

# Navigating the ***NEW*** Medicare Plan Finder for Dual Eligibles



**Presenter: Mary McGeary**  
State Health Insurance Assistance Program  
NJ Division of Aging Services



LOCAL HELP FOR PEOPLE WITH MEDICARE

**The ARC of NJ**  
**Webinar November 14, 2019**

# Did you receive your New Medicare Card?



New Medicare numbers must be used  
for claims starting January 1, 2020

## What if you did NOT receive the new card?

- ✓ Call 1-800-Medicare to confirm your correct mailing address on file.
- ✓ Request another card be mailed to you.
- ✓ Register on [www.mymedicare.gov](http://www.mymedicare.gov) and print your card.

# What is the Medicare Plan Finder?

- ❖ Internet Tool on official Medicare web site
- ❖ Helps people learn about drug coverage and
  - Compare Part D plans & Medicare Advantage Health Plans (HMOs/PPOs)
  - Identify which plans cover your prescriptions
  - Enroll in a Part D or Medicare Advantage plan

# Getting Started: What You Will Need

- ❖ Consumer's zip code
- ❖ List of consumer's prescription drugs
  - strength and quantity
  - if can take generics
- ❖ Pharmacy consumer uses
- ❖ Does consumer have a *MyMedicare* account?
  - Will need user name and password
- ❖ Other Helpful Information
  - Medicare card with NEW Medicare number
  - Other Health Insurance cards
  - Subsidy eligibility (Medicaid, LIS, PAAD)

# 6 STEP Process

1. Enter Consumer Information
2. Enter List of Current Medications
3. Select Pharmacy
4. Compare Search Results
5. Review Plan Details
6. Enroll

# Getting to the Drug Plan Finder

❖ Go to [www.Medicare.gov](http://www.Medicare.gov)

➤ Click “Find Health and Drug Plans”

➤ Or [www.medicare.gov/plan-compare](http://www.medicare.gov/plan-compare)

➤ Or call 1-800-Medicare

➤ Customer Service Assistance for choosing a plan & enrolling

➤ Available 24 hrs a day

➤ Language Line Interpreters for 150 languages

# New Plan Finder: Things to Note

- Can access drug lists created last year
  - but must re-type list
- Cannot save new drug list if use option “*continue without logging in*”
- In order to save the drug list, you must access or create a **MyMedicare** account .
- Search will produce list of plans showing plan with lowest premium first.
  - Need to re-sort by “lowest drug + premium costs”

# Medicare.gov Homepage

The image is a screenshot of the Medicare.gov homepage. At the top, the Medicare.gov logo is displayed in green, with the tagline "The Official U.S. Government Site for Medicare" below it. To the right of the logo is a search bar with the placeholder text "type search term here" and a "Search" button. Below the logo and tagline is a horizontal row of eight dark blue navigation buttons with white text: "Sign Up / Change Plans", "Your Medicare Costs", "What Medicare Covers", "Drug Coverage (Part D)", "Supplements & Other Insurance", "Claims & Appeals", "Manage Your Health", and "Forms, Help, & Resources".

The main banner area features a large, bold headline: "2020 Open Enrollment is here - and ends Dec 7". To the right of the text is a photograph of an elderly woman with glasses, smiling and looking at a laptop. Below the headline are two dark blue buttons with white text: "Find 2020 Health & Drug Plans" and "Get Started with Medicare". An orange arrow points from the left edge of the image towards the "Find 2020 Health & Drug Plans" button.

Below the banner is a dark green horizontal bar. On the left side of this bar is the text "Get free & secure access to your Medicare info" in white. On the right side is a white button with the text "Log in / Create Account" in dark green.

At the bottom of the page is a row of four white boxes, each containing an icon, a title, and a description:

- Need a 2019 plan?**  
Find 2019 health & drug plans (Icon: Shopping bag)
- Find care**  
Search all providers & facilities (Icon: Binoculars)
- Need a procedure?**  
Compare procedure costs (Icon: Heart with pulse line)
- What's covered?**  
Check covered items & services (Icon: Medicare logo)



# Find a 2020 Medicare plan

You can shop here for **drug plans (Part D)** and **Medicare Advantage Plans**.  
See your 2020 plan options now by logging in or creating an account.

Log in

[Continue without logging in](#)

## Qualify for a Special Enrollment Period?

Log in or create account to change your 2019 coverage.

Log in

[Continue without logging in](#)

## New to Medicare?

Learn about your options & enroll in a plan.

Continue

# The **New** Medicare Plan Finder

## Prescription Drug Plan (PDP) Search and Compare from

***“continue without logging in”***

### ***Reminder***

- ***cannot save the drug list after logging out.***
- ***Print copy of drug list and top plans for your records***

# Step One

## Answer a few quick questions

What type of 2020 coverage are you looking for?

