The New Medicare Plan Finder
Find a plan that works for you
Start here to view Medicare Advantage plans (like an HMO or PPO), or Medicare Prescription Drug Plans (Part D).

Basic Search
Enter your ZIP code to see a list of all available plans in your area.

Enter your ZIP code
Example: 90210
Find Plans

See a list of plans tailored to you
Log in to MyMedicare

Don't want to log in to your account? Answer the questions below to personalize your search.

The New Medicare Plan Finder
The Medicare Plan Finder - Before

- Developed in 2005
- Top page on Medicare.gov website
- 40 million unique visitors, 1.54 million enrollments (2018)
  - Half during the yearly Open Enrollment Period

The Medicare Plan Finder Changes

- More modern, mobile friendly experience
- Easier than ever to compare coverage options and shop for plans
- Simple prompts, clean design, plus fonts and colors that are easy on the eyes
The **Current** Medicare Plan Finder

1. Search anonymously with ZIP code
2. Log-in to MyMedicare.gov for a personalized experience
3. Enter five pieces of information (knowledge-based authentication)
4. Find additional tools

The **New** Medicare Plan Finder-2020

1. Log in for a personalized experience
2. Search anonymously
3. Qualify for a SEP
4. Learn more about Medicare
5. Find Medigap plans
Our Approach

- Gather Information and Stakeholder Feedback
- Design from a Beneficiary Perspective
- Incorporate Iterative Feedback

We Listened to Stakeholders
We Listened to People With Medicare

New Medicare Plan Finder Design Goals

- Customize the experience
- Guide users along the journey
- Give users the right context and right amount of information to make a decision
- Lose the jargon and speak clearly
What is the *New* Medicare Plan Finder?

- Modernized look and user experience
- More intuitive flow through the process
- Logging-in gives an enhanced, more personalized experience
- Integrated and redesigned decision support
- Brand new drug pricing engine

Linking MyMedicare to the Plan Finder

- MyMedicare.gov has been visually refreshed and account creation has been simplified
- People with Medicare are encouraged to create a MyMedicare.gov account
- Logging into Plan Finder using the MyMedicare.gov account gives you access to more features and a personalized experience
- Drug suggestions in the New Medicare Plan Finder are based on claims data from MyMedicare.gov
- **TIP:** Help returning clients print old drug lists
Medicare.gov Homepage Redesign

Goal: Streamline tasks for users and create places to highlight new tools/services more effectively

- Updated layout aligns with current web design standards
- Simplified, consistent look & feel
- Data and analytics drove what’s highlighted
- All info on current homepage is still available

The New Medicare Plan Finder

Demonstration
Answer a few quick questions

What type of 2020 coverage are you looking for?
- Medicare Advantage Plan
- Drug plan (Part D)
- Drug plan (Part D) + Medigap policy
- Medigap policy
- I'm not sure. Learn more about Medicare coverage options.

For the best experience, log in or create an account.

When logged in, you can:
- See drug prices based on any help you get
- Access & store your drug list
- Compare your current plan to others
- Enjoy other useful features

Log in  Don't have an account? Create one
Answer a few quick questions

What type of 2020 coverage are you looking for?
- Medicare Advantage Plan
- Drug plan (Part D)
- Drug plan (Part D) + Medigap policy
- Medigap policy
- I’m not sure. Learn more about Medicare coverage options.

ENTER YOUR ZIP CODE
02116 Suffolk County, Boston MA

Next

Your Medicare coverage options

When you first get Medicare, you’ll start with Original Medicare (Hospital Part A & Medical Part B). It covers 80% of most costs, but doesn’t cover drugs. You can add a Medigap policy (Medicare Supplement Insurance) to help pay the remaining costs and a separate drug plan (Part D).

OR, you can get a Medicare Advantage Plan that bundles all of your Medicare coverage, plus drug coverage and extra benefits.

Choose a Medicare coverage option below to get started. Don’t worry, you can explore both. Just start with either one.

Original Medicare  Medicare Advantage Plan
Your Medicare coverage options

Click next to a coverage option below to add or remove information.

Original Medicare

- Add a Medigap Policy (Medicare Supplement)
- Add a drug plan (Part D)
- Medicare Advantage Plan

**Original Medicare**

- Hospital (Part A)
- Medical (Part B)
- Drugs
- Help with out-of-pocket costs
- Use of any doctor or hospital that takes Medicare, across the U.S
- Vision, hearing, dental, & more

Total monthly premium

**$135.50**

Learn more about Original Medicare

If you don’t add a Medigap policy or a drug plan (Part D) when you’re first eligible, you may have to pay more to get it later.
Your Medicare coverage options

Click next to a coverage option below to add or remove information.

- Original Medicare
- Add a Medgap Policy (Medicare Supplement)
- Select Plan

Original Medicare + Medigap policy

This plan includes:
- Hospital (Part A)
- Medical (Part B)
- Drugs
- Help with out-of-pocket costs
- Use of any doctor or hospital that takes Medicare, across the U.S
- Vision, hearing, dental, & more

Standard Part B premium: $135.50
Medigap policy premium range: $76–239

Total monthly premium
$211.50–374.50

Medigap policy (Medicare Supplement)

- Medigap policy premium range in your ZIP code: $76–239

- Pays most of the 20% costs Original Medicare doesn’t cover, plus some other costs.
- Plan can never drop you or change your coverage.
- Costs can vary. Insurance companies can charge different premiums for the same level of coverage.

