

HOW TO RUN A MEDICARE PART D OR MEDICARE ADVANTAGE PLAN COMPARISON

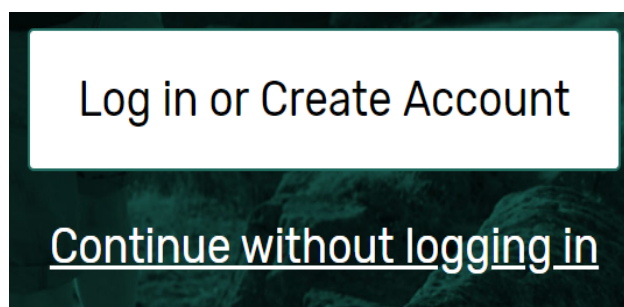


Doing a Search

1. At a personal computer, open your browser and go to [medicare.gov](https://www.medicare.gov).
2. On the Medicare home page, open the dropdown menu under **Health & Drug Plans**, then select **Find health & drug plans**. You can also scroll down the home page and click **Find plans**.
3. You can proceed in one of two ways:
 - a. Click **Log in or Create Account**.

NOTE: You will need this information to create an account:

- **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.).
 - **Date of Birth:** Month/Day/Year (MM/DD/YYYY).
 - **Effective Date for Part A:** Month/Year from your Medicare card.
4. On the Find a Medicare plan page, if you have the above info, you will click **Log in or Create Account**. If you do not have your Medicare Number yet, you can click **Continue without logging in**. The system will not retain your medication list and you will need to re-enter your information the next time you visit [medicare.gov](https://www.medicare.gov), but you can still run a comparison.



5. If using the **Log in or Create Account** box shown above, it will take you to the log-in screen. (See preview on page 2.)
 - a. If you already have an account, you will log in using your username and password.
 - b. If you *do not* yet have an account username/password, click on the **create an account now** link.
NOTE: To create an account, you must have your Medicare card with your Medicare number and the information listed above to continue.

Log in to your account

No account? Get a more personalized experience - [create an account now.](#)

USERNAME

PASSWORD

Log in

[Trouble logging in?](#)

Using a shared or public computer? Be sure to log out and close all browser windows when you're done. This will help keep your information secure.

6. If you logged in with your username and password, the “Find a Medicare Plan” screen will open and should show your full name.
7. If you created a new account, you will be taken to the page where you will need to answer all the questions and click the next button at the bottom of the page.
 - a. On the next page, you will be asked to create your username, password, and select a security question. Please write these down and keep in a safe place because you will need them each year during open enrollment to run your plan comparison and make your new selection. Once you have created your username and password, you will be taken back to the above screen to key in your username and password to go to the next page.

8. Click the circle by the type of plan you wish to find: Medicare Advantage or Part D drug plan. Both are run the same way, so these instructions apply to both options.

Example below is with using your username and password:

YOUR NAME WILL BE HERE

What type of 2021 coverage are you looking for?

Outside Open Enrollment (October 15 - December 7) you can enroll only during specific times, like your Initial Enrollment Period or a Special Enrollment Period. [Learn more about when you can enroll.](#)

- ☐ I want to learn more about Medicare options before I see plans
- ☐ Medicare Advantage Plan
- ☐ Drug plan (Part D)
- ☐ Drug plan (Part D) + Medigap policy
- ☐ Medigap policy only

Example below is when you do not have your Medicare card number and use the “Continue without logging in” option:

What type of 2021 coverage are you looking for?

You must have Medicare before you can enroll in a Medicare Advantage Plan or Drug plan (Part D). Outside Open Enrollment (October 15 - December 7) you can enroll only during specific times, like your Initial Enrollment Period or a Special Enrollment Period. [Learn more about when you can enroll.](#)

- ☐ I want to learn more about Medicare options before I see plans
- ☐ Medicare Advantage Plan
- ☐ Drug plan (Part D)
- ☐ Drug plan (Part D) + Medigap policy
- ☐ Medigap policy only

If you select Drug plan (Part D) the following will pop up; no need to make a selection:

Adds drug coverage to Original Medicare.

