

# The New Medicare Prescription Drug Coverage

## Using the Medicare Prescription Drug Plan Finder



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For more information about Medicare's prescription drug coverage, visit AARP's website at [www.aarp.org/medicarerx](http://www.aarp.org/medicarerx), or call 1-888-OUR-AARP (1-888-687-2277).

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# Contents

Using the Medicare Prescription Drug Plan Finder	1
Preparing for Your Drug Plan Search	1
For Help on the Computer	1
Current Coverage	1
If You Don't Have Computer Access	2
Tips for Calling Medicare	2
Medicare Speech Automated System	2
If You Do Have Computer Access	3
Extra Help for Those With Limited Income	3
Generic Check Box	4
Getting the Answers You Need	6
Exploring Similar Drugs	7
Other Types of Searches	8
Other Resource Information	9
Protect Yourself Against Fraud	10
List of Medications for Medicare Plan Finder Search	11

## Introduction

In this booklet you will find information about how to use the tools available to help you make a decision about a Medicare prescription drug plan. For those who have access to a computer and/or assistance from a computer user, Medicare has developed the Medicare Prescription Drug Plan Finder. In this booklet you will find a step-by-step guide on how to do a "General Search" of prescription drug plans. There are various other kinds of searches that can be done, but our goal was to familiarize you with the tool itself—enabling you to move on to other searches yourself later. For those who do not have access to a computer and/or who are uncomfortable working with this kind of a tool, there is also information about how to enroll in a Medicare prescription drug plan using the telephone. Either way, we hope you will explore the new Medicare prescription drug coverage options available to you—to see if it will help you save on your drug costs. Finally, if you need more information before making a final decision, see the "Other resource information" column on page 9.

# Using the Medicare Prescription Drug Plan Finder

## Preparing for Your Drug Plan Search

Before using the Medicare Prescription Drug Plan Finder, you should collect the following information (see worksheet on page 11):

### 1. A List of the Prescription Drugs You Take:

- Name of each drug\*
- Dosage or strength of the drug you take (e.g., 20 mg)
- Number of times you take each drug each day or per week

\*Prescription drugs are dispensed in a variety of ways—tablets, capsules, patches, time-released, etc. Often this information is entered in coded language on your pill container. The names of some drugs may also be abbreviated because they are so long. Thus, your pill container may not give you everything you need for your drug list. It therefore might be a good idea to talk with your pharmacist when making your list—and if you get all your drugs from one place, your pharmacist may be willing to provide you with a printout of your drug list.

### 2. Information about Your Current Insurance Coverage (if any) such as a Medicare supplement, retiree coverage, Medicare Advantage (managed care) plan, VA, TRICARE, or FEHB.

## For Help on the Computer:

- **Ask a family member or friend to help you.**
- **Contact the State Health Insurance Assistance Program (SHIP). Call 1-800-633-4227** to learn the number for your state's SHIP. SHIP trains volunteers to help people with their Medicare issues. Most are computer savvy. Or,

## Current coverage

If you have VA, TRICARE, or FEHB, your drug coverage may already be as good as the new Medicare Rx coverage. Your medical plan provider should have sent you information by now about whether your coverage is as good as Medicare's.

If you were in a Medicare Advantage Plan with prescription drug coverage prior to 2006, your plan should have informed you that you would be enrolled in their Medicare prescription drug plan.

If you had retiree drug coverage through a former employer or union, or a Medicare supplemental plan with drug benefits, prior to 2006, you should have been notified by your plan provider if your coverage is as good as Medicare's drug coverage.

## Tips on using the Medicare Speech Automated System

It will ask you a series of questions about what kind of information you need. The basic questions you will need to answer are as follows:

1. If you are calling about the new Medicare drug coverage, say: “Drug Coverage.”
2. For information on how the new prescription drug plans work, say: “Plan Choices.”
3. Do you have your Medicare Card?
4. Please tell me your Medicare Claim Number, including any letters (it’s on your Medicare card).
5. May I have your last name, without spelling it?
6. What is your date of birth?
7. What was the starting date of your Medicare coverage? (This is on your Medicare card.)
8. Our records show that you are... (enrolled or not enrolled in Medicare prescription drug plan).
9. If would like to speak with an agent, you will need your drug list and Medicare card. Say: “Agent.” This will bring a customer service representative from Medicare on to the line.