Learn more about Medigap policies.

If you don’t get a Medigap policy when you’re first eligible, you may have to pay more to get it later, or could be denied coverage.

Your Medicare coverage options

Click next to a coverage option below to add or remove information.

- Original Medicare
- Add a Medgap Policy (Medicare Supplement)
- Select Plan

Original Medicare + Medigap policy

This plan includes:
- Hospital (Part A)
- Medical (Part B)
- Drugs
- Help with out-of-pocket costs
- Use of any doctor or hospital that takes Medicare, across the U.S
- Vision, hearing, dental, & more

Standard Part B premium: $135.50
Medigap policy premium range: $76–239

Total monthly premium
$211.50–374.50
Original Medicare + Drug plan (Part D) + Medigap policy

This now includes:
✓ Hospital (Part A)
✓ Medical (Part B)
✓ Drugs
✓ Help with out-of-pocket costs
✓ Use of any doctor or hospital that takes Medicare, across the U.S.
✓ Vision, hearing, dental, & more

Standard Part B premium: $135.50
Drug plan (Part D) premium range: $15 - $165
Medigap policy premium range: $76 - $239

Total monthly premium $224.50 - $229.50
Your Medicare coverage options
Click next to a coverage option below to add or remove information.

Switch to:
- Original Medicare
- Add a Medigap Policy (Medicare Supplement)
- Add a drug plan (Part D)
- Medicare Advantage Plan

Medicare Advantage Plan

This includes:
- Hospital (Part A)
- Medical (Part B)
- Drugs
- Help with out-of-pocket costs
- Use of any doctor or hospital that takes Medicare, across the U.S.
- Vision, hearing, dental, & more

Medicare Advantage Plan premium range in your ZIP code: $0–117

- All Hospital (Part A) and Medical (Part B) benefits provided by a Medicare-approved private plan
- Use doctors & hospitals in the plan's network (for non-emergency or non-urgent care)
- Most plans include drug coverage
- Many plans include extra benefits, like vision, hearing, dental, & more
- Yearly limit on out-of-pocket costs

Learn more about Medicare Advantage Plans.

Standard Part B premium: $35.99
Medicare Advantage Plan premium range: $0–117

Total monthly premium
$133.50 - 252.90

Your Medicare coverage options
Click next to a coverage option below to add or remove information.

Switch to:
- Original Medicare
- Add a Medigap Policy (Medicare Supplement)
- Add a drug plan (Part D)
- Medicare Advantage Plan

Medicare Advantage Plan

This includes:
- Hospital (Part A)
- Medical (Part B)
- Drugs
- Help with out-of-pocket costs
- Use of any doctor or hospital that takes Medicare, across the U.S.
- Vision, hearing, dental, & more

Medicare Advantage Plan premium range in your ZIP code: $0–117

- All Hospital (Part A) and Medical (Part B) benefits provided by a Medicare-approved private plan
- Use doctors & hospitals in the plan's network (for non-emergency or non-urgent care)
- Most plans include drug coverage
- Many plans include extra benefits, like vision, hearing, dental, & more
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Learn more about Medicare Advantage Plans.

Standard Part B premium: $35.99
Medicare Advantage Plan premium range: $0–117

Total monthly premium
$133.50 - 252.90
Your Medicare coverage options

Click next to a coverage option below to add or remove information.

Switch to:  
☐ Original Medicare  
☐ Add a Medicare Policy (Medicare Supplement)  
☐ Medicare Advantage Plan

Medicare Advantage Plan

This includes:
☐ Hospital (Part A)
☐ Medical (Part B)
☐ Drugs
☐ Help with out-of-pocket costs
☒ Use of any doctor or hospital that takes Medicare, across the U.S.
☐ Vision, hearing, dental, & more

Medicare Advantage Plan premium range in your ZIP code: $0–117

- All Hospital (Part A) and Medical (Part B) benefits provided by a Medicare-approved private plan
- Use doctors & hospitals in the plan’s network (for non-emergency or non-urgent care)
- Most plans include drug coverage
- Many plans include extra benefits, like vision, hearing, dental, & more
- Yearly limit on out-of-pocket costs

Learn more about Medicare Advantage Plans.

Standard Part B premium: $135.09
Medicare Advantage Plan premium range: $0–117

Total monthly premium $135.00 – 252.90

If you don’t get a Medicare Advantage Plan when you’re first eligible, you may have to wait for the yearly Open Enrollment Period to enroll.

Your Medicare coverage options

Click next to a coverage option below to add or remove information.

Switch to:  
☐ Original Medicare  
☐ Add a Medicare Policy (Medicare Supplement)  
☐ Medicare Advantage Plan

Medicare Advantage Plan

This includes:
☐ Hospital (Part A)
☐ Medical (Part B)
☐ Drugs
☐ Help with out-of-pocket costs
☒ Use of any doctor or hospital that takes Medicare, across the U.S.
☐ Vision, hearing, dental, & more

Medicare Advantage Plan premium range in your ZIP code: $0–117

- All Hospital (Part A) and Medical (Part B) benefits provided by a Medicare-approved private plan
- Use doctors & hospitals in the plan’s network (for non-emergency or non-urgent care)
- Most plans include drug coverage
- Many plans include extra benefits, like vision, hearing, dental, & more
- Yearly limit on out-of-pocket costs

Learn more about Medicare Advantage Plans.

