I have

Do you get help from Medicare or your state to pay your Medicare prescription drug costs?

- I get help from Medicaid [?]
- I get Supplemental Security Income [?]
- I belong to a Medicare Savings Program (MSP) [?]
- I applied for and got Extra Help through Social Security
- I don't get any Extra Help [?]
- I don't know

[Go Back](#) [Continue to Plan Results](#)

Additional Tools

- ◆ Find and Compare Medigap Policies
- ◆ Search by Plan Name or ID
- ◆ Enroll Now
- ◆ Check Your Enrollment
- ◆ Medicare Complaint Form

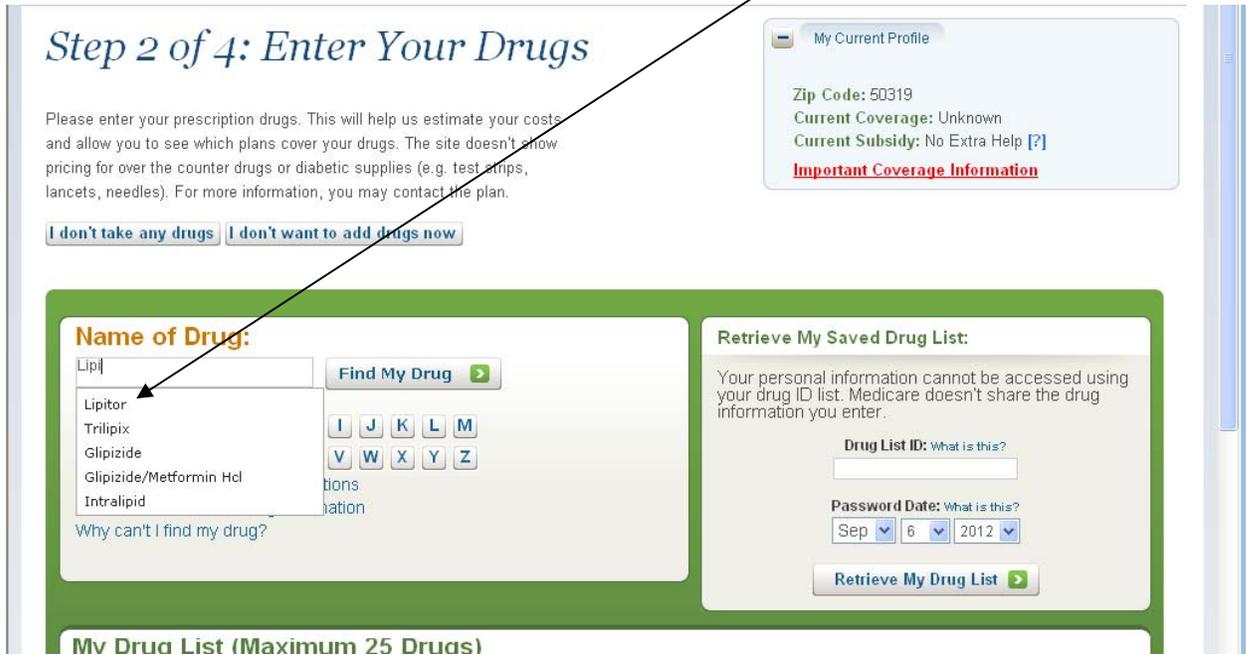
Resources

- ◆ Extra Help Paying for Medicare Prescription Drug Coverage
- ◆ Helpful Contacts
- ◆ Five Ways to Lower Your Costs During the Coverage Gap
- ◆ Find out about your Medicare Choices
- ◆ Download the Medicare Drug and Health Plan Data and Medigap Compare Databases

