

2009 Medicare Health Plans in Whatcom County

* Indicates plan does not offer Part D drug coverage.

New Patients with this insurance can be seen at these clinics for primary care	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap
Interfaith	Advantra® Freedom	Advantra Freedom-Freedom 2	PFFS *	\$0.00			
Interfaith	Advantra® Freedom	Advantra Freedom-Freedom 5 Plus-GAP	PFFS	\$0.00	\$0	Enhanced	Many Generics
Interfaith	Advantra® Freedom	Advantra Freedom-Freedom 5	PFFS	\$0.00	\$0	Basic	No Gap Coverage
Interfaith	Advantra® Freedom	Advantra Freedom-Freedom 1B	PFFS *	\$140.00			
Interfaith, Seamar	Community HealthFirst Medicare Advantage Plan	Community HealthFirst Medicare Complete Rx	Local HMO	\$23.60	\$0	Basic	No Gap Coverage
Interfaith, Seamar	Community HealthFirst Medicare Advantage Plan	Community HealthFirst Medicare Complete	Local HMO *	\$26.00			
Interfaith, Seamar	Community HealthFirst Medicare Advantage Plan (Special Needs)	Community HealthFirst Medicare Complete Plus (Dual-Eligible)	Local HMO	\$31.70	\$295.00	Basic	No Gap Coverage
Center for Senior Health, Family Care Network	Essence Healthcare	Essence Advantage	Local HMO	\$0.00	\$0	Enhanced	No Gap Coverage
Center for Senior Health, Family Care Network	Essence Healthcare	Essence Advantage Plus	Local HMO	\$92.00	\$0	Enhanced	No Gap Coverage
Family Care Network	Group Health Cooperative	Group Health Clear Care Basic	Local HMO *	\$75.00			
Family Care Network	Group Health Cooperative	Group Health Clear Care Essential	Local HMO	\$168.00	\$295	Basic	No Gap Coverage
Family Care Network	Group Health Cooperative	Group Health Clear Care Optimal	Local HMO	\$225.00	\$0	Enhanced	No Gap Coverage
Center for Senior Health, Family Care Network, Interfaith	Regence BlueShield	Regence MedAdvantage + Rx Core	Local PPO	\$60.00	\$0	Enhanced	No Gap Coverage
Center for Senior Health, Family Care Network, Interfaith	Regence BlueShield	Regence MedAdvantage	Local PPO *	\$99.00			
Center for Senior Health, Family Care Network, Interfaith	Regence BlueShield	Regence MedAdvantage + Rx Classic	Local PPO	\$132.00	\$295	Basic	No Gap Coverage
Center for Senior Health, Family Care Network, Interfaith	Regence BlueShield	Regence MedAdvantage + Rx Enhanced	Local PPO	\$149.00	\$0	Enhanced	Many Generics
Interfaith	SecureHorizons by UnitedHealthcare	AARP MedicareComplete Plus	Local HMO	\$0.00	\$0	Enhanced	No Gap Coverage
Interfaith	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2	PFFS *	\$0.00			
Interfaith	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Rx Plan 53	PFFS	\$0.00	\$0	Enhanced	No Gap Coverage
Family Care Network	Sierra Health and Life Insurance Company, Inc.	Sierra Optima Choice	PFFS *	\$32.30			
Family Care Network	Sierra Health and Life Insurance Company, Inc.	Sierra Optima Choice Plus	PFFS *	\$77.70			
Interfaith, Center for Senior Health, Seamar	Sterling Life Insurance Company	Sterling Option I	PFFS *	\$25.00			
Interfaith	Unicare Life & Health Ins. Company	SecurityChoice Plus	PFFS	\$0.00	\$0	Enhanced	Many Generics

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Interfaith	Unicare Life & Health Ins. Company	SecurityChoice Classic	PFFS *	\$0.00			

