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# PDP-Compare 2008/2009

PDP-Compare offers a one-click comparison of 2008 and 2009 Medicare Part D Plans. Just enter your preferences in the chart below and click Search.

	 Search Criteria	
State:*	required	
Partial Plan Name:		
Sort Results by:		
	2008	2009
Maximum Premium:	\$ Max: \$108	\$ Max: \$137
Maximum Deductible:	\$ Max: \$275	\$ Max: \$295
Type of Gap Coverage:		
Full Low-Income Subsidy?		

## :: Print Version :: NC 2008 Plan Materials :: NC 2009 Plan Materials

### There are 13 Stand-Alone Medicare Part D plans which meet your criteria.

Error We represent these plans. Click on the icon next to 2008 Plans to download an enrollment kit. 2009 enrollment kits will be available Nov. 15, 2008

				2008/20	009 Medicare Part	D Plan Info	ormatior	1 I				
				<u>CI</u>	ick here to jump to th	e Chart Leg	end					
	Plan Name					\$0			Cost-S	Sharing		
Cust. Service Rating	Filling a Rx Rating	RxCost Info Rating	Monthly Premium	Deduct- ible	(Donut Hole) Gap Coverage	Premium with Full LIS?	Plan ID	Tier 1	Tier 2	Tier 3	Tier 4	Members in this Sta
2008 Fox Grand			\$30.00	\$275	All Preferred Generics	No	S5557	\$0.00	\$28.00	\$65.00	25%	54
**** 2009 Fox Grand	<b>★★</b> ☆☆☆ d Plan	****	\$31.90	\$185	Some Generics	No	-015	\$0.00	\$19.00	\$35.00	\$75.00	
Enrollo 2008 Adv	vantraRx Pre	mier Plus	\$47.10	\$0	All Preferred Generics	No	S5670	\$2.00	\$22.00	\$70.00	33%	7,028
****	***	***					-048					
Enrollo 2009 Adv	vantraRx Pre	mier Plus	\$54.80	\$0	Many Generics	No		\$4.00	\$30.00	\$76.00	33%	
2008 SilverScri	pt Plus	****	\$37.00	\$0	All Generics	No	S5601	\$9.00	\$26.00	\$85.00	33%	1,052
2009 SilverScri		*****	\$55.50	\$50	Many Generics	No	-017	\$4.00	\$9.00	\$30.00	\$35.00	
Enrollo 2008 Col	mmunity CCF	Rx Gold	\$50.40	\$0	All Generics	No	05000	\$5.00	\$25.00	\$60.00		5,053
****	***	****					S5803	ψ0.00	ψ20.00	ψ00.00		5,055

:	: Click here to link to this
	page on your website Medicare Part D
eMa	il an Enrollment Kit!
Firstname*	
Lastname*	
Birthday*	
Telephone	*
eMail*	
City	
State*	
Zip	
Plan*	
Message	
l am*	new to Medicare
	lost coverage
	in nursing home
	receiving Medicaid
	interested for 2009
l agree	to the <u>Terms of Use</u>

I also want to receive the free Medicare Part D eMail newsletter!

:: After Enrollment into Part D	::	After	Enrol	Iment	into	Part	D
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:: Financial "Extra Help" Updated

- :: Part D Scams Watch Out!
- :: Newsletter Archive
- :: 2008 Medicare Part D Archive
- :: 2007 Medicare Part D Archive
- :: 2006 Medicare Part D Archive
- :: Support Center
- :: Community
- :: Medicare.gov Tutorial
- :: Medicare Supplement Info