☐ Medicare Advantage Plan

☒ Drug plan (Part D)

Adds drug coverage to Original Medicare.

☐ Drug plan (Part D) + Medigap policy

☐ Medigap policy only

☐ Learn more about Medicare options before I see plans.

Enter your ZIP Code

08850

Middlesex, NJ

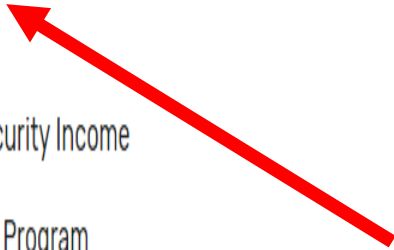
Make sure to click on name of county before clicking  
NEXT



# Answer question about “extra help” to see subsidized premiums and copays

Do you get help with your costs from one of these programs?

- ☐ Medicaid
- ☐ Supplemental Security Income
- ☐ Medicare Savings Program
- ☐ Extra Help from Social Security
- ☐ I'm not sure
- ☐ I don't get help from any of these programs



If you get help from LIS, Medicaid or SLMB, click here.

# Always check “yes” if entering drugs

## Tell us your search preferences

Do you want to see your drug costs when you compare plans?

☒ Yes

**Great!**

To see drug costs, get ready to enter the name, dosage, quantity, and frequency for each drug you take regularly.

☐ No

How do you normally fill your prescriptions?

☒ Retail pharmacy

You'll need to tell us the pharmacies you use most to get accurate drug costs.

☐ Mail order pharmacy

☐ Both

# Step Two- entering drugs

## Add your prescription drugs

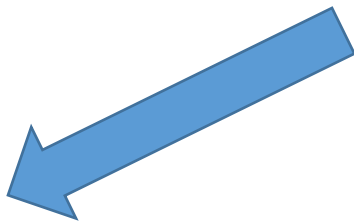
Begin typing to find & select your drug.

Add Drug

[Clear search](#)

[Browse drugs A-Z](#)

[Can't find your drug?](#)



If saved your drug list before 10/1/19, can click here and enter Drug ID #. Can print out drug list, but still need to retype into new plan finder.

[Find Your Saved Drug Lists](#)

[See Plans Without Drug Costs](#)

# Reminder to enter generic name when brand name of drug was added

## Add your prescription drugs

Begin typing to find & select your drug.

Add Drug

[Clear search](#)

[Browse drugs A-Z](#)[Can't find your drug?](#)

[See Plans Without Drug Costs](#)

### A generic is available

**Lipitor** has a lower cost generic version called **atorvastatin**.

Would you like to add **atorvastatin** to your list instead?

Add Generic

Add brand instead

FEEDBACK

**Pay attention to any letters included  
with the name of drug.  
Make sure you select the correct one.**

## **Bupropion hydrochloride**

### **Dosage**

300mg tablet extended release 24 hour

Select a dosage

75mg tablet

100mg tablet

100mg tablet extended release 12 hour

150mg tablet extended release 12 hour

150mg tablet extended release 12 hour

200mg tablet extended release 12 hour

150mg tablet extended release 24 hour

300mg tablet extended release 24 hour

450mg tablet extended release 24 hour

[About Medicare](#) | [Medicare Glossary](#)



# Confirm the drug dose

## Tell us about this drug

### Atorvastatin

#### Dosage

40mg tablet

#### Quantity

30

#### Frequency

Every month

Adjust dosage and quantity to match what you use , then click here

Add to My Drug List

# Step Three- Choose up to 3 local Pharmacies

## Pharmacy selection

Showing 10 pharmacies near **08902 Middlesex, NJ**

[Change location](#)

1

### Edward S Magaziner Md Pa

2186 New Jersey 27  
North Brunswick, NJ 08902

(732) 297-2600



2

### Walmart Pharmacy 10-2003

979 Route 1 South  
North Brunswick, NJ 08902

(732) 545-7979



3

### North Brunswick Pharmacy

1825 Route 130  
North Brunswick, NJ 08902

(732) 940-9940



4

### Aquavita Pharmacy

630 Towne Centre Dr  
North Brunswick, NJ 089021236

(732) 658-3771



5

### Cvs Pharmacy #06034

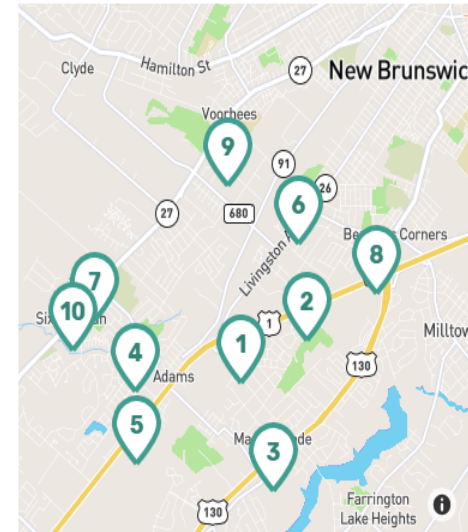
2257 Us Highway 1



6

### Cvs Pharmacy #05980

949 Livingston Avenue



Pharmacies selected

Select up to 2 more pharmacies

Done

FEEDBACK

# Search results page- shows plan by lowest premium

**i** You're previewing 2020 plans.

Starting October 15, you can enroll in 2020 plans. [Show me 2019 plans.](#)

