



LIST OF ILLINOIS ALF-INCLUDED MEDICARE PART D 2020 PRESCRIPTION DRUG PLANS

Enrollment Period for Assisted & Supportive Living Facilities

Assisted and Supportive Living residents may only enroll or change PDPs from October 15 to December 7 of each year for the next benefit year.

Enroll by phone or online through the plan's website. After enrolling, please follow up with the plan within 7-10 days to ensure that the application was received and is being processed. If the resident is switching from a commercial prescription plan to a Medicare Part D PDP, the plan may request proof of cancellation from the commercial prescription plan.

Below is a list of the Illinois ALF-Included Medicare Part D Prescription Drug Plans:

| PLAN NAME | COMPANY NAME | BENEFIT TYPE | ALF Included | MONTHLY PREMIUM | ANNUAL DEDUCTIBLE | Additional Coverage in the Gap | CONTRACT ID | PLAN ID |
|--|---------------------------|--------------|--------------|-----------------|-------------------|--------------------------------|-------------|---------|
| AARP MedicareRx Preferred (PDP) | UnitedHealthcare | Enhanced | Yes | \$70.90 | — | No | S5820 | 016 |
| AARP MedicareRx Saver Plus (PDP) | UnitedHealthcare | Basic | Yes | \$24.20 | \$435.00 | No | S5921 | 362 |
| AARP MedicareRx Walgreens (PDP) | UnitedHealthcare | Enhanced | Yes | \$33.40 | \$435.00 | No | S5921 | 398 |
| Blue Cross MedicareRx Basic (PDP) | Blue Cross/Blue Shield IL | Basic | Yes | \$46.20 | \$435.00 | No | S5715 | 012 |
| Blue Cross MedicareRx Plus (PDP) | Blue Cross/Blue Shield IL | Enhanced | Yes | \$135.90 | — | Yes | S5715 | 002 |
| Blue Cross MedicareRx Value (PDP) | Blue Cross/Blue Shield IL | Enhanced | Yes | \$73.60 | \$435.00 | Yes | S5715 | 001 |
| Cigna-HealthSpring Rx Secure (PDP) | Cigna | Basic | Yes | \$25.20 | \$435.00 | No | S5617 | 224 |
| Cigna-HealthSpring Rx Secure-Essential (PDP) | Cigna | Enhanced | Yes | \$22.20 | \$435.00 | No | S5617 | 296 |
| Cigna-HealthSpring Rx Secure-Extra (PDP) | Cigna | Enhanced | Yes | \$57.30 | \$100.00 | Yes | S5617 | 262 |
| Clear Spring Health Premier Rx (PDP) | Clear Spring Health | Enhanced | Yes | \$16.20 | \$435.00 | No | S6946 | 043 |
| Clear Spring Health Value Rx (PDP) | Clear Spring Health | Basic | Yes | \$24.40 | \$435.00 | No | S6946 | 014 |
| EnvisionRxPlus (PDP) | Envision Insurance | Basic | Yes | \$25.60 | \$435.00 | No | S7694 | 017 |
| Express Scripts Medicare - Choice (PDP) | Express Scripts Medicare | Enhanced | Yes | \$85.60 | \$250.00 | Yes | S5660 | 187 |
| Express Scripts Medicare - Saver (PDP) | Express Scripts Medicare | Enhanced | Yes | \$27.90 | \$435.00 | No | S5660 | 233 |
| Express Scripts Medicare - Value (PDP) | Express Scripts Medicare | Basic | Yes | \$43.30 | \$435.00 | No | S5660 | 119 |
| Mutual of Omaha Rx Plus (PDP) | Mutual of Omaha Rx | Basic | Yes | \$53.20 | \$435.00 | No | S7126 | 016 |
| Mutual of Omaha Rx Value (PDP) | Mutual of Omaha Rx | Enhanced | Yes | \$22.80 | \$435.00 | Yes | S7126 | 049 |
| SilverScript Choice (PDP) | SilverScript | Basic | Yes | \$24.90 | \$365.00 | No | S5601 | 034 |
| SilverScript Plus (PDP) | SilverScript | Enhanced | Yes | \$89.70 | — | Yes | S5601 | 035 |
| WellCare Classic (PDP) | WellCare | Basic | Yes | \$24.50 | \$435.00 | No | S4802 | 087 |
| WellCare Medicare Rx Saver (PDP) | WellCare | Basic | Yes | \$27.00 | \$435.00 | No | S5810 | 051 |
| WellCare Medicare Rx Select (PDP) | WellCare | Enhanced | Yes | \$15.50 | \$435.00 | No | S5810 | 291 |
| WellCare Medicare Rx Value Plus (PDP) | WellCare | Enhanced | Yes | \$71.70 | — | No | S5768 | 140 |
| WellCare Value Script (PDP) | WellCare | Enhanced | Yes | \$16.20 | \$435.00 | No | S4802 | 151 |
| WellCare Wellness Rx (PDP) | WellCare | Enhanced | Yes | \$13.20 | \$435.00 | No | S4802 | 186 |



LIST OF WISCONSIN ALF-INCLUDED MEDICARE PART D 2020 PRESCRIPTION DRUG PLANS

Enrollment Period for Assisted & Supportive Living Facilities

Assisted and Supportive Living residents may only enroll or change PDPs from October 15 to December 7 of each year for the next benefit year.

