


 Aetna Medicare Aetna Medicare CVS Pharmacy PDP 55810-059 Enrollment: 1-800-832-2640 TTY Enrollment: 1-888-760-4748 www.aetnamedicare.com	 Aetna Medicare Aetna Medicare Rx Premier (PDP) 55810-195 Enrollment: 1-800-832-2640 TTY Enrollment: 1-888-760-4748 www.aetnamedicare.com	 BlueCross BlueShield of Minnesota <small>An Independent Licensee of the Blue Cross and Blue Shield Association</small> MedicareBlue Rx Standard 55743-001 Enrollment: 1-877-662-2583 TTY Enrollment: 1-866-582-1158 www.YourMedicareSolutions.com
Counties in Plan Area:	All 87 Minnesota counties.	All 87 Minnesota counties.	All 87 Minnesota counties.
Monthly Premium	\$26	\$75.50	\$39.70
Deductible	\$0 co-pay for Tier 1 preferred generic and Tier 2 non-preferred generics; \$320 for all other drugs.	\$0	\$160
Tier 1 Retail pharmacy:	\$3 co-pay for 31 day supply at preferred pharmacy; \$9 co-pay for 31 day supply at other in-network pharmacy.	\$4 co-pay 31 day supply.	\$4 co-pay for 31 day supply preferred generic drugs. \$12 co-pay for 90 day supply preferred generic drugs.
Tier 1 Mail Order:	\$9 co-pay for 90 day supply at preferred mail.	\$12 co-pay for 90 day supply at preferred mail; \$12 co-pay for 90 day supply at non-preferred mail.	\$8 co-pay for 90 day supply preferred generic drugs.
Tier 2 Retail pharmacy:	\$10 co-pay for 31 day supply at preferred pharmacy; \$20 co-pay for 31 day supply at other in network pharmacy.	\$25 co-pay for 31 day supply.	\$10 co-pay for 31 day supply non- preferred generic drugs. \$30 co-pay for 90 day supply non-preferred generic drugs.
Tier 2 Mail Order:	\$30 co-pay for 90 day supply at preferred mail.	\$60 co-pay for 90 day supply at preferred mail; \$75 co-pay for 90 day non preferred mail.	\$20 co-pay for 90 day supply non-preferred generic drugs.
Tier 3 Retail pharmacy:	\$31 co-pay for 31 day supply at preferred pharmacy; \$41 co-pay for 31 day supply at other in network pharmacy.	\$35 co-pay for 31 day supply.	\$35 co-pay for 31 day supply preferred brand drugs. \$105 co-pay for 90 day supply preferred brand drugs.
Tier 3 Mail Order:	\$93 co-pay for 90 day preferred mail.	\$90 co-pay for 90 day supply at preferred mail; \$105 co-pay for 90 day supply at non-preferred mail.	\$70 co-pay for 90 day supply preferred brand drugs.
Tier 4 Retail pharmacy:	40% co-insurance for 31 day supply at preferred pharmacy; 40% co-insurance for 31 day supply at other in network pharmacy.	\$80 co-pay for 31 day supply at preferred pharmacy.	48% co-insurance for 31 day supply non-preferred brand drugs. 48% co-insurance for 90 day supply non-preferred brand drugs.
Tier 4 Mail Order:	40% co-insurance for 90 day supply at preferred pharmacy.	\$225 co-pay for 90 day supply at preferred pharmacy; \$240 co-pay for 31 day supply at non-preferred network pharmacy.	48% co-insurance for 90 day supply non-preferred brand drugs.
Tier 5 Retail pharmacy:	25% co-insurance for 31 day supply at preferred pharmacy; 25% co-insurance at other in-network pharmacies.	33% co-insurance for 31 day supply.	Does not apply.

Tier 5 Mail Order:	25% co-insurance for 90 day supply.	33% co-insurance preferred mail order for 90 day supply; 33% co-insurance non-preferred mail order for 90 day supply.	Does not apply.
Donut Hole Coverage	No	Some	Some
Donut Hole Coverage Details	Does not apply.	\$4 co-pay for 31 day supply of Tier 1 drugs; \$25 co-pay for 31 day supply of Tier 2 drugs in network pharmacy. \$12 co-pay for 90 day supply of Tier 1 drugs at preferred and non-preferred mail; \$60 co-pay for 90 day supply of Tier 2 drugs at preferred mail and \$75 co-pay at non-preferred mail.	Does not apply.
Extra Services	Does not apply.	Supplemental coverage for some excluded drugs (Tier 1 generic benzodiazepines and Tier 1 generic barbiturates).	MedicareBlue Values Program - discounts on vision exams, eyewear, laser surgery, hearing exams and hearing aids.
Shingles Vaccine	Yes	Yes	Yes
Shingles Vaccine Out of Pocket Costs	Tier 4 drug; out of pocket cost will vary based on stage of plan at time vaccine is obtained.	Tier 4 drug; out of pocket cost will vary based on stage of plan at time vaccine is obtained.	Covered at Level 3: non-preferred brand and is a one time dose. Impact on members depends on in-network use.
Mail Order Available	Yes	Yes	Yes
Number of Pharmacies in MN that Participate	More than 1,200 pharmacies.	More than 1,200 pharmacies.	More than 60,000 pharmacies nationwide.

