



## 2023 MEDICARE PART D STAND-ALONE PRESCRIPTION DRUG PLANS IN NEW JERSEY

Data as of November 9, 2022



Company Name	Plan Name	Benefit Type	Premium with Medicaid or LIS/Extra Help	Monthly Premium	Annual Drug Deductible	Additional Benefits in the Coverage Gap	Contract ID	Plan ID	Plan's Performance Rating*	\$0 premium with NJ PAAD	Preferred Pharmacy Chains**	Insulin Savings Program***
<b>UnitedHealthcare</b> 1-888-867-5564 aarpmedicareRx.com <i>National Plan</i>	AARP MedicareRx Walgreens	Enhanced	\$5.90	<b>\$28.20</b>	\$350 \$0 deduct for Tier 1 drugs	No Additional Gap Coverage	S5921	386	3 stars	PAAD pays the premium but does not enroll	Walgreens	
	AARP MedicareRx Saver Plus	Basic	\$0	<b>\$36.10</b>	\$505	No Additional Gap Coverage	S5921	349	3 stars	PAAD pays the premium	Walgreens, Walmart	
	AARP MedicareRx Preferred	Enhanced	\$74.30	<b>\$109.30</b>	\$0	Covers Tiers 1 & 2 in the Gap	S5820	003	3.5 stars		Walgreens, Walmart	
<b>Cigna</b> 1-800-735-1459 cignamedicareRx.com <i>National Plan</i>	<b>New</b> Cigna Saver Rx	Enhanced	\$13.80	<b>\$13.80</b>	\$505, \$0 deduct for Tier 1 & 2 drugs	No Additional Gap Coverage	S5617	354	3 stars	PAAD pays the premium but does not enroll	Rite Aid, Walgreens, Walmart	
	Cigna Extra Rx	Enhanced	\$38.50	<b>\$73.50</b>	\$100 \$0 deduct for Tiers 1, 2, 3, 6	Covers Tiers 1 & 2 in the Gap	S5617	249	3 stars		Rite Aid, Walgreens, Walmart	
	Cigna Secure Rx	Basic	\$0	<b>\$34.30</b>	\$505 \$0 deduct for Tiers 1 & 6 drugs	No Additional Gap Coverage	S5617	018	3 stars	PAAD pays the premium	Rite Aid, Walgreens, Walmart	

\* Plan's Overall Performance Rating determined by Medicare and based on 2022 performance. Rating range is 1 to 5 stars, with 5 being the highest rating.






Plans in yellow have \$0 premium for those with Medicaid, Low Income Subsidy (also known as "Extra Help"). All yellow plans are referred to as "benchmark" plans.

\*\* Plans work with many pharmacies, but offer two pricing structures: one for "standard" network pharmacies and another for "preferred" network pharmacies. You will pay the plan's standard copays at network pharmacies and reduced copays at preferred pharmacies within your plan's network. This column shows chain stores where preferred pricing is available for each plan. Many independent pharmacies and grocery store pharmacies may also offer preferred pricing for your plan. Check with your plan and/or pharmacy.

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<b>Clear Spring Health</b> 1-877-317-6082 clearspringhealthcare.com	<b>Clear Spring Health Premier Rx</b>	Enhanced	\$17.50	<b>\$20.60</b>	\$505 \$0 deduct for Tier 1 & 2 drugs	No Additional Gap Coverage	S6946	30	1.5 stars		CVS, Rite Aid, Walmart	
	<b>Clear Spring Health Value Rx</b>	Basic	\$0	<b>\$31.00</b>	\$505	No Additional Gap Coverage	S6946	001	1.5 stars	PAAD cannot pay the premium	CVS, Rite Aid, Walmart	
<b>Elixir Insurance</b> 1-888-377-1439 elixirinsurance.com <i>National Plan</i>	<b>Elixir Rx Secure</b> <i>(formerly called Elixir Secure Plus)</i>	Basic	\$26.00	<b>\$61.00</b>	\$505	No Additional Gap Coverage	S7694	004	2.5 stars		CVS, Rite Aid, Walmart	
<b>Horizon Blue Cross Blue Shield of NJ</b> 1-888-765-7134 horizonblue.com	<b>Horizon Medicare Blue Rx Saver</b>	Enhanced	\$24.50	<b>\$59.50</b>	\$450 \$0 deduct for Tier 1 & 2 drugs	No Additional Gap Coverage	S5993	007	4 stars		Walgreens	
	<b>Horizon Medicare Blue Rx Standard</b>	Basic	\$33.60	<b>\$68.60</b>	\$505	No Additional Gap Coverage	S5993	001	4 stars		Best price at all local network pharmacies. Preferred pricing for mail order.	
	<b>Horizon Medicare Blue Rx Enhanced</b>	Enhanced	\$85.50	<b>\$120.50</b>	\$0	Covers Tiers 1 & 2 in the Gap	S5993	003	4 stars			
<b>Humana Insurance</b> 1-800-706-0872 humana-medicare.com <i>National Plan</i>	<b>Humana Walmart Value Rx Plan</b>	Enhanced	\$0.90	<b>\$34.00</b>	\$505 \$0 deduct for Tier 1 & 2 drugs	No Additional Gap Coverage	S5884	183	3 stars	PAAD pays the premium but does not enroll	Walmart	
	<b>Humana Basic Rx Plan</b>	Basic	\$0	<b>\$37.00</b>	\$505	No Additional Gap Coverage	S5884	131	3 stars	PAAD pays the premium but does not enroll	Walmart	
	<b>Humana Premier Rx Plan</b>	Enhanced	\$52.30	<b>\$87.30</b>	\$300 \$0 deduct for Tiers 1 & 2 drugs	Covers Tiers 1 & 2 in the Gap	S5884	150	3 stars		Walmart	