**Medicare.gov** | Find a Plan

Log in Español

There may be Medicare Advantage Plans available with lower drug costs. [Tell me more.](#)

[View 20 available Medicare Advantage Plans](#)

## 28 Prescription Drug Plans available

Middlesex, NJ [Change location](#)

No filters selected

Showing 10 of 28 drug plans

Filter Plans



Sort plans by Lowest monthly premium

**\$0.00**

Drug plan (Part D) monthly premium

Doesn't include:  
\$135.50 Standard Part B premium

Plan Details

Enroll

UnitedHealthcare

**AARP MedicareRx Saver Plus (PDP)**

Plan ID: S5921-349-0

**\$0.00**

Drug deductible

The amount you must pay each year before your plan starts to pay for covered drugs.

PHARMACIES & PRESCRIPTION DRUGS

**3 of 3**

Retail pharmacies in-network

**\$4,154.88**

Retail pharmacy

Estimated total drug + premium cost

This price includes your monthly plan premium and estimated drug costs.

[View covered drugs in plan details](#)

Add mail order

Mail order pharmacy

Estimated total drug + premium cost

This price includes your monthly plan premium and estimated drug costs.

[View Drugs & Pharmacies](#)

Star ratings: ★★★★★

Add to compare

**\$0.00**

Drug plan (Part D) monthly premium

Doesn't include:  
\$135.50 Standard Part B premium

Plan Details

Enroll

Humana

**Humana Basic Rx Plan (PDP)**

Plan ID: S5884-131-0

**\$0.00**

Drug deductible

The amount you must pay each year before your plan starts to pay for covered drugs.

PHARMACIES & PRESCRIPTION DRUGS

**3 of 3**

Retail pharmacies in-network

**\$4,122.48**

Retail pharmacy

Estimated total drug + premium cost

This price includes your monthly plan premium and estimated drug costs.

Add mail order

Mail order pharmacy

Estimated total drug + premium cost

This price includes your monthly plan premium and estimated drug costs.

[View Drugs & Pharmacies](#)

Star ratings: ★★★★★

Add to compare

FEEDBACK

# When sorted by premium does not consider drug costs

**i** You're previewing 2020 plans.

Starting October 15, you can enroll in 2020 plans. [Show me 2019 plans.](#)

**Medicare.gov** | Find a Plan

Log in Español

There may be Medicare Advantage Plans available with lower drug costs. [Tell me more.](#)

[View 20 available Medicare Advantage Plans](#)

## 28 Prescription Drug Plans available

Middlesex, NJ [Change location](#)

No filters selected

Showing 10 of 28 drug plans

Filter Plans



Sort plans by Lowest monthly premium

**\$0.00**

Drug plan (Part D) monthly premium

Doesn't include:  
\$135.50 Standard Part B premium

Plan Details

Enroll

UnitedHealthcare

**AARP MedicareRx Saver Plus (PDP)**

Plan ID: S5921-349-0

**\$0.00**

Drug deductible

The amount you must pay each year before your plan starts to pay for covered drugs.

PHARMACIES & PRESCRIPTION DRUGS

**3 of 3**

Retail pharmacies in-network

**\$4,154.88**

Retail pharmacy

Estimated total drug + premium cost

This price includes your monthly plan premium and estimated drug costs.

[View covered drugs in plan details](#)

Star ratings: ★★★★★

■ Add to compare

Add mail order

Mail order pharmacy

Estimated total drug + premium cost

This price includes your monthly plan premium and estimated drug costs.

[View Drugs & Pharmacies](#)

**\$0.00**

Drug plan (Part D) monthly premium

Doesn't include:  
\$135.50 Standard Part B premium

Humana

**Humana Basic Rx Plan (PDP)**

Plan ID: S5884-131-0

**\$0.00**

Drug deductible

The amount you must pay each year before your plan starts to pay for covered drugs.

**\$4,122.48**

Retail pharmacy

Estimated total drug + premium cost

This price includes your monthly plan premium and estimated drug costs.