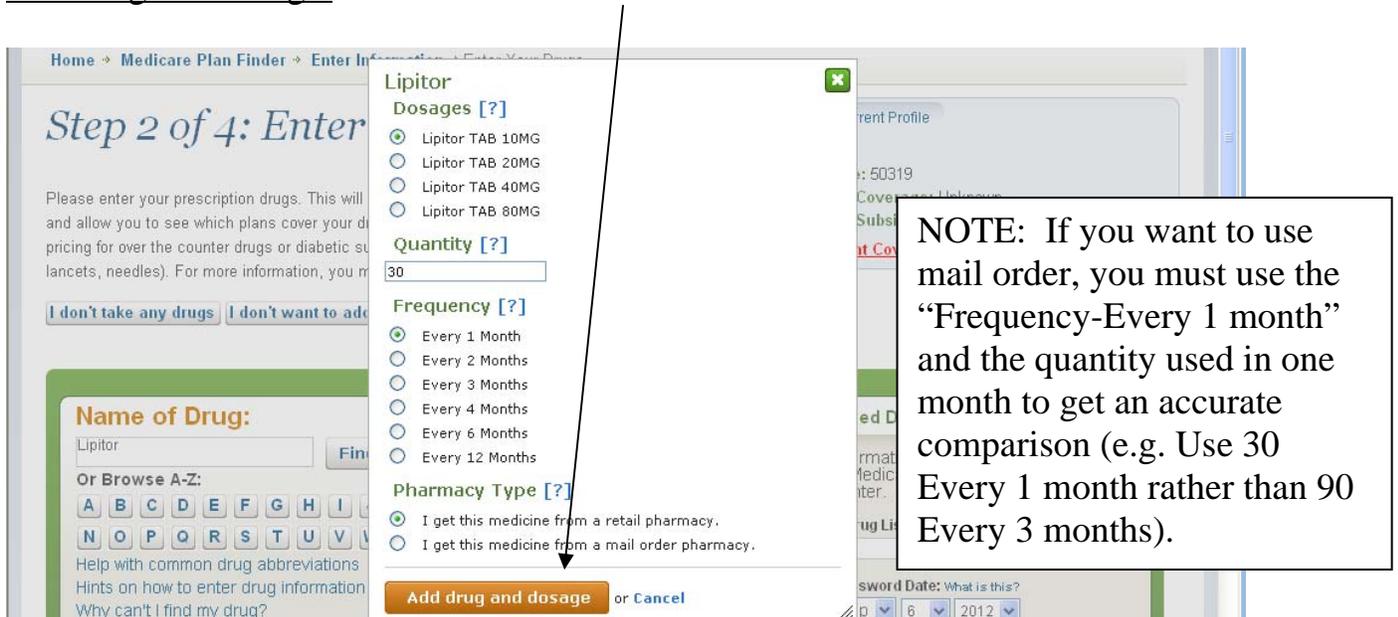
Step 2 of 4: Enter Your Drugs

It is **EXTREMELY** important that you enter the exact drug name, dosage and quantity the individual is taking or the comparison will be inaccurate. The individual may wrongly choose a plan that does not cover his/her drugs. When in doubt, always call the individual or pharmacy to verify information. DO NOT guess.

7. In most cases you will be entering drug information for the first time.
- A. In this case, click in the box under “Name of Drug” and begin typing the drug name. As you type a list of drugs will drop down. Click on the drug name you are entering.



- B. After you click on the drug name a box will pop up where you can select the correct dosage, quantity and frequency for your individual. Always select “retail pharmacy” for Pharmacy Type. After you enter the correct information, click on Add drug and dosage.



C. If a list does not appear, type in the drug name and Click on Find My Drug. A list of drugs will appear under “Search Results.” Click on Add Drug for the correct drug name.

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?](#)
 Oct 11 2010

Retrieve My Drug List >

Search Results:
 6 drugs found with **lipitor**

MEDICINE NAME	DRUG TYPE	ADD DRUG
Lipitor(Atorvastatin Calcium)	Brand	+ Add Drug
levetiracetam(Levetiracetam)	Generic	+ Add Drug
Levitra(Vardenafil HCl)	Brand	+ Add Drug

D. After you click on “Add Drug”, a box will pop up where you can indicate the dosage, quantity and frequency for the drug. Click on Add drug and dosage.

E. If the drug cannot be found, try clicking on the button to browse drugs alphabetically. Sometimes it is possible to recognize a drug that you have not spelled correctly. When a drug is found, there may be several choices to pick from. Pick the correct drug and click on Add Drug.

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 has been saved. You can retrieve your selected drugs and pharmacies on future visits using this Drug List Id and Password Date.

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

Drug List ID: **7014483968**
 Password Date: **10/11/2010 (change date)**
 Zip Code: **50310**

Use a different drug list ID

Search Results:
 273 drugs found with **G**

MEDICINE NAME	DRUG TYPE	ADD DRUG
GA Diet(Nutritional Supplement)	OTC	
gabapentin(Gabapentin)	Generic	+ Add Drug
GA GEL(Nutritional Supplement)	OTC	
Gabitril(Tiagabine HCl)	Brand	+ Add Drug

