

Doing a Search

1. At a personal computer, launch internet browser software such as *Internet Explorer, Firefox* or *Safari*.
2. Enter the Medicare website in the browser address bar: <http://medicare.gov>
3. On the Medicare home page, click the green **“Find health & drug plans”** box.
4. If you know all the information listed below, enter it into the **“Personalized Search”** area and then skip to step 6 below. If you don’t know all the information, skip to step 5 below.
 - **ZIP Code** of your residence
 - **Medicare Number** from your Medicare Red/White/Blue card including any letters and/or numbers
 - **Last Name:** *exactly* as it appears on your Medicare card including any suffix (JR, SR, I, II, III, etc)
 - **Effective Date for Part A:** Month/Year from your Medicare card
 - **Date of Birth:** Month/Day/Year (MMM/DD/YEAR)

NOTE: If the information entered above matches the Medicare database, you will see your Medicare plan information (Part D or Medicare Advantage) in the box in the upper right hand corner of the screen entitled **My Current Profile**. This is where you also see the level of Extra Help that you may receive with your Medicare Part D or Medicare Advantage Plan.

5. If you don’t have the information listed in step 4 above, you should enter the zip code in the **“General Search”** area.

NOTE: If the zip code entered spans multiple counties, choose the appropriate county and click the “Continue” box.
6. When complete, click the brown **“Find Plans”** box in the appropriate area.
7. If this is the first time for this General Search, the **“Step 1 of 4: Enter Information”** screen will appear. Select the most appropriate answers to the following questions and click the brown **“Continue to Plan Results”** box:
 - How do you get your Medicare coverage?
 - Do you get help from Medicare or your state to pay your prescription drug costs?

8. The **“Step 2 of 4: Enter Your Drugs”** screen will appear. **This is an IMPORTANT step that should NOT be skipped as your personalized list of drugs will determine the total drugs costs and sort order for the plans presented for comparison.**
9. If you don’t take any medications, you can click on the **“I don’t take any drugs”** box. However, even if you do not take any prescription medications,

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you are required to enroll in a Part D plan UNLESS you get medications from the VA Pharmacy (which is considered creditable coverage).

TIP: You can enroll in the lowest monthly premium plan to avoid the 1% per month late enrollment penalty if you delay enrollment until later.

Skip to step 14 below as you will not be prompted to select any pharmacies.

10. If you previously saved a drug list, enter the "Drug List ID" and "Password Date" and then click the "Retrieve My Drug List" box. The saved drug list should automatically appear.

You should verify the medications listed, remove any medications no longer taken and add new ones. You may also change the strength or quantity of any medications which can easily be done by the click of a button. Then skip to step 12 below.

11. If this is a new search, enter each prescription medication individually into the "Type the name of your drug" field. Do NOT enter over the counter drugs or supplies.

When you start typing the medication name, a list of matches will appear. Click on the correct drug name and another screen will appear for you to select the Dosage, Quantity, Frequency, and Pharmacy Type:

- The **Dosage** is the medication strength (ex: 500 mg).
- The **Quantity** is the amount of medication you receive each time you refill your prescription. For example, if you take a medication once per day, the quantity will be 30. If you take a medication twice a day, the quantity will be 60, and so on.
- The **Frequency** is how often you refill their prescription for that quantity (ex: every month).
- The **Pharmacy Type** is the type of pharmacy where you get your medication. This can be a mail order pharmacy or a local, retail pharmacy. (Leave it on retail to get retail AND mail order).

NOTE: The Drug List ID and Password Date are created after you add your first drug. Write down this information or print the screen for future reference, especially if you are doing a General Search.

If a generic is available for the drug entered, it will return a screen that will allow you to select either the generic or brand name drug. Click the brown "**Add drug and dosage**" box. Repeat this step for remaining prescription drugs.

TIP: To maximize savings, use generics whenever possible and use a preferred network pharmacy. If a generic is not available for the drug, you should ask your doctor if there is an equivalent generic medication or less expensive brand. The main ingredient in the generic and brand must be the

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same by FDA standards. The fillers used in generics may cause an allergic reaction in some people or may cause the generic to be less effective than the brand. In those situations, you should only use the brand drug.

12. Once you have entered all your medications, click on the brown **"My Drug List is Complete"** box.
13. The **"Step 3 of 4: Select Your Pharmacies"** screen will appear with a list of pharmacies within a 1 mile radius of your zip code. To see more pharmacies, change the mile radius by clicking on the down arrow box in front of the word 'miles' above the pharmacy box and select the desired mile radius.

Select your preferred retail pharmacy by clicking on the **Add Pharmacy** hyperlink. You may select up to two pharmacies for price comparison. After selecting each pharmacy, they should appear in the box entitled **"Your Selected Pharmacies"**. Click on the brown **"Continue to Plan Results"** box.

TIP: Always select two pharmacies so you can compare drug prices. It can make a BIG difference on where you get your medications.

14. The **"Step 4 of 4: Refine Your Plan Results"** screen will appear with the total number of plans available in your zip code. Select which type of plan you want to compare by clicking on the appropriate box: **Prescription Drug Plans (with Original Medicare)** (aka Part D) or **Medicare Health Plans with drug coverage** (aka Medicare Advantage Plans). You may enter additional search criteria via the boxes on the left side of the screen to narrow the list of available plans meeting your specific criteria. Then click on the brown **"Continue to Plan Results"** box.

