






## 2014 / 2015 Medicare Part D Plan Information


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Plan Name						\$0		Cost-Sharing				Members In This State
Cust. Service Rating	RxCo Member Plan Exper.	st Info Ratin g	Monthl y Premi um	Deduc t-ible	(Donut Hole) Gap Covera ge	Premiu m with Full LIS?	Plan ID	Tier 1	Tier 2	Tier 3	Tier 4	
<a href="#">2014 AARP MedicareRx Saver Plus (PDP)</a> 			\$28.00	\$310	No Gap Coverage	Yes	S5921	\$1.00	\$2.00	\$20.00	\$35.00	10,650
												<a href="#">Browse Formula</a>
												<a href="#">RV</a>
<a href="#">2015 AARP MedicareRx Saver Plus (PDP)</a> 			\$33.50	\$320	No Gap Coverage	Yes	S5921	\$1.00	\$2.00	\$25.00	\$40.00	10,650
												<a href="#">Browse Formula</a>
												<a href="#">RV</a>
<a href="#">2014 AARP MedicareRx Preferred (PDP)</a> 			\$53.60	\$0	No Gap Coverage	No	S5820	\$3.00	\$6.00	\$40.00	\$85.00	24,868
												<a href="#">Browse Formula</a>
												<a href="#">RV</a>
<a href="#">2015 AARP MedicareRx Preferred (PDP)</a> 			\$60.40	\$0	No Gap Coverage	No	S5820	\$2.00	\$4.00	\$40.00	\$85.00	24,868
												<a href="#">Browse Formula</a>
												<a href="#">RV</a>
<a href="#">2014 AARP MedicareRx Enhanced (PDP)</a> 			\$110.00	\$0	Some Generic s, Some Brands	No	S5921	\$2.00	\$5.00	\$30.00	\$55.00	1,015
												<a href="#">Browse Formula</a>
												<a href="#">RV</a>

**-- Members will be assigned to AARP MedicareRx Preferred (PDP) S5820-030 --**

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Plan Name	Cust. Service Rating	Member Plan Exper.	RxCost Info Rating	Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing			Members In This State	
									Tier 1	Tier 2	Tier 3		Tier 4
<a href="#">2014 Aetna Medicare Rx Essentials (PDP)</a>				\$39.30	\$310	No Gap Coverage	Yes	S5810-065	\$3.00	\$43.00	\$95.00	25%	693
	☆☆☆☆☆	☆☆☆☆☆	☆☆☆☆☆										
<a href="#">2015 Aetna Medicare Rx Saver (PDP)</a>				\$31.40	\$320	No Gap Coverage	Yes		\$0.00	\$3.00	\$45.00	36%	693
													<a href="#">Browse Formulary</a>
<a href="#">2014 Aetna Medicare Rx Premier (PDP)</a>				\$138.80	\$0	Few Generics	No	S5810-201	\$6.00	24%	44%	33%	416
	☆☆☆☆☆	☆☆☆☆☆	☆☆☆☆☆										
<a href="#">2015 Aetna Medicare Rx Premier (PDP)</a>				\$137.50	\$0	Yes	No		\$0.00	\$3.00	\$42.00	50%	416
													<a href="#">Browse Formulary</a>

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Plan Name	Cust. Service Rating	Member Plan Exper.	RxCost Info Rating	Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing				Members In This State
									Tier 1	Tier 2	Tier 3	Tier 4	
<a href="#">2014 Cigna Medicare Rx Secure-Xtra (PDP)</a> <small>Enroll Options</small> ★★★★☆ ★★★★★ ★★★★★				\$73.50	\$0	No Gap Coverage	No	S5617-276	\$0.00	\$5.00	\$38.00	\$87.00	60 <a href="#">Browse Formulary</a>
<a href="#">2015 Cigna-HealthSpring Rx Secure-Xtra (PDP)</a> <small>Plan Info Only</small>				\$28.10	\$0	No Gap Coverage	No		\$1.00	\$4.00	20%	35%	60 <a href="#">Browse Formulary</a>
<a href="#">2014 Cigna Medicare Rx Secure (PDP)</a> <small>Enroll Options</small> ★★★★☆ ★★★★★ ★★★★★				\$46.70	\$310	No Gap Coverage	No	S5617-153	\$0.00	\$4.00	\$36.00	\$79.00	1,515 <a href="#">Browse Formulary</a>
<a href="#">2015 Cigna-HealthSpring Rx Secure (PDP)</a> <small>Plan Info Only</small>				\$36.90	\$320	No Gap Coverage	Yes		\$1.00	\$5.00	20%	35%	1,515 <a href="#">Browse Formulary</a>
<a href="#">2014 Cigna Medicare Rx Secure-Max (PDP)</a> <small>Enroll Options</small> ★★★★☆ ★★★★★ ★★★★★				\$131.70	\$0	Many Generics, Some Brands	No	S5617-242	\$0.00	\$4.00	\$25.00	\$74.00	55 <a href="#">Browse Formulary</a>
<a href="#">2015 Cigna-HealthSpring Rx Secure-Max (PDP)</a> <small>Plan Info Only</small>				\$127.10	\$0	Yes	No		\$1.00	\$2.00	\$30.00	\$85.00	55 <a href="#">Browse Formulary</a>
<a href="#">2014 Cigna-HealthSpring Rx -Reg 31 (PDP)</a> <small>Enroll Options</small> ★★★★☆ ★★★★★ ★★★★★				\$36.60	\$310	No Gap Coverage	Yes	S5932-030	25%				8,564 <a href="#">Browse Formulary</a>