Star ratings: ★★★★★

■ Add to compare

Add mail order

Mail order pharmacy

Estimated total drug + premium cost

FEEDBACK

# Step Four: Re-sort the plans by total cost

Showing 10 of 28 drug plans

Sort plans by

- Lowest monthly premium
- Lowest yearly drug deductible
- Lowest drug + premium cost**
- Lowest monthly premium

**\$0.00**

**Drug plan (Part D) monthly premium**

Doesn't include:  
\$135.50 Standard Part B premium

Plan Details

Enroll

UnitedHealthcare

**AARP MedicareRx Saver Plus (PDP)**

Plan ID: S5921-349-0

**\$0.00**

**Drug deductible**

The amount you must pay each year before your plan starts to pay for covered drugs.

**\$4,154.88**

**Retail pharmacy**

**Estimated total drug + premium cost**

This price includes your monthly plan premium and estimated drug costs.

Add mail order

**Mail order pharmacy**

**Estimated total drug + premium cost**

This price includes your monthly plan premium and estimated drug costs.

PHARMACIES & PRESCRIPTION DRUGS

**3 of 3**

**Retail pharmacies in-network**

[View covered drugs in plan details](#)

[View Drugs & Pharmacies](#)

**\$0.00**

**Drug plan (Part D) monthly premium**

Doesn't include:  
\$135.50 Standard Part B premium

Humana

**Humana Basic Rx Plan (PDP)**

Plan ID: S5884-131-0

**\$0.00**

**Drug deductible**

The amount you must pay each year before your plan starts to pay for covered drugs.

**\$4,122.48**

**Retail pharmacy**

**Estimated total drug + premium cost**

This price includes your monthly plan premium and estimated drug costs.

Add mail order

**Mail order pharmacy**

**Estimated total drug + premium cost**

Star rating: ★★☆☆☆

[Add to compare](#)

# Results when sorted by total cost

Showing 10 of 28 drug plans

Sort plans by Lowest drug + premium cost

**\$1.70**

**Drug plan (Part D) monthly premium**

Doesn't include:  
\$135.50 Standard Part B premium

[Plan Details](#)

[Enroll](#)

UniCare

**Medicare Rx Basic (PDP)**

Plan ID: S5960-167-0

**\$0.00**

**Drug deductible**

The amount you must pay each year before your plan starts to pay for covered drugs.

PHARMACIES & PRESCRIPTION DRUGS

**3 of 3**

**Retail pharmacies in-network**

**\$87.60**

**Retail pharmacy**

**Estimated total drug + premium cost**

This price includes your monthly plan premium and estimated drug costs.

[View covered drugs in plan details](#)

Star rating: ★★★★★

[Add to compare](#)

[Add mail order](#)

**Mail order pharmacy**

**Estimated total drug + premium cost**

This price includes your monthly plan premium and estimated drug costs.

[View Drugs & Pharmacies](#)

**\$6.70**

**Drug plan (Part D) monthly premium**

Doesn't include:  
\$135.50 Standard Part B premium

Humana

**Humana Walmart Value Rx Plan (PDP)**

Plan ID: S5884-183-0

**\$0.00**

**Drug deductible**

The amount you must pay each year before your plan starts to pay for covered drugs.

**\$166.80**

**Retail pharmacy**

**Estimated total drug + premium cost**

This price includes your monthly plan premium and estimated drug costs.

Star rating: ★★★★★

[Add to compare](#)

[Add mail order](#)

**Mail order pharmacy**

**Estimated total drug + premium cost**

# Step Five – Look at Plan Details

## WALMART PHARMACY 10-2003 - Drug costs during coverage phases

✓ Preferred in-network pharmacy

Selected drugs	Retail cost	Cost after deductible	Cost in coverage gap	Cost after coverage gap
Fluticasone / salmeterol 100-50mcg/dose aerosol powder	\$114.41	\$3.60	\$3.60	\$0.00
Risperidone 4mg tablet	\$6.78	\$2.00	\$1.70	\$0.00
Monthly totals	\$121.20	\$5.60	\$5.30	\$0.00

### Estimated total drug + premium cost

You will pay **\$87.60** per year on drug + premium costs.

Based on current drug costs, it's estimated that:

- You won't enter the **coverage gap** this year

Estimated months when your costs will change.

