

Medicare Prescription Drug Coverage

“Choosing the Plan that’s Right for You!”



An Enrollment Guide Produced by the CHOICES Program

Starting January 1, 2006, a new prescription drug program became available for everyone who has Medicare Part A and/or Part B. It pays for outpatient prescription drugs, insulin and insulin supplies, and “stop smoking” drugs. The program is sometimes called “Medicare Rx.” It’s also known as “Medicare Part D.”

- You won’t get coverage for the program directly from Medicare. You have to buy the coverage from private Medicare-approved companies that sell Part D plans. In Connecticut, there are 51 Medicare-approved Prescription Drug Plans (PDPs) in 2008. PDPs provide prescription drug coverage only; they don’t cover other medical needs like hospital and medical care. You may want to consider a PDP if you have a “Medigap” policy that covers hospital and medical care.
- There are also 37 Medicare-approved Medicare Advantage (HMOs, PPOs, and PFFSs) plans. These are sometimes called MA-PD plans. They offer prescription drug coverage and hospital and medical coverage together in one plan. In addition, there are 10 Medicare plans called “Special Needs Plans” that are available for people with certain chronic diseases and other specialized health needs. This year a “Medical Saving Account” is also a Medicare option where a high deductible Medicare Advantage Plan and a bank account are combined. Call 1-800-MEDICARE (1-800-633-4227), or CHOICES (1-800-994-9422), or go on the web to www.medicare.gov for additional information about Medicare Special Needs Plans and Medicare Medical Savings Accounts.
- Both PDPs and MA-PDs offer different plans with different benefits and costs. In addition to the PDPs and MA-PDs, some employer-sponsored and union-sponsored retirement health plans also offer Part D coverage.
- **You need to know about this program even if you have existing prescription drug insurance in order to make the best decision for your prescription drug needs.**
- For most people, enrollment is voluntary. You don’t have to sign up for it. But if you don’t enroll when you first have the opportunity, you may pay more for premiums later on. You may also have a waiting period for coverage. This may be important later on if you develop a sudden illness.

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NOTE: If you have Medicaid, ConnPACE or a Medicare Savings Program (QMB, SLMB or ALMB), you must be enrolled in a plan. But you still get to choose your own plan.

- Each plan offers its own selection of drugs (called a “formulary”) and has its own preferred provider network. **It’s important to select your plan carefully, especially because you will be limited to the drugs on your chosen plan’s formulary.**
- The initial open enrollment period lasted from November 15, 2005 - May 15, 2006. Everyone who has Medicare Part A and/or Part B has the opportunity to change their Medicare Rx plan or join the program for the first time during the Annual Coordinated Election Period. The Annual Coordinated Election Period takes place each year between November 15th – December 31st. CHOICES has different Question & Answer Guides that explain more about Medicare prescription drug coverage for people in different situations. Ask CHOICES for information on any of the following topics:
 - General Information
 - Retirees with Existing Health Insurance Coverage
 - Extra Help (to pay for Medicare prescription drug coverage)
 - Medicaid (Title 19)
 - ConnPACE
 - Medicare Savings Programs (QMB, SLMB or ALMB)
- The purpose of this Guide is to:
 - (1) Help you decide if you should enroll in a plan
 - (2) Give you information you need to help you select and enroll in a plan.

SHOULD YOU ENROLL IN A PLAN?

You should think about enrolling if you don’t have *any* prescription drug coverage or if the coverage you have isn’t as good as Medicare prescription drug coverage. If your existing coverage is “creditable” (as good as Medicare), then you probably don’t want to join a Medicare plan at this time. (Ask CHOICES for information on how to find out if your existing coverage is creditable.) If cost is an issue, you may qualify for Extra Help to pay for premiums, deductibles and co-pays. If you qualify you may not have any premiums or deductibles. Your co-pays may be as low as \$2.25 (generic) or \$5.60 (brand name).

Ask CHOICES for the income and asset limits for Extra Help.

HOW DO YOU PICK A PLAN?

- Step 1. ___ Make a list of all the prescription drugs you take and how much you pay for them. Look at the dosage you take and the quantity you get.
- Step 2. ___ If you have existing prescription insurance, find out if it's "creditable". (Your insurance company must send you this information.)
- Step 3. ___ If costs are a major concern, find out if you qualify for Extra Help. If you do, you will save money on premiums, deductibles and co-pays. If you have Medicaid (Title 19) or a Medicare Savings Program (QMB, SLMB or ALMB), you automatically qualify for Extra Help. If you have ConnPACE and your income is below \$15,315* (single) or \$20,535* (couple), you must apply for Extra Help. *These amounts will be updated in 2008.
- Step 4. ___ Think about what's most important to you in a prescription drug plan. Rank them in order of importance. E.g., can you take generic drugs or do you need brand name? Do you spend part of the year outside Connecticut and need a national plan? Do you take very few medications now? If so, a less expensive plan with a higher deductible may be adequate. If you take a lot of medications, you may want to narrow your search to the plans that pay for drugs during the coverage gap.
- Step 5. ___ Finally, ask a lot of questions to find the best plan for your needs. Here are some things to think about:
- How much is the monthly premium? (Rx Premiums in CT range from \$0 to approximately \$99.50 per month.)
 - Is there an annual deductible? How much is it?
 - Does the plan cover the drugs you take now?
 - What "tier" are your drugs on the different plans? (This refers to different co-pay or co-insurance levels for different drugs, e.g., Tier 1-5 in some instances, and can be called a generic drug, value generic drug, preferred brand drug, non-preferred brand drug, specialty drugs, and injectibles. If two plans cover the same drug but one plan places it at Tier 1 and another at Tier 3, there may be a significant difference in cost.
 - Are there prior authorization requirements for certain drugs? Is "step-therapy" required? (The requirement that you must try certain drugs first before you can get the medication prescribed by your doctor.)
 - Is there a "transition" process? (Allowing the temporary usage of drugs that are not on the plan's formulary.)
 - Is the plan convenient? Is it accepted at your pharmacy? Does it offer mail order?
 - Is there a gap in coverage? Does the plan also offer hospital and medical coverage? (If this is important to you.)
 - What is the plan's "exception" process if you are denied a particular drug?

REMEMBER! Look for the combination of factors that are most important to your situation. For example, for a person with few prescriptions, a less expensive plan may be adequate. On the other hand, for a person taking many, costly prescriptions; a more expensive plan may be well worth the additional premium dollars. On the following pages you will find general information about the PDPs and MA-PD plans in Connecticut. Telephone numbers for the plans are listed so you can contact them directly for more detailed information. If you decide you want to enroll for the first time or make a change of plans, do so by Dec. 31st, 2007 so your coverage will take effect as of Jan. 1st, 2008.