-- Members will be assigned to Cigna-HealthSpring Rx Secure (PDP) S5617-153 --

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Plan Name	Cust. Service Rating	Member Plan Exper.	RxCost Info Rating	Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing			Tier 4	Members In This State
									Tier 1	Tier 2	Tier 3		
<a href="#">2014 Educators Rx Basic (PDP)</a> <small>Enroll Options</small>	--	★★★★★	★★★★☆	\$90.10	\$310	No Gap Coverage	No	S5877-004	\$2.00	\$12.00	\$45.00	25%	279 <a href="#">Browse Formulary</a>
<a href="#">2015 Educators Rx Basic (PDP)</a> <small>Plan Info Only</small>				\$101.40	\$320	No Gap Coverage	No		\$2.00	\$15.00	\$45.00	25%	279 <a href="#">Browse Formulary</a>
<a href="#">2014 Educators Rx Advantage (PDP)</a> <small>Enroll Options</small>	--	★★★★★	★★★★☆	\$121.10	\$0	No Gap Coverage	No	S5877-007	10%	20%	40%	33%	600 <a href="#">Browse Formulary</a>
<a href="#">2015 Educators Rx Advantage (PDP)</a> <small>Plan Info Only</small>				\$140.30	\$0	No Gap Coverage	No		10%	20%	40%	33%	600 <a href="#">Browse Formulary</a>

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Plan Name		Cust. Service Rating	Member Plan Exper.	RxCost Info Monthly Premium	Deduct-ible	(\$0 Premium with Full LIS?)	Cost-Sharing	Members In This State					
Plan	Info								Monthly Premium	Deduct-ible	Gap Coverage	Plan ID	Tier 1
<a href="#">2014 EnvisionRxPlus Silver (PDP)</a> <span style="background-color: #FFD700; padding: 2px;">Enroll Options</span>				\$40.80	\$310	No Gap Coverage	Yes						2,951
<span>★★★★★</span> <span>★★★★☆</span> <span>★★★★☆</span>								\$9.00	25%	\$45.00	45%		<a href="#">Browse Formulary</a>
<a href="#">2015 EnvisionRxPlus Silver (PDP)</a> <span style="background-color: #FFD700; padding: 2px;">Plan Info Only</span>				\$38.20	\$320	No Gap Coverage	Yes	\$2.00	15%	35%	25%		2,951
													<a href="#">Browse Formulary</a>

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Plan Name	Cust. Service Rating	Member Plan Exper.	RxCost Info Rating	Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing				Members In This State
									Tier 1	Tier 2	Tier 3	Tier 4	
<a href="#">2014 Express Scripts Medicare - Value (PDP)</a> <small>Enroll Options</small>				\$36.50	\$310	No Gap Coverage	Yes	S56600	\$2.00	\$8.00	25%	50%	7,244
	☆☆☆☆☆	☆☆☆☆☆	☆☆☆☆☆					-133					<a href="#">Browse Formulary</a>
<a href="#">2015 Express Scripts Medicare - Value (PDP)</a> <small>Plan Info Only</small>				\$38.70	\$320	No Gap Coverage	Yes		\$0.00	\$4.00	21%	48%	7,244
													<a href="#">Browse Formulary</a>
<a href="#">2014 Express Scripts Medicare - Choice (PDP)</a> <small>Enroll Options</small>				\$49.60	\$0	No Gap Coverage	No	S56600	\$2.00	\$10.00	\$40.00	\$90.00	659
	☆☆☆☆☆	☆☆☆☆☆	☆☆☆☆☆					-216					<a href="#">Browse Formulary</a>
<a href="#">2015 Express Scripts Medicare - Choice (PDP)</a> <small>Plan Info Only</small>				\$50.90	\$50	No Gap Coverage	No		\$1.00	\$5.00	\$40.00	48%	659
													<a href="#">Browse Formulary</a>