Quick Tips

#46: Do you need help to remain in your home?

- Did you know there may be services available to help? The Senior LinkAge Line® (1-800-333-2433) can help you get the answers you need to help you remain in your home.



	 <p>BlueCross BlueShield of Minnesota An Independent Licensee of the Blue Cross and Blue Shield Association MedicareBlue Rx Premier S5743-004 Enrollment: 1-877-662-2583 TTY Enrollment: 1-866-582-1158 www>YourMedicareSolutions.com</p>	 <p>bravo HEALTH a HEALTHSPRING company Bravo Rx S5998-029 Enrollment: 1-800-291-0396 bravohealth.com</p>	<p>CIGNA Medicare Rx® (PDP) Medicare Part D Prescription Drug Plans CIGNA Medicare Rx Plan One S5617-123 Enrollment: 1-800 735-1459 TTY Enrollment: 1-800 322-1451 www.cignamedicarerx.com</p>
Counties in Plan Area:	All 87 Minnesota counties.	All 87 Minnesota counties.	All 87 Minnesota counties.
Monthly Premium	\$104.60	\$39.20	\$35.40
Deductible	\$0	\$320	\$320
Tier 1 Retail pharmacy:	\$4 co-pay for 31 day supply preferred generic drugs. \$12 co-pay for 90 day supply preferred generic drugs.	25% co-insurance.	\$3 co-pay for 30 day supply.
Tier 1 Mail Order:	\$8 co-pay for 90 day supply preferred generic drugs.	25% co-insurance.	\$7.50 co-pay for 90 day supply preferred mail order.
Tier 2 Retail pharmacy:	\$6 co-pay for 31 day supply non-preferred generic drugs. \$18 co-pay for 90 day supply non-preferred generic drugs.	25% co-insurance.	\$20 co-pay for 30 day supply.
Tier 2 Mail Order:	\$12 co-pay for 90 day supply non-preferred generic drugs.	25% co-insurance.	\$50 co-pay for 90 day supply preferred mail order.
Tier 3 Retail pharmacy:	\$35 co-pay for 31 day supply preferred brand drugs. \$105 co-pay for 90 day supply preferred brand drugs.	25% co-insurance.	\$34 co-pay for 30 day supply.
Tier 3 Mail Order:	\$70 co-pay for 90 day supply preferred brand drugs.	25% co-insurance.	\$85 co-pay for 90 day supply preferred mail order.
Tier 4 Retail pharmacy:	48% co-insurance for 31 day supply non-preferred brand drugs. 48% co-insurance for 90 day supply non-preferred brand drugs.	Does not apply.	\$85 co-pay for 30 day supply.
Tier 4 Mail Order:	48% co-insurance for 90 day supply non-preferred brand drugs.	Does not apply.	\$212.50 co-pay for 90 day supply preferred mail order.
Tier 5 Retail pharmacy:	Does not apply.	Does not apply.	25% co-insurance.
Tier 5 Mail Order:	Does not apply.	Does not apply.	25% co-insurance.
Donut Hole Coverage	Some	No	Some
Donut Hole Coverage Details	\$4 co-pay for preferred generic drugs; \$6 co-pay for non-preferred generic drugs.	Does not apply.	Does not apply.




Extra Services	MedicareBlue Values Program - discounts on vision exams, eyewear, laser surgery, hearing exams and hearing aids.	Does not apply.	Healthy Rewards Program – discounts on vision exams, eyewear, hearing aids, exams and fitness club dues.
Shingles Vaccine	Yes	Yes	Yes
Shingles Vaccine Out of Pocket Costs	Covered at Tier 3: non-preferred brand and is a one time dose. Impact on members depends on in-network use.	25% in initial coverage phase, 100% in coverage gap, greater of \$2.60 generic/\$6.50 brand or 5% in catastrophic phase.	\$34 co-pay at network pharmacy.
Mail Order Available	Yes	Yes	Yes
Number of Pharmacies in MN that Participate	More than 60,000 pharmacies nationwide.	More than 60,000 nationwide and 500 in Minnesota.	1,005

Quick Tips

#47: Medicare and Medicaid can be confusing.

- In Minnesota, Medicaid is known as Medical Assistance or M.A. which is health care coverage for Minnesotans of all ages who have limited income and few resources. Your county social service office handles eligibility and enrollment for Medical Assistance.