HOW TO ENROLL IN A PLAN

To enroll in a plan you can:

1. Call CHOICES at 1-800-994-9422 to speak to a CHOICES counselor.
2. Contact the plan directly. Plan phone numbers are listed on the following pages. You can also go to the plans' web sites.
3. Call Medicare (1-800-MEDICARE)
4. Visit www.medicare.gov. Using the Medicare "Plan Finder" tool you can compare up to three plans at a time. You will also be able to enter up to 25 medications to see which plans offer the drugs you take now. You can also use the "Plan Finder" tool to enroll on-line.

You can also get more information from these on-line sources:

- **State of CT Department of Social Services:** www.ct.gov/medicarerx
- **Medicare:** www.medicare.gov
- **Social Security:** www.socialsecurity.gov
- **Center for Medicare Advocacy:** www.medicareadvocacy.org
- **Department of Social Services, Aging Services Division:** www.ct.gov/agingservices

Call CHOICES at 1-800-994-9422 to speak to a counselor at the Area Agency on Aging serving your area of the state. CHOICES counselors are trained and certified to assist you with your Medicare issues and concerns. They can also help you with comparing Medicare prescription drug plans, getting Extra Help to pay for your premiums, deductibles, and co-pays and enrolling you into the plan of your choice.

CHOICES is a program of the State of Connecticut Department of Social Services, Aging Services Division, and serves as Connecticut's State Health Insurance Assistance Program (SHIP), as designated by the Centers for Medicare and Medicaid Services. CHOICES is administered in partnership with the Area Agencies on Aging and the Center for Medicare Advocacy, Inc.



LOCAL HELP FOR PEOPLE WITH MEDICARE



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This publication is not a legal document. The official Medicare provisions are contained in the relevant laws, regulations and rulings. This information is available in alternative formats. Call 1-800-994-9422. TDD/TTY users call 1-800-842-4524.

January 1 – December 31, 2008 Connecticut Medicare Rx PDPs ⁽¹⁾
CHOICES Hotline! – 1-800-994-9422

PLAN SPONSOR AND NUMBER	PLAN NAME AND NUMBER	TELEPHONE: MEMBERS (M) NON-MEMBERS (NM) AND WEBSITE	MONTHLY PREMIUM	ANNUAL DEDUCTIBLE	30-DAY SUPPLY CO-PAYS AND CO-INSURANCE (2)					“COVERAGE GAP” COVERAGE	ARE PREMIUMS COVERED IN FULL IF YOU QUALIFY FOR “FULL SUBSIDY” EXTRA HELP? (3)
					T1	T2	T3	T4	T5		
Aetna Medicare (S5810)	Aetna Medicare Rx Essentials (036)	Non-Members 1-800-213-4599 TTY Users call: 1-800-628-3323	\$25.50	\$275	T1 \$3 Generic	T2 \$39 Preferred	T3 \$80 Non-preferred brand	T4 25% Specialty		None	Yes
	Aetna Medicare Rx Plus (138)	Members 1-877-238-6211 TTY Users call: 1-888-760-4748	\$42.70	\$0	T1 \$4 Generic	T2 \$35 Preferred brand	T3 \$65 Non-preferred brand	T4 33% Specialty		None	No
	Aetna Medicare Rx Premier (172)		\$93.30	\$0	T1 \$4 Generic	T2 \$40 Preferred brand	T3 \$70 Non-preferred brand	T4 33% Specialty	Some – call plan for details	No	
Anthem Blue Cross and Blue Shield (S2893)	Blue MedicareRx Premier (003)	Non-Members 1-877-479-2227 TTY Users call: 1-800-936-9984	\$73	\$0	T1 \$8 Generic	T2 \$24 Preferred Brand	T3 \$54 Non-preferred Brand	T4 33% Non-specialty injectible	T5 33% Specialty	Some – call plan for details	No
	Blue MedicareRx Value (014)	Members 1-866-755-2776 TTY Users call: 1-866-798-7026	\$31.40	\$275	T1 \$8 Generic	T2 \$23 Preferred Brand	T3 \$59 Non-preferred Brand	T4 25% Non-specialty injectible	T5 25% Specialty	None	No
	Blue MedicareRx Value Plus (001)		\$38.60	\$0	T1 \$8 Generic	T2 \$29 Preferred Brand	T3 \$60 Non-preferred Brand	T4 33% Non-specialty injectible	T5 33% Specialty	None	No

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(3) If you are on Medicaid (Title 19) or ConnPACE, the State of Connecticut will pay the entire premium. If you qualify for “full subsidy” Extra Help, but you do not have Medicaid or ConnPACE, you will have to pay the difference between the national “benchmark” premium (\$25.00 in 2008) and your chosen plan’s premium. E.g., if your plan costs \$30.00 per month, the subsidy will cover \$25.00 of your premium and you will be responsible to pay the \$5.00 per month.

IMPORTANT! The information in this chart is from Medicare. Please contact the plan itself for more details!

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					T1	T2	T3	T4		
CIGNA Medicare Rx (S5617)	CIGNA Medicare Rx Plan One (008)	Non-Members 1-800-735-1459	\$32.90	\$275	T1 \$2	T2 \$30	T3 \$70	T4 25%	None	No
	CIGNA Medicare Rx Plan Two (010)	Members 1-800-222-6700	\$34.60	\$0	T1 \$6	T2 \$35	T3 \$80	T4 33%	None	No
	CIGNA Medicare Rx Plan Three (172)		\$78.60	\$0	T1 \$6	T2 \$35	T3 \$60	T4 33%	Some – call plan for details	No
Coventry AdvantraRx (S5674)	AdvantraRx Premier (009)	Non-Members 1-800-882-3822 TTY Users call: 1-800-508-9548 Members 1-866-823-5178 TTY Users call: 1-866-236-1069	\$35	\$0	T1 \$5 Preferred Generics	T2 \$25 Preferred Generics	T3 \$65 Non-preferred Generic & Non-preferred Brand	T4 33% Specialty	None	No

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					T1	T2	T3	T4	T5		
Coventry (cont.)	AdvantraRx Premier Plus (011)	(see previous page)	\$47.50	\$0	T1 \$2 Preferred Generics	T2 \$22 Preferred Generics	T3 \$70 Non-preferred Generic & Non-preferred Brand	T4 33% Specialty		Some – call plan for details	No
	AdvantraRx Value (008)		\$21.70	\$0	T1 \$8 Preferred Generics	T2 \$24 Preferred Brand	T3 \$55 Non-preferred Generic & Non-preferred Brand	T4 33% Specialty		None	No
EnvisionRx Plus (S7694)	EnvisionRxPlus Gold (036)	Non-Members 1-866-250-2005 TTY Users call: 1-866-763-9630 Members 1-866-250-2005 TTY Users call: 1-866-763-9630	\$99.50	\$0	T1 \$0 Preferred Generics	T2 \$40 Non-preferred Generics	T3 \$30 Preferred Brand	T4 \$45 Non-preferred Brand	T5 25% Specialty	Some – call plan for details	No