# Scroll down on Plan Details page to look at tier and restriction information for your drugs

## Other drug information

Selected drugs	Tier	Prior authorization	Quantity limits	Step therapy
Fluticasone / salmeterol 100-50mcg/dose aerosol powder	Tier 3		Yes	
Risperidone 4mg tablet	Tier 2		Yes	

*Contact your plan for more information on quantity limits.*



# For Medicare/Medicaid consumers (Duals):

## **Look for plans that meet 3 criteria:**

1. Qualify for \$0 premium with LIS (called “benchmark plans”)
2. All of consumer’s meds are on plan’s formulary
3. No or minimum restrictions on meds (like Prior Authorization or Step Therapy)

NOTE: If cannot find \$0 premium plan to meet all above, can look at non-benchmark plans and ask if consumer can pay the premium difference

# Example of Good Plan Choice

AARP Medicare Rx Saver Plus

\$0 Premium Benchmark Plan

No PA or  
Step Therapy

All drugs on formulary

Drug Coverage Information				
SELECTED DRUGS		Restrictions		
	TIER (FORMULARY STATUS) [?]	PRIOR AUTHORIZATION [?]	QUANTITY LIMITS [?]	STEP THERAPY [?]
Advair HFA AER 45/21	Tier 3: Preferred Brand		Yes	
Risperidone TAB 1MG	Tier 2: Non-Preferred Generic			

# Example of Bad Plan Choice

- Drug Coverage Information				
SELECTED DRUGS	TIER (FORMULARY STATUS) [?]	Restrictions		
		PRIOR AUTHORIZATION [?]	QUANTITY LIMITS [?]	STEP THERAPY [?]
Lipitor TAB 10MG	NOT ON FORMULARY <sup>15</sup>			
Advair HFA AER 115/21	NOT ON FORMULARY <sup>15</sup>			
risperidone TAB 1MG	Tier: 2 <sup>3</sup>	Yes	Yes	

<sup>3</sup> This drug may be subject to prior authorization, step therapy or quantity limits. View plan details or contact the plan **restriction**

<sup>15</sup> Any amount you spend for a non-formulary drug is not counted towards the deductible, initial coverage limit or out-of-pocket costs UNLESS the plan approves a formulary exception. If an exception is approved, the non-formulary drug will be covered at Tier 1. The drug cost displayed is only estimate and actual cost may vary. Please contact the plan for more information.

# Plan Star Ratings on bottom of Plan Details Page

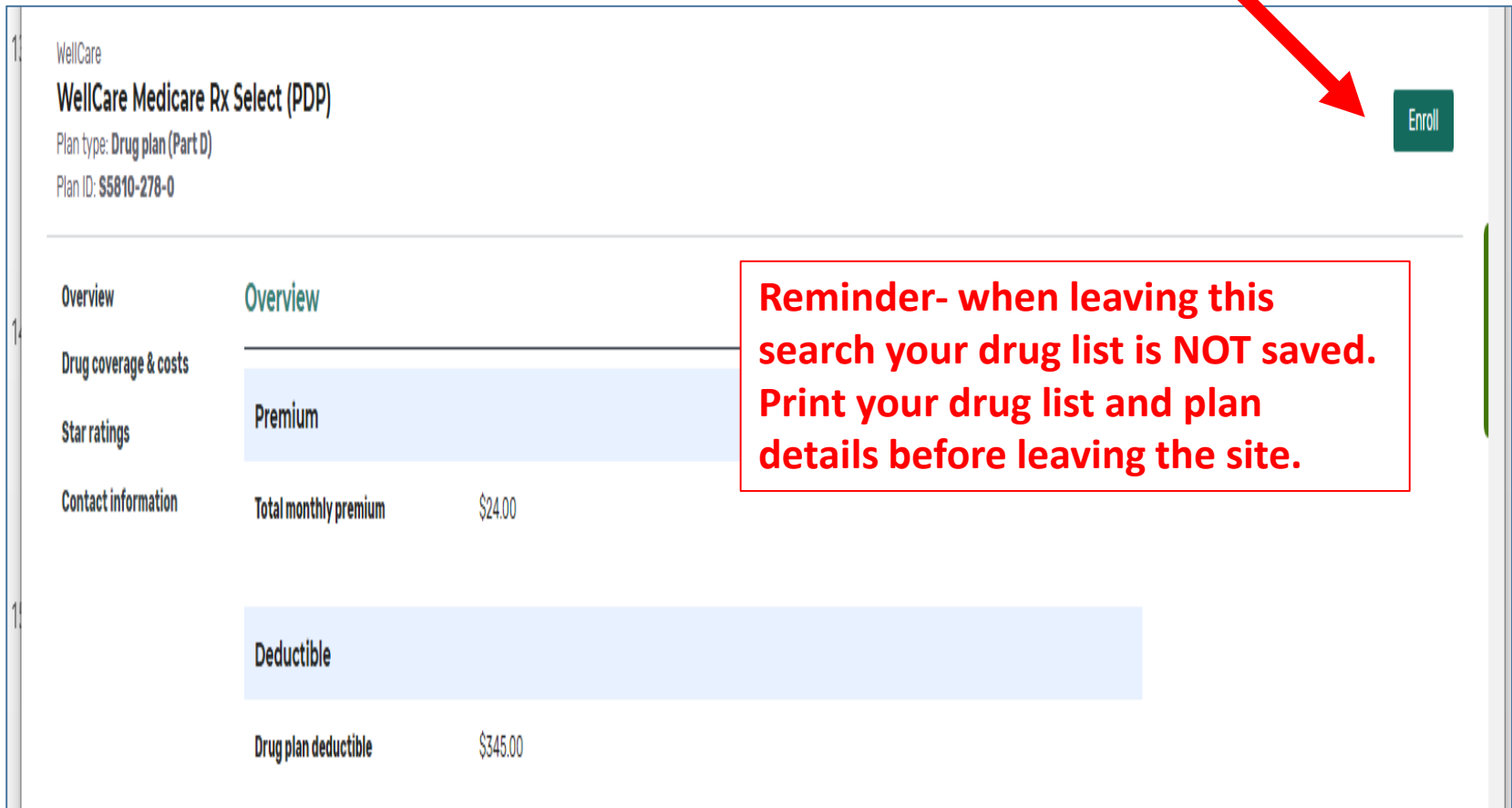
- Rating of One to Five Stars
- Based on Medicare Audits and Member Surveys
- Look at Customer Satisfaction, Complaints, Experiences, Pricing