	CIGNA Medicare Rx® (PDP) Medicare Part D Prescription Drug Plans CIGNA Medicare Rx Plan Two (PDP) S5617-195 Enrollment: 1-800 735-1459 TTY Enrollment: 1-800 322-1451 www.cignamedicarerx.com	 A Medicare Approved Prescription Drug Plan EnvisionRx Plus Silver S7694-025 Enrollment: 1-866-250-2005 TTY Enrollment: 866-763-9630 www.envisionrxplus.com	 A Medicare Approved Prescription Drug Plan EnvisionRx Plus Gold S7694-095 Enrollment: 1-866-250-2005 TTY Enrollment: 866-763-9630 www.envisionrxplus.com
Counties in Plan Area:	All 87 Minnesota counties.	All 87 Minnesota counties.	All 87 Minnesota counties.
Monthly Premium	\$69.40	\$35.10	\$70.80
Deductible	\$0	\$320	\$0
Tier 1 Retail pharmacy:	\$0 co-pay for 30 day supply.	25% co-insurance.	\$2 co-pay preferred generics.
Tier 1 Mail Order:	\$0 co-pay for 90 day supply by preferred mail order.	25% co-insurance for 30 day supply only.	\$6 co-pay preferred generics.
Tier 2 Retail pharmacy:	\$5 co-pay for 30 day supply.	25% co-insurance.	15% co-insurance non-preferred generics.
Tier 2 Mail Order:	\$12.50 co-pay for 90 day supply by preferred mail order.	25% co-insurance for 30 day supply only.	15% co-insurance non-preferred generics.
Tier 3 Retail pharmacy:	\$41 co-pay for 30 day supply.	25% co-insurance.	15% co-insurance preferred brand.
Tier 3 Mail Order:	\$102.50 co-pay for 90 day supply by preferred mail order.	25% co-insurance for 30 day supply only.	15% co-insurance preferred brand.
Tier 4 Retail pharmacy:	\$85 co-pay for 30 day supply.	25% co-insurance.	30% co-insurance non-preferred brand.
Tier 4 Mail Order:	\$212.50 co-pay for 90 day supply preferred mail order.	25% co-insurance for 30 day supply only.	30% co-insurance specialty.
Tier 5 Retail pharmacy:	33% co-insurance.	25% co-insurance.	33% co-insurance specialty.
Tier 5 Mail Order:	33% co-insurance.	25% co-insurance for 30 day supply only.	33% co-insurance specialty.
Donut Hole Coverage	Some	No	Some
Donut Hole Coverage Details	\$0 for Tier 1 drugs.	Does not apply.	Preferred generic drugs (Tier 1) for \$2 co-pay or the cost of the drug, whichever is less, for 30 day supply.
Extra Services	Healthy Rewards Program – discounts on vision exams, eyewear, hearing aids, exams and fitness club dues.	There is a value added service that allows a specific listing of non-covered Part D drugs to process at 100% co-pay.	There is a value added service that allows a specific listing of non-covered Part D drugs to process at 100% co-pay.
Shingles Vaccine	Yes	Yes	Yes
Shingles Vaccine Out of Pocket Costs	\$41 co-pay at network pharmacy.	Call plan for details.	Call plan for details.
Mail Order Available	Yes	No	Yes
Number of Pharmacies in MN that Participate	1,005	1,131	1,131

	 First Health® Part D <i>from Coventry Health Care</i> First Health Part D Value Plus S5768-148 Enrollment: 1-800-882-3822 www.FirstHealthPartD.com	 First Health® Part D <i>from Coventry Health Care</i> First Health Part D - Premier S5768-122 Enrollment: 1-800-882-3822 www.FirstHealthPartD.com	 First Health® Part D <i>from Coventry Health Care</i> First Health Part D Premier Plus S5674-035 Enrollment: 1-800-882-3822 www.FirstHealthPartD.com
Counties in Plan Area:	All 87 Minnesota counties.	All 87 Minnesota counties.	All 87 Minnesota counties.
Monthly Premium	\$25.10	\$30.40	\$100.90
Deductible	\$0	\$250	\$0
Tier 1 Retail pharmacy:	Preferred pharmacies: \$0 co-pay for a 30-day supply; \$0 co-pay for a 90-day supply. Non-preferred pharmacies: \$7 co-pay for a 30-day supply; \$21 copay for a 90-day supply.	\$5 co-pay for 30 day supply of preferred generics; \$15 co-pay for 90 day supply of preferred generics.	\$0 co-pay for 30 day supply for preferred generics; \$0 co-pay for 90 day supply of preferred generics.
Tier 1 Mail Order:	Does not apply.	\$5 co-pay for 30 day supply of preferred generics; \$12.50 co-pay for 90 day supply of preferred generics.	\$0 co-pay for 30 day supply for preferred generics; \$0 co-pay for 90 day supply of preferred generics.
Tier 2 Retail pharmacy:	25% co-insurance for 30 day supply and 90 day supply at preferred pharmacies; 37% co-insurance for 30 day supply and 90 day supply at non-preferred pharmacies.	20% co-insurance for 30 day supply of preferred brand drugs; 20% co-insurance for 90 day supply of preferred brand drugs.	\$20 co-pay for 30 day supply for non preferred generics; \$60 co-pay for 90 day supply of non-preferred generics.
Tier 2 Mail Order:	Does not apply.	20% co-insurance for 30 day supply of preferred brand drugs; 18% co-insurance for 90 day supply of preferred brand drugs.	\$20 co-pay for 30 day supply for non preferred generics; \$50 co-pay for 90 day supply of non preferred generics.
Tier 3 Retail pharmacy:	38% co-insurance for 30 day supply and 90 day supply at preferred pharmacies; 59% co-insurance for 30 day supply and 90 day supply at non-preferred pharmacies.	\$5 co-pay for 30 day supply of preferred generics; \$12.50 co-pay for 90 day supply of preferred generics.	25% co-insurance for 30 day supply for preferred brand drugs; 25% co-insurance for 90 day supply of preferred brand drugs.
Tier 3 Mail Order:	Does not apply.	36% co-insurance for 30 day supply. 36% co-insurance for 90 day supply.	25% co-insurance for 30 day supply for preferred brand drugs; 24% co-insurance for 90 day supply of preferred brand drugs.
Tier 4 Retail pharmacy:	33% co-insurance for 30 day supply and 90 day supply at preferred pharmacies; 33% co-insurance for 30 day supply and 90 day supply at non-preferred pharmacies.	26% co-insurance for 30 day supply.	41% co-insurance for 30 day supply for non preferred brand drugs; 41% co-insurance for 90 day supply of non preferred brand drugs.
Tier 4 Mail Order:	Does not apply.	Does not apply.	41% co-insurance for 30 day supply for non preferred brand drugs; 41% co-insurance for 90 day supply of non preferred brand drugs.
Tier 5 Retail pharmacy:	Does not apply.	Does not apply.	33% co-insurance for 30 day supply of speciality drugs.
Donut Hole Coverage	No	No	Some

