

*Landscape of Plan
Options in
New Jersey*

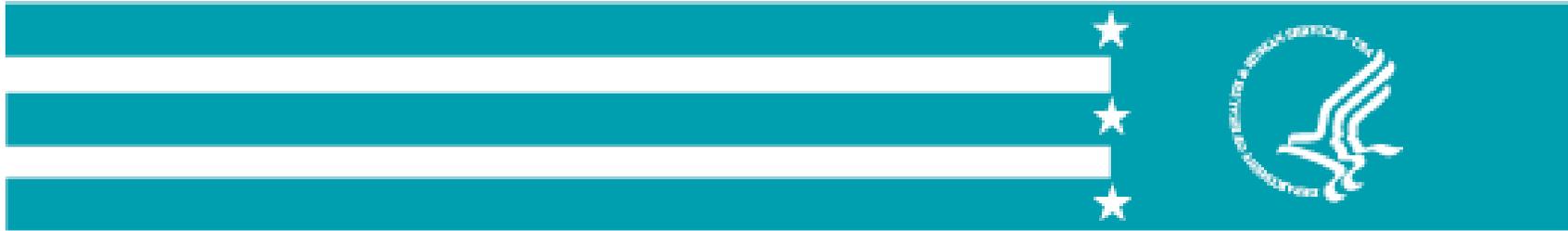
Medicare^{Rx}
Prescription Drug Coverage

**Medicare Advantage
Cost Plans and Demonstrations**

1-800-MEDICARE
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CENTERS FOR MEDICARE & MEDICAID SERVICES



Medicare Advantage, Cost Plans, and Demonstrations Landscape

What is the Landscape of Local Plans?

The Landscape of Local Plans lists all plans available in your area, providing important information on:

- Cost (premiums, deductibles and payments)
- Coverage (important issues around what and how drugs are covered)
- Convenience (pharmacy and mail-order options)

How to read the Medicare Advantage, Cost Plans, and Demonstrations Landscape

Medicare Advantage Plans (like an HMO or PPO), Cost Plans, and Demonstrations allow you to get your health care, including prescription drug coverage at a significantly lower cost through a network of doctors, hospitals, and pharmacies. To help you better understand this information, read on for a description of each column in the Landscape. **Please note**, a dash in the "Drug Premium" column means that plan does not offer prescription drug coverage.

DESCRIPTION

County: The county where the plan is available. To find a plan for you, start by finding your county.

Organization Name: The name of the company offering the Medicare drug plan. Some organizations offer more than one Medicare drug plan.

Plan Name: The name of the Medicare Advantage or other Medicare Health Plan.

Type of Medicare Health Plan

HMO: A type of health plan in which you generally must see doctors and hospitals on the plan's list (network) except in an emergency. You also need a referral to see a specialist.

Local PPO or Regional PPO: A type of health plan in which you pay less if you use doctors and hospitals on the plan's list (network). You can go to any doctor or hospital not on the plan's list, but it will usually cost more. You do not need a referral to see a specialist. A regional PPO has a larger service area than a local PPO.

Private Fee-for-Service: A type of health plan in which you can go to any doctor or hospital that accepts the terms of the plan's payment. You do not need a referral to see a specialist.

Cost Plan: A type of health plan in which you can use doctors and hospitals on the plan's list (network). However, unlike Medicare Advantage Plans, if you get services from a non-network provider, they are covered under the Original Medicare Plan. Coverage in Medicare Cost Plans can include prescription drug coverage. These plans don't provide free additional benefits or savings on your Medicare Part B or prescription drug coverage premiums. There are a limited number of Medicare Cost Plans. Some Medicare Cost Plans cannot accept new enrollment, please check with the plan for enrollment availability.

Demo Plan: These plans are special projects that test possible future improvements in Medicare coverage, costs, and quality of care.

COST

Total Premium: The total amount you would pay the plan each month for your health care and prescription drug coverage.

