

## Comparison of 2010/2011 LIS Plans

2010 LIS Plans	2011 LIS Plans
Blue RX Option 1 ( <i>out for 2011</i> )	CVS Caremark Value ( <i>New</i> )
CIGNA Medicare Rx Plan One	CIGNA Medicare Rx Plan One
First Health Premier ( <i>out for 2011</i> )	Advantage Star Plan by Rx America ( <i>New</i> )
Healthspring PDP Plan-Region 12	Healthspring PDP-Region 12
Medco Medicare Prescription Plan-Value	Medco Prescription Drug Plan Value
AARP Medicare RX Saver( <i>out for 2011</i> )	Health Net Orange Option One ( <i>New</i> )
Community CCRx Basic	Community CCRx Basic
PrescribaRx Bronze ( <i>out for 2011</i> )	Humana WalMart-Preferred Rx Plan ( <i>New</i> )
Windsor Rx	Windsor Rx
	Wellcare Classic ( <i>New</i> )
	Envision Rx Plus Silver ( <i>New</i> )

The Region 12 LIS Benchmark Amount for 2011 will be \$ 33.72.

After November 15, 2011 facilities can begin assisting residents with enrolling into new plans for 2011, if a change in plans is indicated.

If the plan will no longer be operating as a Part D Prescription Drug Plan, then CMS will auto-enroll residents into another plan if they have not enrolled in a new plan by December 31, 2011. Auto-enrollment is random and may or may not be the best plan for the resident; therefore, HCS recommends that a plan comparison be done in order to determine the best plan for the resident.

If the resident remains in a plan whose premium has risen above the LIS Benchmark amount, he/she will owe the difference between the plan premium amount and the LIS benchmark amount. Failure to pay this premium amount can result in termination of the PDP coverage and/or a Medicaid overpayment. Pay particular attention to your residents who are on those plans which will go over the LIS Benchmark amount for 2011....assist them with getting into a new LIS plan for 2011 before December 31, 2010.

## 2011 Medicare Part D Stand-Alone Prescription Drug Plans

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

Notes: Data are subject to change as contracts are finalized. For 2011, enhanced alternative plans may offer additional gap coverage which is calculated as the percentage of "generic" formulary products with coverage above and beyond the 2011 standard "generic" coverage gap cost-sharing benefit and/or the percentage of "brand" formulary products covered in addition to the coverage gap discount for applicable drugs. Additional gap coverage levels are determined separately for formulary generic and brand products and are described as follows: "All": 100% of formulary drugs are covered through the gap, "Many": ≥65% to <100% of formulary drugs are covered through the gap, "Some": ≥10% to <65% of formulary drugs are covered through the gap, "Few": >0% to <10% of formulary drugs are covered through the gap (and must also be >15 products covered through the gap), "No Gap Coverage": 0% of formulary drugs are covered through the gap (or ≤15 products covered through the gap). A label of "All Formulary Drugs" is applied for plans that cover 100% of "generic" and 100% of "brand" products (either by covering all formulary drug products in the gap or by having no initial coverage limit).

