

# YOUR GUIDE TO MEDICARE

## Medical Advantage Plans in Wayne, Oakland and Macomb

Here's a comparison of Medicare Advantage plans, including prices and many benefits, available in tri-county Detroit for 2011.

### MACOMB

#### HMO Plans

	Monthly Premium	Hospital copay	PCP copay	Specialist copay	In-network Max Out of Pocket	0 copay for preventive services	Drug deductible	Additional coverage in the Gap	2010 Plan Premium
HAP Senior Plus - Henry Ford Option 1	\$55.00	\$350 per admission	\$20	\$35	\$3,400	No	No drug coverage		\$50
HAP Senior Plus - Henry Ford Option 2	\$69.00	\$350 per admission	\$20	\$35	\$3,400	No	\$0	No	\$67
HAP Senior Plus - Henry Ford Option 3	\$108.00	\$300 per admission	\$15	\$35	\$3,400	No	\$0	All generics	\$92
Molina Medicare Options	\$60.00	\$500 per admission	\$10	\$20	\$3,000	Yes	\$0	No	\$56

#### HMO Point of Service Plans

BCN Advantage Basic	\$0.00	\$225/day Days 1-5	\$25	\$40	\$5,000	Yes	\$310	No	New Plan
BCN Advantage Option 1	\$24.00	\$175/day Days 1-5	\$20	\$35	\$4,400	Yes	No drug coverage		\$24
BCN Advantage Option 2	\$89.00	\$125/day Days 1-5	\$15	\$30	\$4,200	Yes	\$0	Many generics	\$97
BCN Advantage Option 3	\$181.00	\$80/day Days 1-5	\$10	\$20	\$4,000	Yes	\$0	Many generics	\$182
HAP Senior Plus - Expanded Network Option 1	\$95.00	\$350 per admission	\$20	\$35	\$3,400	No	No drug coverage		\$95
HAP Senior Plus - Expanded Network Option 2	\$113.00	\$350 per admission	\$15	\$30	\$3,400	No	\$110	No	\$117
HAP Senior Plus - Expanded Network Option 3	\$158.00	\$300 per admission	\$15	\$35	\$3,400	No	\$0	All generics	\$139
PriorityMedicare Value	\$83.70	\$600 per admission	\$15	\$40	\$3,400	Yes	\$0	No	\$82.40
PriorityMedicare	\$122.10	\$75/day Days 1-5	\$10	\$30	\$3,400	Yes	\$0	No	\$110.80

#### PPO Plans

Alliance Medicare Option 1	\$150.00	\$75/day days 1-5	\$20	\$35	\$6,700	No	\$0	No	\$147
Alliance Medicare Option 2	\$183.00	\$75/day Days 1-5	\$15	\$30	\$6,700	No	\$0	All generics	\$167
Medicare Plus Blue PPO Vitality	\$69.00	\$200/day Days 1-7	\$25	\$40	\$5,500	Yes	\$310	No	New plan
Medicare Plus Blue PPO Signature	\$109.00	\$150/day Days 1-5	\$25	\$35	\$5,000	Yes	\$0	No	\$141
Medicare Plus Blue PPO Assure	\$203.00	\$75/day Days 1-5	\$15	\$30	\$4,000	Yes	\$0	Many generics	New plan
HumanaChoice R5826-53	\$0.00	\$550 per admission	\$10	\$30	\$3,400	Yes	No Drug Coverage		\$0
HumanaChoice R5826-72	\$61.00	\$1100	15%	20%	\$6,700	Yes	\$310	No	\$96
HumanaChoice R5826-6	\$105.00	\$225/day Days 1-7	\$5	\$35	\$4,000	Yes	\$0	Few generics and brands	\$107
PriorityMedicare Select	\$153.50	\$100/day Days 1-5	\$15	\$30	\$3,400	Yes	\$0	No	\$193.80