Drug Premium: The amount of the total premium that goes toward the drug coverage portion of the Medicare Advantage or other Medicare Health Plan. This is not an additional amount you pay. *A dash in the "Drug Premium" column means that plan does not offer prescription drug coverage.*

Drug Deductible: The amount you pay before the drug plan begins to pay.

COVERAGE

Offers Variable Copayments (tiers): In plans that offer variable copayments, you will pay a fixed amount for each drug and this fixed amount may be different depending on the type of drug. For example, you may pay a lower copayment for generic medications compared to brand medications because generic medications may be on a lower formulary level (tier) than brand medications.

Type of Extra Coverage Offered in the Gap: All plans offer coverage until you hit a limit of \$2,250 in total drug costs. And all plans offer coverage when your out-of-pocket costs exceed \$3,600. Some plans offer coverage during the gap between \$2,250 in total costs and \$3,600 in out-of-pocket costs.

Generics Only: Plan covers generic drugs in coverage gap.

Generics and Brands: Plan covers generic and brand drugs in coverage gap.

Number of Top 100 Drugs on Formulary: How many of the most commonly used 100 drugs by people with Medicare the plan covers.

CONVENIENCE

Mail Order Offered: Whether you can get your drugs in the mail.

For more information about Medicare prescription drug coverage, visit www.medicare.gov on the web.

Technical Note: Medicare Advantage, Cost Plans, and Demonstrations Landscapes are large documents (most are in excess of 50 pages). We recommend you print just the county you are specifically interested in viewing. To print a single county:

- Open the state landscape file you wish to view/print
- Select the county you want to print by scrolling to the specific county page
- Choose **File>Print**
- In the Print Range area, choose **Current Page**
- Click the **OK** button

New Jersey Medicare Advantage, Cost Plans, and Demonstrations

Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
Atlantic	Aetna Medicare	Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Bergen	Aetna Medicare	Aetna Golden Medicare Value Plan	Local HMO	\$0.00	\$0.00	\$0	•		86	•
		Aetna Golden Medicare Basic Plan	Local HMO	\$0.00	-					
		Aetna Golden Medicare Standard Plan w/Rx	Local HMO	\$30.00	\$30.00	\$0	•	G	86	•
		Aetna Golden Choice Standard Plan	Local PPO	\$60.00	\$32.25	\$250	•		86	•
		Aetna Golden Medicare Premier Plan	Local HMO	\$70.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Premier Plan	Local PPO	\$90.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Evercare Plan H	Evercare Plan H	Local HMO	\$28.56	\$28.56	\$0	•		100	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	Oxford Health Plans (NJ), Inc.	Oxford Medicare Advantage Balance	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Oxford Medicare Advantage Signature	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Oxford Medicare Advantage Essential	Local HMO	\$0.00	-					
Burlington	Aetna Medicare	Aetna Golden Medicare Basic Plan	Local HMO	\$0.00	\$0.00	\$0	•		86	•
		Aetna Golden Medicare Value Plan	Local HMO	\$0.00	-					
		Aetna Golden Medicare Standard Plan	Local HMO	\$35.00	\$35.00	\$0	•	G	86	•
		Aetna Golden Choice Value Plan	Local PPO	\$89.00	\$32.25	\$250	•		86	•
		Aetna Golden Medicare Premier Plan	Local HMO	\$99.00	\$58.95	\$0	•	G	100	•

New Jersey Medicare Advantage, Cost Plans, and Demonstrations

Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		Aetna Golden Choice Standard Plan	Local PPO	\$99.00	\$43.21	\$0	•	G	86	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
		Aetna Golden Choice Premier Plan	Local PPO	\$149.00	\$58.95	\$0	•	G	100	•
	AmeriHealth 65	AmeriHealth 65 Plus Medical Only	Local HMO	\$75.00	-					
		AmeriHealth 65 Plus Rx Option II	Local HMO	\$107.00	\$26.20	\$0	•		93	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
Camden	Aetna Medicare	Aetna Golden Medicare Basic Plan	Local HMO	\$0.00	\$0.00	\$0	•		86	•
		Aetna Golden Medicare Value Plan	Local HMO	\$0.00	-					
		Aetna Golden Medicare Standard Plan	Local HMO	\$35.00	\$35.00	\$0	•	G	86	•
		Aetna Golden Choice Value Plan	Local PPO	\$89.00	\$32.25	\$250	•		86	•
		Aetna Golden Medicare Premier Plan	Local HMO	\$99.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Standard Plan	Local PPO	\$99.00	\$43.21	\$0	•	G	86	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
		Aetna Golden Choice Premier Plan	Local PPO	\$149.00	\$58.95	\$0	•	G	100	•
	AmeriHealth 65	AmeriHealth 65 Plus Medical Only	Local HMO	\$75.00	-					
		AmeriHealth 65 Plus Rx Option II	Local HMO	\$107.00	\$26.20	\$0	•		93	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
Cape May	Aetna Medicare	Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					