- ☐ Drug plan (Part D) + Medigap policy
- ☐ Medigap policy only

If you select Medicare Advantage Plan the following will pop up; no need to make a selection:

Bundles all Medicare health benefits (with or without drug coverage) plus extra services – like vision, hearing, dental, and more.

- ☐ Drug plan (Part D)
- ☐ Drug plan (Part D) + Medigap policy
- ☐ Medigap policy only

9. Enter your home zip code in the zip code box.

ENTER YOUR ZIP CODE

Continue

10. Select your county.

For the question below, you can check the box “I’m not sure” to move to the next screen:

Do you get help with your costs from one of these programs?

- ☐ Medicaid
- ☐ Supplemental Security Income
- ☐ Medicare Savings Program
- ☐ Extra Help from Social Security
- ☐ I'm not sure
- ☐ I don't get help from any of these programs

11. Select the appropriate response to the question “Do you get help with your costs from one of these programs?”

12. Select **Continue Without Logging In**.

13. Tell us your search preferences. Do you want to see your drug costs when you compare plans? Always select **Yes** if currently taking medications. Then click **Next**. Only select **No** if you take no medications.

14. If logged in, you should now be on the “Confirm your drug list” page. On this page, you should confirm all prescription medications that you take are listed with the correct dosage, as well as the number you take per month. If you see a medication that you no longer take, you should remove it from the list by clicking the **Remove drug** link under the drug name. If you do not see all your current medications, make sure to add them by clicking the **Add Another Drug** box at the bottom of the page.

You can change the dosage or quantity by clicking on the **Edit drug** link. Once you have entered all your medications correctly, click on the **Done Adding Drugs** box at the bottom of the page.

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. Even if you do not take any prescription medications, you are required to enroll in a Part D plan UNLESS you get medications from the VA Pharmacy, which is considered creditable coverage.

Confirm your drug list

Lisinopril 20mg tablet generic	Quantity 30	Frequency Every month
Remove drug		Edit drug

Find & Add Drug

Done Adding Drugs

If you continued without logging in, you will be taken to the “Add prescription drug” page. Begin by typing in the name of your first medication and a list of potential matches will appear. Click on the correct drug name and the **Add Drug** box, and it will prompt you to select your dosage, quantity, and frequency of the medication. Click **Add to My Drug List**. Continue to add each of your medications until you are finished. Once completed, click **Done Adding Drugs**.

- The **dosage** is the medication strength, e.g., 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 would be 30/month or 90/3 months.
- The **frequency** is how often you refill your prescription for that quantity, e.g., every month, every 2 months, every 3 months, every 6 months, or every 12 months.
- If a generic is available for the drug entered, it will return to a screen that will allow you to select either the generic or brand-name drug.
- Do NOT enter over-the-counter drugs or supplies.

TIP: To maximize savings, use generics whenever possible and use a preferred network pharmacy. If a generic is not available for the drug, you can 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 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. If you can only take the brand name drug, your physician will write DAW (dispense as written) on the prescription; otherwise, the pharmacy will dispense a generic. In order to get 90-day refills, your physician must also write your prescription for 90 days.

15. On the “Choose up to 5 pharmacies” page, you can select up to five different retail pharmacies or four pharmacies plus mail order. To select a pharmacy, click the box beside the name of the desired pharmacy. Once you have made your selections, the pharmacies are listed in the blue banner at the bottom of the page. Click the **Done** box. NOTE: If on the first page you don’t see the pharmacy you are looking for, scroll to the top of the page and increase the distance filter.

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

Choose up to 5 pharmacies

Drug costs vary based on the pharmacy you use. Choosing pharmacies lets us show you your estimated drug costs, helping you pick the lowest cost plan. You don't have to choose the pharmacies you currently use.

ENTER YOUR COMPLETE ADDRESS OR ZIP CODE

43015

NAME OF PHARMACY (OPTIONAL)

Find Pharmacy

Filter by: Distance: 5 miles

Showing 1-8 of 8 pharmacies near 43015

Mail-order Pharmacy

Add both mail-order and retail pharmacies to find the lowest cost.