Donut Hole Coverage Details	Does not apply.	Does not apply.	All Tier 1 preferred generic drugs are covered in the gap phase of the benefit. Some drugs under Tier 3 preferred brand are covered at a 25% co-insurance and Tier 4 non-preferred brand are covered at a 41% co-insurance in the gap phase of the benefit.
Extra Services	Some over-the-counter prescriptions are covered as a part of a step therapy program for a \$0 co-pay. In addition, discounts on vitamins and supplements at preferred pharmacies only.	Some over the counter drugs are provided as a part of step therapy for a \$0 co-pay.	Some over-the-counter drugs are provided at a \$0 co-pay. Some drugs normally excluded under Part D are covered. Refer to the summary of benefits for the listing of covered excluded drugs.
Shingles Vaccine	Yes	Yes	Yes
Shingles Vaccine Out of Pocket Costs	59% co-insurance.	36% co-insurance.	41% co-insurance.
Mail Order Available	No	Yes	Yes
Number of Pharmacies in MN that Participate	20,000 nationwide.	20,000 nationwide.	20,000 nationwide.

Quick Tips




#48: No matter your age, you can get help finding options to help you pay for and reduce your prescription drug costs.

- The Senior LinkAge Line® (1-800-333-2433) helps any Minnesotan that needs assistance with their prescription drug expenses and applying for the patient assistance programs.

Quick Tips

#49: www.DB101.org




- If you are disabled and considering a return to work, visit the new website to help you get answers to questions and find out how returning to work may affect your benefits. You can also call the Disability Linkage Line® at 1-866-333-2466 for additional assistance.

	 Health Net® MEDICARE PROGRAMS Health Net Orange Option 1 55678-056 Enrollment: 1-800-865-9431 TTY Enrollment: 1-800-929-9955 www.healthnet.com	 Health Net® MEDICARE PROGRAMS Health Net Value Orange Option 2 (PDP) 55678-055 Enrollment: 1-800-865-9431 TTY Enrollment: 1-800-929-9955 www.healthnet.com	 HEALTHSPRING Health Spring Prescription Drug Plan 55932-024 Enrollment: 1-800-331-6293 www.healthspring.com
Counties in Plan Area:	All 87 Minnesota counties.	All 87 Minnesota counties.	All 87 Minnesota counties.
Monthly Premium	\$50.60	\$75.30	\$38.70
Deductible	\$320	\$0	\$320
Tier 1 Retail pharmacy:	\$4 co-pay for 30 day supply preferred generic drugs.	\$0 co-pay for 30 day supply preferred generic drugs.	25% co-insurance.
Tier 1 Mail Order:	\$8 co-pay for 90 day supply preferred generic drugs.	\$0 co-pay for 90 day supply preferred generic drugs.	25% co-insurance.
Tier 2 Retail pharmacy:	\$45 co-pay for 30 day supply preferred brand drugs.	\$32 co-pay for 30 day supply preferred brand drugs.	25% co-insurance.
Tier 2 Mail Order:	\$90 co-pay for 90 day supply preferred brand drugs.	\$64 co-pay for 90 day supply preferred brand drugs.	25% co-insurance.
Tier 3 Retail pharmacy:	\$93 co-pay for 30 day supply non-preferred brand drugs.	\$64 co-pay for 30 day supply non-preferred brand drugs.	Does not apply.
Tier 3 Mail Order:	\$233 co-pay for 90 day supply non-preferred brand drugs.	\$160 co-pay for 90 day supply non-preferred brand drugs.	Does not apply.
Tier 4 Retail pharmacy:	25% co-insurance for 30 day supply injectable drugs.	33% co-insurance for 30 day supply injectable drugs.	Does not apply.
Tier 4 Mail Order:	25% co-insurance for 90 day supply injectable drugs.	33% co-insurance for 90 day supply injectable drugs.	Does not apply.
Tier 5 Retail pharmacy:	25% co-insurance for 30 day supply specialty drugs.	33% co-insurance for 30 day supply specialty drugs.	Does not apply.
Tier 5 Mail Order:	25% co-insurance for 90 day supply specialty drugs.	33% co-insurance for 90 day supply specialty drugs.	Does not apply.
Donut Hole Coverage	No	No	No
Shingles Vaccine	Yes	Yes	Yes
Shingles Vaccine Out of Pocket Costs	Call plan for details.	Call plan for details.	25% co-insurance in initial coverage phase; 0% co-insurance covered during donut hole; co-pay of \$6.50 or 5% co-insurance during catastrophic phase.
Mail Order Available	Yes	Yes	Yes
Number of Pharmacies in MN that Participate	1,104 in Minnesota.	1,104 in Minnesota.	More than 60,000 pharmacies nationwide and 500 pharmacies in Minnesota.




