



West Virginia

Medicare Drug Plan Ratings

This AARP rating tool contains information about “stand-alone” Medicare plans in your state that cover only prescription drugs. Each year, from November 15 to December 31, people enrolled in a Medicare drug plan may switch plans. Others who have not yet enrolled in Medicare Part D can also use this time to sign up.

You can compare Medicare drug plans using this AARP rating tool. We’ve listed all the Medicare-approved drug plans in your state along with some helpful information about each plan.

Using the Tool

The drug plans are listed in alphabetical order and are divided into three sections.

- Section One: lists plans that do not pay for any drugs in the coverage gap (also known as the donut hole).
- Section Two: lists plans that pay for only generic drugs in the coverage gap.
- Section Three: lists plans that pay for generic and some brand name drugs in the coverage gap.

(A drug plan sponsor may have one or more plans in a section.)

Note: You’ll reach the coverage gap in 2007 if your total drug costs (what you and your drug plan pay for your drugs excluding premiums) will be greater than \$2,400. If you receive Extra Help, you’ll have no coverage gap under any plan.

Go to the blue cost section of the chart. For each plan, you’ll see:

- The Monthly Premium for 2007
- The Annual Deductible for 2007

- A Total Cost Range based on the number of drugs you take.
 - You’ll need to determine which of these categories fits your drug use: low (taking 3 medications or less), medium (taking 4-5 medications), or high (taking more than 6 medications).
 - The dollar signs represent a range of total costs you could expect to pay under the plan (lowest cost plans are \$, highest cost plans are \$\$\$\$\$). A key with the range of total costs is included below.
 - Total costs include: the deductible, monthly premiums, and all other costs you will pay.
- Extra Help Pays Full Premium. You will pay no or a reduced premium for plans marked “yes” if you qualify for extra help.

Go to the orange section on drug coverage. For each plan, you’ll see:

- What percent of the 100 most commonly used drugs by people with Medicare the plan covers. Look for plans that cover the most drugs.

Important Considerations

- Before enrolling in a plan, you should check with the drug plan to make sure it covers the drugs you use.
- Remember your actual costs will vary based on the specific drugs you take and the plan you choose.
- Be sure to check with the plan to see whether its preferred pharmacies are convenient to you.

Key: Range of Cost by Beneficiary Use

Annual Cost	Low Drug Use	Medium Drug Use	High Drug Use
\$	\$545–848	\$825–1177	\$2882–3887
\$\$	\$849–955	\$1178–1306	\$3888–4037
\$\$\$	\$956–1043	\$1307–1404	\$4038–4137
\$\$\$\$	\$1044–1165	\$1406–1549	\$4138–4217
\$\$\$\$\$	\$1166–2108	\$1551–3000	\$4218–7173

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PLANS

Terms Identified following chart

PLANS	BENEFICIARY'S COST						COVERED DRUGS
	Monthly Premium	Annual Deductible	Annual Cost Ranges For			Extra Help Pays Full Premium	
			Low Drug Use	Medium Drug Use	High Drug Use		
Plans that do not pay for drugs in the coverage gap							
AARP MedicareRx Plan—Saver	\$20.80	\$265	\$\$\$\$	\$\$\$	\$\$\$	YES	98%
AARP MedicareRx Plan	\$27.40	\$0	\$	\$\$	\$\$\$\$	YES	98%
Advantage Star Plan	\$26.10	\$265	\$\$	\$\$	\$\$\$\$	NO	87%
Advantage Freedom Plan	\$31.10	\$265	\$\$	\$\$	\$\$	NO	100%
AdvantraRx Value	\$24.00	\$0	\$\$\$\$\$	\$\$\$\$\$	\$\$\$\$	NO	92%
AdvantraRx Premier	\$35.20	\$0	\$\$\$\$\$	\$\$\$\$	\$\$\$	NO	100%
Aetna Medicare Rx Essentials	\$28.50	\$220	\$\$\$	\$\$\$\$	\$\$\$\$	YES*	89%
Aetna Medicare Rx Plus	\$41.80	\$0	\$\$	\$\$	\$\$\$\$\$	NO	100%
AmeriHealth Advantage Rx Option 1	\$30.30	\$265	\$	\$\$\$\$\$	\$\$	YES*	100%
AmeriHealth Rx Option I	\$42.50	\$265	\$\$\$\$\$	\$	\$\$\$	NO	94%
BlueRx Plus	\$23.20	\$0	\$	\$	\$	YES	100%
BlueRx Value	\$17.90	\$100	\$	\$	\$	YES	88%
Bravo Rx II	\$23.60	\$265	\$\$\$\$\$	\$\$\$\$\$	\$\$	YES	90%
Bravo Rx I	\$31.10	\$0	\$\$	\$\$	\$\$\$\$	NO	98%
CIGNATURE Rx Value Plan	\$19.40	\$265	\$\$\$	\$\$\$	\$\$\$	YES	100%
CIGNATURE Rx Plus Plan	\$27.20	\$0	\$\$\$	\$\$\$\$	\$\$\$\$	NO	100%
Community Care Rx BASIC	\$26.70	\$265	\$	\$	\$	YES	95%
Community Care Rx CHOICE	\$34.50	\$0	\$	\$	\$\$\$\$	NO	95%
EnvisionRxPlus Standard	\$41.00	\$265	\$\$\$\$\$	\$\$\$\$\$	\$\$\$\$\$	NO	91%
First Health Premier	\$28.80	\$0	\$\$\$\$	\$\$\$\$	\$\$\$\$	YES*	98%
Geisinger Health Plan Gold Rx Standard	\$21.90	\$265	\$\$\$\$\$	\$\$\$\$\$	\$\$\$\$	YES	80%
GHP Gold Rx No Deductible	\$22.80	\$0	\$\$\$\$\$	\$\$\$\$\$	\$\$\$\$\$	YES	96%
Health Net Orange Option 1	\$25.40	\$265	\$	\$\$	\$	YES	87%