☒ Pharmacy Added

1. Walgreens #6485

19 London Road, Delaware, OH 43015
(740) 368-9380

☒ Pharmacy Added

4. Kroger Sav-on Pharmacy N-857

1840 Columbus Pike, Delaware, OH 43015
(740) 363-0035

☒ Pharmacy Added

5. Walmart Pharmacy 10-1990

1760 Columbus Pike, Delaware, OH 43015
(740) 369-0422

☒ Pharmacy Added

6. Meijer Pharmacy #249

1380 Sunbury Rd, Delaware, OH 43015
(740) 368-5910

☒ Pharmacy Added

Walgreens #6485

Kroger Sav-On Pharmacy N-857

Walmart Pharmacy 10-1990

Meijer Pharmacy #249

Mail Order Pharmacy

Done

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16. The next screen will show the number of Part D/Advantage plans available in your zip code. The plans are pre-sorted as “lowest drug + premium cost” to obtain the lowest overall cost plan. This is the most cost-effective way to find the best plan for you. You can do other things on this screen like print, change the zip code area to search in, go back and edit your drug lists, and change the pharmacies that you had previously selected. We suggest that you do not use any additional filters as it will not add any cost savings value to your sort.

There may be Medicare Advantage Plans available with lower drug costs. [Tell me more.](#)

[View 56 available Medicare Advantage Plans](#)

[< Back to drugs & pharmacies](#)

Print

MY LOCATION

Delaware, OH [Change location](#)

PLAN TYPE

Select a Plan Type ▾

Filter by:

Insurance Carrier ▾

Star Ratings ▾

Insulin Savings Program ▾

[View all filters](#)

Showing 10 of 30 drug plans

SORT PLANS
BY

Lowest drug + premium cost ▾

17. The plans are listed by lowest overall out-of-pocket cost to highest based on the list of medications you entered. We suggest that you select the top three plans for side-by-side comparison by clicking **Add to compare** under each plan name. Once you have made three selections, click **Compare** at the bottom of the page.

SilverScript SmartRx (PDP)

Aetna Medicare | Plan ID: S5601-189-0

Star rating: ★★★★★☆

MONTHLY PREMIUM

\$7.30 Includes: Only drug coverage

YEARLY DRUG & PREMIUM COST

\$36.50 Retail pharmacy: Estimated total drug + premium cost

\$36.50 Mail-order pharmacy: Estimated total drug + premium cost

DEDUCTIBLE

\$445.00 Drug deductible

PHARMACIES

3 of 4 of your selected retail pharmacies are in-network

[View your pharmacies](#)

DRUGS

[View drugs & their costs](#)

Enroll

Plan Details

☐ Add to compare

3 Plans to
compare

SilverScript SmartRx
(PDP)



WellCare Wellness Rx
(PDP)



Clear Spring Health
Premier Rx (PDP)



Compare

18. From the side-by-side comparison screen you can click on **Plan Details** to get additional information about each of the plans. To enroll in the plan, just click on the blue **Enroll** box and it will take you to the application screen where you will provide all requested information. Also on that page is a brief overview of the plan.

The top three selections will then appear in a side-by-side comparison:

Delaware, OH

	SilverScript SmartRx (PDP) ✕ \$7.30 Monthly premium <div>Enroll</div> <div>Plan Details</div>	WellCare Wellness Rx (PDP) ✕ \$15.60 Monthly premium <div>Enroll</div> <div>Plan Details</div>	Clear Spring Health Premier Rx (PDP) ✕ \$15.20 Monthly premium <div>Enroll</div> <div>Plan Details</div>
Overview			
Star rating	★★★★☆	★★★★☆	Plan too new to be measured
Total	\$7.30	\$15.60	\$15.20
Yearly drug deductible	\$445.00	\$445.00	\$445.00
Drug coverage & costs			
Drugs covered/Not covered	1 of 1 Prescription drugs covered Restrictions may apply	1 of 1 Prescription drugs covered Restrictions may apply	1 of 1 Prescription drugs covered Restrictions may apply
Estimated total drug + premium cost	WALMART PHARMACY 10-1990 ✓ Standard in-network \$131.50 KROGER SAV-ON PHARMACY N-857 ✓ Preferred in-network \$36.50 WALGREENS #6485 ✗ Out-of-network \$871.15 MEIJER PHARMACY #249 ✓ Preferred in-network \$36.50 Mail order pharmacy ✓ Preferred in-network \$36.50	WALMART PHARMACY 10-1990 ✓ Preferred in-network \$78.00 KROGER SAV-ON PHARMACY N-857 ✓ Preferred in-network \$78.00 WALGREENS #6485 ✓ Standard in-network \$118.00 MEIJER PHARMACY #249 ✓ Preferred in-network \$78.00 Mail order pharmacy ✓ Preferred in-network \$78.00	WALMART PHARMACY 10-1990 ✓ Preferred in-network \$81.00 KROGER SAV-ON PHARMACY N-857 ✓ Preferred in-network \$81.00 WALGREENS #6485 ✓ Standard in-network \$148.10 MEIJER PHARMACY #249 ✓ Preferred in-network \$81.00 Mail order pharmacy ✓ Preferred in-network \$82.00