Standard Part B premium: $135.09
Medicare Advantage Plan premium range: $0–117

Total monthly premium $135.00 – 252.90

If you don’t get a Medicare Advantage Plan when you’re first eligible, you may have to wait for the yearly Open Enrollment Period to enroll.
Account Log In (Or Creation)
Find a 2020 Medicare plan
You can shop here for drug plans (Part D) and Medicare Advantage Plans.
See your 2020 plan options now by logging in or creating an account.

Log in
Continue without logging in

Log in to your account

Username
Password
Log in

Need an account?
Create an account for a more personalized experience.
Create An Account
Create an account

All fields are required unless marked as optional.

USERNAME

SECRET QUESTION

SECRET ANSWER

PASSWORD

CONFIRM PASSWORD

Password Creation Guidelines

• Must be 8 to 16 characters long
• Must contain at least one letter
• Must contain at least one number
• Must also contain one or more of the following special characters: @ ! $ % ^ * ( )
• Must be different from the previous six (6) passwords
• Cannot contain your username
• Cannot contain your Medicare Number or SSN

Continue  Cancel
Answer a few quick questions

Jane Doe

Current coverage: Kaiser Permanente Medicare Advantage Value (HMO)
Plan ID: 42172-006-0
Effective: 01/01/18
Part A coverage starts: 02/01/17
Part B coverage starts: 02/01/17
Current subsidy: Dual Eligible

What type of 2020 coverage are you looking for?

- Medicare Advantage Plan
- Drug plan (Part D)
- Drug plan (Part D) + Medigap policy
- Medigap policy
- I'm not sure. Learn more about Medicare coverage options.

Jane Doe

Current coverage: Kaiser Permanente Medicare Advantage Value (HMO)
Plan ID: 42172-006-0
Effective: 01/01/18
Part A coverage starts: 02/01/17
Part B coverage starts: 02/01/17
Current subsidy: Dual Eligible

What type of 2020 coverage are you looking for?

- Medicare Advantage Plan
  - Bundles all Medicare health benefits (with or without drug coverage) plus extra services like hearing or dental.
- Drug plan (Part D)
- Drug plan (Part D) + Medigap policy
- Medigap policy
- I'm not sure. Learn more about Medicare plan options.

ENTER YOUR ZIP CODE

02110 Suffolk County. Boston MA

Your date of birth: 04/05/1954

Great! You’re still within your Initial Enrollment Period.
Add your search preferences

Do you want to see your drug costs when you compare plans?

☑ Yes

Great!
To see drug costs, get ready to enter the name, dosage, quantity, and frequency for each drug you take regularly.

☐ No

How do you normally fill your prescriptions?

☐ Retail pharmacy
☐ Mail order pharmacy
☐ Both

You'll need to tell us the pharmacies you use most to get accurate drug costs.

Continue
Add your prescription drugs

Select your drugs from your recent prescriptions
This information is pulled from your Medicare prescription drug claims from the last year:

- Kapvay 0.1mg
- Lisinopril (Zestril) 20mg
- Microzide 25mg
- Norvasc 10mg
- Simvastatin 20mg
- Synthroid 50mcg
- Zithromax 250mg
- None of the above

Continue

Add your prescription drugs

Select your drugs from your recent prescriptions
This information is pulled from your Medicare prescription drug claims from the last year:

- Kapvay 0.1mg
- Lisinopril (Zestril) 20mg
- Microzide 25mg
- Norvasc 10mg
- Simvastatin 20mg
- Synthroid 50mcg
- Zithromax 250mg
- None of the above

Continue
Confirm your dosage & quantity

Kapvay
Dosage
0.1mg

Quantity
60 per month

Microzide
Dosage
25mg

Quantity
60 per month

Add to My Drug List

Confirm your drug list

Drug list

<table>
<thead>
<tr>
<th>Drug</th>
<th>Quantity</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kapvay 0.1mg</td>
<td>60</td>
<td>Every 1 month</td>
</tr>
<tr>
<td>Microzide 25mg</td>
<td>60</td>
<td>Every 1 month</td>
</tr>
</tbody>
</table>

Add More Drugs  Continue

2 drugs have been added to your drug list.

Add Another Drug  Done
Add your prescription drugs

Begin typing to find and select your drug.

Humira

Add Drug

Browse drugs A–Z

You have 2 drug(s) in your drug list. See or edit drug list.

Add Another Drug   Done

Humira

Dosage
INJ 10/0.14ML

Package
Box of 1 solutions (sold in a package of 2 solutions)

Quantity
90 Every 3 months

Add to My Drug List

You have 2 drug(s) in your drug list. See or edit drug list.