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Enrollo 2009 Community CCRx Gold	\$62.30	\$0	All Generics	No	-225	\$5.00	\$30.00	\$60.00	33%	
Enrollo 2008 Aetna Medicare Rx Plus	\$42.70	\$0	No Gap Coverage	No						
****** ******			1 0		S5810	\$4.00	\$35.00	\$65.00	33%	703
Enrollo 2009 Aetna Medicare Rx Plus	\$63.50	\$0	Some Generics	No	-144	\$0.00	\$10.00	\$36.00	7,700%	
Plan Name	Monthly	Deduct-	Gap	\$0 Prem.	Plan		Cost-S	haring		Members
Service Fill Rx CostInfo	Premium	ible	Coverage	Full LIS?	ID	Tier 1	Tier 2	Tier 3	Tier 4	in this Stat
2008 CIGNA Medicare Rx Plan Three	\$65.50	\$0	Some Generics	No						
*****					S5617	\$6.00	\$35.00	\$60.00	33%	662
2009 CIGNA Medicare Rx Plan Three	\$68.10	\$0	Some Generics	No	-178	\$6.00	\$35.00	\$67.50	33%	
2008 Medco Medicare Prescription Plan - Access	\$63.80	\$0	All Generics	No	S5660	\$6.00	\$35.00	75%	33%	538
******         ******           2009 Medco Medicare Prescription Plan -           Access	\$68.20	\$0	All Generics	No	-178	\$6.00	\$35.00	75%	33%	
2008 Blue Medicare Rx Enhanced	\$75.50	\$0	All Generics	No	S5540	\$10.00	\$30.00	25%		50,064
2009 Blue Medicare Rx Enhanced	\$68.80	\$0	All Generics	No	-004	\$8.00	\$30.00	\$60.00	33%	
Errolo 2008 Prescription Pathway Platinum Plan Reg 8	\$71.50	\$0	All Generics	No	S5597	\$6.00	\$44.00	33%		319
******     ******       Enrollo     2009 Prescriba Rx Platinum	\$74.20	\$0	All Generics	No	-205	\$6.00	\$44.00	33%		
2008 AARP MedicareRx Enhanced	\$64.80	\$0	All Preferred Generics	No	S5921	\$7.00	\$30.00	\$73.40	33%	5,058
2009 AARP MedicareRx Enhanced	\$74.40	\$0	Many Generics	No	-113	\$7.00	\$39.00	\$95.00	33%	
2008 SilverScript Complete	\$44.30	\$0	All Generics	No	S5601	\$7.00	\$30.00	\$90.00	33%	930
2009 SilverScript Complete	\$77.50	\$0	Many Generics	No	-079	\$2.50	\$7.50	\$39.00	\$98.00	
Plan Name	Monthly	Deduct-	Gap	\$0 Prem.	Plan			sharing		Members
Service Fill Rx CostInfo	Premium	ible	Coverage	Full LIS?	ID	Tier 1	Tier 2	Tier 3	Tier 4	in this Stat
Enrol 2008 Humana PDP Complete_ S5884-036_	\$89.70	\$0	All Preferred Generics	No	S5884	\$4.00	\$25.00	\$54.00	25%	6,614
*****					-036					
Enrollo 2009 Humana PDP Complete S5884-036	\$98.90	\$0	Many Generics	No		\$7.00	\$40.00	\$70.00	33%	
Enrollo 2008 Aetna Medicare Rx Premier	\$87.20	\$0	All Generics	No	05040	\$4.00	\$40.00	\$70.00	33%	1,442
*****					S5810 -178	ψ4.00	φ+0.00	φ/0.00	5576	1,442
Enrollo 2009 Aetna Medicare Rx Premier	\$128.50	\$0	Many Generics	No	110	\$0.00	\$10.00	\$30.00	\$65.00	

A few notes to help with the understanding of the 2009 Medicare Part D Plan chart above.

- Plan Name: This is the official plan name from CMS. The same plan name generally has a different plan id in each state.
- CMS Plan Ratings: these are found under the Plan Name at the left side of the chart.

This is a one to 5 star rating system with five (5) stars as excellent, four (4) stars as very good, three (3) stars as good, two (2) stars as fair and one (1) star as poor.

**Cust. Service Rating** - Drug Plan Customer Service - Medicare and members rate the drug plan and how well a drug plan provides customer service.

#### This category includes measures of how drug plans rate on the following areas:

- Time members and pharmacists are on hold when they call the drug plan's customer call centers and pharmacy help desk.
- Calls disconnected by the drug plan's customer call center and pharmacy help desk.
- Complaints Medicare has received about the drug plan.
- Members' satisfaction related to getting help from the drug plan and their overall rating of the drug plan.

Filling a Rx Rating- Using Your Plan To Get Your Prescriptions Filled - This category shows how well drug plans make prescription drugs available to their members.