- Call your local Area Agency on Aging at 1-800-677-1116 to learn which office is the closest to you.

### If You Don’t Have Computer Access:

- Call **MEDICARE at 1-800-633-4227**. Customer service representatives will walk you through the Plan Finder. If you request it, they will send you a “Customized Print on Demand” booklet of the prescription drug plans that might work best for you.

### Tips for calling Medicare:

- Medicare’s toll-free number is currently available 24 hours a day, 7 days a week. Try to call during non-peak hours such as evenings or weekends, and try to avoid Monday mornings.
- You will need to have your list of drugs and dosages, your Medicare card, your date of birth, and the date you originally enrolled in Medicare (the date is on your Medicare card) available when you call.
- Write down any specific questions you have before calling, and check your questions off as they are answered when you call.
- When you make the call, you may first get a “Speech Automated System” (a computer) that will instruct you to say your answers. If you decide to use this system, you will need to speak slowly, distinctly, and loudly enough for the computer to understand you. Also, try to minimize any background noises that might make it hard for you and the computer to hear.
- If the response from the Medicare automated system is that you are not enrolled in a plan, it will ask you to please check back later because Medicare is updating its records daily. So if you have enrolled already, wait about a week and call Medicare back. If you haven’t enrolled yet, and want to get Medicare drug coverage, you will need to make a choice and enroll in a plan. Say: “Enroll.”

- If you dislike or have difficulty using a speech automated system, you can press zero (0) on your telephone to bypass the automated system. This may or may not get you to a customer service operator right away—depending upon how busy they are. **It’s important to know, however, that calls are taken in the order they are received—so hanging up and calling back only puts you at the back of the line!**

### If You Do Have Computer Access:

Once you have gathered your drug information, you are ready to begin your prescription drug plan search, using the Medicare Prescription Drug Plan Finder.

To keep your initial search simple, this tool focuses on “Stand Alone” prescription drug plans associated with the traditional Medicare fee-for-service program. By working through a “General Search,” you will become better acquainted with the information available through the Plan Finder.

To start your prescription drug plan search:

1. On the computer, go to the Internet, type: **www.medicare.gov**, hit enter, and log onto the Medicare website.
2. Click on **Compare Medicare Prescription Drug Plans**.
3. Scroll down to where you see (in blue) **Where Would You Like to Begin?** Then, where you see, **Find a Medicare Prescription Drug Plan**, click on the orange arrow to the right.
4. Scroll down to the lower half of the page until you see a button that says **General Search** and click on that button.
5. Enter your **Zip Code** in the box that is provided. **Do not hit enter.**

Note: In some cases, when you enter your zip code, you will get another box that asks you to select your county. Click on the drop down arrow and select your county, then click on **Continue**.

## Extra Help for those with limited income

Extra Help is available if your income and assets are below these figures:

- Income eligibility for Extra Help is \$14,355 (single) or \$19,245 (couple).\*
- Asset eligibility is \$11,500 (single) or \$23,000 (couple).

If it looks like your income is less than these figures, even if you have some doubts, it is a good idea to apply for this benefit, since it could provide:

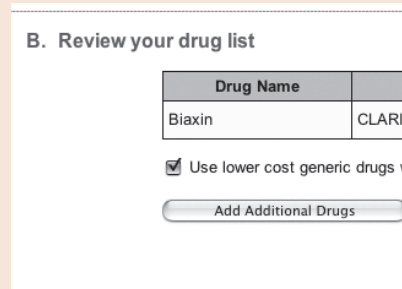
- Unlimited drug coverage (no coverage gap).
- Greatly reduced (or even zero) monthly premiums.
- Greatly reduced (or even zero) annual deductible.
- Co-pays of \$1 to \$5 or 15% of the cost of each drug—depending on income and asset levels.

\*Income figures will go up for 2006.