Add Another Drug   Done
Confirm your drug list

Drug list

<table>
<thead>
<tr>
<th>Drug</th>
<th>Quantity</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Humira INJ 10/0.1 ML</td>
<td>90</td>
<td>Every 3 months</td>
</tr>
<tr>
<td>Bar of 1 solutions (add-in a package of 2 solutions)</td>
<td>brand</td>
<td></td>
</tr>
<tr>
<td>Kapvay 0.1mg</td>
<td>60</td>
<td>Every 1 month</td>
</tr>
<tr>
<td>Microzide 25mg</td>
<td>60</td>
<td>Every 1 month</td>
</tr>
<tr>
<td>brand</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Remove drug
Edit drug

Add more drugs    Continue

Humira INJ 10/0.1 ML has been added to your drug list.
You have 3 drug(s) in your drug list.

Add Another Drug Done

Add your prescription drugs

Begin typing to find and select your drug.

Add drug

Browse drugs A-Z
Add your prescription drugs

Begin typing to find and select your drug.

Add drug

Browse drugs A-Z

You have 1 drug in your drug list. See or edit drug list.

Add Another Drug  Done
Add your prescription drugs

A generic is available
Lipitor has a lower cost generic version called Atorvastatin.

Would you like to add Atorvastatin to your list instead?

Add Generic  Add brand instead

Add to My Drug List
Confirm your drug list

Drug list

**Atorvastatin 10mg**
- Generic
- Quantity: 60
- Frequency: Every 1 month
- Remove drug
- Edit drug

**Humira INJ 10/0.1 ML**
- Box of 1 solution (sold in a package of 2 solutions)
- Quantity: 90
- Frequency: Every 3 months
- Remove drug
- Edit drug

**Kapway 0.1mg**
- Brand
- Quantity: 60
- Frequency: Every 1 month
- Remove drug
- Edit drug

**Microzide 25mg**
- Brand
- Quantity: 60
- Frequency: Every 1 month
- Remove drug
- Edit drug

---

Atorvastatin 10mg has been added to your drug list.
You have 4 drugs in your drug list.

Add Another Drug  Done

---

Select pharmacies near you

Showing 10 pharmacies near 02116 Suffolk County, Boston MA

1. **SpotRx Pharmacy**
   - 2196 E Cambridge Rd #200
   - Boston, MA 02116
   - 1-617-376-9600

2. **Fry’s Pharmacy**
   - 4724 N 20th St
   - Boston, MA 02116
   - 1-617-376-9969

3. **CVS Pharmacy**
   - 1610 E Cambridge Rd
   - Boston, MA 02116
   - 1-617-236-4007

4. **CVS Pharmacy**
   - 1600 E Cambridge Rd
   - Boston, MA 02116
   - 1-617-437-7916

5. **Safeway Pharmacy**
   - 3132 E Cambridge Rd
   - Boston, MA 02116
   - 1-617-542-2993

6. **Target**
   - 4111 N 24th St
   - Boston, MA 02116
   - 1-617-236-8538

7. **Phoenix Pharmacy**
   - 1701 E Thomas Rd
   - Boston, MA 02116
   - 1-617-927-6533

8. **CVS Pharmacy**
   - 2400 E Thomas Rd
   - Boston, MA 02116
   - 1-617-859-5300

---

Pharmacies selected

Mail order pharmacy

Select up to 2 more pharmacies

Done
Select pharmacies near you
Showing 10 pharmacies near 02116 Suffolk County, Boston MA

1. SpotRx Pharmacy
   2196 E Camelback Rd #200
   Boston, MA 02116
   1-617-375-9600

2. Fry’s Pharmacy
   4724 N 20th St
   Boston, MA 02116
   1-617-375-7969

3. CVS Pharmacy
   1620 E Camelback Rd
   Boston, MA 02116
   1-617-256-8007

4. Safeway Pharmacy
   3532 E Camelback Rd
   Boston, MA 02116
   1-617-942-2933

5. Phoenix Pharmacy
   1901 E Thomas Rd
   Boston, MA 02116
   1-617-927-6163

6. CVS Pharmacy
   1620 E Camelback Rd
   Boston, MA 02116
   1-617-437-7916

7. Target
   5001 Soter Rd
   Boston, MA 02116
   1-617-256-4007

8. CVS Pharmacy
   2406 E Thomas Rd
   Boston, MA 02116
   1-617-859-5300

Select 1 more pharmacy (optional)  Done
The New Medicare Plan Finder-Medicare Advantage