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Whatcom	Advantra® Savings	Advantra Savings-Plan 2	MSA *				
Whatcom	CIGNA Medicare Access	CIGNA Medicare Access Plan One	PFFS *	\$40.00			
Whatcom	CIGNA Medicare Access	CIGNA Medicare Access Plus RX Plan Two	PFFS	\$65.00	\$0	Basic	No Gap Coverage
Whatcom	CIGNA Medicare Access	CIGNA Medicare Access Plan Three	PFFS *	\$95.00			
Whatcom	CIGNA Medicare Access	CIGNA Medicare Access Plus RX Plan Four	PFFS	\$140.00	\$0	Basic	No Gap Coverage
Whatcom	Evercare® Health Plans (Special Needs)	Evercare Plan IH (Institutional)	Local HMO	\$25.60	\$0.00	Enhanced	No Gap Coverage
Whatcom	Evercare® Health Plans (Special Needs)	Evercare Plan DH (Dual-Eligible)	Local HMO	\$25.50	\$295.00	Basic	No Gap Coverage
Whatcom	Evercare® Health Plans (Special Needs)	Evercare Plan MH (Chronic or Disabling Condition)	Local HMO	\$0.00	\$0.00	Enhanced	No Gap Coverage
Whatcom	Health Net Pearl	Health Net Pearl WA Option 3	PFFS *	\$111.00			
Whatcom	Health Net Pearl	Health Net Pearl WA Option 6 w/Drug	PFFS	\$148.00	\$0	Enhanced	No Gap Coverage
Whatcom	Humana Insurance Company	Humana Gold Choice PFFS H1804-271	PFFS	\$49.00	\$295	Basic	No Gap Coverage
Whatcom	Humana Insurance Company	Humana Gold Choice PFFS H1804-269	PFFS	\$59.00	\$0	Enhanced	Few Generics and Few Brands
Whatcom	Humana Insurance Company	Humana Gold Choice PFFS H1804-270	PFFS	\$79.00	\$0	Enhanced	Few Generics and Few Brands
Whatcom	Mennonite Mutual Aid Association	Team Care Advantage	*	\$25.00			
Whatcom	Mennonite Mutual Aid Association	Team Care Advantage Rx		\$36.00	\$100	Basic	No Gap Coverage
Whatcom	Sterling Life Insurance Company	Sterling Basic	PFFS *	\$10.00			
Whatcom	Sterling Life Insurance Company	Sterling Option II	PFFS	\$46.00	\$225	Basic	No Gap Coverage
Whatcom	Sterling Life Insurance Company	Sterling Option III	PFFS *	\$55.00			

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Whatcom	Sterling Life Insurance Company	Sterling Option IV	PFFS	\$61.00	\$225	Basic	No Gap Coverage
Whatcom	Universal American	Today's Options Value	PFFS *	\$30.00			
Whatcom	Universal American	Today's Options Value	PFFS *	\$30.00			
Whatcom	Universal American	Today's Options Value powered by CCRx	PFFS	\$51.70	\$0	Enhanced	No Gap Coverage
Whatcom	Universal American	Today's Options Value powered by CCRx	PFFS	\$51.70	\$0	Enhanced	No Gap Coverage
Whatcom	Universal American	Today's Options Premier	PFFS *	\$69.00			
Whatcom	Universal American	Today's Options Premier	PFFS *	\$69.00			
Whatcom	Universal American	Today's Options Premier powered by CCRx	PFFS	\$112.80	\$0	Enhanced	All Generics
Whatcom	Universal American	Today's Options Premier powered by CCRx	PFFS	\$112.80	\$0	Enhanced	All Generics
Whatcom	WellCare	Melody	PFFS *	\$0.00			
Whatcom	WellCare	Sonata	PFFS *	\$0.00			
Whatcom	WellCare	Concert	PFFS	\$29.00	\$0	Enhanced	No Gap Coverage
Whatcom	WellCare	Serenade	PFFS *	\$79.00			