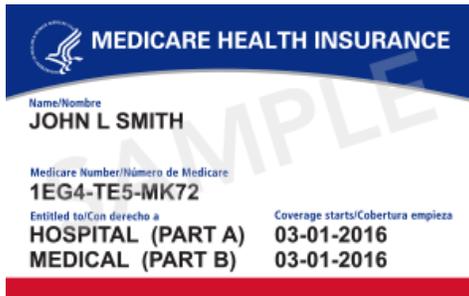


## Step by Step Instructions

1. Locate your Medicare card if you have one and a list of any *prescription* medications you may take.

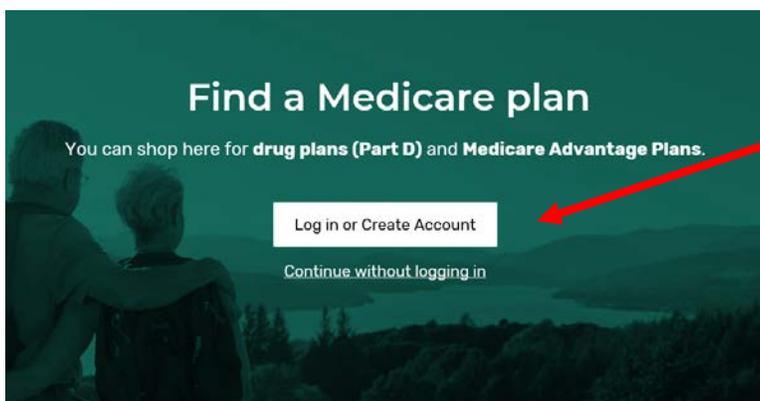


Prescription drug list:  
-Name of drug  
-Dosage  
-Quantity  
-Frequency of Refill

2. Go to [www.medicare.gov](http://www.medicare.gov) and click on the box labeled “Find Plans.”



3. For a Personalized search, enter your MyMedicare.gov username & password or follow the prompts to create an account. You can click “Trouble Logging In” to recover your username, password, or verify if you have an existing account. If you get locked out or can’t recover your account, you may call 1-800-MEDICARE. If you gave permission to the ADRC to store your username and password, you can call 715-726-7777 to retrieve your account information. We don’t encourage “Continue without logging in” because none of the information you enter, including your drugs, can be saved.



Write down your myMedicare.gov account information here!

Username: \_\_\_\_\_

Password: \_\_\_\_\_

Secret answer: \_\_\_\_\_

4. You will be brought to a screen “Answer a few quick questions”. Indicate what type of Medicare coverage you want to search for. Generally, we use this tool for information on Medicare Advantage Plans or Drug Plans (Part D). It is importance to understand the difference between your options before you proceed.

Medicare Advantage Plans or Medicare Part C Plans are one type of Medicare health plan offered through private insurance companies that contract with Medicare. A Medicare Advantage Plan bundles hospital, medical and usually drug coverage into one plan. With these types of plans you generally have to stay within a provider network and you will have copays for medical services. You must have Medicare Part A & B to join a Medicare Advantage Plan.

Drug Plan (Part D) is prescription coverage offered by private insurance companies approved and regulated by CMS. This type of coverage is for prescription drugs only and does not cover health or medical expenses. Each plan has different premiums, deductibles, benefits and pharmacy network

## Answer a few quick questions

### What type of 2020 Medicare coverage do you want?

You must have Medicare before you can enroll in a Medicare Advantage Plan or Drug plan (Part D). Outside Open Enrollment (October 15 - December 7) you can enroll only during specific times, like your Initial Enrollment Period or a Special Enrollment Period. [Learn more about when you can enroll.](#)

- I want to learn more about Medicare options before I see plans
- Medicare Advantage Plan
- Drug plan (Part D)
- Drug plan (Part D) + Medigap policy
- Medigap policy only

5. Enter your zip code if requested and click on your County of residence if prompted. Click “Next”.

6. Answer “Yes” when asked if you want to see your drug costs when you compare plans. Specify how you normally fill your prescriptions. Click “Next”.

(If you are age 65 or better and do not take prescription drugs, you may want to look into Wisconsin’s SeniorCare program. To learn more about SeniorCare, visit <https://www.dhs.wisconsin.gov/seniorcare/index.htm> or call 1-800-657-2038.)

## Tell us 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

7. Begin typing in your prescription drug and select from list. Enter the dosage, quantity and frequency of the medications. Click “Add to My Drug List”. Continue adding prescriptions until all your medications are entered. Review your drug list. When you are done click “Done Adding Drugs”

**Drug list**

<b>Advair 250-50mcg/dose aerosol powder</b>	<b>Package Type</b> Dispensable pack of 60 aerosol powders	<b>Quantity</b> 1	<b>Frequency</b> Every month
<a href="#">Remove drug</a>			<a href="#">Edit drug</a>

<b>Metoprolol succinate 25mg tablet extended release 24 hour generic</b>		<b>Quantity</b> 30	<b>Frequency</b> Every month
<a href="#">Remove drug</a>			<a href="#">Edit drug</a>

Add Another Drug

Done Adding Drugs

8. Pharmacy Selection. Select your pharmacy or up to three pharmacies if you would like to compare costs. You may find that you can save money on your medications by using a particular pharmacy. When you are finished click “Done”.