## Generic check box

When you enter a drug name, the computer automatically checks to see if a generic drug is available.

Generics will automatically come up on your list of drugs



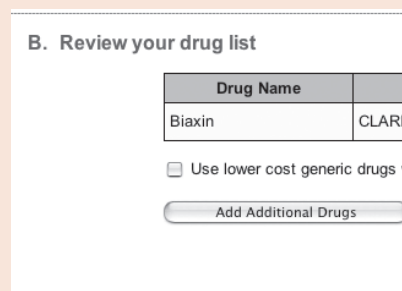
B. Review your drug list

Drug Name	
Biaxin	CLARIT

Use lower cost generic drugs v

Add Additional Drugs

—unless you uncheck the box first (below).



B. Review your drug list

Drug Name	
Biaxin	CLARIT

Use lower cost generic drugs v

Add Additional Drugs

Because generics are usually less expensive than their brand name equivalents, the computer will also factor the generics listed into the plan costs. Therefore, the cost quotes might be misleading, if you intend to stay with a brand name as opposed to a generic.

You will have another chance to do this kind of cost comparison later, so we suggest you uncheck the box at this point in your search.

- On the same page, scroll down and click on the box that best describes your **Current Prescription Coverage**. If you don't know, click "**None of the Above**."
- On that same page, scroll down and select "**yes**" or "**no**" to the question **Eligible or Qualify For Additional Help**, then scroll down and click the **Continue** button. (If you are not sure if you will qualify for the Extra Help, check the eligibility information in the box in the shaded area on page 3.)
- This will bring up the next window **Decide on Your Plan Options**. At the bottom of the page, click on **Choose a Drug Plan Type**.
- Near the bottom of the page, click on the gray button **Search for Medicare Prescription Drug Plans**.
- Scroll down to **Enter Your Medications**, and click on the gray button. Using the list of drugs you made earlier, type the name of your drug in the box that appears, and click **Search for Drug**. Scroll down to **Review Your Drug List** to see that drug name has been entered. If you have more than one drug to enter, click on **Add Additional Drugs** and enter the next drug. Repeat for each drug used, clicking **Add Selected Drug to My List** each time after typing in the name of your drug. Don't panic when the screen appears to go blank—the computer is just doing its work.

Note 1: If you type the drug name incorrectly or just type in the first few letters, the program will give you a drop-down screen with a list of drugs to choose from that are close to what you've entered—select the correct drug and then click on **Add the Drug to My List**. You can also enter just the first letter of the drug name (such as "L" for Lovastatin) and you will get a complete listing of all drugs that start with that letter. If you find your drug on this list, you then need to select it and click on **Add the Drug to My List**.

Note 2: When all your drugs are listed, click on the little box below the list. This will remove the check mark (see explanation in the shaded box) from the box that says: "Use lower cost generics when available."

Note 3: If a particular drug does not appear on the Medicare Plan Finder list, it is probably not covered by Medicare and you will have to pay for the drug yourself—unless you qualify for another program such as Medicaid or a state pharmacy assistance program

- When you have completed entering your list of medications, click on **Continue with Selected Drugs**.
- Next click on **Change/Update My Drug Dosage**. **This is one of the most important steps in the whole process!** You will get a more precise plan comparison if you take the time to enter exact dosages and quantities. For example, if two pills are taken per day, change the 30-day quantity to 60. To change the dosage, click the drop-down arrow to the right of the drug name, and then click **Update Dosage/Quantity** to make sure all your changes have been registered. You next need to click on **Continue with Selected Drugs**.
- Scroll down to **Choose How You Want to View Your Plan**. Click on **Continue to Plan List** rather than **Select My Preferred Pharmacy**. You will have another chance to do this later. You will then see a screen titled **Find a Medicare Prescription Drug Plan**. Scroll down to the **Prescription Drug Plan Comparison** multi-colored chart that gives you plans for the zip code you entered, starting with the one that is estimated to be least expensive overall calculated for 30-day supplies from local "preferred" pharmacies (those that are in the plan's network). You still need to compare plans, however, because there are other factors to think about.