Comparing Prescription Drug Plans (with Original Medicare)

1. To evaluate and compare plans, you should consider such factors as:
 - Whether all your prescription medications are included on the plan's formulary.
 - Estimated annual drug costs.
 - Monthly premiums, copays, 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.
 - The overall star rating of the Prescription Drug Plan.
2. You can enroll in or change your Prescription Drug Plan as follows:
 - During your 7-month Initial Enrollment Period (IEP) for Original Medicare (Parts A & B).
 - During the Annual Open Enrollment Period (AEP), Oct. 15 through Dec. 7.
 - Once each quarter if you currently receive Extra Help for your Medicare Part D.
 - Note: If enrolling in the fourth quarter for the next year's plan, the effective date will be Jan. 1 of the following year.
 - During Special Enrollment Periods (SEP), such as when moving out of your current plan's service area or an extended care facility, losing other creditable coverage, qualifying for extra help, enrolling in Medicaid, etc.
3. You can enroll in a Prescription Drug Plan by:
 - Clicking the **Enroll** box next to or underneath the plan name on the **Medicare.gov** website.
 - Calling OSHIP at 1-800-686-1578.
 - Calling the desired plan directly.
 - Enrolling on the desired plan's website.
 - Calling Medicare at 1-800-633-4227.

Comparing Medicare Health Plans with Drug Coverage

1. To evaluate and compare Advantage plans, you should consider such factors as:
 - Whether all your prescription medications are included on the plan's formulary.
 - 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.
 - The overall star rating of the plan by Medicare.
2. You can enroll in or change Medicare Health Plans as follows:
 - During your 7-month Initial Enrollment Period (IEP) for Original Medicare (Parts A & B).
 - During the Annual Open Enrollment Period (AEP), Oct. 15 through Dec. 7.
 - Any time to enroll in a five-star Medicare Health Plan.

- Once each quarter if you currently receive Extra Help for your Medicare Part D.
- Note: If enrolling in the fourth quarter for the next year's plan, the effective date will be Jan. 1 of the following year.
- During Special Enrollment Periods, such as when moving out of your current plan's service area or an extended care facility, losing other creditable coverage, qualifying for extra help, enrolling in Medicaid, etc.

3. You can enroll in a Medicare Health Plan by:

- Clicking the **Enroll** box underneath the plan name on the Medicare.gov "Your Plan Comparison" pages.
- Calling OSHIP at 1-800-686-1578.
- Calling the desired plan directly.
- Enrolling on the desired plan's website.
- Calling Medicare at 1-800-633-4227.

Important Reminder about MediGold:

All the hospitals in Delaware County belong to the OhioHealth network, which does 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 that are part of the Mount Carmel Health System, such as St. Ann's, Mt. Carmel East, and 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 the actual cost of each medication under each plan and pharmacy, click on the blue "Plan Details" button. Look down the list for your preferred pharmacy.
- You should run the plan comparison each year during the annual open enrollment period since the plans change each year and so can your health.
- 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 may or may not receive a new identification 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 a new plan will notify CMS, who notifies your current plan to cancel you at the end of the current year.
- You can sometimes save by utilizing mail order. On many plans, the tier 1 and tier 2 drugs are at no cost to you and do not apply to the annual deductible.