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Plan Name	Cust. Service Rating	Member Plan Exper.	RxCost Info Rating	Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing				Members In This State
									Tier 1	Tier 2	Tier 3	Tier 4	
<a href="#">2014 First Health Part D Value Plus (PDP)</a> <small>Enroll Options</small>	★★★★☆	★★★★☆	★★★★☆	\$51.90	\$0	No Gap Coverage	No	S5768-154	\$3.00	\$11.00	\$37.00	\$88.00	6,389
<a href="#">2015 First Health Part D Value Plus (PDP)</a> <small>Plan Info Only</small>				\$46.40	\$235	No Gap Coverage	No		\$0.00	\$3.00	\$35.00	50%	6,389
<b>-- This Plan not offered in 2014 --</b>													
<a href="#">2015 First Health Part D Premier Plus (PDP)</a> <small>Plan Info Only</small>	★★★★☆	★★★★☆	★★★★☆	\$107.50	\$0	Yes	No	S5768-193	\$0.00	\$3.00	\$42.00	50%	
<a href="#">2014 First Health Part D Premier Plus (PDP)</a> <small>Enroll Options</small>	★★★★☆	★★★★☆	★★★★☆	\$108.90	\$0	Some Generics, Some Brands	No	S5674-053	\$1.00	\$25.00	25%	40%	811
<b>-- Members will be assigned to First Health Part D Premier Plus (PDP) S5768-193 --</b>													
<a href="#">2014 First Health Part D Essentials (PDP)</a> <small>Enroll Options</small>	★★★★☆	★★★★☆	★★★★☆	\$57.20	\$310	No Gap Coverage	No	S5768-118	\$1.00	15%	44%		6,064
<b>-- Members will be assigned to First Health Part D Value Plus (PDP) S5768-154 --</b>													

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Plan Name			Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing				Members In This State
Cust. Service Rating	Member Plan Exper.	RxCos t Info Rating						Tier 1	Tier 2	Tier 3	Tier 4	
<a href="#">2014 Humana Walmart Rx Plan (PDP)</a> <small>Enroll Options</small>			\$12.60	\$310	No Gap Coverage	No	S5884-177	\$1.00	\$4.00	20%	39%	16,538
★★★★★	★★★★☆	★★★★☆										
<a href="#">2015 Humana Walmart Rx Plan (PDP)</a> <small>Plan Info Only</small>			\$15.70	\$320	No Gap Coverage	No		\$1.00	\$4.00	20%	35%	16,538
												<a href="#">Browse Formulary</a>
<a href="#">2014 Humana Preferred Rx Plan (PDP)</a> <small>Enroll Options</small>			\$22.80	\$310	No Gap Coverage	Yes	S5884-147	\$1.00	\$2.00	20%	35%	15,980
★★★★★	★★★★☆	★★★★☆										
<a href="#">2015 Humana Preferred Rx Plan (PDP)</a> <small>Plan Info Only</small>			\$29.00	\$320	No Gap Coverage	Yes		\$1.00	\$2.00	20%	35%	15,980
												<a href="#">Browse Formulary</a>
<a href="#">2014 Humana Enhanced (PDP)</a> <small>Enroll Options</small>			\$47.90	\$0	Few Brands	No	S5884-089	\$2.00	\$5.00	\$42.00	\$92.00	23,556
★★★★★	★★★★☆	★★★★☆										
<a href="#">2015 Humana Enhanced (PDP)</a> <small>Plan Info Only</small>			\$52.00	\$0	Yes	No		\$3.00	\$7.00	\$42.00	44%	23,556
												<a href="#">Browse Formulary</a>