## Star ratings

<b>Overall star rating ^</b> Overall rating is based on the categories below.		★★★★☆
<b>- Drug plan (Part D) star rating</b>		
<b>Summary rating of drug plan quality</b>		★★★★☆
<b>+ Drug plan customer service</b>		Not enough data available
<b>+ Member complaints &amp; changes in the drug plan's performance</b>		★★★★☆
<b>+ Member experience with the drug plan</b>		★★★★☆
<b>+ Drug safety &amp; accuracy of drug pricing</b>		★★★★☆

Plan Ratings	
Excellent	★★★★★
Above Average	★★★★☆
Average	★★★☆☆
Below Average	★★☆☆☆
Poor	★☆☆☆☆

# Step Six: When find plan you like click “Enroll”



WellCare  
**WellCare Medicare Rx Select (PDP)**  
Plan type: Drug plan (Part D)  
Plan ID: S5810-278-0

**Enroll**

**Reminder- when leaving this search your drug list is NOT saved. Print your drug list and plan details before leaving the site.**

Overview	Overview	
Drug coverage & costs	Premium	
Star ratings		
Contact information	Total monthly premium	\$24.00
	Deductible	
	Drug plan deductible	\$345.00

# How to Enroll

- By Phone
  - 1 (800) Medicare
  - Call Plan Directly
- By Internet
  - [www.medicare.gov](http://www.medicare.gov)
  - Plan's website

## IMPORTANT:

- Get enrollment confirmation
- Advise not to pay premium by automatic deduction from Social Security check

# What if a new prescription later is not covered by the plan you choose?

1. You and your doctor should work with the plan
  - **Switch** to similar drug that is on the formulary
2. If you cannot switch drugs:
  - Your doctor can request an **Exception** to have it covered
3. If plan denies your exception request can **Appeal; OR**
4. **Change** to Plan that covers your drugs  
Reminder- limited to one change each calendar quarter.

**My Medicare  
Account Log In  
(Or Creation of account)**



# Find a 2020 Medicare plan

You can shop here for **drug plans (Part D)** and **Medicare Advantage Plans**.  
See your 2020 plan options now by logging in or creating an account.



Log in

[Continue without logging in](#)

## Qualify for a Special Enrollment Period?

Log in or create account to change your 2019 coverage.

Log in

[Continue without logging in](#)

## New to Medicare?

Learn about your options & enroll in a plan.

Continue

# Log in to your account

USERNAME

PASSWORD

[Log In](#)[Trouble signing in?](#)

By accessing this system, you agree to our Terms and Conditions. [Read more +](#)

## Need an account?

Create an account for a more personalized experience.

[Create An Account](#)

7 Comments



# Create an account

All fields are required.

## MEDICARE NUMBER

[Where can I find my Medicare Number?](#)

## LAST NAME

## SUFFIX

Select one ▼

## EMAIL ADDRESS (IF YOU HAVE ONE)

## CONFIRM EMAIL ADDRESS

☐ I don't have an email address

## DATE OF BIRTH

For example: 07 05 1970

Month    Day    Year

### DATE OF BIRTH

For example: 07 05 1970

Month

Day

Year

01

01

1944

### ZIP CODE OR CITY

### EFFECTIVE DATE FOR HOSPITAL (PART A)

[Where can I find my Part A effective date?](#)

Month



Year



[Don't have Part A?](#)

Continue

Cancel

# Create an account

All fields are required unless marked as optional.

