

2012 Medicare Part D Stand-Alone Prescription Drug Plans - page 1 of 2

You must have Medicare Part A or Part B to qualify for Part D enrollment. All plans participate in national pharmacy networks. Generally, Tier 1 = generics; Tier 2 = preferred brands; Tier 3 = non-preferred brands; Tiers 4 & 5 = specialties and injectables.

Organization	Plan Name	Monthly Premium	Annual Deductible	Co-Payments after deductible has been met and prior to reaching \$2,930 in full drug cost					Coverage in Gap	Mail Order	LIS	Quality Rating (out of 5)
				Tier 1	Tier 2	Tier 3	Tier 4	Tier 5				
Aetna 800-832-2640 aetnamedicare.com	CVS Prescription PDP	\$26.00	\$320*	\$3	\$24	\$39	38%	25%	no	yes	yes	2.5
	Medicare Rx Premier	\$92.20	\$0	\$4	\$25	\$35	\$80	33%	many gen	yes		2.5
Blue MedicareRx 800-261-8667 anthem.com/ca/medicare	Standard	\$39.30	\$320*	\$2	\$7	\$40	\$90	25%	no	yes		2.5
	Plus	\$62.80	\$0	\$2	\$7	\$45	\$90	33%	some gen	yes		2.5
	Gold	\$107.30	\$0	\$2	\$7	\$45	\$90	33%	many gen, some brands	yes		2.5
Blue Shield of California 800-488-8000 blueshieldca.com	Basic Plan	\$41.10	\$320	\$4	\$35	\$75	25%	25%	no	yes		4.0
	Enhanced Plan	\$55.60	\$0	\$7	\$45	\$75	33%	33%	many gen	yes		4.0
	Premium Plan	\$108.20	\$0	\$7	\$45	\$75	33%	33%	many gen, some brands	yes		4.0
Bravo Health 800-723-9209 mybravohealth.com	Bravo Rx	\$37.10	\$320	25%	25%	25%	25%	25%	no	yes		2.5
CIGNA Medicare Rx 800-735-1459 cignamedicarerx.com	Rx Plan One	\$56.20	\$320	\$3	\$20	\$34	\$86	25%	no	yes		2.5
Community CCRx PDP 866-423-5040 communityccrx.com	Basic	\$48.90	\$320	\$2	25%	46%	25%	n/a	no	?		3.0
	Choice	\$91.50	\$0	\$0	\$40	\$70	33%	n/a	no	?		3.0
EnvisionRx Plus 866-250-2005 envisionrxplus.com	Silver	\$29.60	\$320	25%	25%	25%	25%	25%	no	?	yes	2.5
	Rite Aid EnvisionRxPlus	\$78.60	\$0	\$0	20%	15%	30%	33%	some gen	yes		2.5
First Health Part D 800-882-3822 firsthealthpartd.com	Value Plus	\$28.90	\$0	\$0	26%	40%	33%	n/a	no	?		2.5
	Premier	\$38.70	\$250	\$6	19%	36%	26%	n/a	no	yes		2.5
	Premier Plus	\$107.30	\$0	\$0	\$20	25%	43%	33%	some gen, some brands	yes		3.0

*This plan does not charge an annual deductible for all drugs. LIS = Low-Income Subsidy



CALIFORNIA HEALTH ADVOCATES

By California Health Advocates: <http://www.cahealthadvocates.org/>

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Organization Name	Plan Name	Monthly Premium	Annual Deductible	Co-Payments after deductible has been met and prior to reaching \$2,930 in full drug cost					Coverage in Gap	Mail Order		Quality Rating (out of 5)
				Tier 1	Tier 2	Tier 3	Tier 4	Tier 5		LIS	yes	
Health Net 800-865-9431 healthnet.com	HN Orange Option 1	\$31.90	\$320	\$4	\$41	\$85	25%	25%	no	yes	yes	3.0
	HN Orange Option 2	\$87.60	\$0	\$0	\$38	\$75	33%	33%	no	yes		3.0
HealthSpring 615-291-7024 healthspring.com	Drug Plan-Reg 32	\$53.00	\$320	25%	25%	n/a	n/a	n/a	no	yes		2.5
Humana Inc. 800-706-0872 humana-medicare.com	Walmart-Preferred Rx	\$15.10	\$320	\$1	\$5	20%	30%	n/a	no	yes	yes	3.0
	Enhanced	\$43.20	\$0	\$7	\$38	\$74	33%	n/a	no	yes		3.0
	Complete	\$114.90	\$0	\$5	\$37	\$69	33%	n/a	many gen, some brands	yes		3.0
Medco 800-758-3605 medcomedicare.com	Value	\$34.80	\$320	\$4	\$8	25%	35%	25%	no	yes		4.0
	Choice	\$82.50	\$150*	\$6	\$12	\$45	\$95	26%	many gen	yes		4.0
Silver Script Insurance Co. 866-552-6106 silverscript.com	CVS Caremark Value	\$28.20	\$320	\$7	\$45	\$95	25%	n/a	no	yes	yes	3.0
	CVS Caremark Plus	\$81.90	\$0	\$0	\$40	\$90	33%	n/a	no	yes		3.0
United American Ins Co. 866-524-4169 uamedicarepartd.com	Select	\$37.60	\$320	\$2	\$9	\$45	\$95	25%	no	yes		2.5
	Preferred	\$54.80	\$80*	\$3	\$9	\$45	\$95	31%	no	yes		2.5
United HealthCare 888-867-5564 aarpmedicarerx.com	AARP Preferred	\$48.20	\$0	\$4	\$8	\$43	\$94	33%	no	yes		3.0
	AARP Enhanced	\$96.10	\$0	\$4	\$7	\$40	\$76	33%	some gen	yes		3.0
WellCare 1-888-293-5151 wellcarepdp.com	Classic	\$31.50	\$320	\$0	\$42	\$95	25%	n/a	no	yes	yes	3.5
	Signature	\$55.40	\$0	\$0	\$20	\$45	\$90	33%	no	yes		3.5

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