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Plan Name	Cust. Service Rating	Member Plan Exper.	RxCost Info Rating	Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing				Members In This State	
									Tier 1	Tier 2	Tier 3	Tier 4		
<a href="#">2014 Regence Medicare Script Basic (PDP)</a> <span style="background-color: #f4a460; padding: 2px;">Enroll Options</span> ★★☆☆☆ ★★★★★ ★☆☆☆☆				\$84.50	\$145	No Gap Coverage	No	S5916-001	\$10.00	\$33.00	\$45.00	\$90.00	3,998	<a href="#">Browse Formulary</a>
<a href="#">2015 Regence Medicare Script Basic (PDP)</a> <span style="background-color: #f4a460; padding: 2px;">Plan Info Only</span>				\$93.80	\$155	No Gap Coverage	No		\$10.00	\$15.00	\$45.00	\$95.00	3,998	<a href="#">Browse Formulary</a>
<a href="#">2014 Regence Medicare Script Enhanced (PDP)</a> <span style="background-color: #f4a460; padding: 2px;">Enroll Options</span> ★★☆☆☆ ★★★★★ ★☆☆☆☆				\$132.50	\$0	Many Generics	No	S5916-002	\$5.00	\$33.00	\$45.00	\$90.00	1,322	<a href="#">Browse Formulary</a>
<a href="#">2015 Regence Medicare Script Enhanced (PDP)</a> <span style="background-color: #f4a460; padding: 2px;">Plan Info Only</span>				\$144.70	\$0	Yes	No		\$5.00	\$12.00	\$45.00	\$95.00	1,322	<a href="#">Browse Formulary</a>

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Plan Name	Cust. Service Rating	Member Plan Exper.	RxCost Info Rating	Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing			Members In This State	
									Tier 1	Tier 2	Tier 3		
<a href="#">2014 SilverScript Basic (PDP)</a> <small>Enroll Options</small>				\$39.20	\$310	No Gap Coverage	Yes	S5601-062	\$2.00	20%	40%	25%	21,513
	☆☆☆☆	☆☆☆☆	☆☆☆☆										
<a href="#">2015 SilverScript Choice (PDP)</a> <small>Plan Info Only</small>				\$32.00	\$0	No Gap Coverage	Yes	S5601-062	\$8.00	\$33.00	42%	33%	<a href="#">Browse Formulary</a>
<a href="#">2014 SilverScript Plus (PDP)</a> <small>Enroll Options</small>				\$128.90	\$0	Many Generics, Some Brands	No	S5601-063	\$0.00	\$17.00	\$41.00	33%	1,215
	☆☆☆☆	☆☆☆☆	☆☆☆☆										
<a href="#">2015 SilverScript Plus (PDP)</a> <small>Plan Info Only</small>				\$94.20	\$0	Yes	No	S5601-063	\$0.00	\$24.00	40%	33%	<a href="#">Browse Formulary</a>
<a href="#">2014 SilverScript Choice (PDP)</a> <small>Enroll Options</small>				\$33.80	\$0	No Gap Coverage	No	S5601-140	\$0.00	\$24.00	35%	33%	4,185
	☆☆☆☆	☆☆☆☆	☆☆☆☆										

-- Members will be assigned to SilverScript Choice (PDP) S5601-062 --

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Plan Name	Cust. Service Rating	Member Plan Exper.	RxCost Info Monthly Premium	Deduct-ible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing				Member s In This State
								Tier 1	Tier 2	Tier 3	Tier 4	
<a href="#">2014 SmartD Rx Saver (PDP)</a> <span style="background-color: #cccccc; padding: 2px;">Plan Info Only</span> ★★☆☆☆   ★★★★★   ★★☆☆☆			\$39.10	\$310	No Gap Coverage	Yes	S0064-031					1,207
<a href="#">2015 SmartD Rx Saver (PDP)</a> <span style="background-color: #cccccc; padding: 2px;">Plan Info Only</span>			\$36.10	\$320	No Gap Coverage	Yes		\$0.00	\$4.00	23%	41%	
<a href="#">2014 SmartD Rx Plus (PDP)</a> <span style="background-color: #cccccc; padding: 2px;">Plan Info Only</span> ★★☆☆☆   ★★★★★   ★★☆☆☆			\$71.10	\$0	Call Plan for details	No	S0064-066					80

**-- Members will be assigned to SmartD Rx Saver (PDP) S0064-031 --**

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Plan Name	Cust. Service Rating	Member Plan Exper.	RxCost Info Rating	Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing				Members In This State
									Tier 1	Tier 2	Tier 3	Tier 4	
<a href="#">2014 Symphonix Rite Aid Value Rx (PDP)</a>	--	--	--	\$38.20	\$310	No Gap Coverage	Yes	S0522-032	\$1.00	\$10.00	\$35.00	\$85.00	1,026
<a href="#">Enroll Options</a>													<a href="#">Browse Formulary</a>
<a href="#">2015 Symphonix Rite Aid Value Rx (PDP)</a>	--	--	--	\$36.90	\$320	No Gap Coverage	Yes		\$1.00	\$4.00	\$25.00	\$55.00	1,026
<a href="#">Plan Info Only</a>													<a href="#">Browse Formulary</a>
<b>-- This Plan not offered in 2014 --</b>													
<a href="#">2015 Symphonix Rite Aid Premier Rx (PDP)</a>	--	--	--	\$86.60	\$0	Yes	No	S0522-064	\$2.00	\$4.00	\$30.00	\$70.00	
<a href="#">Plan Info Only</a>													<a href="#">Browse Formulary</a>