USERNAME

SECRET QUESTION

SECRET ANSWER

PASSWORD

CONFIRM PASSWORD

Continue

Cancel

## Password Creation Guidelines

- Must be 8 to 16 characters long
- Must contain at least one letter
- Must contain at least one number
- Must also contain one or more of the following special characters: @ ! \$ % ^ \* ( )
- Must be different from the previous six (6) passwords
- Cannot contain your username
- Cannot contain your Medicare Number or SSN

**EXAMPLE OF ACCEPTABLE  
PASSWORD: Mydruglist(2019)**

# Create an account

All fields are required unless marked as optional.

USERNAME

SECRET QUESTION



SECRET ANSWER

PASSWORD

CONFIRM PASSWORD

Create answers to  
“secret questions”

# Log in to your account



You successfully created an account.

You can start using your account now. You'll also get a confirmation letter in the mail within 10-14 days to the address on file with Social Security. If you're not sure which address is on file, contact [Social Security](#).

USERNAME

PASSWORD

Log In

[Trouble signing in?](#)

By accessing this system, you agree to our Terms and Conditions. [Read more](#)

## Need an account?

Create an account for a more personalized experience.

Create An Account

# Answer a few quick questions

## Jane Doe

**Current coverage:** Kaiser Permanente Medicare Advantage Value (HMO)

Plan ID: H2172-006-0

Effective: 01/07/18

**Part A coverage starts:** 02/01/17

**Part B coverage starts:** 02/01/17

**Current subsidy:** Dual Eligible

***MyMedicare***  
account will  
confirm your  
current coverage  
and subsidy level

## What type of 2020 coverage are you looking for?

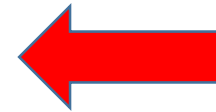
- ☐ Medicare Advantage Plan
- ☐ Drug plan (Part D)
- ☐ Drug plan (Part D) + Medigap policy
- ☐ Medigap policy
- ☐ I'm not sure. Learn more about Medicare coverage options.



# Add your prescription drugs

## Select your drugs from your recent prescriptions

This information is pulled from your Medicare prescription drug claims from the last year.



☐ Kapvay 0.1mg

☐ lisinopril (Zestoretic) 20mg

☐ Microzide 25mg

☐ Norvasc 10mg

☐ Simvastatin 20mg

☐ Synthroid 50mcg

Review drugs and edit if needed

# Confirm your dosage & quantity

## Kapvay

### Dosage

### Quantity


---

## Microzide

### Dosage

### Quantity

---



Add to My Drug List

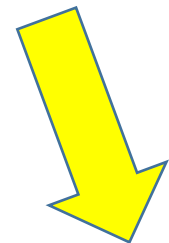
# Confirm your drug list

## Drug list

<b>Kapvay 0.1mg</b> brand	<b>Quantity</b> 60	<b>Frequency</b> Every 1 month
<a href="#">Remove drug</a>		<a href="#">Edit drug</a>

<b>Microzide 25mg</b> brand	<b>Quantity</b> 60	<b>Frequency</b> Every 1 month
<a href="#">Remove drug</a>		<a href="#">Edit drug</a>

Proceed with plan comparison. Your updated drug list is now saved in your MyMedicare account.



Add More Drugs

Continue

2 drugs have been added to your drug list.

Add Another Drug

Done

# Other benefits of *MyMedicare* Account

When log from [www.mymedicare.gov](http://www.mymedicare.gov)

1. Confirm Medicare coverage
2. View secondary insurance (like Medicaid or employer plan)
3. Print your Medicare Card
4. View Part A and Part B medical claims processed by Medicare
5. Appoint or update authorized rep

The screenshot shows the MyMedicare Account dashboard. The top navigation bar is dark green. Below it, the main content area is divided into two columns. The left column is titled 'My information' and contains a box for 'Current plan' (Humana Preferred Rx Plan (PDP) (S5884 - 104)) and 'Coverage starts' (Part A: 06/01/2019, Part B: 06/01/2019). The right column is titled 'My messages' and contains a box for 'Get your Medicare Summary Notices (MSNs) electronically' and 'Unread messages' (6). Below these columns is a section titled 'What do you want to do?' with five tiles: 'Update/print my drugs', 'Print my Medicare card', 'Pay my premium', 'Find providers', and 'View my claims'. The bottom right corner has a tile for 'Manage my account'. Red circles with numbers 1 through 5 are overlaid on the image, pointing to the following elements: 1. 'My information' header, 2. 'Current plan' box, 3. 'Print my Medicare card' tile, 4. 'View my claims' tile, and 5. 'Manage my account' tile.