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EnvisionRxPlus (cont.)	EnvisionRxPlus Standard (002)	(see previous page)	\$64.50	\$275	T1 25%				None	No
First Health Part D (S5768)	First Health Part D-Premier (038)	Non-Members 1-800-588-3322 TTY Users call: 1-800-508-9548	\$27	\$0	T1 \$7 Preferred Generics	T2 \$33 Preferred Brand	T3 \$60 Non Preferred Generic & Non- Preferred Brand	T4 33% Specialty	None	Yes
	First Health Part D-Secure (085)	Members 1-866-865-0662 TTY Users call: 1-866-236-1069	\$14.60	\$175	T1 \$4 Preferred Generics	T2 \$20 Preferred Brand	T3 \$49 Non Preferred Generic & Non- Preferred Brand	T4 30% Specialty	None	No
	First Health Part D-Select (050)		\$42.60	\$0	T1 \$5 Preferred Generics	T2 \$21 Preferred Brand	T3 \$55 Non Preferred Generic & Non- Preferred Brand	T4 33% Specialty	Some – call plan for details	No

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					T1	T2	T3	T4	T5		
Health Net (S5678)	Health Net Orange Option 1 (004)	Non-Members 1-800-606-3604 TTY Users call: 1-800-929-9955	\$25.40	\$275	T1 \$1 Preferred Generic	T2 \$40 Preferred Brand	T3 25% Injectible	T4 25% Specialty		None	Yes
	Health Net Orange Option 2 (010)	Members 1-800-806-8811 TTY Users call: 1-800-929-9955	\$38	\$0	T1 \$5 Preferred Generics	T2 \$30 Preferred Brand	T3 \$75 Non-preferred Brand	T4 33% Injectible	T5 33% Specialty	None	No
HealthSpring Prescription Drug Plan (S5932)	HealthSpring Prescription Drug Plan – Reg 2 (003)	Non-Members 1-800-331-6293 TTY Users call: 1-866-845-7230 Members 1-800-331-6293 TTY Users call: 1-866-845-7230	\$18.80	\$275	25% Coinsurance					None	Yes
Humana Insurance Company (S5884)	Humana PDP Complete S5884-031 (031)	Non-Members 1-800-706-0872 TTY Users call: 1-877-833-4486 Members 1-800-281-6918 TTY Users call: 1-800-833-3301	\$95.10	\$0	T1 \$4 Preferred Generics	T2 \$25 Preferred Brand	T3 \$54 Non-preferred Brand	T4 25% Specialty		Some – call plan for details	No

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					T1	T2	T3	T4		
Humana (cont.)	Humana PDP Enhanced S5884-002 (002)	(see previous page)	\$25	\$0	T1 \$4 Preferred Generics	T2 \$25 Preferred Brand	T3 \$54 Non- preferred Brand	T4 25% Specialty	None	No
	Humana PDP Standard S5884-061 (061)		\$24	\$275	25% Coinsurance				None	Yes
MemberHealth (S5803)	Community CCRx Basic (071)	Non-Members 1-866-684-5353 TTY Users call: 1-866-684-5351	\$22.80	\$275	T1 \$0 Generics	T2 30% Preferred Brand	T3 60% Brand		None	Yes
	Community CCRx Choice (139)		\$43.70	\$0	T1 \$0 Generic	T2 \$20 Preferred Brand	T3 \$45 Brand	T4 25% Specialty	None	No
	Community CCRx Gold (219)		\$44.80	\$0	T1 \$5 Generic	T2 \$25 Preferred Brand	T3 \$60 Brand	T4 25% Specialty	Some – call plan for details	No

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					T1	T2	T3	T4		
Medco Medicare Prescription Plan (S5660)	Medco Medicare Prescription Plan – Access (173)	Non-Members 1-800-758-3605 TTY Users call: 1-800-716-3231	\$68.60	\$0	T1 \$6 Generic	T2 \$35 Preferred Brand	T3 75% Non-Preferred Brand	T4 33% Specialty	Some – call plan for details	No
	Medco Medicare Prescription Plan – Choice (003)	Members 1-800-758-4574 TTY Users call: 1-800-716-3231	\$41	\$0	T1 \$6 Generic	T2 \$35 Preferred Brand	T3 75% Non-Preferred Brand	T4 33% Specialty	None	No
	Medco Medicare Prescription Plan – Value (105)		\$25.20	\$275	T1 23% Generic	T2 23% Preferred Brand	T3 58% Non-Preferred Brand	T4 25% Specialty	None	Yes
Pennsylvania Life Insurance Company (S5597)	Prescription Pathway Bronze Plan Reg 2 (068)	Non-Members 1-800-978-9500 TTY Users call: 1-866-222-3904	\$23.70	\$275	25% Coinsurance				None	Yes
	Prescription Pathway Gold Plan Reg 2 (035)	Members 1-866-566-3050 TTY Users call: 1-800-754-5171	\$29	\$0	T1 \$6 Generic	T2 \$44 Brand	T3 33% Specialty		None	No
	Prescription Pathway Platinum Plan Reg 2 (200)		\$63.10	\$0	T1 \$6 Generic	T2 \$44 Brand	T3 33% Specialty		Some – call plan for details	No

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January 1 – December 31, 2008 Connecticut Medicare Rx PDPs⁽¹⁾
CHOICES Hotline! – 1-800-994-9422

PLAN SPONSOR AND NUMBER	PLAN NAME AND NUMBER	TELEPHONE: MEMBERS (M) NON-MEMBERS (NM) AND WEBSITE	MONTHLY PREMIUM	ANNUAL DEDUCTIBLE	30-DAY SUPPLY CO-PAYS AND CO-INSURANCE (2)					“COVERAGE GAP” COVERAGE	ARE PREMIUMS COVERED IN FULL IF YOU QUALIFY FOR “FULL SUBSIDY” EXTRA HELP? (3)
					T1	T2	T3	T4	T5		
RxAmerica (S5644)	Advantage Allegiance Plan by RxAmerica (287)	800-429-6686	\$43.80	\$0	T1 \$5 Generic	T2 35% Preferred Brand	T3 25% Specialty Brand	T4 45% Non-Preferred Brand		Some – call plan for details	No
	Advantage Freedom Plan by Rx America (047)		\$27.30	\$0	T1 \$5 Generic	T2 35% Preferred Brand	T3 25% Specialty Brand	T4 45% Non-Preferred Brand		None	No
	Advantage Star Plan by Rx America (068)		\$21.30	\$275	T1 \$5.50 Generic	T2 25% Preferred Brand	T3 25% Specialty Brand	T4 35% Non-Preferred Brand		None	Yes
SilverScript Insurance Company (S5601)	SilverScript (004)	Non-Members 1-866-552-6106 TTY Users call: 1-866-552-6288	\$21	\$275	T1 \$7 Generic	T2 \$29 Preferred Brand	T3 \$93 Non-Preferred Brand	T4 25% Specialty		None	Yes
	SilverScript Complete (073)		Members 1-866-235-5660 TTY Users call: 1-866-236-1069	\$54.50	\$0	T1 \$7 Generic	T2 \$30 Preferred Brand	T3 \$90 Non-Preferred Brand	T4 33% Specialty	T5 \$2 Value Generics	Some – call plan for details
	SilverScript Plus (005)		\$41.70	\$0	T1 \$9 Generic	T2 \$26 Preferred Brand	T3 \$85 Non-Preferred Brand	T4 33% Specialty	T5 \$4 Value Generics	Some – call plan for details	No