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<b>Mutual of Omaha Rx</b> 1-800-961-9006 mutualofomaharx.com	<b>New</b> <b>Mutual of Omaha Rx Essential</b>	Enhanced	\$20.50	<b>\$21.70</b>	\$505 \$0 deduct for Tier 1	No Additional Gap Coverage	S7126	106	2 stars		CVS, Rite Aid, Walmart	
	<b>Mutual of Omaha Rx Premier</b>	Enhanced	\$55.50	<b>\$65.70</b>	\$505 \$0 deduct for Tiers 1 & 2 drugs	No Additional Gap Coverage	S7126	073	2 stars		CVS, Rite Aid, Walmart	
	<b>Mutual of Omaha Rx Plus</b>	Basic	\$54.70	<b>\$89.70</b>	\$505	No Additional Gap Coverage	S7126	003	2 stars		CVS, Rite Aid, Walmart	
<b>Aetna Medicare</b> 1-833-526-2445 aetnamedicare.com <i>National Plan</i>	<b>SilverScript Smart Saver Rx</b> <i>(formerly named Smart Rx Plan)</i>	Enhanced	\$6.80	<b>\$6.80</b>	\$505 \$0 deduct for Tier 1	No Additional Gap Coverage	S5601	179	3.5 stars	PAAD pays the premium but will not enroll	CVS, Walmart <b>(CANNOT use Walgreens)</b>	
	<b>SilverScript Choice</b>	Basic	\$0	<b>\$35.30</b>	\$505	No Additional Gap Coverage	S5601	008	3.5 stars	PAAD pays the premium	CVS, Walmart	
	<b>SilverScript Plus</b>	Enhanced	\$61.20	<b>\$76.20</b>	\$0	Covers Tiers 1 & 2 in the Gap	S5601	009	3.5 stars		CVS, Walmart	
<b>Wellcare</b> 1-866-859-9084 wellcare.com/pdp <i>National Plan</i>	<b>WellCare Value Script</b>	Enhanced	\$9.30	<b>\$9.30</b>	\$505 \$0 deduct for Tiers 1 & 2 drugs	No Additional Gap Coverage	S4802	139	3 stars	PAAD pays the premium but will not enroll	CVS, Walgreens	
	<b>WellCare Classic</b>	Basic	\$0	<b>\$33.70</b>	\$505	No Additional Gap Coverage	S4802	078	3 stars	PAAD pays the premium	CVS, Walgreens	
	<b>Wellcare Medicare Rx Value Plus</b>	Enhanced	\$47.20	<b>\$71.30</b>	\$0	No Additional Gap Coverage	S4802	207	3 stars		CVS, Walgreens	

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**For assistance in choosing a Medicare Part D Drug Plan, call the NJ State Health Insurance Assistance Program (SHIP) 1-800-792-8820 or call 1-800-Medicare.**



**\*\*\* Insulin Savings Program-** Starting 1/1/2023, all insulins covered by a Medicare plan must have a cost share of no more than \$35/month, with no deductible. However, some plans offer lower copays for certain insulins. These plans are noted on this chart with a blue circle.

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