	HUMANA. Humana Walmart-Preferred Rx Plan S5884-145 Enrollment: 1-800-706-0872 TTY Enrollment: 711 www.humana-medicare.com	HUMANA. Humana Enhanced S5884-083 Enrollment: 1-800-706-0872 TTY Enrollment: 711 www.humana-medicare.com	HUMANA. Humana Complete S5884-053 Enrollment: 1-800-706-0872 TTY Enrollment: 711 www.humana-medicare.com
Counties in Plan Area:	All 87 Minnesota counties.	All 87 Minnesota counties.	All 87 Minnesota counties.
Monthly Premium	\$15.10	\$35.40	\$106.50
Deductible	\$320	\$0	\$0
Tier 1 Retail pharmacy:	\$1 co-pay for 30 day supply; \$3 co-pay for 90 day supply, at preferred retail pharmacy.	\$7 co-pay for 30 day supply; \$21 co-pay for 90 day supply at preferred pharmacy.	\$6 co-pay for 30 day supply; \$18 co-pay for 90 day supply at preferred pharmacy.
Tier 1 Mail Order:	\$0 co-pay for 30 day supply, \$0 co-pay for 90 day supply, at preferred retail pharmacy.	\$0 co-pay for 30 day supply; \$0 co-pay for 90 day supply at preferred mail.	\$0 co-pay for 30 day supply; \$0 co-pay for 90 day supply at preferred mail.
Tier 2 Retail pharmacy:	\$5 co-pay for 30 day supply; \$15 co-pay for 90 day supply, at preferred retail pharmacy.	\$36 co-pay for 30 day supply; \$108 co-pay for 90 day supply at preferred pharmacy.	\$39 co-pay for 30 day supply; \$117 co-pay for 90 day supply at preferred pharmacy.
Tier 2 Mail Order:	\$0 co-pay for 30 day supply; \$0 co-pay for 90 day supply, at preferred retail pharmacy.	\$36 co-pay for 30 day supply; \$98 co-pay for 90 day supply at preferred mail.	\$39 co-pay for 30 day supply; \$107 co-pay for 90 day supply at preferred mail.
Tier 3 Retail pharmacy:	20% co-insurance for 30 day supply at preferred pharmacy; 20% co-insurance for 90 day supply at preferred pharmacy.	\$75 co-pay for 30 day supply; \$225 co-pay for 90 day supply at preferred pharmacy.	\$72 co-pay for 30 day supply; \$216 co-pay for 90 day supply at preferred pharmacy.
Tier 3 Mail Order:	20% co-insurance for 30 day supply at preferred mail; 20% co-insurance for 90 day supply at preferred mail.	\$75 co-pay for 30 day supply; \$215 co-pay for 90 day supply at preferred mail.	\$72 co-pay for 30 day supply; \$206 co-pay for 90 day supply at preferred mail.
Tier 4 Retail pharmacy:	35% co-insurance for 30 day supply at preferred pharmacy; 35% co-insurance for 90 day supply at preferred pharmacy.	33% co-insurance 30 day preferred pharmacy; no 90 day.	33% co-insurance 30 day preferred pharmacy; no 90 day.
Tier 4 Mail Order:	35% co-insurance for both 30 and 90 day supply at preferred mail.	33% co-insurance 30 day preferred mail; no 90 day.	33% co-insurance 30 day preferred mail; no 90 day.
Donut Hole Coverage	No	No	Some
Donut Hole Coverage Details	Does not apply.	Does not apply.	Plan provides coverage for all preferred generics and select brand drugs.
Extra Services	\$0 co-pay on all Tier 1 & Tier 2 drugs through RightSource.	\$0 co-pay on preferred generics through RightSource.	\$0 co-pay on preferred generics through RightSource.
Shingles Vaccine	Yes	Yes	Yes
Shingles Vaccine Out of Pocket Costs	35% co-insurance.	\$75 co-pay.	\$72 co-pay.
Mail Order Available	Yes	Yes	Yes
Number of Pharmacies in MN that Participate	60,000 nationwide.	60,000 nationwide.	60,000 nationwide.