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					T1	T2	T3	T4			
Sterling Life Insurance Company (S4802)	Sterling Rx (023)	Non-Members 1-888-909-1713 TTY Users call: 1-888-858-8567	\$29.30	\$275	T1 \$5 Generic	T2 \$30 Preferred Brand	T3 40% Non-Preferred Brand	T4 25% Specialty		None	Yes
	Sterling Rx Plus (035)	Members 1-866-865-0664 TTY Users call: 1-866-236-1069	\$72.50	\$100	T1 \$0 Generic	T2 \$25 Preferred Brand	T3 25% Non-Preferred Brand	T4 25% Specialty		Some – call plan for details	No
UniCare (S5960)	MedicareRx Rewards Standard (108)	Non-Members 1-866-892-5334 TTY Users call: 1-800-297-1538	\$24.60	\$275	25% Coinsurance					None	Yes
	MedicareRx Rewards Value (002)	Members 1-800-928-6201 TTY Users call: 1-877-247-1657	\$27.10	\$0	T1 \$10 Generic	T2 \$44.90 Preferred Brand	T3 \$80 Non-Preferred Brand	T4 33% Non-Specialty Injectibles	T5 33% Specialty	None	Yes

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					T1	T2	T3	T4		
United American Insurance Company (S5755)	UA Medicare Part D Prescription Drug Cov (006)	Non-Members 1-866-524-4169 TTY Users call: 1-866-524-4170 Members 1-866-524-4169 TTY Users call: 1-866-524-4170	\$39.70	\$0	T1 \$9 Generic	T2 \$35 Preferred Brand	T3 \$70 Non-Preferred Brand	T4 33% Specialty	None	No
	UA Medicare Part D Rx Covg – Silver Plan (041)	Non-Members 1-866-299-3406 TTY Users call: 1-866-524-4170 Members 1-866-299-3406 TTY Users call: 1-866-524-4170	\$35.10	\$150	T1 \$4 Generic	T2 \$40 Preferred Brand	T3 \$80 Non-Preferred Brand	T4 25% Specialty	None	No
UnitedHealthcare (S5820)	AARP MedicareRx Preferred (002)	Non-Members 1-888-867-5564 TTY Users call: 1-877-730-4192 Members 1-888-867-5575 TTY Users call: 1-877-730-4192	\$34	\$0	T1 \$7 Preferred Generic	T2 \$30 Preferred Brand	T3 \$75.60 Other Non-Preferred	T4 33% Specialty	None	No

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					T1	T2	T3	T4		
UnitedHealthCare (cont.)	UnitedHealth Rx Value (106)	Non-Members 1-888-867-5561 TTY Users call: 1-877-730-4203 Members 1-888-867-5562 TTY Users call: 1-877-730-4203	\$21.20	\$275	T1 \$6 Preferred Generic	T2 \$27.75 Preferred Brand	T3 25% Other Non- Preferred	T4 25% Specialty	None	No
UnitedHealthcare (S5921)	AARP Medicare Rx Enhanced (183)	Non-Members 1-888-867-5564 TTY Users call: 1-877-730-4192 Members 1-888-867-5575 TTY Users call: 1-877-730-4192	\$63.40	\$0	T1 \$7 Preferred Generic	T2 \$30 Preferred Brand	T3 \$75.60 Other Non- Preferred	T4 33% Specialty	Some – call plan for details	No
	AARP MedicareRx Saver (181)	Non-Members 1-800-745-0922 TTY Users call: 1-877-730-4192 Members 1-888-867-5575 TTY Users call: 1-877-730-4192	\$31	\$275	T1 \$5 Preferred Generic	T2 \$20 Preferred Brand	T3 \$49.65 Other Non- Preferred	T4 25% Specialty	None	No

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					T1	T2	T3	T4		
United HealthCare (cont.)	UnitedHealth Rx Basic (182)	Non-Members 1-888-867-5561 TTY Users call: 1-877-730-4203 Members 1-888-867-5562 TTY Users call: 1-877-730-4203	\$38.50	\$0	T1 \$7 Preferred Generic	T2 \$28 Preferred Brand	T3 \$65.70 Other Non- Preferred	T4 33% Specialty	None	No
WellCare (S5967)	WellCare Classic (139)	888-423-5252	\$27.60	\$250	T1 \$0	T2 \$35	T3 \$89	T4 26%	None	Yes
	WellCare Signature (036)		\$31.50	\$0	T1 \$0	T2 \$45	T3 \$107	T4 33%	None	No

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**January 1 – December 31, 2008 Connecticut Medicare Rx MA-PDs ⁽¹⁾
CHOICES Hotline! – 1-800-994-9422**

PLAN SPONSOR AND NUMBER	PLAN NAME AND NUMBER	TYPE OF PLAN	TELEPHONE MEMBERS (M) NON-MEMBERS (NM)	PLAN SERVICE DELIVERY AREA (BY COUNTY)	MONTHLY PREMIUM FOR DRUGS ONLY (2)	COMBIND MONTHLY PREMIUM FOR DRUGS, HOSPITAL AND MEDICAL (2)	ANNUAL DEDUCTIBLE FOR DRUG COVERAGE ONLY	30-DAY SUPPLY CO-PAYS AND CO-INSURANCE (3)				“COVERAGE GAP” COVERAGE
								T1	T2	T3	T4	
Aetna Medicare (H0768)	Aetna Golden Choice Premier Plan (002)	PPO	Non-Members 1-800-832-2640 TTY call: 1-800-628-3323	Fairfield, Hartford, Litchfield, New Haven	\$60.60	\$118	\$0	T1 \$4 Generic	T2 \$40 Preferred Brand	T3 \$70 Non-Preferred Brand	T4 33% Specialty	Some – call plan for details
	Aetna Golden Choice Standard (001)				\$22.40	\$83	\$275	T1 \$4.25 Generic	T2 \$34 Preferred Brand	T3 \$80 Non-Preferred Brand	T4 25% Specialty	None
Aetna Medicare (H5736)	Aetna Medicare Open Premier Plan w/ Rx (017)	PFFS	TTY call: 1-800-628-3323	Litchfield, Middlesex, Tolland	\$63	\$151	\$0	T1 \$4 Generic	T2 \$40 Preferred Brand	T3 \$70 Non-Preferred Brand	T4 33% Specialty	Some – call plan for details
	Aetna Medicare Open Value Plan w/Rx (002)				\$21.20	\$25	\$275	T1 \$4 Generic	T2 \$34.50 Preferred Brand	T3 \$80 Non-Preferred Brand	T4 25% Specialty	None
Aetna Medicare (H5793)	Aetna Golden Medicare Premier Plan (003)	HMO		Fairfield, Hartford, Litchfield, New Haven	\$41.10	\$99	\$0	T1 \$4 Generic	T2 \$40 Preferred Brand	T3 \$70 Non-Preferred Brand	T4 33% Specialty	Some – call plan for details