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			Annual Cost Ranges For			Extra Help Pays Full Premium	
	Monthly Premium	Annual Deductible	Low Drug Use	Medium Drug Use	High Drug Use		
Plans that do not pay for drugs in the coverage gap							
Health Net Orange Option 2	\$27.90	\$0	\$	\$	\$\$	YES	100%
HealthSpring Prescription Drug Plan	\$26.30	\$265	\$	\$	\$	YES	90%
Humana PDP Standard	\$14.80	\$265	\$	\$	\$	YES	100%
Humana PDP Enhanced	\$22.90	\$0	\$	\$	\$	NO	100%
Medco YOURx PLAN	\$37.10	\$100	\$\$\$	\$\$\$\$	\$\$\$\$\$	NO	98%
MedicareRx Rewards Value	\$24.30	\$265	\$\$	\$\$	\$\$\$	YES	94%
MedicareRex Rewards Plus	\$30.80	\$0	\$\$	\$\$	\$\$\$	NO	94%
NMHC Medicare PDP Gold	\$32.30	\$0	\$\$	\$\$\$\$	\$\$\$\$\$	NO	91%
Prescription Pathway Bronze Plan	\$25.90	\$265	\$	\$	\$\$	YES	96%
Prescription Pathway Gold Plan	\$23.70	\$0	\$\$	\$\$\$	\$\$\$\$	NO	96%
SAMAScript	\$46.50	\$265	\$\$\$\$	\$\$\$	\$\$\$\$\$	NO	100%
SecureRx—Option 3	\$20.30	\$0	\$	\$	\$\$\$\$\$	YES	85%
SecureRx—Option 2	\$30.40	\$0	\$	\$\$	\$\$\$\$\$	NO	100%
SierraRx Basic	\$32.00	\$265	\$	\$	\$	NO	85%
SilverScript	\$29.30	\$265	\$\$\$\$	\$\$\$\$	\$\$\$\$	YES*	94%
SilverScript Plus	\$39.60	\$0	\$\$\$	\$\$	\$\$\$	NO	98%
Sterling Rx	\$28.90	\$100	\$\$\$	\$\$\$	\$\$\$\$	YES*	98%
UA Medicare Part D Rx Covg—Silver Plan	\$32.30	\$265	\$\$	\$	\$\$	NO	98%
UA Medicare Part D Prescription Drug Cov	\$41.80	\$0	\$\$\$\$	\$\$\$\$	\$\$\$\$\$	NO	98%
UnitedHealth Rx Basic	\$29.20	\$0	\$\$\$\$	\$\$\$	\$\$\$\$	NO	98%
UnitedHealth Rx Extended	\$41.90	\$0	\$\$	\$\$	\$\$\$\$\$	NO	98%
UPMC for Life Prescription Drug Plan	\$23.50	\$0	\$	\$\$	\$\$\$	YES	98%
WellCare Classic	\$19.90	\$265	\$\$\$\$\$	\$\$\$\$\$	\$\$	YES	83%
WellCare Signature	\$27.10	\$0	\$\$\$\$\$	\$\$\$\$\$	\$\$\$\$\$	YES	83%

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Terms Identified following chart