Comparing Prescription Drug Plans (with Original Medicare)

1. The **“Your Plan Results”** screen will appear showing the Medicare Part D Prescription Drug Plans meeting your criteria and sorted according to the **“Lowest Remainder of the Year Retail Costs”**.
2. You may check the box next to the name to display a detailed, side-by-side comparison of up to three (3) plans. Then click the brown **“Compare Plans”** box at the top or bottom of the list.
3. To evaluate and compare plans, you should consider such factors as:
 - Whether all of your prescription medications are included on the plan’s formulary;
 - Estimated annual drug costs;
 - Monthly premiums, co-pays and annual deductible, if any;
 - The tiers for the prescription medications that you take;
 - Whether your selected pharmacies are participating or preferred pharmacies in the plan network;
 - Whether your prescription medications are available through mail order; and
 - The overall star rating of the Prescription Drug Plan.
4. You can enroll in or change Prescription Drug Plan, as follows:
 - During your initial enrollment period for Original Medicare (Parts A & B);
 - During the annual open enrollment period, October 15 through December 7,
 - Monthly, if you currently receive Extra Help for your Medicare Part D; or
 - During special enrollment periods such as when moving out of your current plan’s service area, living in an extended care facility, losing other creditable coverage, qualifying for extra help, enrolling in Medicaid, etc.
5. You can enroll in a Prescription Drug Plan by:
 - Clicking the **“Enroll”** box next to or underneath the plan name on the Medicare.gov **“Your Plan Results”** or **“Your Plan Comparison”** web pages.
 - Calling OSHIP at 1-800-686-1578
 - Calling the desired plan directly.

- Enrolling on the desired plan's website.

Comparing Medicare Health Plans with drug coverage

1. The **"Your Plan Results"** screen will appear showing the Medicare Health Plans with drug coverage (i.e. Medicare Advantage) meeting your criteria and sorted according to the "Lowest Estimated Annual Health & Drug Cost".
2. You may check the box next to the name to display a detailed, side-by-side comparison of up to three (3) plans. Then click the brown **"Compare Plans"** box at the top or bottom of the list. To view the drug costs, click on the box **"Drug Costs & Coverage"**. To view hospital and medical benefits, click on the box **"Health Plan Benefits"**.
3. To evaluate and compare plans, you should consider such factors as:
 - Whether all of your prescription medications are included on the plan's formulary;
 - Estimated annual health and drug costs;
 - Monthly premiums, copays, coinsurance, annual deductible, and out of pocket maximums
 - The tiers for the prescription medications that you take;
 - Whether your selected pharmacies are participating or preferred pharmacies in the plan network;
 - Whether your prescription medications are available through mail order;
 - Whether your doctors and hospitals are in the plan's network; and
 - The overall star rating of the Plan by Medicare.
4. You can enroll in or change Medicare Health Plan, as follows:
 - During your initial enrollment period for Original Medicare (Parts A & B);
 - During the annual open enrollment period, October 15th through December 7th;
 - Anytime to enroll in a five star Medicare Health Plan;
 - Monthly, if you currently receive Extra Help for your Medicare Part D; or
 - During special enrollment periods such as when moving out of your current plan's service area, living in a care facility, losing other creditable coverage, qualifying for extra help, enrolling in Medicaid, etc.
5. You can enroll in a Medicare Health Plan by:

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- Clicking the “Enroll” box next to or underneath the plan name on the Medicare.gov “Your Plan Results” or “Your Plan Comparison” web pages.
- Calling OSHIP at 1-800-686-1578
- Calling the desired plan directly.
- Enrolling on the desired plan’s website.

Important Reminder about MediGold:

All hospitals in Delaware County are members of the OhioHealth network and do NOT accept MediGold. If you want to be treated at Grady Memorial, Riverside Methodist, Grant, Doctors or Marion General hospitals, then you should NOT enroll in a MediGold plan. MediGold requires plan participants to use contracted doctors and hospitals which are part of the Mount Carmel Health System (e.g. St. Ann’s, Mt. Carmel East, Mt. Carmel West Hospitals).

TIPS:

- The “Monthly Drug Costs at Retail Pharmacies” is based on the lowest retail pharmacy and includes the monthly premium.
- The month in which you meet the deductible, go into the donut hole and go into catastrophic coverage will be indicated on the monthly summary. This is only accurate if you take your medications as prescribed.
- Each plan can tier their own drugs so the same drug could be a different tier under different plans.
- To view a list of Participating and Preferred Pharmacies, click on the hyperlink under the “Pharmacy & Mail Order Information” section.
- If there are no Preferred Pharmacies under the plan, it will state “Not applicable” under the Preferred column.
- If there are preferred pharmacies, it will state “Yes” under the Preferred column. You will save the most using a Preferred pharmacy rather than a Participating pharmacy.
- To view the actual cost of each medication under each plan and pharmacy, click on the “View Drug Cost Summary” link. Then click on each pharmacy name to view cost.
- **You should run the plan comparisons each year during the annual open enrollment period since the plans change each year and your health can change each year.**
- If your current plan will be offered next year and is still the best plan for you, no action is needed. You will automatically be re-enrolled in that same plan and receive a new id card for the next plan year.
- If you are enrolling in a different plan, you do not need to notify your current plan. Enrolling in the new plan will automatically notify your current plan to cancel you at the end of the current year.

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- You can usually save at least one month of retail price per medication if you utilize mail order. On many plans, the tier 1 & tier 2 drugs are at no cost to you and do not apply to the annual deductible.