Feasterville, Pennsylvania

HOW TO COMPARE MEDICARE PART D PLANS ONLINE

Large-Print Client Worksheet • Medicare.gov Plan Compare

Website: Medicare.gov/plan-compare

Before you begin: Have your Medicare card, prescription bottles, and preferred pharmacy information nearby. Enter every prescription accurately so Medicare can estimate your costs.

1. Gather your prescription information

Write down your medications below. Use the prescription bottle whenever possible.

Medication name	Strength	How often	Quantity / refill
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Preferred pharmacy: _____

Other pharmacy I would consider: _____

2. Go to Medicare.gov

■ Open your internet browser (Chrome, Edge, Safari, or Firefox).

■ Type **Medicare.gov/plan-compare** in the address bar and press Enter.

■ Enter your ZIP code when requested.

■ Answer the Medicare coverage questions accurately.

Important: If you have Medicare Advantage, do not enroll in a separate Part D plan without first understanding how it could affect your Medicare Advantage coverage.

3. Enter your prescriptions

■ Choose the option to compare Medicare drug plans / Part D plans.

■ Select **Add drugs** or the equivalent option.

■ Search for each medication by name and select the correct strength and form.

■ Enter the quantity and refill frequency requested by Medicare.gov.

■ Review the complete list before continuing.

4. Choose your pharmacy

■ Search for your regular pharmacy by name.

■ Select the correct location.

■ If you are willing to use another nearby pharmacy, compare that pharmacy too.

■ Check whether the pharmacy is in-network and whether it is a preferred pharmacy.

COMPARE THE RESULTS

Do not look only at the monthly premium. Review your estimated yearly cost and prescription coverage.

5. Review the plans Medicare shows you

For each plan you are seriously considering, write down the information below.

	PLAN 1	PLAN 2	PLAN 3
Insurance company			
Plan name			
Monthly premium			
Annual deductible			
Estimated annual drug cost			
Pharmacy in-network?	■ Yes ■ No	■ Yes ■ No	■ Yes ■ No
Preferred pharmacy?	■ Yes ■ No	■ Yes ■ No	■ Yes ■ No
All drugs covered?	■ Yes ■ No	■ Yes ■ No	■ Yes ■ No

6. Check your medications and coverage rules

■ Every prescription I take appears in the plan's drug list.

■ I checked the drug tier for my important medications.

■ I checked whether prior authorization is required.

■ I checked for quantity limits.

■ I checked for step-therapy or other restrictions.

■ I checked the pharmacy network and preferred-pharmacy status.

■ I reviewed the estimated annual drug cost.

7. Call the plan directly if you have questions

Write down the contact information shown on Medicare.gov for the plan you are considering.

Insurance company	_____
Plan name	_____
Plan phone number	_____
Website	_____
Plan ID (if shown)	_____

Suggested opening: “I found your Medicare Part D plan on Medicare.gov and I have questions about enrolling.”

8. Questions to ask the plan representative

- Are all of my prescriptions covered?
- What will I pay for each of my prescriptions?
- Is my pharmacy in-network and is it a preferred pharmacy?
- Does the plan have a deductible? If so, how much?
- Do any of my medications require prior authorization or have quantity limits?
- When would my coverage begin?
- How will I receive my plan ID card?
- What is the enrollment confirmation number?

ENROLLMENT & FINAL CHECKLIST

Keep this page with your Medicare paperwork.

9. If you decide to enroll

You may be able to enroll through Medicare.gov or directly with the plan. You can also call Medicare.

- Medicare.gov: Select the **Enroll** option for the plan you choose, if available.
- Call the plan using the phone number listed on Medicare.gov.
- Medicare: **1-800-MEDICARE (1-800-633-4227)**. TTY: 1-877-486-2048.

10. Record your enrollment

Plan name	_____
Insurance company	_____
Enrollment date	_____
Effective date	_____
Confirmation number	_____
Representative name	_____
Phone number	_____

11. Final checklist

- I entered ALL of my prescriptions.
- I checked the medication strength, quantity, and frequency.
- I entered my pharmacy.
- I checked that my medications are covered.
- I checked for prior authorization and quantity limits.
- I checked my pharmacy's network status.
- I compared estimated annual drug costs—not just the premium.
- I wrote down the plan's phone number.
- I recorded my enrollment confirmation number and effective date.

12. Important reminders

Do not cancel your current plan first. If you are changing Part D plans, your old coverage generally ends when the new coverage begins. If you have Medicare Advantage, employer/union coverage, Medicaid, VA coverage, or other insurance, check how a Part D change could affect that coverage before enrolling.

Use official contact information. Medicare.gov is the official Medicare website. If someone calls you unexpectedly asking for financial information, hang up and call the plan using the number listed on Medicare.gov or your plan documents.

NEED HELP?
Medicare: 1-800-MEDICARE (1-800-633-4227)
Medicare Plan Compare: Medicare.gov/plan-compare

Insurance Shops • Feasterville, Pennsylvania
This handout is for educational and comparison purposes. Medicare plan availability, costs, formularies, pharmacy networks, and enrollment rules can change. Always verify current information directly with Medicare.gov or the plan before enrolling.