	<p><i>medco</i>[®] Medco Medicare PDP - Value S5660-127 Enrollment: 1-800-758-3605 TTY Enrollment: 1-800-716-3231 www.medcomedicare.com</p>	<p><i>medco</i>[®] Medco Medicare PDP - Choice S5660-025 Enrollment: 1-800-758-3605 TTY Enrollment: 1-800-716-3231 www.medcomedicare.com</p>	<p>SILVERSCRIPT[™] CVS Caremark Value S5601-050 Enrollment: 1-866-552-6106 TTY Enrollment: 1-866-552-6288 www.silverscript.com</p>
Counties in Plan Area:	All 87 Minnesota counties.	All 87 Minnesota counties.	All 87 Minnesota counties.
Monthly Premium	\$36.90	\$97.80	\$35.50
Deductible	\$320	\$0 for generics; \$150 for brand-name drugs.	\$320
Tier 1 Retail pharmacy:	\$4 co-pay 31 day supply; \$10 co-pay 90 day supply.	\$6 co-pay for 30 day supply; \$15 co-pay for 90 day supply at preferred pharmacy.	\$5.75 co-pay.
Tier 1 Mail Order:	\$8 co-pay 90 day supply preferred mail.	\$0 co-pay for 30 day supply; \$0 co-pay for 90 day supply at preferred mail.	\$8.75 co-pay.
Tier 2 Retail pharmacy:	\$8 co-pay 31 day supply; \$20 co-pay 90 day supply.	\$12 co-pay for 30 day supply; \$30 co-pay for 90 day supply at preferred pharmacy.	\$45 co-pay.
Tier 2 Mail Order:	\$16 co-pay for 90 day supply at preferred mail.	\$12 co-pay for 90 day supply at preferred mail.	\$101.25 co-pay.
Tier 3 Retail pharmacy:	25% co-insurance for 31 day supply; 25% co-insurance for 90 day supply.	\$45 co-pay for 30 day supply; \$135 co-pay for 90 day supply at preferred pharmacy.	\$95 co-pay.
Tier 3 Mail Order:	25% co-insurance for 90 day preferred mail.	\$113 co-pay for 90 day supply at preferred mail.	\$261.25 co-pay.
Tier 4 Retail pharmacy:	34-40% co-insurance for 31 day supply; 34-40% co-insurance for 90 day supply.	\$95 co-insurance 30 day preferred pharmacy; \$285 co-insurance 90 day preferred pharmacy.	25% co-insurance.
Tier 4 Mail Order:	34-40% co-insurance for 90 day preferred mail.	\$238 co-pay 90 day preferred mail.	Does not apply.
Tier 5 Retail pharmacy:	25% co-insurance for 30 day supply; 25% co-pay for 90 day supply.	26% co-insurance 30 day preferred pharmacy; 26% co-insurance 90 day preferred pharmacy.	Does not apply.
Tier 5 Mail Order:	25% co-insurance for 90 day preferred mail.	26% co-insurance 90 day preferred mail.	Does not apply.
Donut Hole Coverage	No	Some	Some
Donut Hole Coverage Details	Does not apply.	Does not apply.	Does not apply.
Extra Services	Does not apply.	Does not apply.	20% discount on CVS Store Brand health-related items at more than 7,000 CVS/ pharmacy and Longs Drugs stores nationwide and online at www.cvs.com.
Shingles Vaccine	Yes	Yes	Yes
Shingles Vaccine Out of Pocket Costs	Varies	Varies	Call plan for details.
Mail Order Available	Yes	Yes	Yes
Number of Pharmacies in MN that Participate	2,166	2,166	More than 65,000 nationwide; more than 1,300 in Minnesota.

	 SILVERSCRIPT CVS Caremark Plus S5601-051 Enrollment: 1-866-552-6106 TTY Enrollment: 1-866-552-6288 www.silverscript.com	 WINDSOR RX PDP Windsor RX S2505-030 Enrollment: 1-888-900-4307 TTY Enrollment: 711 www.windsorr.com	 UNICARE MedicareRx Rewards Standard S5960-131 Enrollment: 1-877-541-7382 TTY Enrollment: 1-800-241-6894 www.unicare.com/medicare
Counties in Plan Area:	All 87 Minnesota counties.	All 87 Minnesota counties.	All 87 Minnesota counties.
Monthly Premium	\$78.60	\$33	\$52.50
Deductible	\$0	\$320	\$320
Tier 1 Retail pharmacy:	\$0 co-pay preferred pharmacies; \$5 co-pay non-preferred pharmacies.	\$6 co-pay.	\$4 co-pay.
Tier 1 Mail Order:	\$0 co-pay preferred mail.	\$12 co-pay.	\$6 co-pay.
Tier 2 Retail pharmacy:	\$40 co-pay preferred pharmacies; \$45 co-pay non-preferred pharmacies.	\$45 co-pay for preferred brand.	\$7 co-pay.
Tier 2 Mail Order:	\$90 co-pay preferred mail.	\$90 co-pay for preferred brand.	\$10.50 co-pay.
Tier 3 Retail pharmacy:	\$90 co-pay preferred pharmacies; \$95 co-pay non-preferred pharmacies.	\$90 co-pay for non-preferred brand.	\$33 co-pay.
Tier 3 Mail Order:	\$247.50 co-pay preferred mail.	\$180 co-pay for non-preferred brand.	\$82.50 co-pay.
Tier 4 Retail pharmacy:	33% co-insurance for 31 day supply.	25% co-insurance for specialty drugs.	\$90 co-pay.
Tier 4 Mail Order:	Does not apply.	25% co-insurance for specialty drugs.	\$225 co-pay.
Tier 5 Retail pharmacy:	Does not apply.	Does not apply.	25% co-insurance.
Tier 5 Mail Order:	Does not apply.	Does not apply.	25% co-insurance.
Tier 6 Retail pharmacy:	Does not apply.	Does not apply.	25% co-insurance.
Tier 6 Mail Order:	Does not apply.	Does not apply.	25% co-insurance, 30 day supply.
Donut Hole Coverage	Some	Some	No
Donut Hole Coverage Details	Does not apply.	Does not apply.	Does not apply.
Extra Services	20% discount on CVS Store Brand health-related items at more than 7,000 CVS/pharmacy and Longs Drugs stores nationwide and online at www.cvs.com.	Call plan for details.	None
Shingles Vaccine	Yes	Yes	Yes
Shingles Vaccine Out of Pocket Costs	Call plan for details.	Tier 2 cost share. Co-pays may apply.	Call plan for details.
Mail Order Available	Yes	Yes	Yes
Number of Pharmacies in MN that Participate	More than 65,000 nationwide and more than 1,300 in Minnesota.	528	More than 400.