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								T1	T2	T3	T4			
Aetna (cont.)	Aetna Golden Medicare Value Plan (001)	HMO	(see previous page)	Fairfield, Hartford, Litchfield, New Haven	\$0	\$0	\$0	T1 \$4 Generic	T2 \$36 Preferred Brand	T3 \$80 Non-Preferred Brand	T4 25% Specialty	None		
Anthem Blue Cross Blue Shield (H5854)	MediBlue HMO Plus (002)	HMO	Non-Members 1-800-238-1143 TTY call: 1-800-241-6894 Members 1-866-673-4157 TTY call: 1-800-241-6894	Fairfield, Hartford, New Haven	\$28	\$29	\$0	T1 \$5 Generic	T2 \$30 Preferred Brand	T3 \$65 Non-Preferred Brand	T4 30% Specialty	Some – call plan for details		
	MediBlue HMO Select (003)				\$55	\$98	\$0	T1 \$5 Generic	T2 \$30 Preferred Brand	T3 \$65 Non-Preferred Brand	T4 30% Specialty	Some – call plan for details		
Anthem Blue Cross Blue Shield (H1689)	SmartValue Enhanced (017)	PFFS	Non-Members 1-800-765-2585 TTY call: 1-888-844-5530 Members 1-888-445-8916 TTY call: 1-877-247-1657	Litchfield, Middlesex, New London, Tolland, Windham	\$59.40	\$98	\$0	T1 \$8 Generic	T2 \$30 Preferred Brand	T3 \$64 Non-Preferred Brand	T4 33% Non-Specialty Injectibles	T5 33% Specialty	Some – call plan for details	
	SmartValue Enhanced Plus (019)				\$21.30	\$30	\$0	T1 \$8 Generic	T2 \$30 Preferred Brand	T3 \$64 Non-Preferred Brand	T4 33% Non-Specialty Injectibles	T5 33% Specialty	Some – call plan for details	
	SmartValue Plus (010)													

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								T1	T2	T3	T4		
Connecti-Care Insurance Company, Inc. (H6504)	Connecti-Care VIP Choice 1 (001)	PFFS	Non-Members 1-877-224-8220 TTY call: 1-800-842-9710	All CT Counties	\$46.90	\$159.50	\$0	T1 \$5	T2 \$25	T3 50%	T4 25%	Some – call plan for details	
	Connecti-Care, Inc. (H3528)				Connecti-Care VIP Prime 1 (001)	\$0	\$0	\$0	T1 \$5	T2 \$25	T3 50%	T4 25%	Some – call plan for details
					Connecti-Care VIP Prime 2 (001)	\$44.90	\$45	\$0	T1 \$5	T2 \$25	T3 50%	T4 25%	Some – call plan for details
					Connecti-Care VIP Prime 3 (001)	\$46.90	\$99	\$0	T1 \$5	T2 \$25	T3 50%	T4 25%	Some – call plan for details
Health Net (5996)	Health Net Pearl Option 6 (009)	PFFS	Non-Members 1-800-200-0410 TTY call: 1-800-929-9955 Members 1-800-977-8221 TTY call: 1-800-929-9955	All CT Counties	\$26.30	\$169	\$0	T1 \$5 Preferred Generic	T2 \$37 Preferred Brand	T3 \$74 Non-Preferred Brand	T4 33% Injectibles	T5 33% Specialty	None

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								T1	T2	T3	T4	T5	
Health Net of Connecticut (H0755)	Health Net Navy (020)	HMO	Non-Members 1-800-949-2516 TTY Users call: 1-888-747-2424	All CT Counties	Info not avail.	\$119	\$0	Information Not Available					Some – call plan for details
	Health Net Ruby Option 1 (001)				\$21	\$99	\$0	T1 \$7 Preferred Generics	T2 \$29 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 33% Injectible	T5 33% Specialty	Some – call plan for details
	Health Net Ruby Option 2 (022)				\$0	\$0	\$0	T1 \$7 Preferred Generics	T2 \$29 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 33% Injectible	T5 33% Specialty	None
	Health Net Ruby Option 3 (028)				\$18.40	\$39	\$0	T1 \$7 Preferred Generics	T2 \$29 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 33% Injectible	T5 33% Specialty	None
	Health Net Ruby Option 4 (025)				\$21	\$79	\$0	T1 \$7 Preferred Generics	T2 \$29 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 33% Injectible	T5 33% Specialty	Some – call plan for details
Humana Insurance Company (H1804)	Humana Gold Choice PFFS H1804-247 (247)	PFFS	Non-Members 1-800-833-2312 TTY call: 1-877-833-4486 Members 1-877-511-5000 TTY call: 1-800-833-3301	Hartford, Litchfield, Middlesex, Tolland	\$30.20	\$99	\$0	T1 \$4 Preferred Generics	T2 \$30 Preferred Brand	T3 \$60 Non-Preferred Brand	T4 25% Specialty	Some – call plan for details	

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January 1 – December 31, 2008 Connecticut Medicare Rx MA-PDs ⁽¹⁾
CHOICES Hotline! – 1-800-994-9422

PLAN SPONSOR AND NUMBER	PLAN NAME AND NUMBER	TYPE OF PLAN	TELEPHONE MEMBERS (M) NON-MEMBERS (NM)	PLAN SERVICE DELIVERY AREA (BY COUNTY)	MONTHLY PREMIUM FOR DRUGS <u>ONLY</u> (2)	COMBIND MONTHLY PREMIUM FOR DRUGS, HOSPITAL <u>AND</u> MEDICAL (2)	ANNUAL DEDUCTIBLE FOR DRUG COVERAGE <u>ONLY</u>	30-DAY SUPPLY CO-PAYS AND CO-INSURANCE (3)				“COVER AGE GAP” COVERAGE
								T1 \$4 Preferred Generics	T2 \$30 Preferred Brand	T3 \$60 Non-Preferred Brand	T4 25% Specialty	
Humana (cont.)	Humana Gold Choices PFFS H1804-248 (248)	PFFS	(see previous page)	Hartford, Litchfield, Middlesex, Tolland	\$30.20	\$129	\$0	T1 \$4 Preferred Generics	T2 \$30 Preferred Brand	T3 \$60 Non-Preferred Brand	T4 25% Specialty	Some – call plan for details
	Humana Gold Choice PFFS H1804-249 (249)				\$14.40	\$89	\$275	25% Coinsurance				None
Secure-Horizons Medicare Direct (H5435)	Secure-Horizon Medicare Direct Rx Plan 51 (014)	PFFS	Non-Members 1-800-555-5757 TTY call: 1-800-201-4874	Middlesex	\$0	\$89	\$275	25% Coinsurance				None
Secure-Horizons by United-HealthCare (H0752)	Medicare Complete (002)	HMO	Members 1-800-234-1228 TTY call: 1-888-685-8480	New Haven	\$0	\$0	\$0	T1 \$4	T2 \$28 Preferred Brand	T3 \$58 Non-Preferred	T4 33% Specialty	None

(1)MA-PDs are Medicare Advantage Prescription Drug Plans that offer prescription coverage and hospital and medical coverage. These plans are options for people who want to receive all of their health care under a single provider. There are different types of Medicare Advantage plans. In CT, there include local HMOs (Health Maintenance Organizations) and PFFS (Private Fee For Service).