Note: In order to view the information about the various plans, you will click on the words in the column that are underlined (Plan Information, Plan Name, # of Pharmacies, etc.). This will bring up more detailed information about each plan. In order to move back and forth between these columns, you should scroll down to the bottom of the screen and click on the buttons that may say **Return to Personalized Search**, **Close Window**, or **Return to Previous Page**. You can also use your "back" button on your computer in most cases to move back and forth between the various windows.

## Getting the answers you need from the Medicare Rx Plan Finder

What will my detailed cost be under this plan?

See [View Cost Details](#).

What are my 90-day mail order options?

See [View Cost Details](#).

Are there ways of paying less under a prescription drug plan? See [Lower My Cost Share](#).

How can I tell whether all my drugs are covered?

See [View Cost Details](#).

How can I tell what my drug costs will be in the “gap in coverage?” See [View Cost Details/Show Details](#) or [Plan Name/Show Details](#) (if it says [Hide Details](#) click on it to bring up the [Show Details](#)).

Note: A Double Asterisk (\*\*)—to the right of a drug’s name (in [Show Details](#)) means it is not part of a plan’s preferred drug list, or formulary, and therefore will be more costly to you.

How can I tell whether I can get my prescription drugs in other parts of the country under this plan, if I’m traveling? See [View Plan Notes](#).

Which pharmacies can I go to under this plan? Click on the number in the [# of Pharmacies](#) Column.

14. Scroll down about halfway until you see a multi-colored chart. Look for the heading **More About this Plan**.

Then, starting in the **Plan Information** column on the topmost plan, click on the **Select Below** arrow that will provide a drop-down menu with the following selections:

- **Enroll in this Plan**
- **View Cost Details:** This gives you what you need to compare plans properly. Some of the things it shows include: (see box to the right also)
  - > An estimate of your total annual costs (including premiums, deductibles and co-pays) for all of 2006.
  - > Your fixed costs —monthly premiums and annual deductible (if any).
  - > Your co-pays in the initial coverage period.
  - > If or when you might reach the “gap in coverage” and what your drugs will cost you when you do.
- **Lower My Cost Share:** This is where you can check to see what savings might be available through the use of a similar drug or generic equivalent.
- **View Notes:** This will give you information about whether the plan is regional or national, as well as information about where you might obtain your drugs (pharmacy networks, etc.)

15. In the **Plan Name Column**, click on the name of the plan to get detailed information about your specific drug costs, including:

- Your monthly premium and deductible (if any).
- Your specific co-pay or co-insurance for each drug you listed earlier.
- The “tier” your drug(s) are in for that plan (remember tiers won’t necessarily be the same for all plans).

- The cost for a 90-day mail order supply.
- If and when your costs are estimated to reach the “gap in coverage” or catastrophic level, and your estimated monthly cost during the “gap” period.

16. In the **Select to Compare** column, click in the boxes to the left of the plan names (up to three at a time) you are interested in, and then scroll down and click the button that says **Compare Three Plans**. Repeat for more comparisons.

17. In the **# of Pharmacies column**, click on the # to get a list of the pharmacies that are preferred by that particular plan.

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By now you should be getting a feel for how the Medicare Prescription Drug Plan Finder works. There is a lot of information available at your fingertips—but it takes a little practice to become comfortable using it—so take your time and don’t be afraid to explore some of the other search possibilities available. There will be times when “traffic” is heavy on the Plan Finder. You may have to try at another non-peak time, but don’t get discouraged. As the “traffic jam” begins to break up, you’ll have access when you want it.

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### Some other things to be aware of when using the Medicare Prescription Drug Plan Finder:

1. **Restrictions on certain drugs**—Watch for a single asterisk (\*) to the right of a drug name in the “View Cost Details” page. It means there are special rules that apply, such as:
  - **Prior Authorization:** This means that you or your doctor must obtain the plan’s approval before it will cover a particular drug (often a high-priced one). The physician generally has to document why this specific medication is needed.
  - **Step Therapy:** This is a variation of prior authorization. It requires the physician to use a similar but

## Exploring similar drugs to treat a particular condition

AARP has developed an online consumer guide to help you find the most effective and affordable drugs. The guide provides unbiased information on drug safety, effectiveness, and cost. It’s based upon an independent review and assessment of the available medical evidence.