### OAKLAND

#### HMO Plans

HAP Senior Plus Henry Ford Option 1	\$55.00	\$350 per admission	\$20	\$35	\$3,400	No	No Drug Coverage		\$50
HAP Senior Plus Henry Ford Option 2	\$69.00	\$350 per admission	\$20	\$35	\$3,400	No	\$0	No	\$67
HAP Senior Plus Henry Ford Option 3	\$108.00	\$300 per admission	\$15	\$35	\$3,400	No	\$0	All Generics	\$92
HealthPlus MedicarePlus Advantage HMO Option 1	\$75.00	\$400 per admission	\$15	\$35	\$6,700	Yes	\$0	No	\$72
HealthPlus MedicarePlus Advantage HMO Option 2	\$121.00	\$300 per admission	\$10	\$25	\$6,700	Yes	\$0	Many Generics	\$102
Molina Medicare Options	\$60.00	\$500 per admission	\$10	\$20	\$3,000	Yes	\$0	No	\$56

#### HMO Point of Service Plans

BCN Advantage Basic	\$0.00	\$225/day Days 1-5	\$25	\$40	\$5,000	Yes	\$310	No	New plan
BCN Advantage Option 1	\$24.00	\$175/day Days 1-5	\$20	\$35	\$4,400	Yes	No Drug Coverage		\$24
BCN Advantage Option 2	\$89.00	\$125/day Days 1-5	\$15	\$30	\$4,200	Yes	\$0	Many generics	\$172
BCN Advantage Option 3	\$181.00	\$80/day Days 1-5	\$10	\$20	\$4,000	Yes	\$0	Many generics	\$182
HAP Senior Plus Expanded Network Option 1	\$95.00	\$350 per admission	\$20	\$35	\$3,400	No	No Drug Coverage		\$95
HAP Senior Plus Expanded Network Option 2	\$113.00	\$350 per admission	\$15	\$30	\$3,400	No	\$110	No	\$117
HAP Senior Plus Expanded Network Option 3	\$158.00	\$300 per admission	\$15	\$35	\$3,400	No	\$0	All generics	\$139
PriorityMedicare Value	\$83.70	\$600 per admission	\$15	\$40	\$3,400	Yes	\$0	No	\$82.40
PriorityMedicare	\$122.10	\$75/day Days 1-5	\$10	\$30	\$3,400	Yes	\$0	No	\$110.80

## 2011 Medicare Part D standalone prescription drug plans

Data as of Sept. 15, 2010. Includes all contracts/plans regardless of 2011 approval status. Employer sponsored plans (800 series) are excluded. Plans under sanction are not shown.

COMPANY NAME	PLAN NAME	BENEFIT TYPE	\$0 PREMIUM WITH FULL LOW-INCOME SUBSIDY	MONTHLY DRUG PREMIUM	ANNUAL DRUG DEDUCTIBLE	ADDITIONAL DRUG COVERAGE OFFERED
Alliance Medicare Rx	Alliance Medicare Rx (PDP)	Basic	■	\$57.50	\$110	No gap coverage
Sterling Life Insurance Company	Sterling Rx (PDP)	Basic	■	\$48.20	\$100	No gap coverage
Blue Cross Blue Shield of Michigan	Prescription Blue Option A (PDP)	Basic	■	\$72.00	\$145	No gap coverage
Blue Cross Blue Shield of Michigan	Prescription Blue Option B (PDP)	Enhanced	■	\$88.00	\$0	Many generics
SilverScript Insurance Company	CVS Caremark Value (PDP)	Basic	■	\$33.00	\$310	No gap coverage
SilverScript Insurance Company	CVS Caremark Plus (PDP)	Enhanced	■	\$68.80	\$0	Many generics
CIGNA Medicare Rx	CIGNA Medicare Rx Plan Two (PDP)	Enhanced	■	\$61.20	\$0	Few generics
CIGNA Medicare Rx	CIGNA Medicare Rx Plan One (PDP)	Basic	■	\$36.00	\$310	No gap coverage
RxAmerica	Advantage Star Plan by RxAmerica (PDP)	Basic	■	\$35.00	\$310	No gap coverage
Medco Medicare Prescription Plan	Medco Medicare Prescription Plan - Value (PDP)	Basic	■	\$36.50	\$310	No gap coverage
Medco Medicare Prescription Plan	Medco Medicare Prescription Plan - Choice (PDP)	Enhanced	■	\$62.90	\$250	Many generics
First Health Part D	First Health Part D Premier Plus (PDP)	Enhanced	■	\$89.20	\$0	Some generics and some brands
Health Net	Health Net Value Orange Option 2 (PDP)	Enhanced	■	\$68.80	\$0	No gap coverage
Health Net	Health Net Orange Option 1 (PDP)	Basic	■	\$34.00	\$310	No gap coverage
United American Insurance Company	UA Medicare Part D Prescription Drug Cov (PDP)	Basic	■	\$40.00	\$100	No gap coverage