F. As you add drugs to the list they will appear under “My Drug List.

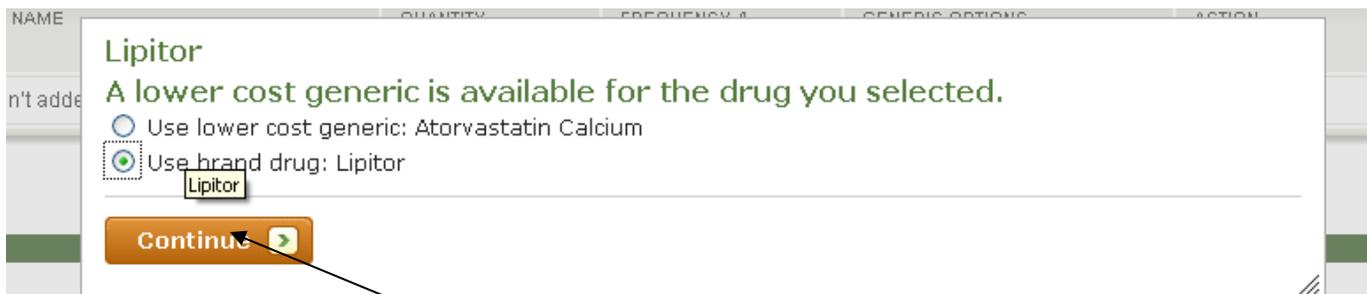
MEDICINE NAME	QUANTITY	FREQUENCY	GENERIC OPTIONS	ACTION
Lipitor TAB 10MG	30	Every 1 Month	Generic Not Available	Change dose Add Remove
gabapentin TAB 600MG	90	Every 1 Month	Already Generic	Change dose Add Remove

My Drug List is Complete

G. To add drugs to the list, click (put your cursor) in the Name of Drug box. Type the next drug name, dosage, quantity and frequency. Continue this process until all drugs are entered.

H. If a drug has a generic option, after you enter the drug name and select the dosage, quantity and frequency, another pop up box will appear which tells you a lower cost generic is available. There are two choices:

- Use lower cost generic: (name of generic)
- Use brand drug: (name of brand drug)



The generic option will be selected. **Always change the option to “Use brand drug”** because that is the drug you originally entered and that is the drug the individual is taking. You can tell the individual that a generic is available and give the name, but the individual should visit with the prescribing medical professional before any changes are made. If you don’t select “Use brand drug”, the generic will be substituted and your comparison will give inaccurate costs.

- I. For some prescriptions, an individual may need to take different doses of the same drug. For example a person may need one 10 mg Lipitor pill and one 20 mg pill per day. Click on the Add button.

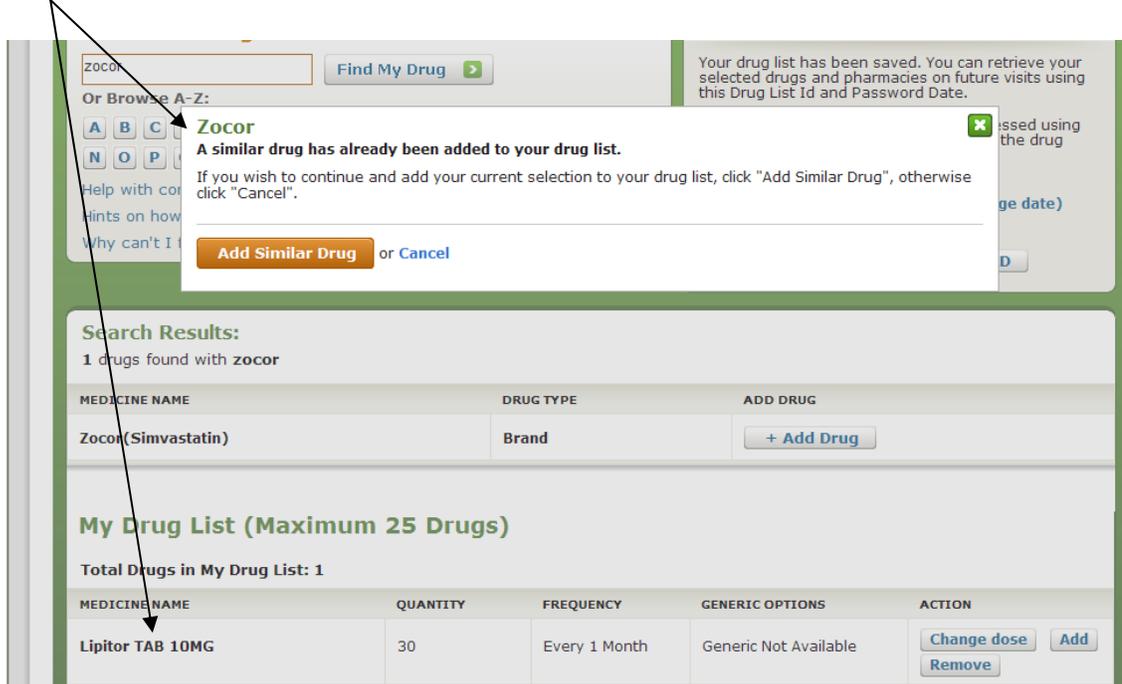
The screenshot shows a 'My Drug List' table with columns: MEDICINE NAME, QUANTITY, FREQUENCY, GENERIC OPTIONS, and ACTION. The table lists several drugs, including Lipitor TAB 10MG, gabapentin TAB 600MG, Coumadin TAB 5MG, and Lipitor TAB 20MG. A modal window titled 'Lipitor Dosages' is open, allowing the user to select a new dosage and frequency. The modal includes radio buttons for dosages (10MG, 20MG, 40MG, 80MG), a quantity input field (set to 30), and radio buttons for frequencies (Every 1 Month, 2 Months, 3 Months, 4 Months, 6 Months, 12 Months). At the bottom of the modal are 'Update drug and dosage' and 'Cancel' buttons. Arrows from the text above point to the 'Add' button in the table and the 'Lipitor TAB 20MG' entry.