(2)The first premium amount is for prescription drug coverage only. The second amount is for prescription, hospital and medical coverage combined. This is in addition to your Medicare Part B Premium (96.40 in 2008 for most people in CT, but more for people with higher incomes).

(3) The co-pay and co-insurance amounts shown are for the prescription drug coverage only. Contact the plan for the amounts of primary care co-pays and other cost sharing information. Some plans have higher prescription co-pays or co-insurance for using an out-of-network pharmacy.

Important! The information in this chart is from Medicare. Contact the plan itself for more details!

January 1 – December 31, 2008 Connecticut Medicare Rx MA-PDs ⁽¹⁾
CHOICES Hotline! – 1-800-994-9422

PLAN SPONSOR AND NUMBER	PLAN NAME AND NUMBER	TYPE OF PLAN	TELEPHONE MEMBERS (M) NON-MEMBERS (NM)	PLAN SERVICE DELIVERY AREA (BY COUNTY)	MONTHLY PREMIUM FOR DRUGS <u>ONLY</u> (2)	COMBIND MONTHLY PREMIUM FOR DRUGS, HOSPITAL <u>AND</u> MEDICAL (2)	ANNUAL DEDUCTIB -LE FOR DRUG COVERAG -E <u>ONLY</u>	30-DAY SUPPLY CO-PAYS AND CO-INSURANCE (3)				“COVER AGE GAP” COVERA GE
								T1 \$5 Generic	T2 \$31 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 30% Specialty	
Today's Option (H3333)	Today's Options Basic Plus (063)	PFFS	Non-Members 1-800-934-5100 TTY Users call: 1-800-777-9083 Members 1-888-445-8699 TTY Users call: 1-800-958-2692	Tolland	\$18.40	\$18.40	\$0	T1 \$5 Generic	T2 \$31 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 30% Specialty	None
	Today's Options Basic Plus (065)			Hartford, Litchfield, Middlesex, New London	\$18.40	\$38.40	\$0	T1 \$5 Generic	T2 \$31 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 30% Specialty	None
	Today's Options Basic Plus (066)			Fairfield, New Haven, Windham	\$18.40	\$53.40	\$0	T1 \$5 Generic	T2 \$31 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 30% Specialty	None
	Today's Options Premier Plus (051)			Tolland	\$28.60	\$61.60	\$0	T1 \$5 Generic	T2 \$31 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 30% Specialty	Some – call plan for details
	Today's Options Premier Plus (054)			Fairfield New Haven, Windham	\$28.60	\$107.60	\$0	T1 \$5 Generic	T2 \$31 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 30% Specialty	Some – call plan for details
	Today's Options Premier Plus (053)			Hartford, Litchfield, Middlesex, New London	\$28.60	\$92.60	\$0	T1 \$5 Generic	T2 \$31 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 30% Specialty	Some – call plan for details

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(2)The first premium amount is for prescription drug coverage only. The second amount is for prescription, hospital and medical coverage combined. This is in addition to your Medicare Part B Premium (96.40 in 2008 for most people in CT, but more for people with higher incomes).

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Important! The information in this chart is from Medicare. Contact the plan itself for more details!

January 1 – December 31, 2008 Connecticut Medicare Rx MA-PDs ⁽¹⁾
CHOICES Hotline! – 1-800-994-9422

PLAN SPONSOR AND NUMBER	PLAN NAME AND NUMBER	TYPE OF PLAN	TELEPHONE MEMBERS (M) NON-MEMBERS (NM)	PLAN SERVICE DELIVERY AREA (BY COUNTY)	MONTHLY PREMIUM FOR DRUGS ONLY (2)	COMBIND MONTHLY PREMIUM FOR DRUGS, HOSPITAL AND MEDICAL (2)	ANNUAL DEDUCTIBLE FOR DRUG COVERAG -E ONLY	30-DAY SUPPLY CO-PAYS AND CO-INSURANCE (3)					“COV ERAG E GAP” COVE RAGE
								T1 \$5 Generic	T2 \$31 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 30% Specialty		
Today's Options (cont.)	Today's Options Value Plus (057)	PFFS	(see previous page)	Tolland	\$18.40	\$28.40	\$0	T1 \$5 Generic	T2 \$31 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 30% Specialty	None	
	Today's Options Value Plus (059)			Hartford, Litchfield, Middlesex, New London	\$18.40	\$58.40	\$0	T1 \$5 Generic	T2 \$31 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 30% Specialty	None	
	Today's Options Value Plus (060)			Fairfield, New Haven, Windham	\$18.40	\$73.40	\$0	T1 \$5 Generic	T2 \$31 Preferred Brand	T3 \$61 Non-Preferred Brand	T4 30% Specialty	None	
Unicare Life & Health Ins. Company (H0540)	Security-Choice Enhanced Plus (032)	PFFS	Non-Members 1-888-949-5384 TTY call: 1-800-297-1538 Members 1-888-445-8916 TTY call: 1-800-297-1538	Middlesex	\$23.60	\$62	\$0	T1 \$8 Generics	T2 \$30 Preferred Brand	T3 \$64 Non-Preferred Brand	T4 33% Non-specialty Injectibles	T5 33% Specialty	Some – call plan for details

- (3) MA-PDs are Medicare Advantage Prescription Drug Plans that offer prescription coverage and hospital and medical coverage. These plans are options for people who want to receive all of their health care under a single provider. There are different types of Medicare Advantage plans. In CT, there include local HMOs (Health Maintenance Organizations) and PFFS (Private Fee For Service).
- (4) The first premium amount is for prescription drug coverage only. The second amount is for prescription, hospital and medical coverage combined. This is in addition to your Medicare Part B Premium (96.40 in 2008 for most people in CT, but more for people with higher incomes).
- (5) The co-pay and co-insurance amounts shown are for the prescription drug coverage only. Contact the plan for the amounts of primary care co-pays and other cost sharing information. Some plans have higher prescription co-pays or co-insurance for using an out-of-network pharmacy.