Enroll by phone or online through the plan's website. After enrolling, please follow up with the plan within 7-10 days to ensure that the application was received and is being processed. If the resident is switching from a commercial prescription plan to a Medicare Part D PDP, the plan may request proof of cancellation from the commercial prescription plan.

Below is a list of the Wisconsin ALF Included Medicare Part D Prescription Drug Plans:

| Plan Name | Company Name | Benefit Type | Monthly Drug Premium | Annual Drug Deductible | Additional Drug Coverage Offered in the Gap | Contract ID | Plan ID |
|--|--------------------------|--------------|----------------------|------------------------|---|-------------|---------|
| Anthem MediBlue Rx Enhanced (PDP) | Anthem MediBlue Rx (PDP) | Enhanced | \$ 19.40 | \$ 300.00 | Yes | S5596 | 080 |
| Anthem MediBlue Rx Plus (PDP) | Anthem MediBlue Rx (PDP) | Enhanced | \$ 42.30 | \$ - | Yes | S5596 | 057 |
| Anthem MediBlue Rx Standard (PDP) | Anthem MediBlue Rx (PDP) | Basic | \$ 57.20 | \$ 400.00 | No | S5596 | 056 |
| Cigna-HealthSpring Rx Secure (PDP) | Cigna | Basic | \$ 41.30 | \$ 435.00 | No | S5617 | 223 |
| Cigna-HealthSpring Rx Secure-Essential (PDP) | Cigna | Enhanced | \$ 22.10 | \$ 435.00 | No | S5617 | 295 |
| Cigna-HealthSpring Rx Secure-Extra (PDP) | Cigna | Enhanced | \$ 58.40 | \$ 100.00 | Yes | S5617 | 261 |
| Clear Spring Health Premier Rx (PDP) | Clear Spring Health | Enhanced | \$ 15.10 | \$ 435.00 | No | S6946 | 042 |
| Clear Spring Health Value Rx (PDP) | Clear Spring Health | Basic | \$ 32.20 | \$ 435.00 | No | S6946 | 013 |
| EnvisionRxPlus (PDP) | EnvisionInsurance | Basic | \$ 38.80 | \$ 435.00 | No | S7694 | 016 |
| Express Scripts Medicare - Choice (PDP) | Express Scripts Medicare | Enhanced | \$ 89.80 | \$ 250.00 | Yes | S5660 | 186 |
| Express Scripts Medicare - Saver (PDP) | Express Scripts Medicare | Enhanced | \$ 24.10 | \$ 435.00 | No | S5660 | 232 |
| Express Scripts Medicare - Value (PDP) | Express Scripts Medicare | Basic | \$ 37.00 | \$ 435.00 | No | S5660 | 118 |
| Humana Basic Rx Plan (PDP) | Humana | Basic | \$ 39.60 | \$ 435.00 | No | S5884 | 139 |
| Humana Premier Rx Plan (PDP) | Humana | Enhanced | \$ 52.30 | \$ 435.00 | No | S5884 | 162 |
| Humana Walmart Value Rx Plan (PDP) | Humana | Enhanced | \$ 13.20 | \$ 435.00 | No | S5884 | 195 |
| Mutual of Omaha Rx Plus (PDP) | Mutual of Omaha Rx | Basic | \$ 61.90 | \$ 435.00 | No | S7126 | 015 |
| Mutual of Omaha Rx Value (PDP) | Mutual of Omaha Rx | Enhanced | \$ 26.80 | \$ 435.00 | Yes | S7126 | 048 |
| SilverScript Choice (PDP) | SilverScript | Basic | \$ 39.20 | \$ 215.00 | No | S5601 | 032 |
| SilverScript Plus (PDP) | SilverScript | Enhanced | \$ 69.10 | \$ - | Yes | S5601 | 033 |
| AARP MedicareRx Preferred (PDP) | UnitedHealthcare | Enhanced | \$ 79.00 | \$ - | No | S5820 | 015 |
| AARP MedicareRx Saver Plus (PDP) | UnitedHealthcare | Basic | \$ 37.90 | \$ 435.00 | No | S5921 | 361 |
| AARP MedicareRx Walgreens (PDP) | UnitedHealthcare | Enhanced | \$ 34.20 | \$ 435.00 | No | S5921 | 397 |
| WellCare Classic (PDP) | WellCare | Basic | \$ 34.20 | \$ 435.00 | No | S4802 | 097 |
| WellCare Medicare Rx Saver (PDP) | WellCare | Basic | \$ 38.60 | \$ 435.00 | No | S5810 | 050 |
| WellCare Medicare Rx Select (PDP) | WellCare | Enhanced | \$ 22.30 | \$ 300.00 | No | S5810 | 290 |
| WellCare Medicare Rx Value Plus (PDP) | WellCare | Enhanced | \$ 72.00 | \$ - | No | S5768 | 139 |
| WellCare Value Script (PDP) | WellCare | Enhanced | \$ 15.60 | \$ 435.00 | No | S4802 | 132 |
| WellCare Wellness Rx (PDP) | WellCare | Enhanced | \$ 13.10 | \$ 435.00 | No | S4802 | 185 |
| WPS MedicareRx Plan 1 (PDP) | WPS Health Insurance | Basic | \$ 74.30 | \$ 435.00 | No | S5753 | 006 |
| WPS MedicareRx Plan 2 (PDP) | WPS Health Insurance | Enhanced | \$ 124.00 | \$ - | Yes | S5753 | 007 |