MEDICINE NAME	QUANTITY	FREQUENCY	GENERIC OPTIONS	ACTION
Lipitor TAB 10MG	30	Every 1 Month	Generic Not Available	Change dose Add Remove
gabapentin TAB 600MG	90		Generic	Change dose Add Remove
Coumadin TAB 5MG	30		sodium	Change dose Add Remove
Lipitor TAB 20MG	30		Not Available	Change dose Add Remove

This will result in the drug showing up on the list twice. Select a different dose for each listing.

- J. Sometimes you may need to remove a drug at this stage. The Remove button will accomplish this.

- K. A pop up box will appear when you attempt to add a drug to your list for which a similar drug is already on your list. You can choose to “Add similar drug” or “Cancel”, depending on your reason for typing in both drugs.

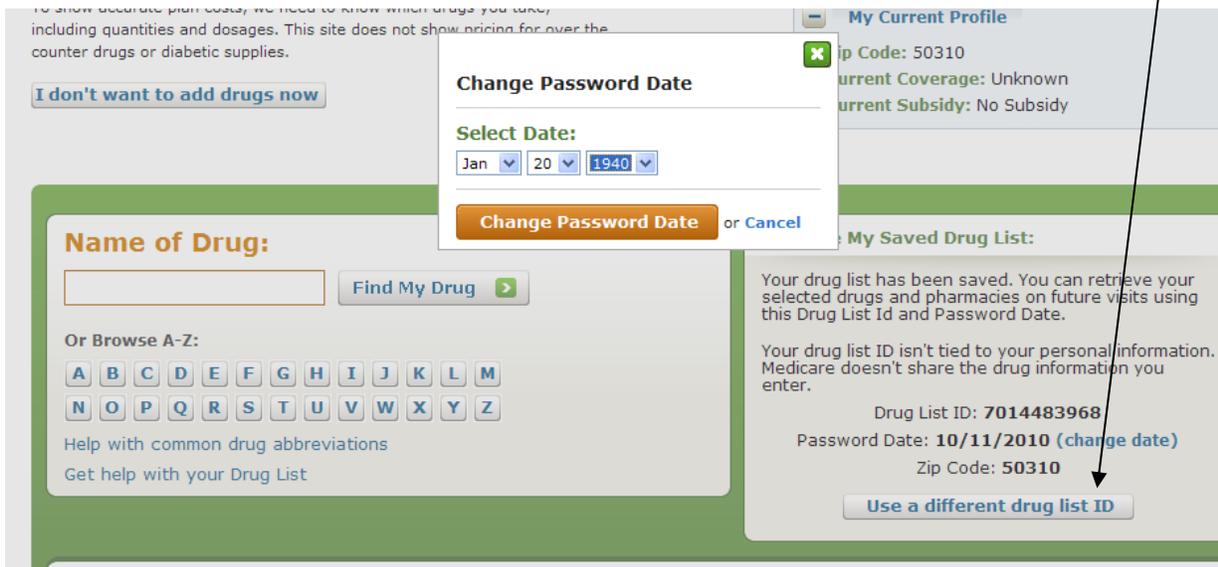


- L. Another feature of the “Enter Your Drugs” screen is the option to Click on the button, “I don’t take any drugs.” If you choose this option, a pop up box appears explaining that no drug pricing information will appear. When you get to the list of plans and drug details pages the total cost of the plan will reflect the premium only. On the details page you can also view the network pharmacies for the plan.



8. Saved Drug List—To the right of the drug entry box you will see a box called “Retrieve My Saved Drug List.”

A. After you enter the first drug you will notice that a number appears in this box after “Drug List ID.” A “Password Date” will also appear. These are automatically generated. You can change the Password Date by clicking on (change date). A pop up box will appear and you can enter a date of your choice. SHIP uses the individual’s birth date as the Password Date. Click on Change Password Date to save the new date.