	Monthly Premium	Hospital copay	PCP copay	Specialist copay	In-network Max Out of Pocket	0 copay for preventive services	Drug deductible	Additional coverage in the Gap	2010 Plan Premium
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#### PPO Plans

Alliance Medicare Option 1	\$150.00	\$75/day Days 1-5	\$20	\$35	\$6,700	No	\$0	No	\$147
Alliance Medicare Option 2	\$183.00	\$75/day Days 1-5	\$15	\$30	\$6,700	No	\$0	All generics	\$167
Medicare Plus Blue PPO Vitality	\$69.00	\$200/day Days 1-7	\$25	\$40	\$5,500	Yes	\$310	No	New plan
Medicare Plus Blue PPO Signature	\$109.00	\$150/day Days 1-5	\$25	\$35	\$5,000	Yes	\$0	No	\$141
Medicare Plus Blue PPO Assure	\$203.00	\$75/day Days 1-5	\$15	\$30	\$4,000	Yes	\$0	Many generics	New plan
HumanaChoice R5826-053	\$0.00	\$550 per admission	\$10	\$30	\$3,400	Yes	No Drug Coverage		\$0
HumanaChoice R5826-072	\$61.00	\$1,100	15%	20%	\$6,700	Yes	\$310	No gap coverage	\$96
HumanaChoice R5826-006	\$105.00	\$225/day Days 1-5	\$5	\$35	\$4,000	Yes	\$0	Few generics & brands	\$107
PriorityMedicare Select	\$153.50	\$100/day Days 1-5	\$15	\$30	\$3,400	Yes	\$0	No gap coverage	\$193.80

#### Demo Plans: Fox Run of Novi ONLY

Erickson Advantage HMO Point of Service Signature w/ drugs	\$121.00							No Drug Coverage	\$121
Erickson Advantage HMO Point of Service Signature w/o drugs	\$159.00						\$0	No gap coverage	\$150

### WAYNE

#### HMO Plans

HAP Senior Plus Henry Ford Option 1	\$55.00	\$350 per admission	\$20	\$35	\$3,400	No	No drug coverage		\$50
HAP Senior Plus Henry Ford Option 2	\$69.00	\$350 per admission	\$20	\$35	\$3,400	No	\$0	No	\$67
HAP Senior Plus Henry Ford Option 3	\$108.00	\$300 per admission	\$15	\$35	\$3,400	No	\$0	All generics	\$92
Molina Medicare Options	\$60.00	\$500 per admission	\$10	\$20	\$3,000	Yes	\$0	No	\$56

#### HMO Point of Service Plans

BCN Advantage Basic	\$0.00	\$225/day Days 1-5	\$25	\$40	\$5,000	Yes	\$310	No	New plan
BCN Advantage Option 1	\$24.00	\$175/day Days 1-5	\$20	\$35	\$4,400	Yes	No drug coverage		\$24
BCN Advantage Option 2	\$89.00	\$125/day Days 1-5	\$15	\$30	\$4,200	Yes	\$0	Many generics	\$172
BCN Advantage Option 3	\$181.00	\$80/day Days 1-5	\$10	\$20	\$4,000	Yes	\$0	Many generics	\$182
HAP Senior Plus Expanded Network Option 1	\$95.00	\$350 per admission	\$20	\$35	\$3,400	No	No drug coverage		\$95
HAP Senior Plus Expanded Network Option 2	\$113.00	\$350 per admission	\$15	\$30	\$3,400	No	\$110	No	\$117
HAP Senior Plus Expanded Network Option 3	\$158.00	\$300 per admission	\$15	\$35	\$3,400	No	\$0	All generics	\$139
PriorityMedicare Value	\$83.70	\$600 per admission	\$15	\$40	\$3,400	Yes	\$0	No	\$82.40
PriorityMedicare	\$122.10	\$75/day Days 1-5	\$10	\$30	\$3,400	Yes	\$0	No	\$110.80