	 UNICARE. MedicareRx Rewards Plus S5960-156 Enrollment: 1-877-541-7382 TTY Enrollment: 800-241-6894 www.unicare.com/medicare	 United American Part D Prescription Drug Plans (PDP) United American - Preferred S5755-028 Enrollment: 1-866-412-8501 TTY Enrollment: 1-866-524-4170 www.uamedicarepartd.com	 United American Part D Prescription Drug Plans (PDP) United American - Select S5755-096 Enrollment: 1-866-412-8501 TTY Enrollment: 1-866-524-4170 www.uamedicarepartd.com
Counties in Plan Area:	All 87 Minnesota counties.	All 87 Minnesota counties.	All 87 Minnesota counties.
Monthly Premium	\$95.10	\$56.30	\$38.70
Deductible	\$0	\$40	\$320
Tier 1 Retail pharmacy:	\$4 co-pay.	\$3 co-pay preferred generics.	\$3 co-pay for preferred generics.
Tier 1 Mail Order:	\$6 co-pay.	\$0 co-pay preferred generics.	\$0 co-pay for preferred generics.
Tier 2 Retail pharmacy:	\$7 co-pay.	\$9 co-pay non-preferred generics.	\$8 co-pay for non preferred generics.
Tier 2 Mail Order:	\$10.50 co-pay.	\$21 co-pay preferred brand.	\$21 co-pay for non preferred generics.
Tier 3 Retail pharmacy:	\$45 co-pay.	\$45 co-pay preferred brand.	\$45 co-pay for preferred brand drugs.
Tier 3 Mail Order:	\$112.50 co-pay.	\$90 co-pay preferred brand.	\$122 co-pay for preferred brand drugs.
Tier 4 Retail pharmacy:	\$90 co-pay.	\$95 co-pay non-preferred brand.	\$95 co-pay for non preferred brand drugs.
Tier 4 Mail Order:	\$225 co-pay.	\$190 co-pay non-preferred brand.	\$257 co-pay for non preferred brand drugs.
Tier 5 Retail pharmacy:	33% co-insurance.	32% co-insurance.	25% co-insurance for specialty drugs.
Tier 5 Mail Order:	33% co-insurance.	32% co-insurance.	25% co-insurance for specialty drugs.
Tier 6 Retail pharmacy:	33% co-insurance.	Does not apply.	Does not apply.
Tier 6 Mail Order:	33% co-insurance, 30 day supply.	Does not apply.	Does not apply.
Donut Hole Coverage	Some	No	No
Donut Hole Coverage Details	Tier 1 preferred generic drugs covered at \$7 for 30 day retail and \$10.50 for 90 day mail order.	Does not apply.	Does not apply.
Extra Services	None	Does not apply.	None
Shingles Vaccine	Yes	No	No
Shingles Vaccine Out of Pocket Costs	Call plan for details.	Does not apply.	Does not apply.
Mail Order Available	Yes	Yes	Yes
Number of Pharmacies in MN that Participate	More than 400 pharmacies.	1,200	1,200

