

PREFERRED PHARMACIES 2021 (see notes below)

CUMBERLAND COUNTY Zip code 04101+25miles (Portland)

PLAN NAME	Contract ID	Plan ID	Monthly Drug Premium	Annual Drug Deductible *	Mail	Walmart	Sams	Walgreens	CVS	Hannaford	Osco	Community Pharmacy- Gorham	Apothacary by design	Nothern Light at Fore River	Portland 1 Veranda st Martins Pt.	NEW	NEW	NEW
AARP MedicareRx Preferred (PDP)	S5820	1	\$81.80	\$0		X	X	X		X								
AARP MedicareRx Saver Plus (PDP)	S5921	378	\$27.40	\$445		X	X	X		X								
AARP MedicareRx Walgreens (PDP)	S5921	384	\$36.40	\$445	*	OON	OON	X										
Anthem MediBlue Rx Enhanced (PDP)	S5596	66	\$19.60	\$350	*	X			X		X							
Anthem MediBlue Rx Plus (PDP)	S5596	1	\$60.70	\$0		X			X		X							
Anthem MediBlue Rx Standard (PDP)	S5596	46	\$57.80	\$395		X			X		X							
Cigna-HealthSpring Rx Secure (PDP)	S5617	3	\$29.30	\$445	*	X		OON	X	X	X	X	X	X				
Cigna-HealthSpring Rx Secure-Essential (PDP)	S5617	280	\$24.00	\$445	*	X		X		X	X	X		X				
Cigna-HealthSpring Rx Secure-Extra (PDP)	S5617	246	\$53.90	\$100	*	X	X	X		X	X	X		X				
Elixir RX Plus	S7694	124	\$14.30	\$445	*	X			X	X	X		X					
Elixir Secure	S7694	1	\$28.50	\$445	*	X			X	X	X		X					
Express Scripts Medicare - Choice (PDP)	S5660	172	\$65.40	\$100	*			X		OON		X		X				
Express Scripts Medicare - Saver (PDP)	S5660	218	\$25.80	\$285	*	X		OON	X	X	X	X	X	X				
Express Scripts Medicare - Value (PDP)	S5660	104	\$25.30	\$445	*	X		X		X	X	X		X				
Humana Basic Rx Plan (PDP)	S5884	101	\$27.80	\$445		X	X											
Humana Premier Rx Plan (PDP)	S5884	148	\$68.30	\$445	*	X	X											
Humana Walmart Value Rx Plan (PDP)	S5884	181	\$17.20	\$445	*	X	X											
Mutual of Omaha Premier (PDP)	S7126	71	\$23.90	\$445	*	X	X		X				X					
Mutual of Omaha Rx Plus (PDP)	S7126	1	\$99.40	\$445		X	X		X				X					
SilverScript Choice (PDP)	S5601	2	\$26.30	\$305	*	X			X		X							
SilverScript Plus (PDP)	S5601	3	\$66.80	\$0		X			X		X							
SilverScript Smart RX (PDP)	S5601	176	\$7.10	\$445	*		OON	OON	X		X	OON		OON				
WellCare Classic (PDP)	S4802	75	\$26.70	\$445				X	X	X	X							
WellCare Medicare Rx Saver (PDP)	S5810	35	\$35.50	\$445				X	X	X	X							
WellCare Medicare Rx Select (PDP)	S5810	296	\$24.70	\$445	*			X	X	X	X							
WellCare Medicare Rx Value Plus (PDP)	S5768	125	\$75.60	\$0				X	X	X	X							
WellCare Value Script (PDP)	S4802	136	\$17.20	\$445	*			X	X	X	X							
WellCare Wellness Rx (PDP)	S4802	170	\$15.20	\$445	*	X				X	X							

X = PREFERRED PHARMACY; OON = OUT OF NETWORK

*** Some plans do not apply the deductible to Tier 1 and 2 drugs and also to drugs purchased in preferred pharmacies. Call plan.**

This schedule of preferred pharmacies is for staff and volunteer only and can be used for summarizing information appearing in the Plan Finder for beneficiaries. It is NOT a complete list of all pharmacies. Certain pharmacies were selected on the basis of those preferred pharmacy appearances in 2020. Other pharmacies not listed may be in plan networks and may be Preferred by certain Plans. Changes are made from time to time to the data on the form and therefore may not always be 100% up to date. SEE PLAN DOCUMENTS FOR COMPLETE INFORMATION.