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Plan Name	Cust. Service Rating	Member Plan Exper.	RxCost Info Rating	Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing				Members In This State
									Tier 1	Tier 2	Tier 3	Tier 4	
<a href="#">2014 Transamerica MedicareRx Classic (PDP)</a> <small>Enroll Options</small>	★★★★★	★★★★★	★★★☆☆	\$48.10	\$310	No Gap Coverage	No	S9579-030	\$0.00	\$8.00	\$45.00	\$95.00	29
<a href="#">2015 Transamerica MedicareRx Classic (PDP)</a> <small>Plan Info Only</small>				\$37.30	\$320	No Gap Coverage	Yes		\$0.00	\$7.00	\$45.00	50%	29
<a href="#">2014 Transamerica MedicareRx Choice (PDP)</a> <small>Enroll Options</small>	★★★★★	★★★★★	★★★☆☆	\$57.60	\$0	No Gap Coverage	No	S9579-063	\$0.00	\$20.00	\$45.00	\$95.00	108
<a href="#">2015 Transamerica MedicareRx Choice (PDP)</a> <small>Plan Info Only</small>				\$46.10	\$0	No Gap Coverage	No		\$0.00	\$18.00	\$45.00	\$95.00	108

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Plan Name			Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing				Members In This State
Cust. Service Rating	Member Plan Exper.	RxCost Info Rating						Tier 1	Tier 2	Tier 3	Tier 4	
<a href="#">2014 United American - Select (PDP)</a>			\$38.00	\$310	No Gap Coverage	Yes	S5755-102	\$1.00	\$5.00	\$35.00	\$95.00	975
   												<a href="#">Browse Formulary</a>
<a href="#">2015 United American - Select (PDP)</a>			\$41.50	\$320	No Gap Coverage	Yes		\$0.00	\$3.00	14%	24%	975
												<a href="#">Browse Formulary</a>
<a href="#">2014 United American - Enhanced (PDP)</a>			\$72.30	\$80	No Gap Coverage	No	S5755-034	\$1.00	\$7.00	\$37.00	\$95.00	589
   												<a href="#">Browse Formulary</a>
<a href="#">2015 United American - Enhanced (PDP)</a>			\$79.10	\$80	No Gap Coverage	No		\$0.00	\$7.00	\$37.00	40%	589
												<a href="#">Browse Formulary</a>

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Plan Name	Cust. Service Rating	Member Plan Exper.	RxCost Info Rating	Monthly Premium	Deductible	(Donut Hole) Gap Coverage	\$0 Premium with Full LIS?	Plan ID	Cost-Sharing				Members In This State
									Tier 1	Tier 2	Tier 3	Tier 4	
<a href="#">2014 Windsor Rx (PDP)</a> <small>Enroll Options</small>	★★★★☆	★★★★★	★★★★☆	\$38.90	\$310	No Gap Coverage	Yes	S4802-021	\$3.00	\$11.00	\$43.00	\$95.00	4,560
<a href="#">2015 WellCare Simple (PDP)</a> <small>Plan Info Only</small>				\$37.70	\$320	No Gap Coverage	Yes		\$0.00	\$2.00	\$35.00	\$94.00	4,560
<a href="#">2014 WellCare Classic (PDP)</a> <small>Enroll Options</small>	★★★★☆	★★★★☆	★★★★☆	\$30.30	\$0	No Gap Coverage	Yes	S5967-168	\$0.00	\$11.00	\$39.00	\$90.00	5,131
<a href="#">2015 WellCare Classic (PDP)</a> <small>Plan Info Only</small>				\$42.80	\$320	No Gap Coverage	No		\$0.00	\$4.00	\$40.00	\$89.00	5,131
<a href="#">2014 WellCare Extra (PDP)</a> <small>Enroll Options</small>	★★★★☆	★★★★☆	★★★★☆	\$56.90	\$0	No Gap Coverage	No	S5967-202	\$0.00	\$0.00	\$35.00	\$58.00	1,518
<a href="#">2015 WellCare Extra (PDP)</a> <small>Plan Info Only</small>				\$71.10	\$0	No Gap Coverage	No		\$0.00	\$4.00	\$40.00	\$89.00	1,518