State	Company Name	Plan Name	Benefit Type	\$0 Premium with Full Low-Income Subsidy?	Monthly Drug Premium	Annual Drug Deductible	Type of Additional Drug Coverage Offered in the Gap	Contract ID	Plan ID	Benefit Type Detail
Alabama	Blue Cross and Blue Shield of Alabama	BlueRx Option II (PDP)	Enhanced		\$80.10	\$0	No Gap Coverage	S1030	001	EA
Alabama	Blue Cross and Blue Shield of Alabama	BlueRx Option I (PDP)	Basic		\$41.60	\$310	No Gap Coverage	S1030	006	AE
Alabama	Windsor Rx	Windsor Rx (PDP)	Basic	•	\$31.00	\$310	No Gap Coverage	S2505	001	AE
Alabama	Sterling Life Insurance Company	Sterling Rx (PDP)	Basic		\$49.20	\$100	No Gap Coverage	S4802	033	BA
Alabama	SilverScript Insurance Company	CVS Caremark Value (PDP)	Basic	•	\$31.20	\$310	No Gap Coverage	S5601	024	AE
Alabama	SilverScript Insurance Company	CVS Caremark Plus (PDP)	Enhanced		\$69.60	\$0	Many Generics	S5601	025	EA
Alabama	CIGNA Medicare Rx	CIGNA Medicare Rx Plan Two (PDP)	Enhanced		\$63.20	\$0	Few Generics	S5617	182	EA
Alabama	CIGNA Medicare Rx	CIGNA Medicare Rx Plan One (PDP)	Basic	•	\$32.60	\$310	No Gap Coverage	S5617	220	AE
Alabama	RxAmerica	Advantage Star Plan by RxAmerica (PDP)	Basic	•	\$29.20	\$310	No Gap Coverage	S5644	012	AE
Alabama	Medco Medicare Prescription Plan	Medco Medicare Prescription Plan - Value (PDP)	Basic	•	\$33.40	\$310	No Gap Coverage	S5660	114	DS
Alabama	Medco Medicare Prescription Plan	Medco Medicare Prescription Plan - Choice (PDP)	Enhanced		\$62.40	\$250	Many Generics	S5660	182	EA
Alabama	First Health Part D	First Health Part D Premier Plus (PDP)	Enhanced		\$95.50	\$0	Some Generics and Some Brands	S5670	066	EA
Alabama	Health Net	Health Net Value Orange Option 2 (PDP)	Enhanced		\$71.60	\$0	No Gap Coverage	S5678	029	EA
Alabama	Health Net	Health Net Orange Option 1 (PDP)	Basic	•	\$32.20	\$310	No Gap Coverage	S5678	030	AE
Alabama	United American Insurance Company	UA Medicare Part D Prescription Drug Cov (PDP)	Basic		\$47.80	\$60	No Gap Coverage	S5755	015	BA
Alabama	First Health Part D	First Health Part D Premier (PDP)	Basic		\$42.80	\$150	No Gap Coverage	S5768	015	BA
Alabama	Universal American	Community CCRx Basic (PDP)	Basic	•	\$29.50	\$310	No Gap Coverage	S5803	081	AE
Alabama	Universal American	Community CCRx Choice (PDP)	Enhanced		\$90.00	\$0	No Gap Coverage	S5803	149	EA
Alabama	UnitedHealthcare	AARP MedicareRx Preferred (PDP)	Basic		\$39.80	\$0	No Gap Coverage	S5820	011	BA
Alabama	Humana Insurance Company	Humana Enhanced (PDP)	Enhanced		\$46.40	\$0	Few Generics	S5884	001	EA
Alabama	Humana Insurance Company	Humana Complete (PDP)	Enhanced		\$110.00	\$0	Many Generics and Some Brands	S5884	040	EA
Alabama	Humana Insurance Company	Humana Walmart-Preferred Rx Plan (PDP)	Basic	•	\$14.80	\$310	No Gap Coverage	S5884	106	BA
Alabama	UnitedHealthcare	AARP MedicareRx Enhanced (PDP)	Enhanced		\$96.10	\$0	Some Generics	S5921	153	EA
Alabama	HealthSpring Prescription Drug Plan	HealthSpring Prescription Drug Plan -Reg12 (PDP)	Basic	•	\$31.70	\$310	No Gap Coverage	S5932	001	DS
Alabama	UniCare	MedicareRx Rewards Standard (PDP)	Basic		\$43.80	\$310	No Gap Coverage	S5960	118	AE
Alabama	UniCare	MedicareRx Rewards Plus (PDP)	Enhanced		\$47.60	\$0	Some Generics	S5960	148	EA
Alabama	WellCare	WellCare Signature (PDP)	Enhanced		\$61.60	\$0	No Gap Coverage	S5967	046	EA
Alabama	WellCare	WellCare Classic (PDP)	Basic	•	\$32.70	\$310	No Gap Coverage	S5967	149	AE
Alabama	Bravo Health	BravoRx (PDP)	Basic		\$34.20	\$310	No Gap Coverage	S5998	020	DS
Alabama	EnvisionRx Plus	EnvisionRxPlus Silver (PDP)	Basic	•	\$32.50	\$310	No Gap Coverage	S7694	012	DS
Alabama	EnvisionRx Plus	EnvisionRxPlus Gold (PDP)	Enhanced		\$85.90	\$150	Many Generics	S7694	046	EA