



2012

Medicare Part D Plan Guide

Prescription drug plans to meet your needs and fit your budget.



Highlights in 2012

- Earlier Annual Enrollment Period — **October 15 – December 7**
- \$2 generic drugs through the Pharmacy Saver program
- Better coverage for generics in the gap
- New drug tiers

AARP | MedicareRx Plans
insured through **UnitedHealthcare**

What is Medicare Part D and how does it work?

Medicare Part D is a government program that offers prescription drug insurance to everyone eligible for Medicare. Original Medicare Parts A and B do not include prescription drug coverage. Part D is different from Medicare Parts A and B because you're not automatically enrolled. You must enroll in a Part D plan through a private insurance company like UnitedHealthcare® or other companies contracted by Medicare.

When to enroll.



You can enroll in a Medicare Part D plan, or switch plans, only during certain times of the year. If you miss the enrollment periods, you may have to wait until the following year to enroll, or you may be subject to the Medicare late-enrollment penalty.¹

You can enroll or switch your plan:

When you turn 65 or become eligible for Medicare	This is your Initial Enrollment Period (IEP). It's your first chance to enroll in Medicare Part D. If you're turning 65, you can enroll three months before the month you turn 65, the month of your birthday, and three months after your birthday month. If you enroll before the month you turn 65, coverage starts on the first day of your birthday month. If you enroll during your birthday month or later, coverage starts on the first day of the month following the date you enroll.
October 15 – December 7	This is the Annual Enrollment Period (AEP). It's a set time during which you can enroll in, or switch, Medicare Part D plans. You can enroll October 15 to December 7 . If you enroll during the AEP, your coverage will begin on January 1, 2012.
If something changes	This requires a Special Election Period (SEP) and may happen for various reasons. For example: <ul style="list-style-type: none">• You retire and leave a health care plan through your employer or union• You move out of your current health plan's service area Contact UnitedHealthcare to learn more about these and other SEPs.

The four drug payment stages of Medicare Part D.

There are four drug payment stages to every Medicare Part D plan. In each stage, the amount you pay for your prescription drugs is different. If you're not familiar with a term used in this chart, see "Key terms to know" on the last page of this guide.

Stage	Costs	Plan Benefit
Stage 1 Annual Deductible (starts January 1)	Deductible amount. Not all plans have a deductible.	You Pay: \$0 for AARP® MedicareRx Plans, insured through UnitedHealthcare. Other companies may charge a deductible as high as \$320.
Stage 2 Initial Coverage	Up to \$2,930 in total drug costs. This does not include premiums.	You Pay: Copay or coinsurance for each covered drug. Plan Pays: The rest of the costs for each covered drug until total drug costs are reached.
Stage 3 Coverage Gap	After \$2,930 in total drug costs, up to \$4,700 in out-of-pocket costs.	You Pay: <ul style="list-style-type: none"> • 86% of the price for generic drugs • 50% of the price (plus the dispensing fee) for brand name drugs • You may pay less if your plan has better coverage in the gap Plan Pays: The rest of the costs for drugs covered by your plan during the gap. Some of these costs are also paid by drug manufacturer discounts.
Stage 4 Catastrophic Coverage	After \$4,700 in out-of-pocket costs, no limit.	You Pay: A small copay or coinsurance for each covered drug. Plan Pays: The rest of the costs for each covered drug until the end of the year. There is no limit.

Note: People with limited incomes may qualify for Extra Help in paying for their prescription drug costs. If you qualify, Medicare could pay for up to 100% of drug costs including monthly prescription drug premiums, annual deductibles and coinsurance. Additionally, those who qualify won't have a coverage gap or late-enrollment penalty.

Features of a UnitedHealthcare AARP MedicareRx Part D plan.

There are two AARP MedicareRx Plans, both with a \$0 annual deductible. The plan that's best for you will depend on which prescription drugs you take. While both plans include thousands of prescription drugs, they offer slightly different coverage. When comparing Part D plans, be sure to consider all plan costs such as the annual deductible, monthly premiums and drug copays.

	AARP MedicareRx Preferred (PDP)	AARP MedicareRx Enhanced (PDP)
At a Glance	Good value with robust drug coverage.	Best coverage with a more extensive drug list.
Annual Deductible	\$0	\$0
Drug List (Formulary)	Includes nearly all generic drugs covered by Medicare Part D and most commonly used brand name drugs.	Includes more than 95% of the drugs covered by Medicare Part D.
Coverage Gap	You would pay 50% of the price (plus dispensing fee) for brand name drugs and 86% of the price for generic drugs.	The same coverage as the AARP MedicareRx Preferred plan plus additional coverage for Tier 1 and Tier 2 drugs.
Preferred Mail Service Pharmacy	Yes	Yes
\$2 Generic Drugs	Yes, through participating Pharmacy Saver pharmacies.	Yes, through participating Pharmacy Saver pharmacies.