B. **Print this page as soon as the number appears.** The Drug List ID and Password Date can be used to pull up the drug list if you want to do a comparison later, or if for some reason you lose the drug list as you are entering information.

C. If you are doing a “General Search” and have the individual’s Drug List ID and Password Date from a previous comparison you can click on Use a different drug list ID and you will be able to enter the ID # and date. Click on Retrieve my Drug List and the individual’s previously entered drug list will appear. You can update the list as needed.

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?
1122334455

Password Date: What is this?
Jan 20 1940

Retrieve My Drug List >

C. If you do a “Personalized Search” and the individual has entered a drug list previously, the original Drug List ID and Password Date will automatically appear. The individual’s previous drug list will also appear. You will not need to enter all the drugs again. You can update the list as needed.

9. Click on My Drug List is Complete when you have entered all drug information.

Step 3 of 4: Select Your Pharmacies

10. The next screen gives you a choice of picking one or two Pharmacies or skipping this step.

- A. Click on Add Pharmacy under the name of the pharmacy(ies) the individual wants included in the comparison. One or two can be selected. The comparisons will factor costs at these pharmacies. Then click on the Continue to Plan Results button.

Step 3 of 4: Select Your Pharmacies

Please select up to two pharmacies to get a better estimate of how much your prescription drugs will cost. If your pharmacy isn't in a plan's network, the cost you will see is the full price of the drug with no insurance. Also note that some plans offer lower drug prices at preferred network pharmacies, compared to other pharmacies in the network.

My Current Profile

Zip Code: 50319
 Current Coverage: Unknown
 Current Subsidy: No Extra Help [?]
 Drug List ID: 1074774368
 Password Date: 09/06/2012
[Important Coverage Information](#)

[Continue to Plan Results](#)

We found 10 pharmacies within 1.5 miles of 50319

Search New Location of 1.5 miles of 50319 [Show/Hide Pharmacy Map](#)

Available Pharmacies

Add to Selected Pharmacies

<p>CAREPLUS CVS PHARMACY 711 High St Bldg 1 Third Floor Des Moines, IA 50309 1-515-244-8100 Add Pharmacy</p>	<p>DAHLS PHARMACY 1320 E Euclid Des Moines, IA 50316 1-515-265-5946 Add Pharmacy</p>	<p>HAMMER PHARMACY 600 E Grand Avenue Des Moines, IA 50309 1-515-243-4177 Add Pharmacy</p>
<p>IOWA LUTHERAN HOSPITAL PHARMACY 700 E University Ave Des Moines, IA 50316 1-515-263-5510 Add Pharmacy</p>	<p>IOWA METHODIST MEDICAL CENTER PHARMACY 1200 Pleasant St Des Moines, IA 50309 1-515-241-6355 Add Pharmacy</p>	<p>MEDICAP PHARMACY 1300 E 14Th Des Moines, IA 50316 1-515-263-1782 Add Pharmacy</p>
<p>METHODIST PLAZA PHARMACY LTD 1212 Pleasant St Suite 105 Des Moines, IA 50309 1-515-244-8855 Add Pharmacy</p>	<p>UNITED COMMUNITY SERVICES INC 401 Sw 8Th Des Moines, IA 50309 1-515-280-3860 Add Pharmacy</p>	<p>WALGREENS #3252 606 Walnut St Des Moines, IA 50309 1-515-283-1793 Add Pharmacy</p>
<p>WALGREENS #5362 1330 E University</p>		

- B. The drop down box will offer an extended range to search for pharmacies. This is handy when the pharmacy is too far away from the zip code entered and does not appear on the list. By increasing the miles, more pharmacies will be shown.

- C. Click on Search New Location if the pharmacy used by the individual falls outside the radius of the zip code where s/he lives. A pop up box will appear where the new zip code is entered. Click on Update. A new list of pharmacies appears.

Step 3 of 4: Select Your Pharmacies

Please select up to two pharmacies to get a better estimate of how much your prescription drugs will cost. If your pharmacy isn't in a plan's network, the cost you will see is the full price of the drug with no insurance. Also note that some plans offer lower drug prices at preferred network pharmacies, compared to other pharmacies in the network.

My Current Profile

- Zip Code: 50319
- Current Coverage: Unknown
- Current Subsidy: No Extra Help [?]
- Drug List ID: 1074774368
- Password Date: 09/06/2012

[Important Coverage Information](#)

[Continue to Plan Results](#)

We found 10 pharmacies within 10 miles of your current location.

