

2019 Medicare Part D Stand-Alone Prescription Drug Plans

Must have Medicare Part A and/or Part B to qualify for Part D enrollment

Organization Name Enrollment Telephone No. Website	Plan Name	Monthly Premium	Annual Deductible	Copayments after deductible has been met and prior to reaching \$3,820 in full drug cost						Coverage in Gap*	Low Income Subsidy Plan	Quality Rating (out of 5)
				Tier 1	Tier 2	Tier 3	Tier 4	Tier 5	Tier 6			
Aetna Medicare 833-856-5680 aetnamedicare.com	Rx Select	\$19.10	\$365**	\$0	\$2	\$47	40%	25%	N/A	Tier 1,2		3.0
	Rx Saver	\$32.40	\$310**	\$1	\$2	\$30	35%	27%	N/A	No	Yes	3.0
	Rx Value Plus	\$58.70	\$0	\$1	\$2	\$47	48%	33%	N/A	Tier 1,2		3.0
Anthem Blue Cross 800-261-8667 anthem.com/ca/medicare	MedicareRx Plus	\$113.10	\$0	\$1	\$3	\$40	38%	33%	N/A	Tier 1, 6		3.5
	MedicareRx Standard	\$116.90	\$250**	\$1	\$5	\$30	40%	25%	N/A	No		3.5
Blue Shield of California 800-488-8000 blueshieldca.com	Rx Plus	\$81.10	\$415**	\$2	\$6	\$31	31%	25%	25%	No		4.0
	Rx Enhanced	\$117.80	\$0	\$4	\$10	\$40	27%	25%	33%	No		4.0
Cigna-Healthspring Rx 800-735-1459 cigna.com	Rx Secure Essential	\$21.90	\$415**	\$1	\$3	20%	47%	25%	N/A	No		2.0
	Rx Secure-Extra	\$70.60	\$100**	\$4	\$10	\$42	49%	31%	\$6	No		2.0
	Rx Secure	\$83.40	\$415	\$1	\$3	\$30	33%	25%	N/A	No		2.0
EnvisionRx Plus 888-377-1439 envisionrxplus.com	EnvisionRxPlus	\$12.90	\$315**	\$1	\$6	\$29	37%	26%	N/A	No	Yes	2.0
Express Scripts Medicare 866-477-5704 express-scripts.com	Saver	\$23.90	\$415**	\$1	\$4	18%	32%	25%	N/A	No		3.5
	Value	\$56.80	\$415	\$1	\$3	\$25	44%	25%	N/A	No		3.5
	Choice	\$99.70	\$350**	\$2	\$7	\$42	45%	26%	N/A	Tier 3		3.5

* During the coverage gap, plans may cover all or only some drugs within the listed tiers.

** Deductible may not apply to all tiers.

Co-payments are based on a one-month supply of a covered Part D prescription drug from a preferred pharmacy. Non-preferred pharmacy prices may be higher.

Quality Rating is based on a combination of member satisfaction, problems with plan and complaints.

Tier 1 = Preferred Generics; Tier 2 = Non-Preferred Generics; Tier 3 = Preferred Brands; Tier 4 = Non-Preferred Brands; Tier 5 = Specialty; Tier 6 = Select Care

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Humana Insurance Co. 800-706-0872 humana.com/medicare	Walmart Rx Plan	\$29.90	\$415**	\$1	\$4	20%	35%	25%	N/A	No		3.5
	Preferred Rx Plan	\$34.10	\$415	\$0	\$1	25%	34%	25%	N/A	No	Yes	3.5
	Enhanced	\$82.80	\$0	\$5	\$10	\$47	50%	33%	N/A	No		3.5
Mil Life Insurance, Inc. 888-575-7530 journeyrxmedicare.com	Journey Rx Value	\$20.80	\$415**	\$0	\$1	15%	35%	25%	N/A	No		3.0
	Journey Rx Standard	\$27.00	\$415	\$2	\$6	15%	32%	25%	N/A	No	Yes	3.0
Mutual of Omaha Rx 800-961-9006 mutualofomaha.com	Rx Value	\$27.60	\$415**	\$1	\$4	15%	35%	25%	N/A	No		N/A
	Rx Plus	\$43.30	\$415	\$3	\$5	\$34	48%	25%	N/A	No		N/A
SilverScript 866-552-6106 silverscript.com	Choice	\$34.80	\$0	\$3	\$13	\$42	45%	33%	N/A	No	Yes	3.5
	Allure	\$80.00	\$0	\$1	\$5	20%	40%	33%	N/A	No		3.5
	Plus	\$83.60	\$0	\$1	\$5	\$35	40%	33%	N/A	No		3.5
UnitedHealthCare (AARP) 888-867-5564 800-753-8004 (Walgreens) uhcmedicareolutions.com	MedicareRx Walgreens	\$28.10	\$415**	\$0	\$5	\$30	32%	25%	N/A	No		3.0
	MedicareRx Saver Plus	\$33.10	\$415	\$1	\$5	\$25	31%	25%	N/A	No	Yes	3.0
	MedicareRx Preferred	\$84.30	\$0	\$5	\$10	\$40	40%	33%	N/A	No		3.0
WellCare 888-293-5151 wellcare.com/pdp	Value Script	\$15.00	\$415**	\$0	\$6	\$40	46%	25%	N/A	No		3.0
	Classic	\$34.60	\$415**	\$0	\$3	\$37	42%	25%	N/A	No	Yes	3.0
	Extra	\$73.70	\$0	\$0	\$5	\$40	46%	33%	N/A	No		3.0

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