The guide shows how the most expensive drugs are not necessarily the best, and that consumers willing to consult with their doctor or pharmacist, can often find similar safe and effective lower cost drugs. To learn more about AARP’s prescription drug consumer’s guide, visit the AARP website listed below.

[www.aarp.org/comparedrugs](http://www.aarp.org/comparedrugs)

## Other types of searches

### Formulary Search:

Each plan has a formulary, or its preferred list of drugs.

To do a Formulary Search, go to [www.medicare.gov](http://www.medicare.gov), click on **Formulary Search**. Enter your state, then your list of drugs. When the list of plans is displayed, click on the name of each plan to see in which tier each of your drugs falls. This won't give you co-pays, however, so you'll need to go to "View Cost Details" (see page 6) for that.

### Personalized Search:

Start at [www.medicare.gov](http://www.medicare.gov) again. Click on **Compare Medicare Prescription Drug Plans**. Click on **Find a Medicare Drug Plan**. Enter your personal information in the boxes, then click on **Personalized Search**. From there, follow the same basic steps as for the "General Search."

- less expensive "preferred" drug to treat a condition before being allowed to use the one originally prescribed.
- Quantity Limits: This does NOT mean that your supply of drugs will be cut off after a certain time—or restricted to a particular number of prescriptions per year.** It does mean that your doctor must follow your plan's guidelines when prescribing drugs for a current condition. If, for instance, your doctor writes a prescription that falls outside your drug plan's quantity limit, he or she must get prior authorization from your plan before the plan will agree to pay for the prescription. For example, prescriptions for sleeping pills need to be monitored very closely by your doctor and therefore most will have a quantity limit associated with them. In other words, if the normal course of treatment calls for a 10-day supply of pills, then your doctor can't write the prescription for more than that—unless he or she has prior approval from the drug plan to do so.
- Co-payment/Coinsurance:** This is the amount you pay for each prescription after you have paid the deductible. In some plans, you pay the same co-payment (a set amount) or coinsurance (a percentage of the cost) for any prescription. In other plans, there might be different levels or "tiers," with different costs, depending on which tier a particular drug is assigned. Some plans may have co-payments for some drugs and coinsurance for others.
- "Tiered" co-payment levels:** Typically, less expensive drugs are assigned to lower tiers, with lower co-pay amounts. Brand-name drugs may be further divided into "preferred" and "non-preferred" tiers as well. Further, some plans may dedicate another tier for less common and/or very expensive drugs. With these kinds of variations, it's a good idea to compare not only the monthly premium and annual deductible—but also co-payments—when calculating your total costs.

- Premiums and Deductibles:** Keep in mind that some plans will not require a premium or a deductible—but you still need to compare total costs for the plan as a whole to see which plan makes the most dollar sense. While your premiums and deductible (if any) cannot increase in the calendar year, your co-pays or co-insurance may. Such changes, though not expected to happen frequently, can raise or lower your estimated annual drug costs.
- Types of Medicare Plans:**
  - **"Stand alone" plans** that offer only drug coverage. Such a plan may be for you if you wish to stay in the traditional Medicare fee-for-service program for other medical coverage.
  - **Medicare Advantage (MA) plans** that cover both medical services and prescription drugs. Such a plan may be for you if you can accept restrictions on your choice of health care providers, and you prefer managed care.
- Call and Confirm Plan Information:** Prior to enrolling in any prescription drug plan, it's important to call the Prescription Drug Plan sponsor (or check their website) to confirm the information that you have gotten from the Plan Finder. The plans are able to make changes on a daily basis—and many have, as they try to be more competitive with the plans they only saw for the first time on November 15, 2005.
- Changing Plans:** Medicare beneficiaries who qualify for Extra Help have the option of changing their prescription drug plan at any time. If you do not qualify for Extra Help you can change your plan once between now and May 16, 2006. Thereafter, changes can be made during the annual enrollment period which is typically November 15 to December 31 of each year.