[Search New Location or Radius](#)

Available Pharmacies

Add to Selected Pharmacies

CAREPLUS CVS PHARMACY
711 High St
Bldg 1 Third Floor
Des Moines, IA 50309
1-515-244-8100
[Add Pharmacy](#)

Search Criteria

Address or ZIP Code (Required):

Pharmacy Name:

Enter a new ZIP code, address, or pharmacy name to change your search. If you want to change the search radius, use the drop-down menu on the Select Your Pharmacies page.

[Update](#) or [Cancel](#)

Step 4 of 4: Refine Your Plan Results

11. On this page, click on “All” under “Subject.” This will allow you to see stand alone drug plan information and information for Medicare Advantage plans if the individual requests. Then click on Continue to Plan Results.

Step 4 of 4: Refine Your Plan Results

This is a summary of the types of plans available in your area. Use the checkboxes to select the types of plans you'd like to view. You may also use the filters on the left to narrow your search. Using filters may eliminate some options, including plans with the lowest estimated annual costs.

My Current Profile [Update Search](#)

Zip Code: 50319
Current Coverage: Unknown
Current Subsidy: No Extra Help [?]
Drug List ID: 1074774368
Password Date: 09/06/2012
[Important Coverage Information](#)

Refine Your Search

[Update Plan Results](#)

- + Limit Your Monthly Premium
- + Limit Your Annual Drug Deductible
- + Select Drug Options
- + Select Plan Ratings
- + Select Coverage Options
- + Select Special Needs Plans
- + Change Health Status

Summary of Your Search Results

There are a total of 46 plans available in your area including Original Medicare. Please select a plan type to continue.

Select	Available Plans Based On Your Filters	Number of Plans Available:
<input checked="" type="checkbox"/>	All	45
<input type="checkbox"/>	Prescription Drug Plans (with Original Medicare) [?]	33 plan(s) available
<input type="checkbox"/>	Medicare Health Plans with drug coverage[?]	9 plan(s) available
<input type="checkbox"/>	Medicare Health Plans without drug coverage[?]	3 plan(s) available

[Continue To Plan Results](#)

COMPARE PLANS

SHIIP prefers that individuals are given detailed plan information. A side-by-side comparison of plans does not provide all the information the individual needs to make a good decision. To get Plan Details use the following steps.

- A. When the plan list comes up, the plans are listed in order from lowest annual drug cost to highest. Select the 2-3 plans which have the lowest estimated annual cost (first column).

Prescription Drug Plans Plan Ratings

There are 33 plans in 50319 that match your preferences. [View 10](#) [View 20](#) [View 50](#)

Compare Plans Sort Results By Lowest Estimated Annual Retail Drug Cost Sort

Estimated Annual Drug Costs:[?]	Monthly Premium: [?]	Deductibles:[?] and Drug Copay[?] / Coinsurance:[?]	Drug Coverage [?], Drug Restrictions[?] and Other Programs:	Overall Plan Rating:[?]	
WellCare Classic (PDP) (S5967-162-0) Organization: WellCare					
Retail Pharmacy Status: Network Annual: \$793 Rest of 2012: \$438 Mail Order Annual: \$793 Rest of 2012: \$438	\$39.40	Annual Drug Deductible: \$320 Drug Copay/ Coinsurance: \$0 - \$95, 25%	All Your Drugs on Formulary: Yes Drug Restrictions: Yes No Gap Coverage Lower Your Drug Costs MTM Program[?]: Yes	★★★ 3.5 out of 5 stars	<input type="button" value="Enroll"/>
CIGNA Medicare Rx Plan One (PDP) (S5617-123-0) Organization: Cigna Medicare Rx					
Retail Pharmacy Status: Network Annual: \$805 Rest of 2012: \$432 Mail Order Annual: \$797 Rest of 2012: \$434	\$35.40	Annual Drug Deductible: \$320 Drug Copay/ Coinsurance: \$3 - \$85, 25%	All Your Drugs on Formulary: Yes Drug Restrictions: Yes No Gap Coverage Lower Your Drug Costs MTM Program[?]: Yes N	★★★ 2.5 out of 5 stars	<input type="button" value="Enroll"/>
WellCare Signature (PDP) (S5967-059-0) Organization: WellCare					

If you do a personalized search, the individual’s current plan will appear above the list of “Prescription Drug Plans.” The individual may request the detail information on this plan, even though the annual cost is higher than other plans available.

B. Click on the name of the plan.

Compare Plans Sort Results By Lowest Estimated Annual Retail Drug Cost Sort

WellCare Classic (PDP) (S5967-162-0)
Organization: WellCare

Estimated Annual Drug Costs:[?]	Monthly Premium: [?]	Deductibles:[?] and Drug Copay[?] / Coinsurance:[?]	Drug Coverage [?], Drug Restrictions[?] and Other Programs:	Overall Plan Rating:[?]	
Retail Pharmacy Status: Network:	\$39.40	Annual Drug Deductible: \$320 Drug Copay/ Coinsurance: \$0 - \$95. 25%	All Your Drugs on Formulary: Yes Drug Restrictions: Yes	★★★★ 3.5 out of 5 stars	Enroll

C. “Your Plan Details” page will appear, with the “Drug Costs & Coverage” tab showing. This is the plan detail information you want to print for the individual.