#### PPO Plans

Alliance Medicare Option 1	\$150.00	\$75/day Days 1-5	\$20	\$35	\$6,700	No	\$0	No	\$147
Alliance Medicare Option 2	\$183.00	\$75/day Days 1-5	\$15	\$30	\$6,700	No	\$0	All Generics	\$167
Medicare Plus Blue PPO Vitality	\$69.00	\$200/day Days 1-7	\$25	\$40	\$5,500	Yes	\$310	No	New plan
Medicare Plus Blue PPO Signature	\$109.00	\$150/day Days 1-5	\$25	\$35	\$5,000	Yes	\$0	No	\$141
Medicare Plus Blue PPO Assure	\$203.00	\$75/day Days 1-5	\$15	\$30	\$4,000	Yes	\$0	Many generics	New plan
HumanaChoice R5826-053	\$0.00	\$550 per admission	\$10	\$30	\$3,400	Yes	No drug coverage		\$0
HumanaChoice R5826-072	\$61.00	\$1,100	15%	20%	\$6,700	Yes	\$310	No gap coverage	\$96
HumanaChoice R5826-006	\$105.00	\$225/day Days 1-7	\$5	\$35	\$4,000	Yes	\$0	Few generics & brands	\$107
PriorityMedicare Select	\$153.50	\$100/day Days 1-5	\$15	\$30	\$3,400	Yes	\$0	No gap coverage	\$193.80

#### Demo Plans: Fox Run of Novi ONLY

Erickson advantage HMO Point of service Signature w/ drugs	\$121.00							No drug coverage	\$121
Erickson advantage HMO Point of service Signature w/o drugs	\$159.00						\$0	No cap coverage	\$150

COMPANY NAME	PLAN NAME	BENEFIT TYPE	\$0 PREMIUM WITH FULL LOW-INCOME SUBSIDY	MONTHLY DRUG PREMIUM	ANNUAL DRUG DEDUCTIBLE	ADDITIONAL DRUG COVERAGE OFFERED
First Health Part D	First Health Part D Premier (PDP)	Basic	■	\$34.70	\$150	No gap coverage
Universal American	Community CCRx Basic (PDP)	Basic	■	\$32.30	\$310	No gap coverage
Universal American	Community CCRx Choice (PDP)	Enhanced	■	\$81.60	\$0	No gap coverage
UnitedHealthcare	AARP MedicareRx Preferred (PDP)	Basic	■	\$31.70	\$0	No gap coverage
Priority Health Medicare	PriorityMedicare Rx (PDP)	Basic	■	\$50.00	\$0	No gap coverage
Humana Insurance Company	Humana Complete (PDP)	Enhanced	■	\$111.80	\$0	Many generics and some brands
Humana Insurance Company	Humana Enhanced (PDP)	Enhanced	■	\$45.50	\$50	Few generics
Humana Insurance Company	Humana Walmart-Preferred Rx Plan (PDP)	Basic	■	\$14.80	\$310	No gap coverage
UnitedHealthcare	AARP MedicareRx Enhanced (PDP)	Enhanced	■	\$82.40	\$0	Some generics
HealthSpring Prescription Drug Plan	HealthSpring Prescription Drug Plan-Reg 13 (PDP)	Basic	■	\$32.40	\$310	No gap coverage
UniCare	MedicareRx Rewards Standard (PDP)	Basic	■	\$44.70	\$310	No gap coverage
UniCare	MedicareRx Rewards Plus (PDP)	Enhanced	■	\$49.50	\$0	Some generics
WellCare	WellCare Signature (PDP)	Enhanced	■	\$54.90	\$0	No gap coverage
WellCare	WellCare Classic (PDP)	Basic	■	\$35.30	\$310	No gap coverage
Bravo Health	BravoRx (PDP)	Basic	■	\$34.50	\$310	No gap coverage
EnvisionRx Plus	EnvisionRxPlus Silver (PDP)	Basic	■	\$35.70	\$310	No gap coverage
EnvisionRx Plus	EnvisionRxPlus Gold (PDP)	Enhanced	■	\$72.50	\$150	Many generics