	 AARP MedicareRx Plans <small>insured through UnitedHealthcare</small> AARP MedicareRx Preferred S5820-024 Enrollment: 1-888-867-5564 TTY Enrollment: 711 www.AARPMedicareRx.com	 AARP MedicareRx Plans <small>insured through UnitedHealthcare</small> AARP MedicareRx Enhanced S5921-249 Enrollment: 1-888-867-5564 TTY Enrollment: 711 AARPMedicareRx.com	 Community CCRx PDP <small>Local Pharmacists Caring for You.</small> Community CCRx Basic (PDP) S5803-094 Enrollment: 1-866-684-5353 TTY Enrollment: 1-866-684-5351 www.communityccrx.com
Counties in Plan Area:	All 87 Minnesota counties.	All 87 Minnesota counties.	All 87 Minnesota counties.
Monthly Premium	\$41.90	\$91.30	\$34.80
Deductible	\$0	\$0	\$320
Tier 1 Retail pharmacy:	\$4 co-pay.	\$4 co-pay.	\$2 co-pay for 30 day supply; \$6 co-pay for 90 day supply.
Tier 1 Mail Order:	\$0 co-pay.	\$0 co-pay.	Does not apply.
Tier 2 Retail pharmacy:	\$8 co-pay.	\$7 co-pay.	25% co-insurance.
Tier 2 Mail Order:	\$8 co-pay.	\$7 co-pay.	Does not apply.
Tier 3 Retail pharmacy:	\$40 co-pay.	\$40 co-pay.	48% co-insurance.
Tier 3 Mail Order:	\$105 co-pay.	\$105 co-pay.	Does not apply.
Tier 4 Retail pharmacy:	\$95 co-pay.	\$76 co-pay.	25% co-insurance.
Tier 4 Mail Order:	\$270 co-pay.	\$213 co-pay.	Does not apply.
Tier 5 Retail pharmacy:	33% co-insurance.	33% co-insurance.	Does not apply.
Tier 5 Mail Order:	33% co-insurance.	33% co-insurance.	Does not apply.
Tier 6 Retail pharmacy:	Does not apply.	Does not apply.	Does not apply.
Tier 6 Mail Order:	Does not apply.	Does not apply.	Does not apply.
Donut Hole Coverage	No	Some	Some
Donut Hole Coverage Details	Does not apply.	\$4 co-pay for 31 day supply of tier 1 generics; \$0 co-pay for 90 day supply of tier 1 generics mail order. \$7 co-pay for 31 day supply for tier 2; \$7 copay for 90 day tier 2 mail order.	Does not apply.
Extra Services	Pharmacy Saver reduces members' out-of-pocket costs on prescriptions purchased at pharmacies participating in the program to prices lower than co-pays.	Pharmacy Saver reduces members' out-of-pocket costs on prescriptions purchased at pharmacies participating in the program to prices lower than co-pays.	Does not apply.
Shingles Vaccine	Yes	Yes	Yes
Shingles Vaccine Out of Pocket Costs	Call plan for details.	Call plan for details.	48% co-insurance.
Mail Order Available	Yes	Yes	No
Number of Pharmacies in MN that Participate	Pharmacies throughout Minnesota and nationwide.	Pharmacies throughout Minnesota and nationwide.	1,111

	 Community CCRx Choice (PDP) 55803-162 Enrollment: 1-866-684-5353 TTY Enrollment: 1-866-684-5351 www.communityccrx.com	 WellCare Classic 55967-162 Enrollment: 1-866-765-4390 TTY Enrollment: 1-888-816-5252 www.wellcarepdp.com	 WellCare Signature 55967-059 Enrollment: 1-866-765-4390 TTY Enrollment: 1-888-816-5252 www.wellcarepdp.com
Counties in Service Area:	All 87 Minnesota counties.	All 87 Minnesota counties.	All 87 Minnesota counties.
Monthly Premium	\$87.60	\$39.40	\$72
Deductible	\$0	\$320	\$0
Tier 1 Retail pharmacy:	\$0 co-pay for 30 day supply; \$0 co-pay for 90 day supply.	\$0 co-pay for 31 day supply.	\$0 co-pay for 31 day supply.
Tier 1 Mail Order:	Does not apply.	\$0 co-pay for 93 day supply.	\$0 co-pay for 93 day supply.
Tier 2 Retail pharmacy:	\$40 co-pay for 30 day supply; \$120 co-pay for 90 day supply.	\$45 co-pay for 31 day supply.	\$20 co-pay for 31 day supply.
Tier 2 Mail Order:	Does not apply.	\$112.50 co-pay for 93 day supply.	\$50 co-pay for 93 day supply.
Tier 3 Retail pharmacy:	\$70 co-pay for 30 day supply; \$210 co-pay for 90 day supply.	\$95 co-pay for 31 day supply.	\$45 co-pay for 31 day supply.
Tier 3 Mail Order:	Does not apply.	\$237.50 co-pay for 93 day supply.	\$112.50 co-pay for 93 day supply.
Tier 4 Retail pharmacy:	33% co-insurance.	25% co-insurance for 31 day supply.	\$95 co-pay for 31 day supply.
Tier 4 Mail Order:	Does not apply.	Does not apply.	\$237.50 co-pay for 93 day supply.
Tier 5 Retail pharmacy:	Does not apply.	Does not apply.	33% co-insurance for 31 day supply.
Tier 5 Mail Order:	Does not apply.	Does not apply.	Does not apply.
Tier 6 Retail pharmacy:	Does not apply.	Does not apply.	Does not apply.
Tier 6 Mail Order:	Does not apply.	Does not apply.	Does not apply.
Donut Hole Coverage	Some	No	No
Donut Hole Coverage Details	Does not apply.	Does not apply.	Does not apply.
Extra Services	Does not apply.	Does not apply.	Does not apply.
Shingles Vaccine	Yes	Yes	Yes
Shingles Vaccine Out of Pocket Costs	\$70 co-pay.	\$95 co-pay.	\$95 co-pay.
Mail Order Available	No	Yes	Yes
Number of Pharmacies in MN that Participate	1,111	1,072 retail pharmacies.	1,072 retail pharmacies.