	BENEFICIARY'S COST						COVERED DRUGS Top 100 Drugs Used by Medicare Beneficiaries
	Annual Cost Ranges For						
	Monthly Premium	Annual Deductible	Low Drug Use	Medium Drug Use	High Drug Use	Extra Help Pays Full Premium	
Plans that pay for generic drugs in the coverage gap							
AARP MedicareRx Plan—Enhanced	\$45.80	\$0	\$\$\$	\$\$\$\$	\$\$\$\$\$	NO	98%
AdvantraRx Premier Plus	\$47.60	\$0	\$\$\$\$\$	\$\$\$\$\$	\$\$\$	NO	100%
Aetna Medicare Rx Premier	\$69.90	\$0	\$\$\$\$	\$\$\$	\$\$	NO	100%
AmeriHealth Rx Option II Enhanced	\$52.20	\$0	\$\$\$\$\$	\$\$\$\$\$	\$\$\$\$\$	NO	94%
BlueRx Complete	\$49.90	\$0	\$\$\$	\$\$	\$	NO	100%
CIGNATURE Rx Complete Plan	\$36.80	\$0	\$\$\$\$	\$\$\$\$\$	\$\$\$\$\$	NO	100%
Community Care Rx GOLD	\$40.90	\$0	\$\$	\$\$	\$\$	NO	96%
EnvisionRxPlus Gold	\$62.00	\$0	\$\$\$\$\$	\$\$\$\$	\$\$\$\$	NO	91%
First Health Select	\$40.30	\$0	\$\$\$\$\$	\$\$\$\$	\$\$\$	NO	100%
Health Net Orange Option 3	\$43.10	\$0	\$\$\$	\$\$\$	\$\$	NO	100%
Humana PDP Complete	\$79.70	\$0	\$\$\$\$\$	\$\$\$\$\$	\$\$\$\$\$	NO	100%
MedicareRx Rewards Premier	\$45.00	\$0	\$\$\$\$	\$\$\$\$	\$\$\$	NO	99%
Prescription Pathway Platinum Plan	\$45.10	\$0	\$\$\$\$	\$\$\$\$	\$\$\$	NO	100%
SecureRx—Option 1	\$44.40	\$0	\$\$	\$\$	\$\$	NO	100%
SilverScript Complete	\$46.20	\$0	\$\$\$\$	\$\$\$\$\$	\$\$\$\$	NO	94%
Sterling Rx Plus	\$57.20	\$100	\$\$\$\$	\$\$\$	\$	NO	98%
UPMC for Life PDP Enhanced	\$37.50	\$0	\$\$	\$\$	\$	NO	98%
WellCare Complete	\$46.60	\$0	\$\$\$\$\$	\$\$\$\$\$	\$\$	NO	83%
Plans that pay for generic drugs and some brand name drugs in the coverage gap							
SierraRx Plus	\$104.50	\$0	\$\$\$\$\$	\$\$\$\$\$	\$	NO	99%

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- **Monthly Premium:** The amount you pay each month to receive drug coverage
- **Annual Deductible:** The amount you must pay each year for your medicine before your plan starts to pay your costs
- **Annual Costs for Low Drug Use:** An estimate of the costs a beneficiary would pay if taking 3 medications for diabetes and hypertension
- **Annual Costs for Medium Drug Use:** An estimate of the costs a beneficiary would pay if taking 5 medications for diabetes and hypertension
- **Annual Costs for High Drug Use:** An estimate of the costs a beneficiary would pay if taking 9 medications for diabetes, hypertension, and respiratory illness
- **Coverage of Top 100 Drugs Used by Medicare Beneficiaries:** Percentage of the Top 100 most commonly used drugs by Medicare beneficiaries that are covered by the plan

* Recent guidance from CMS indicates that those Medicare beneficiaries who qualify for extra help should pay no or a reduced premium for these plans.

N/A: Information not available.

Help Is Available:

- Medicare can be reached 24/7 at 1-800-633-4227 (TTY 1-877-486-2048) or at www.medicare.gov.
- State Health Insurance Assistance Program (SHIP): Call Medicare to find a local program or go to www.shiptalk.org on the Web.
- AARP Extra Help Application Center can assist you with filing your Extra Help application before December 31, 2006. Call them at 1-800-985-6848 Monday–Friday, 9am–9pm Eastern Time.
- Social Security or your state Medicaid office can tell you whether you qualify for help with paying for prescription drugs. Call Social Security at 1-800-772-1213 (TTY 1-877-486-2048) or go to www.socialsecurity.gov/prescriptionhelp on the Web.

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