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**January 1 – December 31, 2008 Connecticut Medicare Rx MA-PDs ⁽¹⁾
CHOICES Hotline! – 1-800-994-9422**

PLAN SPONSOR AND NUMBER	PLAN NAME AND NUMBER	TYPE OF PLAN	TELEPHONE MEMBERS (M) NON-MEMBERS (NM)	PLAN SERVICE DELIVERY AREA (BY COUNTY)	MONTHLY PREMIUM FOR DRUGS <u>ONLY</u> (2)	COMBIND MONTHLY PREMIUM FOR DRUGS, HOSPITAL <u>AND</u> MEDICAL (2)	ANNUAL DEDUCTIBLE FOR DRUG COVERAG <u>E ONLY</u>	30-DAY SUPPLY CO-PAYS AND CO-INSURANCE (3)					“COVERAGE GAP” COVERAGE	
								T1 \$8 Generics	T2 \$30 Preferred Brand	T3 \$64 Non-Preferred Brand	T4 33% Non-Specialty Injectibles	T5 33% Specialty	Some – call plan for details	
Unicare Life Insurance Co. (cont.)	Security-Choice Plus (020)	PFFS	(see previous page)	Middlesex	\$0	\$0	\$0							
WellCare (H0712)	WellCare Choice (001)	HMO	Non-Members 1-866-238-4344 TTY call: 1-877-247-6272 Members 1-866-579-8006 TTY call: 1-877-247-6272	Fairfield, Hartford, New Haven, Tolland	\$0	\$0	\$0	T1 \$0	T2 \$39	T3 \$69	T4 33%		None	

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(2) The first premium amount is for prescription drug coverage only. The second amount is for prescription, hospital and medical coverage combined. This is in addition to your Medicare Part B Premium (96.40 in 2008 for most people in CT, but more for people with higher incomes).

(3) The co-pay and co-insurance amounts shown are for the prescription drug coverage only. Contact the plan for the amounts of primary care co-pays and other cost sharing information. Some plans have higher prescription co-pays or co-insurance for using an out-of-network pharmacy.

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**January 1 – December 31, 2008 Connecticut Medicare Special Needs Plans
CHOICES Hotline! – 1-800-994-9422**

PLAN SPONSOR AND NUMBER	PLAN NAME AND NUMBER	TYPE OF PLAN	TELEPHONE: MEMBERS (M) NON-MEMBERS (NM)	PLAN SERVICE DELIVERY AREA (BY COUNTY)	SPECIAL RULES FOR ENROLLING
ConnectiCare Inc. (H3528)	ConnectiCare VIP Custom 1 (004)	Medicare Advantage Plan	Non-Members 1-877-224-8220 TTY Users call: 1-800-842-9710 Members 1-800-224-2273 TTY Users call: 1-800-842-9710	All CT Counties	Must have certain chronic or disabling conditions
Evercare Health Plans (H0710)	Evercare Plan DP (002)	PPO	Non-Members 1-888-834-3721 TTY Users call: 1-888-685-8480 Members 1-877-702-5110 TTY Users call: 1-800-387-1074	Fairfield, Hartford, Litchfield, New Haven, Tolland, Windham	Must have Medicare and Medicaid
	Evercare Plan IP (001)				Must live in an institution (like a nursing home) or require nursing care at home. Call plan for details
	Evercare Plan MP (003)				Must have certain chronic or disabling conditions
Evercare Health Plans (H7698)	Evercare Plan RD (003)	Medicare Advantage Plan		Hartford	Must have certain chronic or disabling conditions
HealthNet of Connecticut (H0755)	Health Net Amber (021)	Medicare Advantage Plan	Non-Members 1-800-949-2516 TTY Users call: 1-888-747-2424 Members 1-800-547-8734 TTY Users call: 1-888-747-2424	All CT Counties	Must have Medicare and Medicaid

- Call 1-800-MEDICARE (1-800-633-4227), or CHOICES (1-800-994-9422), or go on the web to www.medicare.gov for additional information about Medicare Special Needs Plans and Medicare Medical Savings Accounts.

**January 1 – December 31, 2008 Connecticut Medicare Special Needs Plans
CHOICES Hotline! – 1-800-994-9422**

HealthNet of CT (cont.)	Health Net Sage (027)	Medicare Advantage Plan	(see previous page)	All CT Counties	Must have certain chronic or disabling conditions
Senior Whole Health of Connecticut (H5949)	Senior Whole Health of Connecticut (001)	Medicare Advantage Plan	Non-Members 1-866-404-9505 TTY Users call: 1-888-749-6455 Members 1-866-404-9505 TTY Users call: 1-888-749-6455	Fairfield, Hartford, Middlesex, New Haven	Must have Medicare and Medicaid
Wellcare (H0712)	WellCare Access (005)	Medicare Advantage Plan	Non-Members 1-866-238-4344 TTY Users call: 1-877-247-6272 Members 1-866-579-8006 TTY Users call: 1-877-247-6272	Fairfield, Hartford, New Haven, Tolland	Must have Medicare and Medicaid
	Wellcare Select (011)				Must have Medicare and Medicaid

- Call 1-800-MEDICARE (1-800-633-4227), or CHOICES (1-800-994-9422), or go on the web to www.medicare.gov for additional information about Medicare Special Needs Plans and Medicare Medical Savings Accounts.

**January 1 – December 31, 2008 Connecticut Medicare Medical Savings Account Plans
CHOICES Hotline! – 1-800-994-9422**

PLAN SPONSOR AND NUMBER	PLAN NAME AND NUMBER	TYPE OF PLAN	TELEPHONE: MEMBERS (M) NON- MEMBERS (NM)	PLAN SERVICE DELIVERY AREA (BY COUNTY)	YEARLY DEDUCTIBLE	YEARLY DEPOSIT	COST SHARING AFTER DEDUCTIBLE	YEARLY OUT-OF-POCKET MAXIMUM
Anthem Blue Cross and Blue Shield (H5011)	SmartSaver (001)	Medical Savings Account	800-765-2585	All CT Counties	\$3,500	\$1,175	\$0	\$3,500

- Call 1-800-MEDICARE (1-800-633-4227), or CHOICES (1-800-994-9422), or go on the web to www.medicare.gov for additional information about Medicare Special Needs Plans and Medicare Medical Savings Accounts.