**Pharmacy selection**

Showing **10** pharmacies near **54729 Chippewa, WI** [Change location](#)

Add mail order to my pharmacies.

<p>① <b>St Josephs Hospital Chippewa Falls</b></p> <p>2661 County Trunk I Chippewa Falls, WI 54729</p> <p>(715) 723-1811</p> <input type="checkbox"/>	<p>② <b>The Medicine Shoppe Pharmacy</b></p> <p>603 North Bridge Street Chippewa Falls, WI 547292424</p> <p>(715) 723-9192</p> <input type="checkbox"/>
<p>③ <b>Ltc Rx</b></p> <p>13 E Spruce St. Suite #102 Chippewa Falls, WI 54729</p> <p>(715) 861-4422</p> <input type="checkbox"/>	<p>④ <b>Walgreens #7966</b></p> <p>849 Woodward Ave Chippewa Falls, WI 54729</p> <p>(715) 726-8540</p> <input type="checkbox"/>
<p>⑤ <b>St Joseph's Hospital</b></p> <p>2661 County Hwy I Chippewa Falls, WI 547291498</p> <p>(715) 717-7400</p> <input type="checkbox"/>	<p>⑥ <b>Marshfield Clinic Pharmacy</b></p> <p>2655 County Hwy I Chippewa Falls, WI 547291423</p> <p>(715) 726-4177</p> <input type="checkbox"/>
<p>⑦ <b>Omnicare Of Chippewa Falls</b></p> <p>2815 County Highway I Ste B Chippewa Falls, WI 54729 Ste B</p> <input type="checkbox"/>	<p>⑧ <b>Chippewa Clinic Pharmacy</b></p> <p>2509 County Highway I Chippewa Falls, WI 54729</p> <input type="checkbox"/>

9. Plans will automatically sort by “Lowest drug + premium costs” – It’s suggested to leave it that way.

Sort plans by **Lowest drug + premium cost**

Star rating: ★★★★★

**(PDP)**

Add to compare

<b>\$151.38</b> <b>Retail pharmacy</b> <b>Estimated total drug + premium cost</b> Based on the rest of the year. This price includes your monthly plan premium and estimated drug costs.	<b>\$147.81</b> <b>Mail order pharmacy</b> <b>Estimated total drug + premium cost</b> Based on the rest of the year. This price includes your monthly plan premium and estimated drug costs.
---	---

10. Look for the estimate above “Estimated total drug + premium cost”. During Open Enrollment, this price includes your monthly plan premium *and* estimated drug costs for the following year. As you scroll down, this will figure will increase in cost.

Sort plans by **Lowest drug + premium cost**

Star rating: ★★★★★

**(PDP)**

Add to compare

<b>\$151.38</b> <b>Retail pharmacy</b> <b>Estimated total drug + premium cost</b> Based on the rest of the year. This price includes your monthly plan premium and estimated drug costs.	<b>\$147.81</b> <b>Mail order pharmacy</b> <b>Estimated total drug + premium cost</b> Based on the rest of the year. This price includes your monthly plan premium and estimated drug costs.
---	---

11. If you are logged into your Medicare account and comparing plans, your current plan should show at the top of the screen. If you are not logged in, locate your current plan and compare the “Estimated total drug + premium cost” to other plans. Is there another plan that is a lower cost?

\*\*\*For those looking at Advantage plans only\*\*\* Remember, Advantage Plans bundle your hospital, medical and sometimes drug coverage. In addition to reviewing your Advantage Plan drug coverage make sure you also review the Advantage Plan health benefits including the health plan deductible, copays for medical services, provider & pharmacy network, drug costs, extra benefits such as dental & hearing, etc.

12. You can compare plans individually by clicking “Plan Details” on the left-hand side, or you can check multiple boxes (up to three at a time) to the right of the plan’s name, and at the bottom of the screen click “Compare” to view side-by-side comparisons.

13. Verify your drugs are within the quantity limits or if prior authorization or step therapy is required by the plan under “Other drug information”.



Selected drugs	Tier	Prior authorization	Quantity limits	Step therapy
Atorvastatin 40mg tablet	Tier 1		Yes	
Metformin hydrochloride 500mg tablet	Tier 1		Yes	
Prednisone 5mg tablet	Tier 2			

Prior authorization- You must get approval from a plan before you fill your prescription in order for the prescription to be covered by your plan. Your Medicare drug plan may require prior authorization for certain drugs.

Quantity Limits- A restriction used by drug plans that limits coverage of a particular drug to a specific amount. (for example, only allowing plan members 30 tablets per 30 days)

Step Therapy- A restriction placed on drug coverage which requires members try a lower-costing medication before using a more expensive drug.

14. Please keep a copy of any plan details for your records. The Medicare website is subject to revision and/or error and is not a guarantee of pricing or formulary coverage. Contact the plan directly for the most accurate information and to verify information provided on Medicare.gov.

15. You can enroll online (green button next to the left of Plan’s contact information) by calling the plan’s “Non-member” phone number or by calling 1-800-MEDICARE.

If you aren’t sure what all of the information on your plan results means please contact:

- Medicare: 1-800-633-4227 (1-800-MEDICARE open 24/7 during open enrollment)
- Medigap Helpline: 1-800-242-1060
- Part D Helpline/Over 60: 1-855-677-2783
- Part D Helpline for adults under age 60: 1-800-926-4862
- Aging and Disability Resource Center of Chippewa County: 715-726-7777