Medicare Advantage (MA) Search and Compare

26 Medicare Advantage Plans available
02116 Suffolk County, Boston MA Change location

<table>
<thead>
<tr>
<th>Plan Details</th>
<th>Plan Details</th>
<th>Plan Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaiser Permanente Medicare Advantage (HMO)</td>
<td>Kaiser Permanente Medicare Advantage (HMO)</td>
<td>Kaiser Permanente Medicare Advantage (HMO)</td>
</tr>
<tr>
<td>Plan ID: H2172-096-0</td>
<td>Plan ID: H2172-096-0</td>
<td>Plan ID: H2172-096-0</td>
</tr>
<tr>
<td>$0 Health plan deductible</td>
<td>$0 Drug deductible</td>
<td>$4,074 Out-of-pocket max</td>
</tr>
<tr>
<td>The amount you must pay each year before your plan starts to pay for covered services.</td>
<td>The amount you must pay each year before your plan starts to pay for covered drugs.</td>
<td>Once you exceed this amount for covered services in a year, your plan pays 100% for your care.</td>
</tr>
<tr>
<td>$0,00 Medicare Advantage + Drug monthly premium</td>
<td>$0,00 Medicare Advantage + Drug monthly premium</td>
<td>$0,00 Medicare Advantage + Drug monthly premium</td>
</tr>
<tr>
<td>Doesn’t include: $35.50 Standard Part B premium</td>
<td>Doesn’t include: $35.50 Standard Part B premium</td>
<td>Doesn’t include: $35.50 Standard Part B premium</td>
</tr>
<tr>
<td>6 of 7 Prescription drugs covered</td>
<td>6 of 7 Prescription drugs covered</td>
<td>6 of 7 Prescription drugs covered</td>
</tr>
<tr>
<td>Restrictions may apply</td>
<td>Restrictions may apply</td>
<td>Restrictions may apply</td>
</tr>
<tr>
<td>$30.21 Estimated yearly drug costs</td>
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<td>$30.21 Estimated yearly drug costs</td>
</tr>
<tr>
<td>You may expect to pay this amount for drugs based on the drugs you entered.</td>
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<td>You may expect to pay this amount for drugs based on the drugs you entered.</td>
</tr>
</tbody>
</table>

Your current plan: Kaiser Permanente Medicare Advantage (HMO) Plan ID: H2172-096-0

Your current subsidy: Dual Eligible
Side-by-Side Comparison

Medicare.gov

26 Medicare Advantage Plans available

Your current plan

Kaiser Permanente

Kaiser Permanente Medicare Advantage (HMO)
Plan ID: H2772-006-0

$0
Health plan deductible
The amount you must pay each year before your plan starts to pay for covered services.

$0
Drug deductible
The amount you must pay each year before your plan starts to pay for covered drugs.

$4,074
Out-of-pocket max
Once you spend this amount for covered services in a year, your plan pays 100% for your care.

$30.21
Estimated yearly drug costs
You may expect to pay this amount for drugs based on the drugs you entered.

$0
Health plan deductible
The amount you must pay each year before your plan starts to pay for covered services.

$0
Drug deductible
The amount you must pay each year before your plan starts to pay for covered drugs.

$4,074
Out-of-pocket max
Once you spend this amount for covered services in a year, your plan pays 100% for your care.

$30.21
Estimated yearly drug costs
You may expect to pay this amount for drugs based on the drugs you entered.

Plan Details

Your current plan

View available drug costs

Medicare.gov | Find a Plan

Your current subsidy: Dual Eligible

Your current plan

Plan Details

Vision
Dental
Hearing
Transportation
Fitness benefits
See more benefits

View available drug costs

Medicare.gov | Find a Plan

Your current subsidy: Dual Eligible

Your current plan

Plan Details

Vision
Dental
Hearing
Transportation
Fitness benefits
See more benefits

View available drug costs
### Overview

<table>
<thead>
<tr>
<th>Plan</th>
<th>Health Premium</th>
<th>Drug Premium</th>
<th>Standard Part B Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaiser Permanente</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$135.50</td>
</tr>
<tr>
<td>Humana Gold Plus</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$135.50</td>
</tr>
<tr>
<td>Blue Medicare Advantage</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$135.50</td>
</tr>
</tbody>
</table>

**Premium**

- **Health premium**: $0.00
- **Drug premium**: $0.00
- **Standard Part B premium**: $135.50

**Deductible**

- **Health plan deductible**: $0
- **Drug plan deductible**: $0
- **Out-of-pocket max**: $0

---

### Overview

<table>
<thead>
<tr>
<th>Plan</th>
<th>Health Premium</th>
<th>Drug Premium</th>
<th>Standard Part B Premium</th>
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<tr>
<td>Blue Medicare Advantage</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$135.50</td>
</tr>
</tbody>
</table>

**Premium**

- **Health premium**: $0.00
- **Drug premium**: $0.00
- **Standard Part B premium**: $135.50

**Deductible**

- **Health plan deductible**: $0
- **Drug plan deductible**: $0
- **Out-of-pocket max**: $0
**Overview**

**Premium**
- Total monthly premium: $0.00
- Health plan premium: $0.00
- Drug plan premium: $0.00

**Deductible**
- Health plan deductible: $0
- Drug plan deductible: $0.00

**Estimated yearly costs**
- Estimated total yearly costs for care: $3,988.00
- Estimated total yearly drug costs: No Data

**Out-of-pocket**
- Out-of-pocket max: $3,200 in-network

**Benefits & costs**

**Primary doctor visit**
$20 per visit

**Specialist visit**
$25 per visit

**Tests, labs, imaging**
- Diagnostic test & procedures: $0-$100
- Lab services: $0-$85
- Diagnostic radiology services (like MRI): $0-$100
- Outpatient X-rays: $0-$100
- Emergency care: $90 per visit (always covered)
- Urgent care: $0-$35 per visit (always covered)

**Hospital services**
- Inpatient hospital coverage:
  - $15 per day for days 1 through 5
  - $20 per day for days 6 through 90
  - $30 per day for days 91 and beyond
- Outpatient hospital coverage: $180 per visit
### Preventive services