## Other resource information

On the AARP Medicare website [www.aarp.org/medicarerx](http://www.aarp.org/medicarerx) you will find a host of helpful information (in English and Spanish), including:

*The New Medicare Prescription Drug Coverage: What You Need to Know*

*The New Medicare Prescription Drug Coverage: Extra Help for People with Limited Incomes*

*The New Medicare Prescription Drug Coverage: A Glossary of Terms*

*The New Medicare Prescription Drug Coverage: Drug Formularies, Exceptions, & Appeals*

*The New Medicare Prescription Drug Coverage: More Information for People with Medigap*

*The New Medicare Prescription Drug Coverage: More Information for People with Retiree Coverage*

*The New Medicare Prescription Drug Coverage: How to Ask the Right Questions & Get the Most from Your Medicines* (includes My Medication Record)

The Medicare website [www.medicare.gov](http://www.medicare.gov), features more than the plan finder. On their home page, click on **Other Resources** for fact sheets, things to consider, etc.

A. Personalized plan search

Personal information

Medicare claim number:

Last name:

Date of birth:

Effective date for Medicare Part A or B:

ZIP code:

(Click to agree to the terms and conditions of the [User Agreement](#) and begin your search.)

## Don't Give Out



## Final Note: Protect yourself against fraud

- **Applying is free.** The forms are free, and there's plenty of free help in your community to fill them out.
- **Don't give out bank or credit card account numbers.** You will have to give some personal information about your income and resources if you apply for Extra Help, but not your banking, checking or credit card information!
- **Talk to the right person.** If you have sent information to Social Security to apply for Extra Help, they may call you, but if the caller asks for your Social Security number, hang up! They probably aren't from the Social Security Administration!
- **By law, Medicare plans cannot come to your door to sell their product, unless you have invited them.** If you experience this kind of activity, contact your state attorney general. Look in the blue pages of your telephone directory for state government listings, then look for "Attorney General."
- **Don't be pressured.** Companies can call you to tell you about their drug plans, but they can't sign you up over the phone. In addition, organizations must:
  - Comply with the National-Do-Not-Call Registry
  - Honor "do not call again" requests, and
  - Abide by federal and state calling hours.
- **Take your time. You have until May 15 of this year to enroll without incurring a late penalty.**

List of Medications for Medicare Plan Finder Search	What I pay now <b>monthly</b> for the drugs I take	Plan 1	Plan 2	Plan 3
Monthly Premium	\$	\$	\$	\$
Deductible	\$	\$	\$	\$

Name of the drug (including strength/numbers; e.g., Lipitor 20mg, 30 tab or Metformin HCL tab 500mg)

#1				
#2				
#3				
#4				
#5				
#6				
#7				
#8				
#9				
#10				
#11				
#12				
<b>Total Monthly Cost</b>				
<b>Does this plan have a gap in coverage?</b>				
<b>If so, when does the gap begin?</b>				
<b>When does the gap end?</b>				
<b>Can I use the plan at the pharmacy? Do I have to go to a different pharmacy?</b>				
<b>Does the plan give me discounts on all the drugs I currently take?</b>				
<b>If I currently buy a 90-day supply, what is the price difference? Do I have to utilize mail order?</b>				
<b>If I live in another state for part of the year, can I get my drugs in that state?</b>				

List of Medications for Medicare Plan Finder Search	What I pay now <b>monthly</b> for the drugs I take	Plan 1	Plan 2	Plan 3
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#1				
#2				
#3				
#4				
#5				
#6				
#7				
#8				
#9				
#10				
#11				
#12				
<b>Total Monthly Cost</b>				
Does this plan have a gap in coverage?				
If so, when does the gap begin?				
When does the gap end?				
Can I use the plan at the pharmacy? Do I have to go to a different pharmacy?				
Does the plan give me discounts on all the drugs I currently take?				
If I currently buy a 90-day supply, what is the price difference? Do I have to utilize mail order?				
If I live in another state for part of the year, can I get my drugs in that state?				

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