Your Plan Details

[My Current Profile](#) [Update Search](#)

Zip Code: 50319
Current Coverage: Unknown
Current Subsidy: No Extra Help [?]
Drug List ID: 1074774368
Password Date: 09/06/2012
[Important Coverage Information](#)

Click the tabs below for more detailed information about the plan health benefits, drug costs and more coverage and plan ratings.

[Overview](#) [Health Plan Benefits](#) [Drug Costs & Coverage](#) [Plan Ratings](#)

WellCare Classic (PDP)
(S5967-162-0)

Organization: WellCare
Plan Type: PDP
[View Plan Medication Therapy Management \(MTM\) program eligibility information](#)

PO Box 31685
Tampa, FL 33631

Members:
1-888-550-5252
1-888-816-5252 (TTY/TDD)

Non Members:
1-888-293-5151
1-888-816-5252 (TTY/TDD)

Overall Plan Rating: [?]
★★★★
3.5 out of 5 stars

Enroll

NOTE: Health Plan Benefits are based on Original Medicare

Fixed Costs

Monthly Drug Plan Premium [?]	\$39.40
Monthly Health Plan Premium [?]	N/A
Annual Drug Deductible [?]	\$320.00

D. To view the mail order pharmacy costs click on the mail order tab.

What You Pay

DAHLS PHARMACY **Mail Order Pharmacy**

DAHLS PHARMACY - Network Pharmacy

SELECTED DRUGS	FULL COST OF DRUG	Refill Frequency	What You Pay			
			Deductible [?]	Initial Coverage Level[?]	Coverage Gap[?]	Catastrophic Coverage[?]
Gabapentin TAB 600MG	\$39.75	Every 1 Month	\$39.75	\$0.00	\$34.18	\$2.60
Lipitor TAB 10MG	\$123.69	Every 1 Month	\$123.69	\$0.00	\$62.60	\$6.18
MONTHLY TOTALS:	\$163.44		\$163.44	\$0.00	\$96.78	\$8.78

Estimated Monthly Drug Costs

DAHLS PHARMACY **Mail Order Pharmacy**

Monthly Costs (based on January enrollment)

Month	Cost
Jan	\$202
Feb	\$195
Mar	\$39
Apr	\$39
May	\$39
Jun	\$39
Jul	\$39
Aug	\$39
Sep	\$39
Oct	\$39
Nov	\$39
Dec	\$39

E. It is important to review “Restrictions” which apply to your drugs. A “Yes” under Quantity Limits indicates that the plan has a quantity limit restriction or will limit the amount of the medication you can receive each time you fill this prescription. Click on the “Yes” to learn more about the restriction limits.

SELECTED DRUGS	TIER (FORMULARY STATUS) [?]	Restrictions		
		PRIOR AUTHORIZATION [?]	QUANTITY LIMITS [?]	STEP THERAPY [?]
Lipitor TAB 10MG	Tier: 3 ³		Yes	

F. As you look at the plan details, scroll down the screen and you will see the “Estimated Annual Drug Costs” for full year and the rest of the year. These estimated annual drug costs include the premium, deductible, co-pays and the costs for the drugs when you are in the donut hole. Right below Mail Order Pharmacy you will see “Lower your drug costs”. This is where you **click** to find lower costs drug options that may be available, as well as any pharmaceutical assistance programs.

G. At the bottom of this screen, under “Drug Coverage Information” you will find four tabs:



- Add/Edit Drugs—if the drugs listed on this page are not correct or the dosage or quantity needs to be changed, click on this tab.
- Print My Drug List—click on this tab and a box pops up which has a list of drugs including the dosage and quantity for you to review.
- View Drug Benefit Summary—This tab will give a pop up box which shows cost sharing for the various tiers.
- There are two ways to print plan information for your individual. You can:
 - a) Print Plan Report—Click on this tab to print the detailed plan information.
 - b) At the top of the page click on the “Print” icon. This will print the Plan Details page as viewed on your monitor. You will see plan information for only the pharmacy or mail order, but not both.