<table>
<thead>
<tr>
<th>Service</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive services</td>
<td>$0</td>
</tr>
</tbody>
</table>

### Ambulance

<table>
<thead>
<tr>
<th>Service</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ground ambulance</td>
<td>$265</td>
</tr>
</tbody>
</table>

### Therapy services

<table>
<thead>
<tr>
<th>Service</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational therapy visit</td>
<td>$25</td>
</tr>
<tr>
<td>Physical therapy &amp; speech &amp; language therapy visit</td>
<td>$25</td>
</tr>
</tbody>
</table>

### Mental health services

<table>
<thead>
<tr>
<th>Service</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient group therapy with a psychiatrist</td>
<td>$20</td>
</tr>
<tr>
<td>Outpatient individual therapy with a psychiatrist</td>
<td>$20</td>
</tr>
<tr>
<td>Outpatient group therapy visit</td>
<td>$20</td>
</tr>
</tbody>
</table>

### Other services

<table>
<thead>
<tr>
<th>Service</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Durable medical equipment (like wheelchairs &amp; oxygen)</td>
<td>20% per item</td>
</tr>
<tr>
<td>Prosthetics (like braces, artificial limbs)</td>
<td>20% per item</td>
</tr>
<tr>
<td>Diabetes supplies</td>
<td>$0 or 10-20% per item</td>
</tr>
</tbody>
</table>

### Extra benefits & costs

#### Hearing

<table>
<thead>
<tr>
<th>Service</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hearing exam</td>
<td>$25</td>
</tr>
<tr>
<td>Fitting/evaluation</td>
<td>$7</td>
</tr>
<tr>
<td>Hearing aids - inner ear</td>
<td>$399-699</td>
</tr>
</tbody>
</table>

#### Preventive dental

<table>
<thead>
<tr>
<th>Service</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oral exam</td>
<td>Not covered</td>
</tr>
<tr>
<td>Cleaning</td>
<td>Not covered</td>
</tr>
</tbody>
</table>
# Comprehensive Dental

<table>
<thead>
<tr>
<th>Service</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-routine services</td>
<td>Not covered</td>
</tr>
<tr>
<td>Diagnostic services</td>
<td>Not covered</td>
</tr>
<tr>
<td>Restorative services</td>
<td>Not covered</td>
</tr>
<tr>
<td>Endodontics</td>
<td>Not covered</td>
</tr>
<tr>
<td>Periodontics</td>
<td>Not covered</td>
</tr>
<tr>
<td>Extractions</td>
<td>Not covered</td>
</tr>
<tr>
<td>Prosthodontics, other oral/masculine surgery, other services</td>
<td>Not covered</td>
</tr>
</tbody>
</table>

# Vision

<table>
<thead>
<tr>
<th>Service</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine eye exam</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Contact lenses</td>
<td>$0 copay</td>
</tr>
<tr>
<td>Eyeglasses (includes lenses)</td>
<td>Not Covered</td>
</tr>
<tr>
<td>Eyeglass frames</td>
<td>Not covered</td>
</tr>
<tr>
<td>Eyeglass lenses</td>
<td>Not covered</td>
</tr>
</tbody>
</table>

# More Benefits

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fitness benefit</td>
<td>Some coverage</td>
</tr>
<tr>
<td>Transportation services for non-emergency care</td>
<td>Some coverage</td>
</tr>
<tr>
<td>Over the counter drug benefits</td>
<td>Some coverage</td>
</tr>
<tr>
<td>In-home support services</td>
<td>Not covered</td>
</tr>
<tr>
<td>Worldwide emergency</td>
<td>Not covered</td>
</tr>
<tr>
<td>Worldwide urgent care</td>
<td>Some coverage</td>
</tr>
<tr>
<td>Health-related emergency response device</td>
<td>Some coverage</td>
</tr>
<tr>
<td>Routine chiropractic care</td>
<td>Some coverage</td>
</tr>
<tr>
<td>Home &amp; bathroom safety devices &amp; modifications</td>
<td>Some coverage</td>
</tr>
<tr>
<td>Medically-approved non-opioid pain management</td>
<td>Not covered</td>
</tr>
<tr>
<td>Meals for short duration</td>
<td>Not covered</td>
</tr>
<tr>
<td>Yearly physical exams</td>
<td>Some coverage</td>
</tr>
<tr>
<td>Telehealth</td>
<td>Not covered</td>
</tr>
</tbody>
</table>
Humana Gold Plus H0028-027 (HMO)
Plan ID: H0028-027-0

Special benefits
These benefits MIGHT apply to you if you have qualifying chronic illnesses, diseases, or other factors. Contact plans to see if you qualify for these benefits before enrolling.