#### This category includes measures of how drug plans rate on the following areas:

- Plan members' ability to get prescriptions filled easily.
- Enrollment information the drug plan shares with pharmacists when a member needs a prescription filled.
- Information Medicare and the drug plan have about plan members who qualify for extra help.
- Complaints Medicare has received about the drug plan's benefits and access to prescription drugs. These complaints include situations where your drug plan membership card doesn't work at the pharmacy, or a pharmacy is listed incorrectly on Medicare's website.
- Complaints Medicare has received about joining and leaving the drug plan.
   These complaints include situations where you don't receive enrollment materials (like your membership card) from your drug plan, or you have difficulty switching to a new drug plan.
- How often a plan failed to make a timely appeals decision. Appeals are special kinds of requests you file when you disagree with certain decisions made by the drug plan about getting a prescription filled.

**RxCost Info Rating-** This category shows how well drug plans are doing with pricing prescriptions and providing information on the Medicare website.

This category includes measures of how drug plans rate on the following areas:

- Availability of drug coverage and cost information from the drug plan and how often the plan's drug prices change on the Medicare website.
- Complaints Medicare has received about pricing and out-of-pocket costs.
   These complaints include situations where you were charged the wrong price for a prescription, or the wrong plan premium amount was deducted from your Social Security check.

- Monthly Premium: This is the amount you must pay each month to use the plan. This
  monthly premium must be paid even if you are in the initial deductible phase or the
  coverage gap (donut hole) phase.
- Deductible: This is the \$295 deductible that was presented in the CMS Standard Plan. Many provider's plans do not have a deductible, however the premium may be higher.
- Gap Coverage: the Donut Hole: In the CMS Standard Plan, the beneficiary must pay the next \$3453.75 in drug costs (the Donut Hole). Many provider's plans cover the costs that fall into this category for an additional premium. In our chart, you will see one of the following:
  - No Gap Coverage: you must pay the \$3453.75;
  - Some Generics: 10% to 65% of formulary generics are covered, but you must pay for Brand Drugs up to \$3453.75;
  - Many Generics: 65% to 100% of formulary generics are covered, but you must pay for Brand Drugs up to \$3453.75;
  - All Generics : All formulary Generics are covered, but you must pay for Brand Drugs up to \$3453.75;
  - All Generics & Few Brands: One regional plan (Alliance Medicare RX), only available in Michigan covers all Generics and a few (less than 10%) of Brand drugs on the plan's formulary.
  - Many Generics & Few Brands: two regional plans, only available in Florida (Quality Rx Plus) and Wisconsin (DeanCare Rx Enhanced) cover many Generics (65%-100% of formulary generics) and a few (less than 10%) of formulary Brands.
- S0 Premium with Full LIS Does the plan Qualify for \$0 Premium with Full Low-Income Subsidy?: If Yes is in the field, then you would pay a \$0 premium if you have a Full Low-Income Subsidy (LIS). If No is in the field, then you would be responsible for the difference between what the state provides as the Full Low-Income Subsidy and the actual cost of the plan even if you have a Full Low-Income Subsidy.
- Plan ID: This is the unique id for this particular plan.

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- Copay / Coinsurance Cost Sharing These figures apply to the initial coverage phase of your plan. This is the phase after the initial deductible has been met and before you reach the Coverage Gap (Donut Hole). Plans often cover drugs in "tiers". Tiers are specific to the list of drugs covered by the plan. Plans may have several tiers, and the copay for a drug depends on which tier the drug is in. Plans can form their own tiers, so you should contact the plan or reference it's summary of benefits to find out what copays and limitations are associated with each tier. These cost sharing figures DO NOT necessarily apply to the Coverage Gap. The plan may have a separate copay/ coinsurance for the same drug while in the Coverage Gap.
- Members in This State We are showing the latest Medicare Part D plan enrollment figures. We update this figure as new enrollment statistics are released by Medicare.

(Chart Source: Centers for Medicare and Medicaid files: 2009LandscapeSourceData\_PDP\_09\_18\_08.xls, AnnualReportByPlan\_Jul 2007\_06262007. xls and Medicare.gov website plan finder.)

Please note: The above plan information comes from CMS. We make every attempt to keep our information up-to-date with plan/premium changes. However, we cannot guarantee the accuracy of this information. Through the application process we will provide you with the most up-to-the-minute information/pricing.

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