Learn more about the AARP MedicareRx Plans.



1-877-231-1520, TTY 711

8 a.m. – 8 p.m. local time, 7 days a week



www.AARPMedicareRxInfo.com

Thousands of prescription drugs — check to see if yours are covered.

When choosing an AARP MedicareRx Plan, it's important to find out if the drugs you take are covered and how much they would cost. Doing this is easy. Simply go to www.AARPMedicareRxInfo.com and click on the “Look up drugs” link.

The screenshot shows the AARP Medicare Plans website interface. At the top, there's a navigation bar with links for Home, Our Plans, Medicare Education, and Health & Wellness. A search bar is located at the top right. The main heading is "Look Up Prescription Drugs". Below this, a progress bar shows five steps: 1. Get Started, 2. Enter Drugs, 3. Select Generics, 4. Enter Drug Details, and 5. View Drug Costs. Step 4 is highlighted. A callout box on the right shows a search for "Cres" and a list of results: "cresol", "crestor", and "cresylate". A bottle of Metronidazole 250 mg tablets is also shown. A "Questions?" box provides contact information for UnitedHealthcare at 1-877-637-5592.

4 easy steps to check your drugs.

1. Enter the drugs you take.
2. Select generics, if available.
3. Enter your drug details.
4. View your drug costs and choose the plan that best fits your needs.

Or call UnitedHealthcare at **1-877-231-1520**, TTY 711, 8 a.m. – 8 p.m. local time, 7 days a week, and we can look up your drugs for you.

Pharmacy Saver offers hundreds of generic drugs for only \$2 a prescription.

UnitedHealthcare is always looking for ways to save our members money. We have worked with many of our network pharmacies to provide the Pharmacy Saver program. Hundreds of generic drugs now cost only \$2 for a 30-day supply. In addition to savings, Pharmacy Saver offers convenience, with many national and local pharmacies to choose from. To look up qualifying drugs, participating pharmacies and prices, go to: www.PharmacySaver.com.

PharmacySaver



Go to www.PharmacySaver.com to find a Pharmacy Saver pharmacy near you and verify your drugs are covered.

Learn more about the AARP MedicareRx Plans.



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8 a.m. – 8 p.m. local time, 7 days a week



www.AARPMedicareRxInfo.com

More ways to save.

Choose generic drugs.

Ask your doctor if any of your drugs are available as a generic. Choosing a generic drug when available can help you save money.

Use lower-tier drugs.

Prescription drugs are grouped into one of five tiers. Each tier has a different copay or coinsurance amount. If your drug is in a more expensive tier, ask your doctor if there is a drug in a lower tier that could work for you and save you money.

Tier 1 (Preferred Generic): Lowest copay. Lower-cost, commonly used generic drugs.

Tier 2 (Non-Preferred Generic): Low copay. Most generic drugs.

Tier 3 (Preferred Brand): Medium copay. Many common brand name drugs, called preferred brands, and some higher-cost generic drugs.

Tier 4 (Non-Preferred Brand): Highest copay. Non-preferred generic and non-preferred brand name drugs.

Tier 5 (Specialty Tier): Coinsurance. Unique and/or very high-cost drugs.

Order by mail.

When you use our Preferred Mail Service Pharmacy, Prescription Solutions® by OptumRx,™ you may save money as well as time and effort. All orders are delivered for free to your mailbox. Features include:

- Pay \$0 for a 90-day supply of Tier 1 maintenance medications (typically generic drugs)²
- Savings start at \$14 off your copay for a 90-day supply of Tier 2 medications (typically generic drugs) for some plans²
- Save \$15 off your copay for a 90-day supply of Tier 3 and Tier 4 medications (typically brand name drugs)²

Note: Maintenance medications are typically those drugs you take on a regular basis for a chronic or long-term condition.

After you enroll in an AARP MedicareRx Plan, you'll receive:

- **Letter** stating that your application is being reviewed by the Centers for Medicare and Medicaid Services (CMS). If you enrolled through an agent or broker, you'll get a call to answer any questions you may have and confirm you want to enroll
- **Letter** from UnitedHealthcare confirming that CMS has approved your application. The letter will include your new **member ID cards** and the date your coverage will start
- **Welcome Kit** that contains important plan information, including:
 - Guide to Plan Benefits
 - Pharmacy Directory
 - Partial Drug List (Formulary)
 - Preferred Mail Order Form
- **Explanation of Benefits** statements will be sent each month you fill a prescription drug using your plan

You may qualify for Extra Help in paying for your drugs.