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food &amp; Produce</td>
<td>Limited</td>
</tr>
<tr>
<td>Meals</td>
<td>Limited</td>
</tr>
<tr>
<td>Pest control</td>
<td>Limited</td>
</tr>
<tr>
<td>Transportation for non-medical needs</td>
<td>Not covered</td>
</tr>
<tr>
<td>Indoor air quality equipment &amp; services</td>
<td>Not covered</td>
</tr>
<tr>
<td>Social needs benefits</td>
<td>Limited</td>
</tr>
<tr>
<td>Complimentary therapies</td>
<td>Limited</td>
</tr>
<tr>
<td>Services supporting self-direction</td>
<td>Limited</td>
</tr>
<tr>
<td>Structural home modifications</td>
<td>Limited</td>
</tr>
<tr>
<td>General supports for living</td>
<td>Limited</td>
</tr>
<tr>
<td>Reduced cost sharing for certain people with Medicare</td>
<td>Limited</td>
</tr>
</tbody>
</table>

Drug coverage & costs

<table>
<thead>
<tr>
<th>Type</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare Part B drugs</td>
<td></td>
</tr>
<tr>
<td>Chemotherapy drugs</td>
<td>20%</td>
</tr>
<tr>
<td>Other Part B drugs</td>
<td>20%</td>
</tr>
</tbody>
</table>

Medicare star rating

| Rating                         |          |
| Overall star rating            | ****     |

Documents

Contact information
The New Medicare Plan Finder

Prescription Drug Plan (PDP) Search and Compare

4 drug plans available
02156 Suffolk County, Boston MA Change location

Showing 4 of 4 drug plans
Sort plans by Monthly premium: low to high

Magellan Rx Medicare Basic (PDP)
Run D: 51982-168-0

$0.00 Monthly premium
Doesn’t include:
$135.50 Standard Part B premium

$415 Drug deductible
The amount you must pay each year before your plan starts to pay for covered drugs.

Add Your Drugs

Enter drugs you take regularly (if any) to see your estimated yearly drug costs.

Add Your Drugs & Pharmacies

Add your drugs and up to 3 preferred pharmacies to get an accurate cost estimate. We’ll show you which plans cover them when you review costs.

Magellan

$5.00 Monthly premium

WellCare Value Script
Run D: 51982-168-0

Star rating: ★★★★☆
Add to Compare

Star rating: ★★★★☆
Add to Compare

Plan Details
Enroll
The **New** Medicare Plan Finder: 
Live Site Now Under Testing

A peek at the live site:
### EnvisionRxPlus (PDP)
- **Monthly premium:** $12.90
- **Coverage includes:** $11.60 Standard Part B premium

<table>
<thead>
<tr>
<th>Selected drugs</th>
<th>Retail cost</th>
<th>Cost after deductible</th>
<th>Cost in coverage gap</th>
<th>Cost after coverage gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amoxicillin 430mg tablet</td>
<td>$7.02</td>
<td>$7.02</td>
<td>$7.02</td>
<td>$4.00</td>
</tr>
<tr>
<td>Atorvastatin 40mg tablet</td>
<td>$6.34</td>
<td>$6.34</td>
<td>$6.34</td>
<td>$4.00</td>
</tr>
<tr>
<td>Lisinopril 20mg tablet</td>
<td>$9.27</td>
<td>$7.00</td>
<td>$7.00</td>
<td>$4.00</td>
</tr>
<tr>
<td>Prednisone 10mg tablet</td>
<td>$26.49</td>
<td>$15.00</td>
<td>$15.00</td>
<td>$4.00</td>
</tr>
</tbody>
</table>

**Estimated drug costs during coverage phases**

**KAISER PERMANENTE PHARMACY #208 - Drug costs during coverage phases**

In-network pharmacy

<table>
<thead>
<tr>
<th>Selected drugs</th>
<th>Retail cost</th>
<th>Cost after deductible</th>
<th>Cost in coverage gap</th>
<th>Cost after coverage gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amoxicillin 430mg tablet</td>
<td>$7.02</td>
<td>$7.02</td>
<td>$7.02</td>
<td>$4.00</td>
</tr>
<tr>
<td>Atorvastatin 40mg tablet</td>
<td>$6.34</td>
<td>$6.34</td>
<td>$6.34</td>
<td>$4.00</td>
</tr>
<tr>
<td>Lisinopril 20mg tablet</td>
<td>$9.27</td>
<td>$7.00</td>
<td>$7.00</td>
<td>$4.00</td>
</tr>
<tr>
<td>Prednisone 10mg tablet</td>
<td>$26.49</td>
<td>$15.00</td>
<td>$15.00</td>
<td>$4.00</td>
</tr>
</tbody>
</table>

**Estimated monthly drug costs**

Based on current drug costs, it's estimated that:
- You'll meet your **$0.00 deductible** in July.
- You won't enter the **coverage gap** this year.
The version of the new MPF launched on August 27 is for 2019 plans, and has an option to revert to the old MPF

- Only people new to Medicare or with a Special Election Period (SEP) can use this version to enroll in a 2019 plan

- Starting with OEP, you can only use the New Medicare Plan Finder to find 2020 plans and enroll

- You must have a MyMedicare.gov account to access personalized features
Key Changes

• **Design:** Overall look and feel brought to current standards
• **Mobile Optimized:** For a smart phone or a tablet
• **Pharmacies:** You can pick a mail order pharmacy plus 2 retail pharmacies to price
• **Drug List:** Claims based list you can then customize
  • Old drug lists will not transfer to the new MPF
  • Drug list IDs and password ID dates cannot be used with the new MPF
  • Now you can price 40 drugs instead of 25

The *New* Medicare Plan Finder:
Account Recovery

Username and Password recovery
on MyMedicare
or Medicare Plan Finder
Log in or create account

No account? Create one now
Create an account for a more personalized experience.