Medicare Plan Finder Training

Forcing the Tool to Calculate Extra Help (9/6/12)

1. Go to the Medicare website, www.medicare.gov.
 - Click on “Find Health & Drug Plans”

Español | A A A | Email | Print

About Us | FAQ | Glossary | CMS.gov | MyMedicare.gov Log

Medicare.gov

The Official U.S. Government Site for Medicare

type search term here Search

► Learn about your health care options

Sign Up / Change Plans | Your Medicare Costs | What Medicare Covers | Drug Coverage (Part D) | Supplements & Other Insurance | Claims & Appeals | Manage Your Health | Help & Resources

Is your test, item, or service covered?

type your test, item, or service here Go

Find health & drug plans | Apply for Medicare

MyMedicare.gov login

2. On the next page:
 - Using the General Search section, enter the zip code.
 - Click Find Plans at the bottom of the box.

Medicare Plan Finder

You have the option to complete a general or personalized plan search. A personalized search may provide you with more accurate cost estimates and coverage information. To begin your plan search, please choose from one of these options below.

General Search
A general plan search only requires your zip code.
ZIP Code: 50319
Find Plans
By clicking on this button you are agreeing to the terms and conditions of the [User Agreement](#)

or

Personalized Search
A personalized plan search requires your zip code and complete Medicare information. This page is secured to protect your personal information. If

Additional Tools

- ◆ How to Use the Medicare Plan Finder
- ◆ Find and Compare Medigap Policies
- ◆ Search by Plan Name or ID
- ◆ Enroll Now
- ◆ Find formularies in your area
- ◆ Medicare Complaint Form

Resources

- ◆ Extra Help Paying for Medicare Prescription Drug Coverage
- ◆ Helpful Contacts
- ◆ Five Ways to Lower Your Costs During the Coverage Gap

3. The next screen, “Step 1 of 4: Enter Information”, asks for general information because you did not enter personalized information.

A. The answer to the first question will not affect the comparison so you can check “I don’t know what coverage I have.”

B. The second question asks, ‘Do you get help from Medicare or your state to pay your Medicare prescription drug costs?’

- If the individual is eligible for full Medicaid (Title XIX), and is eligible to pay \$1.10 for generics and \$3.30 for brand name drugs, click the first option “I get help from Medicaid.”
- In Iowa we do not have many people who qualify under Supplemental Security Income for Part D extra help so you probably won’t use this option.
- If the individual gets help from the state of Iowa (through the Dept. of Human Services) to pay the Part B premium, the person is in a Medicare Savings Program and the third option should be selected. You would also select the third option for anyone who is receiving full Medicaid benefits but pays \$2.60 for generics and \$6.50 for brand name drugs.
- If you select any of these three options, click on Continue to Plan Results as the next step.

The screenshot shows a web form with a green border. The first question is "How do you get your Medicare coverage?" with four radio button options: "Original Medicare [?]", "Medicare Health Plan (such as an HMO, PPO, or Private-Fee-for-Service plan) [?]", "I don't have any Medicare coverage yet", and "I don't know what coverage I have" (which is selected). The second question is "Do you get help from Medicare or your state to pay your Medicare prescription drug costs?" with six radio button options: "I get help from Medicaid [?]", "I get Supplemental Security Income [?]", "I belong to a Medicare Savings Program (MSP) [?]", "I applied for and got Extra Help through Social Security", "I don't get any Extra Help [?]", and "I don't know". At the bottom left is a "Go Back" link, and at the bottom right is a "Continue to Plan Results" button with a right-pointing arrow.

C. If the individual applied for the Part D extra help through Social Security and was notified that s/he qualified for assistance, click on the fourth option—“I qualified for Extra Help through Social Security. When you select this option, two additional options will appear.

Do you get help from Medicare or your state to pay your Medicare prescription drug costs?

- I get help from Medicaid [?]
- I get Supplemental Security Income [?]
- I belong to a Medicare Savings Program (MSP) [?]
- I applied for and got Extra Help through Social Security
 - I pay \$2.60 - \$6.50 for covered drugs [?]
 - I pay 15% coinsurance for covered drugs [?]
- I don't get any Extra Help [?]
- I don't know

- If the individual is paying \$2.60 for generics and \$6.50 for brand name drugs, click on the first option and then click on Continue to Plan Results.
- If the client is paying a 15% coinsurance, click on the second option. You will then be asked to indicate the premium subsidy the client receives (found in their letter from Social Security). Select the appropriate percent and then click on Continue to Plan Results.

I applied for and got Extra Help through Social Security

- I pay \$2.60 - \$6.50 for covered drugs [?]
- I pay 15% coinsurance for covered drugs [?]
 - I pay the following percentage for my monthly prescription drug plan premium:
 - 0%
 - 25%
 - 50%
 - 75%
 - I don't know
- I don't get any Extra Help [?]
- I don't know

[Go Back](#) **Continue to Plan Results**

From this point forward you will do a comparison as instructed in the general instructions—Step 2 of 4.