You may be able to get Extra Help from Medicare to pay for your prescription drug plan deductibles, premiums and copays. You may qualify if in 2011 your income was:

- Less than \$16,335 a year if you're single
- Less than \$22,065 a year if you're married and living with your spouse

Income limits for Alaska are \$20,400 for a single person and \$27,570 for a married couple. Limits for Hawaii are \$18,810 for a single person and \$25,395 for a married couple. Income limits may change for 2012.

There's no penalty for applying for Extra Help. You may reapply every year. If you don't qualify, you can still get Medicare Part D coverage.

To see if you qualify for Extra Help, call Medicare at:

1-800-MEDICARE (1-800-633-4227)

TTY 1-877-486-2048

24 hours a day, 7 days a week

Or call the **Social Security Administration** at:

1-800-772-1213

TTY 1-800-325-0778

7 a.m. – 7 p.m., Monday – Friday

You can also call your **state Medicaid office** for more information and assistance.

Let UnitedHealthcare help you find the Medicare Part D plan that could be right for you.



1-877-231-1520, TTY 711

8 a.m. – 8 p.m. local time, 7 days a week

Se habla español.



www.AARPMedicareRxInfo.com

A UnitedHealthcare® Medicare Solution

¹If you qualify for extra help, you will not have a late-enrollment penalty (LEP). Also, if you have other prescription coverage at least as good as Medicare (also known as creditable coverage), you may not be assessed a LEP.

²Savings apply during the initial coverage period, which begins after the payment of your required deductible (if any) and ends when the total cost of your drugs (paid by UnitedHealthcare, you and others) reaches \$2,930.

³Payment options may vary based on your situation.

Drugs and prices are subject to change during the plan year. Quantities may be limited by retailer based on their dispensing policy. Other pharmacies are available in our network. Members may use any pharmacy in the network, but may not receive Pharmacy Saver pricing. Pharmacies participating in the Pharmacy Saver program may not be available in all areas.

The benefit information provided herein is a brief summary, not a comprehensive description of benefits. For more information contact the plan. You must continue to pay your Medicare Part B premium if not otherwise paid for under Medicaid or by another third party. Limitations, copayments, and restrictions may apply.

You are not required to use the plan's Preferred Mail Service Pharmacy to obtain a 90-day supply of your maintenance medications, but you may pay more out-of-pocket compared to using the Preferred Mail Service Pharmacy. Your prescriptions should arrive in about seven days from the date the completed order is received by the Mail Service Pharmacy. You will be contacted by the Preferred Mail Service Pharmacy if there will be an extended delay in the delivery of your medications.

Prescription Solutions® by OptumRx™ is an affiliate of UnitedHealthcare Insurance Company.

Plan is insured or covered by UnitedHealthcare Insurance Company or one of its affiliates, a Medicare-approved Part D sponsor.

UnitedHealthcare Insurance Company pays royalty fees to AARP for the use of its intellectual property. These fees are used for the general purposes of AARP. AARP and its affiliates are not insurers. You do not need to be an AARP member to enroll. AARP encourages you to consider your needs when selecting products and does not make specific product recommendations for individuals.

Members may enroll in the plan only during specific times of the year. Contact UnitedHealthcare for more information. You must have both Medicare Parts A and B to enroll in the plan.

You must use contracted network pharmacies to access your prescription drug benefit except under non-routine circumstances, in which case quantity limitations and restrictions may apply. You may be able to get Extra Help to pay for your prescription drug premiums and costs. To see if you qualify for Extra Help, call: 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048, 24 hours a day/ 7 days a week, or the Social Security Office at 1-800-772-1213 between 7 a.m. and 7 p.m., Monday through Friday. TTY users should call 1-800-325-0778, or your state Medicaid office.

Benefits, premium and/or copayments/coinsurance may change on January 1, 2013. Please contact UnitedHealthcare for details.

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Key terms to know.

- **Coinsurance** A percentage of a drug's total cost. You pay this amount instead of a copay
- **Copay** A set amount you pay for each prescription you fill
- **Deductible** A preset, fixed amount you pay before Medicare or other insurance starts to pay
- **Out-of-pocket costs** The amount you pay (or others pay on your behalf) for prescription drugs starting January 1, 2012, not including premiums
- **Total drug costs** The amount you and the plan and others pay for prescription drugs starting January 1, 2012. This does not include premiums

Plan features beyond prescriptions.

Both plans include thousands of covered drugs and over 65,000 participating pharmacies nationwide. They also provide the support and service you need to get the most out of your benefits.

- Customer Service is available seven days a week
- Newsletters full of healthy-living tips and money-saving ideas
- User-friendly website lets you:
 - Easily locate a pharmacy near you
 - Look up covered drugs
 - View current claims

Easy ways to pay.³

- **Automatic deduction** from your Social Security check
- **Automatic deduction** from your bank account
- **Mail in** your payment