**January 1 – December 31, 2008 Connecticut Medicare Rx BENCHMARK Plans
CHOICES Hotline! – 1-800-994-9422**

Plan Sponsor Names
Aetna Medicare Rx Essentials (Plan S5810-036)
CCRX Plan One (Plan S5803-071)
First Health Premier (Plan S5778-038)
HealthNet Orange Option 1 (Plan S5678-004)
HealthSpring Prescription Drug Plan (S5884-003)
Humana PDP Standard (S5884-061)
Prescription Pathways Bronze Plan (S5597-068)
Rx America Advantage Star Plan (S5644-068)
SilverScript Basic(S5601-004)
Sterling Rx (S4802-023)
Unicare Medicare Rx Rewards Value (S5960-002)
Unicare Medicare Rx Standard (S5960-106)
Wellcare Classic (S5967-139)
MEDCO Value Plan (S5660-105)

- “Benchmark” plans are those that offer basic (vs. enhanced) benefits and have premiums at or below the national average premium. In 2008 the national average premium is \$25.00.
- Dual eligible beneficiaries (people who have both Medicare and Medicaid), people who are on a Medicare Savings Program (QMB, SLMB, or ALMB), SSI recipients, and people who qualify for Extra Help, will be randomly assigned to one of the above plans if they do not select one on their own. Beneficiaries who enroll in – or are assigned to – one of these plans will not have to pay a monthly premium. Beneficiaries who join a plan other than one of the above will have to pay the difference between their plan’s premium and \$25.00, unless they are on Medicaid (Title 19) or ConnPACE. The State of Connecticut will pay the full premium for Medicaid and ConnPACE beneficiaries. **IMPORTANT:** If in 2007 you were in a benchmark plan that is no longer considered a benchmark plan, you will be allowed to remain in your plan provided the premium does not exceed \$1 over the national average, i.e., provided the premium does not exceed \$30.17 per month. If the premium exceeds \$30.17 per month, you will be assigned to another plan that meets the benchmark standard.

IMPORTANT! The information in this chart is from Medicare. Please contact the plan itself for more details!

**January 1 – December 31, 2008 Connecticut Medicare Rx Prescription Drug Plans
CHOICES Hotline! – 1-800-994-9422**

Plan / Company	Telephone & Website Information	Low Income Subsidy Plan	National Plan
<u>Aetna Medicare Rx Essentials</u> (S5810-036)	(M) 1-877-238-6211	X	X
<u>Aetna Medicare Rx Plus</u> (S5810-138)	(NM) 1-800-445-1796 www.aetna.com		X
<u>Aetna Medicare Rx Premier</u> (S5810-172)			X
<u>Blue MedicareRx Premier</u> (S2893-003)	(M) 1-866-755-2776		
<u>Blue MedicareRx Value</u> (S2893-014)	(NM) 1-877-479-2227 www.anthem.com		
<u>Blue MedicareRx Value Plus</u> (S2893-001)			
<u>CIGNA Medicare Rx Plan One</u> (S5617-008)	(M) 1-800-222-6700		X
<u>CIGNA Medicare Rx Plan Three</u> (S5617-172)	(NM) 1-800-735-1459 www.signature-rx.com		X
<u>CIGNA Medicare Rx Plan Two</u> (S5617-010)			X
<u>AdvantraRx Premier</u> (S5674-009)	(M) 1-866-823-5178		
<u>AdvantraRx Premier Plus</u> (S5674-011)	(NM) 1-800-882-3822 www.advantrax.com		
<u>AdvantraRx Value</u> (S5674-008)			
<u>EnvisionRxPlus Gold</u> (S7694-036)	(M) 1-866-250-2005		X
<u>EnvisionRxPlus Standard</u> (S7694-002)	(NM) Same www.envisionrxplus.com		X
<u>First Health Part D-Premier</u> (S5768-038)	(M) 1-866-865-0662	X	
<u>First Health Part D-Secure</u> (S5768-085)	(MN) 1-800-588-3322		

First Health Part D-Select (S5768-050)	www.firsthealth.com		
Health Net Orange Option 1 (S5678-004)	(M) 1-800-806-8811	X	X
Health Net Orange Option 2 (S5678-010)	(NM) 1-800-606-3604 www.healthnet.com		X
HealthSpring Prescription Drug Plan - Reg 2(S5932-003)	(M) 1-866-845-6941 (NM) 1-888-802-2415 www.myhealthspring.com	X	X
Humana PDP Complete S5884-031 (S5884-031)	(M) 1-800-281-6918		
Humana PDP Enhanced S5884-002 (S5884-002)	(NM) 1-800-706-0872		
Humana PDP Standard S5884-061 (S5884-061)	www.humana-medicare.com	X	
Medco Medicare Prescription Plan - Access(S5660-173)	(M) 1-800-758-4574		
Medco Medicare Prescription Plan - Choice(S5660-003)	(NM) 1-800-758-3605 www.yourxplan.com		
Medco Medicare Prescription Plan - Value(S5660-105)		X	
Community CCRx Basic (S5803-071)	(M) 1-866-684-5353	X	X
Community CCRx Choice (S5803-139)	(NM) Same		X
Community CCRx Gold (S5803-219)	www.communitycarerx.com		X
Prescription Pathway Bronze Plan Reg 2 (S5597-068)	(M) 1-866-566-3050	X	
Prescription Pathway Gold Plan Reg 2 (S5597-035)	(NM) 1-800-978-9500		
Prescription Pathway Platinum Plan Reg 2(S5597-200)	www.rxpathway.com		
Advantage Allegiance Plan by RxAmerica(S5644-287)	(M) 1-800-429-6686		X
Advantage Freedom Plan by RxAmerica (S5644-047)	(NM) 1-877-279-0370		X

Advantage Star Plan by RxAmerica (S5644-068)	www.meds4medicare.com	X	X
SilverScript (S5601-004)	(M) 1-866-235-5660	X	X
SilverScript Complete (S5601-073)	(NM) 1-866-552-6106 www.silverscript.com		X
SilverScript Plus (S5601-005)			X
Sterling Rx (S4802-023)	(M) 1-866-865-0664 (NM) 1-888-909-1713	X	X
Sterling Rx Plus (S4802-035)	www.sterlingplans.com		X
MedicareRx Rewards Standard (S5960-108)	(M) 1-800-928-6201	X	X
MedicareRx Rewards Value (S5960-002)	(NM) 1-888-949-5384 www.unicare.com	X	X
UA Medicare Part D Prescription Drug Cov (S5755-006)	(M) 1-866-524-4169 (NM) Same www.uamedicarepartd.com		
UA Medicare Part D Rx Covg - Silver Plan (S5755-041)	(M) 1-866-299-3406 (NM) Same www.uamedicarepartd.com		
AARP MedicareRx Enhanced (S5921-183)	(M) 1-888-867-5575 (NM) 1-888-867-5564 www.aarpmedicarerx.com		X
AARP MedicareRx Preferred (S5820-002)	(M) 1-888-867-5557 (NM) 1-888-867-5564 www.aarpmedicarerx.com		
AARP MedicareRx Saver (S5921-181)	(M) 1-888-867-5575 (NM) 1-800-745-0922 www.aarpmedicarerx.com		X
UnitedHealth Rx Basic (S5921-182)	(M) 1-888-867-5562 (NM) 1-888-867-5561 www.aarpmedicarerx.com		X
UnitedHealth Rx Value (S5820-106)	(M) 1-888-867-5562 (NM) 1-888-867-5561 www.aarpmedicarerx.com		
WellCare Classic (S5967-139)	(M) 1-888-550-5252 (NM) 1-888-423-5252 www.wellcare.com	X	X
WellCare Signature (S5967-036)			X

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