

# MEDICARE – PART D Prescription Drug Coverage

## 2020 Alaska Options

### Oct. 15 through Dec. 7 is the Medicare Part D Open

**Enrollment Period.** This is the ideal time for all people on Medicare to consider whether they have the best prescription drug coverage available for the following year. Other times to enroll in Part D are: when you are first eligible for Medicare and join during your Initial Enrollment Period (the 7 months around your birthday month, or the 25<sup>th</sup> month of receiving a Social Security Disability Insurance benefit), during a Special Enrollment Period such as when you've lost creditable prescription coverage from an employer or union, you've moved from your service area, or you moved into or out of (or currently live in) a long term care facility.

What is the “best plan?” The plan that:

1. covers your prescriptions on the plan's formulary (list of covered medications);
2. works with your pharmacy;
3. offers the lowest cost on your medications.

All Part D plans have a fixed monthly premium. Medicare beneficiaries may pay a deductible and pay a co-payment cost at the pharmacy, or to the plan if using their mail-order service.

Since your medication needs may vary each year and the plan's pricing and formulary can change, you'll want to be sure to compare what will be available next year with your current coverage during the Open Enrollment Period. You can use [medicare.gov](http://medicare.gov) or check with the plan you are in to see whether your medications will be covered next year.

### Part D Benefit Periods

1. Initial Deductible Period: the beneficiary pays 100% of prescription costs until the deductible is met. The maximum deductible for 2020 is \$435.
2. Initial Coverage Period: the cost of covered drugs is shared, 25% by the beneficiary and 75% by the plan.
3. Coverage Gap (donut hole) Period: once the beneficiary and plan have paid \$4,020 for the year, the beneficiary pays 25% for generic and 25% for brand-name drugs until they have spent \$6,350.
4. Catastrophic Benefit Period: the beneficiary pays a copay of \$3.60 per generic and \$8.95 for brand-name drugs (or 5% of the drug's total cost, whichever is greater).

### Late Enrollment Penalty

A beneficiary who doesn't sign up for Part D within their Initial Enrollment Period and doesn't have other creditable drug coverage may be subjected to a Late Enrollment Penalty if they enroll in a Part D plan later.

The penalty is calculated by taking 1% of Medicare's base beneficiary premium for Part D and multiplying it by the number of full months that the beneficiary did not have Part D or other creditable drug coverage. That amount is rounded to the nearest \$0.10 and added to the monthly premium of a Part D plan. The base premium may increase or decrease each year, so the penalty amount may increase or decrease also. For 2020, the base premium for Part D is **\$32.74**.



Anchorage: **907.269.3680** Toll-free statewide: **800-478-6065**

Online: **[medicare.alaska.gov](http://medicare.alaska.gov)**

## 2020 Alaska Medicare Part D Options

Choosing a Medicare Drug Plan can be confusing. We are here to assist you with all your Medicare questions. If you call us, please have your Medicare card and a list of your prescriptions available. Call **(907) 269-3680** in Anchorage or **1-800-478-6065** Alaska statewide. Call **(907) 269-3680** in Anchorage or **1-800-478-6065** Alaska statewide.

PLAN Name & Contract ID	Company Name	Phone Number	With Extra Help or Medicaid	Monthly Premium	Annual Deductible
Cigna-HealthSpring Rx Secure (S5617-227)	Cigna	1-800-222-6700	X	\$ 32.70	\$ 435.00
Cigna-HealthSpring Rx Secure-Essential (S5617-313)	Cigna	1-800-222-6700		\$ 22.20	\$ 435.00
Cigna-HealthSpring Rx Secure-Extra (S5617-279)	Cigna	1-800-222-6700		\$ 59.70	\$ 100.00
Clear Spring Health Premier Rx (S6946-058)	Clear Spring Health	1-877-384-1241		\$ 14.00	\$ 435.00
Clear Spring Health Value Rx (S6946-029)	Clear Spring Health	1-877-384-1241	X	\$ 30.20	\$ 435.00
EnvisionRxPlus (S7694-034)	Envision Insurance	1-866-250-2005	X	\$ 31.30	\$ 435.00
Express Scripts Medicare - Choice (S5660-204)	Express Scripts Medicare	1-866-477-5703		\$ 85.20	\$ 250.00
Express Scripts Medicare - Saver (S5660-250)	Express Scripts Medicare	1-866-477-5703		\$ 28.50	\$ 435.00
Express Scripts Medicare - Value (S5660-136)	Express Scripts Medicare	1-866-477-5703	X	\$ 29.20	\$ 435.00
Humana Basic Rx Plan (S5884-116)	Humana	1-866-945-4481	X	\$ 26.70	\$ 435.00
Humana Premier Rx Plan (S5884-180)	Humana	1-866-945-4481		\$ 55.30	\$ 435.00
Humana Walmart Value Rx Plan (S5884-213)	Humana	1-866-945-4481		\$ 13.20	\$ 435.00
Mutual of Omaha Rx Plus (S7126-033)	Mutual of Omaha Rx	1-800-205-8193		\$ 57.60	\$ 435.00
Mutual of Omaha Rx Value (S7126-066)	Mutual of Omaha Rx	1-800-205-8193		\$ 26.80	\$ 435.00
SilverScript Choice (S5601-068)	SilverScript	1-866-235-5660		\$ 58.20	\$ 230.00
AARP MedicareRx Preferred (S5820-033)	United Healthcare	1-888-867-5564		\$ 63.70	\$ -
AARP MedicareRx Saver Plus (S5921-377)	UnitedHealthcare	1-888-867-5564	X	\$ 31.20	\$ 435.00
AARP MedicareRx Walgreens (S5921-415)	UnitedHealthcare	1-888-867-5564		\$ 33.50	\$ 435.00
WellCare Classic (S4802-096)	WellCare	1-888-293-5151	X	\$ 31.40	\$ 435.00
WellCare Medicare Rx Saver (S5810-068)	WellCare	1-888-293-5151		\$ 33.90	\$ 435.00
WellCare Medicare Rx Select (S5810-309)	WellCare	1-888-293-5151		\$ 22.20	\$ 435.00
WellCare Medicare Rx Value Plus (S5768-197)	WellCare	1-888-293-5151		\$ 74.40	\$ -
WellCare Value Script (S4802-165)	WellCare	1-888-293-5151		\$ 17.10	\$ 435.00
WellCare Wellness Rx (S4802-203)	WellCare	1-888-293-5151		\$ 14.20	\$ 435.00