Create Account

Trouble logging in?

What are you having trouble with?

- Forgot Username
- Forgot Password
- Forgot Username and Password

Are you unsure of whether you have an account?

- Verify Your Account Access

Return to MyMedicare.gov
Forgot username

Step 1 of 2: Enter Your Information

All fields required.

MEDICARE NUMBER: [Input field]

Where can I find my Medicare Number?

LAST NAME: [Input field]  SUFFIX: [Input field]  None

DATE OF BIRTH:

Month: [Input field]  Day: [Input field]  Year: [Input field]

PROVE YOU’RE NOT A ROBOT

Type the last 3 numbers of 116783:

[Input field]

Continue  Back

Forgot username

Step 2 of 2: Username Reminder

Your MyMedicare.gov user name is MightyMouse

Return to MyMedicare.gov to sign in.
Trouble logging in?

What are you having trouble with?
- Forgot Username
- Forgot Password
- Forgot Username and Password

Are you unsure of whether you have an account?
- Verify Your Account Access

Return to MyMedicare.gov

Forgot password

Step 1 of 4: Enter Your Information

All fields required.

MEDICARE NUMBER

Info

Where can I find my Medicare Number?

LAST NAME

SUPP LEX

None

DATE OF BIRTH

Month

Day

Year

Username

Info

PROVE YOU'RE NOT A ROBOT

Type the first and last number of 2021

Continue

Back
Forgot password

Step 2 of 4: Answer Secret Question
All fields required.

Secret Question Info
In what city did you first meet your spouse?

SECRET ANSWER

Continue Cancel

Note: If you do not have or remember the correct answer, and make three (3) incorrect attempts, your account will be locked out and you will not be able to access MyMedicare.gov until you complete the registration process.

Forgot password

Step 3 of 4: Change Password
Please update your password using following the password creation guidelines. All fields required.

NEW PASSWORD

CONFIRM NEW PASSWORD

Continue Cancel

Password Creation Guidelines

- Must be 8 to 16 characters long
- Must contain at least one letter
- Must contain at least one number
- Must also contain one or more of the following special characters: @ ! $ % ^ * ( )
- Must be different from the previous six (6) passwords
- Cannot contain your username
- Cannot contain your Medicare Number or SSN
Trouble logging in?

What are you having trouble with?
- Forgot Username
- Forgot Password
- Forgot Username and Password

Are you unsure of whether you have an account?
- Verify Your Account Access

Return to MyMedicare.gov

Forgot username and password

Step 1 of 5: Enter Your Information
All fields required.

MEDICARE NUMBER

Where can I find my Medicare Number?

LAST NAME

SUFFIX
None

DATE OF BIRTH
Month
Day
Year

PROVE YOU’RE NOT A ROBOT
What color is the purple pen?

Continue
Back
Forgot username and password

Step 2 of 5: Username Reminder

Your MyMedicare.gov Username is **MightyMouse**

Please note your MyMedicare.gov username for your records, so that you may visit MyMedicare.gov often.

Continue on to the Forgot Password process in order to change your password.

[Continue] [Cancel]
Forgot username and password

Step 3 of 5: Answer Secret Question
All fields required.

Secret Question Info
In what city did you first meet your spouse?

SECRET ANSWER

Continue  Cancel

Note: If you do not have or remember the correct answer, and make three (3) incorrect attempts, your account will be locked out and you will not be able to access MyMedicare.gov until you complete the registration process.

Forgot username and password

Step 4 of 5: Change Password
Please update your password using following the password creation guidelines.
All fields required.

NEW PASSWORD

CONFIRM NEW PASSWORD

Continue  Cancel

Password Creation Guidelines
• Must be 8 to 16 characters long
• Must contain at least one letter
• Must contain at least one number
• Must also contain one or more of the following special characters: @ $ % ^ * ()
• Must be different from the previous six (6) passwords
• Cannot contain your username
• Cannot contain your Medicare Number or SSN

Non-discrimination/Accessibility
Trouble logging in?

What are you having trouble with?

- [ ] Forgot Username
- [ ] Forgot Password
- [ ] Forgot Username and Password

Are you unsure of whether you have an account?

- [ ] Verify Your Account Access

Return to MyMedicare.gov

Verify account access

Step 1 of 2: Enter Your Information

All fields required.

MEDICARE NUMBER

Info

Where can I find my Medicare Number?

LAST NAME

SUFFIX

None

DATE OF BIRTH

Month  Day  Year

PROVE YOU'RE NOT A ROBOT

Type the last 2 numbers of 995959257

Continue  Back
Verify account access

Step 2 of 2: Registration Status

You have previously enrolled in MyMedicare.gov.

You registered on 07/11/2019.

You were registered by Beneficiary (Self).

Your MyMedicare.gov user name is MightyMouse

Please note your MyMedicare.gov username for your records, so that you may visit MyMedicare.gov often.

Return to MyMedicare.gov to sign in.

Questions?
This training was provided by the CMS National Training Program (NTP)

Thank you.