**My information**

**1**

**Current plan**  
Humana Preferred Rx Plan (PDP)  
(S5884 - 104)

**Coverage starts**  
Part A: 06/01/2019  
Part B: 06/01/2019

**2**

**View my plans & coverage**  
Find & compare 2020 plans

**My messages**

**3**

**Get your Medicare Summary Notices (MSNs) electronically**

**6** Unread messages

View All Messages Go Paperless

**What do you want to do?**

**4**

**Update/print my drugs**

**5**

**Print my Medicare card**

**Pay my premium**

**Find providers**

**View my claims**

**Manage my account**

# The **New** Medicare Plan Finder: Account Recovery

**Username and Password recovery  
on MyMedicare  
or Medicare Plan Finder**

# Find a 2020 Medicare plan

You can shop here for **drug plans (Part D)** and **Medicare Advantage Plans**.  
See your 2020 plan options now by logging in or creating an account.



Log in

[Continue without logging in](#)

## Qualify for a Special Enrollment Period?

Log in or create account to change your 2019 coverage.

Log in

[Continue without logging in](#)

## New to Medicare?

Learn about your options & enroll in a plan.

Continue

# Log in or create account

USERNAME

PASSWORD

Log in

[Trouble signing in?](#)

Using a shared or public computer? Be sure to log out and close all browser windows when you're done. This will help keep your information secure.

By accessing this system, you agree to our [Terms and Conditions](#) +.

**No account? Create one now**

Create an account for a more personalized experience.

Create Account

[Nondiscrimination/Accessibility](#) | [Privacy Policy](#) | [Privacy Setting](#) | [Linking](#)

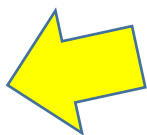


A federal government website

# Trouble logging in?

## What are you having trouble with?

- [Forgot Username](#)
- [Forgot Password](#)
- [Forgot Username and Password](#)



## Are you unsure of whether you have an account?

- [Verify Your Account Access](#)

[Return to MyMedicare.gov](#)



# Forgot username

## Step 1 of 2: Enter Your Information

All fields required.

MEDICARE NUMBER [Info](#)

[Where can I find my Medicare Number?](#)

LAST NAME


SUFFIX

None 

DATE OF BIRTH

Month 

Day 

Year 

PROVE YOU'RE NOT A ROBOT

Type the last 3 numbers of 116783?

Continue

Back

# Forgot username

## Step 2 of 2: Username Reminder

Your MyMedicare.gov user name is **MightyMouse**

Return to [MyMedicare.gov](#) to sign in.

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[About Medicare](#) | [Medicare Glossary](#)

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Medicare.gov

# Trouble logging in?

## What are you having trouble with?

- [Forgot Username](#)
  - [Forgot Password](#)
  - [Forgot Username and Password](#)
- 

## Are you unsure of whether you have an account?

- [Verify Your Account Access](#)

[Return to MyMedicare.gov](#)

# Forgot password

## Step 1 of 4: Enter Your Information


All fields required.

MEDICARE NUMBER [Info](#)

[Where can I find my Medicare Number?](#)

LAST NAME

SUFFIX

None 

DATE OF BIRTH

Month 

Day 

Year 

Username [Info](#)

PROVE YOU'RE NOT A ROBOT

Type the first and last number of 263?

Continue

Back

# Forgot password

## Step 2 of 4: Answer Secret Question

All fields required.

Secret Question [Info](#)

In what city did you first meet your spouse?

SECRET ANSWER

Continue

Cancel

Note: If you do not have or remember the correct answer, and make three (3) incorrect attempts, your account will be locked out and you will not be able to access MyMedicare.gov until you complete the registration process.

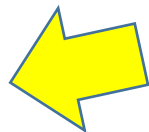
# Trouble logging in?

## What are you having trouble with?

- [Forgot Username](#)
- [Forgot Password](#)
- [Forgot Username and Password](#)

## Are you unsure of whether you have an account?

- [Verify Your Account Access](#)



[Return to MyMedicare.gov](#)

# Verify account access

## Step 1 of 2: Enter Your Information

All fields required.

MEDICARE NUMBER [Info](#)

[Where can I find my Medicare Number?](#)

LAST NAME

SUFFIX

None 

DATE OF BIRTH

Month 

Day 

Year 

PROVE YOU'RE NOT A ROBOT

Type the last 2 numbers of 9953925?

Continue

Back

# Verify account access

## Step 2 of 2: Registration Status

**You have previously enrolled in MyMedicare.gov.**

You registered on **07/11/2019**.

You were registered by **Beneficiary (Self)**.

Your MyMedicare.gov user name is **MightyMouse**

Please note your MyMedicare.gov username for your records, so that you may visit MyMedicare.gov often.

Return to [MyMedicare.gov](https://www.medicare.gov) to sign in.



# Additional Resources

- ✓ Visit Medicare's **National Training Program** webpage for *Plan Finder* and *My Medicare* video tutorials



<https://cmsnationaltrainingprogram.cms.gov/resources>

- ✓ Call your local SHIP for an appointment with a counselor: **1-800-792-8820**



# Questions?