New Jersey Medicare Advantage, Cost Plans, and Demonstrations

Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Cumberland	Aetna Medicare	Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	AmeriHealth 65	AmeriHealth 65 Plus Medical Only	Local HMO	\$75.00	-					
		AmeriHealth 65 Plus Rx Option II	Local HMO	\$107.00	\$26.20	\$0	•		93	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Essex	Aetna Medicare	Aetna Golden Medicare Value Plan	Local HMO	\$0.00	\$0.00	\$0	•	G	86	•
		Aetna Golden Medicare Basic Plan	Local HMO	\$0.00	-					
		Aetna Golden Medicare Standard Plan w/Rx	Local HMO	\$30.00	\$30.00	\$0	•	G	86	•
		Aetna Golden Choice Standard Plan	Local PPO	\$50.00	\$32.25	\$250	•		86	•
		Aetna Golden Medicare Premier Plan	Local HMO	\$75.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Premier Plan	Local PPO	\$90.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Evercare Plan H	Evercare Plan H	Local HMO	\$28.56	\$28.56	\$0	•		100	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	Oxford Health Plans (NJ), Inc.	Oxford Medicare Advantage Balance	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Oxford Medicare Advantage Signature	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Oxford Medicare Advantage Essential	Local HMO	\$0.00	-					
Gloucester	Aetna Medicare	Aetna Golden Medicare Basic Plan	Local HMO	\$0.00	\$0.00	\$0	•		86	•

New Jersey Medicare Advantage, Cost Plans, and Demonstrations

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County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		Aetna Golden Medicare Value Plan	Local HMO	\$0.00	-					
		Aetna Golden Medicare Standard Plan	Local HMO	\$35.00	\$35.00	\$0	•	G	86	•
		Aetna Golden Choice Value Plan	Local PPO	\$89.00	\$32.25	\$250	•		86	•
		Aetna Golden Medicare Premier Plan	Local HMO	\$99.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Standard Plan	Local PPO	\$99.00	\$43.21	\$0	•	G	86	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
		Aetna Golden Choice Premier Plan	Local PPO	\$149.00	\$58.95	\$0	•	G	100	•
	AmeriHealth 65	AmeriHealth 65 Plus Medical Only	Local HMO	\$75.00	-					
		AmeriHealth 65 Plus Rx Option II	Local HMO	\$107.00	\$26.20	\$0	•		93	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
Hudson	Aetna Medicare	Aetna Golden Medicare Value Plan	Local HMO	\$0.00	\$0.00	\$0	•	G	86	•
		Aetna Golden Medicare Basic Plan	Local HMO	\$0.00	-					
		Aetna Golden Medicare Standard Plan w/Rx	Local HMO	\$30.00	\$30.00	\$0	•	G	86	•
		Aetna Golden Choice Standard Plan	Local PPO	\$50.00	\$32.25	\$250	•		86	•
		Aetna Golden Medicare Premier Plan	Local HMO	\$75.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Premier Plan	Local PPO	\$90.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Evercare Plan H	Evercare Plan H	Local HMO	\$28.56	\$28.56	\$0	•		100	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	Oxford Health Plans (NJ), Inc.	Oxford Medicare Advantage Signature	Local HMO	\$0.00	\$0.00	\$0	•		100	•

New Jersey Medicare Advantage, Cost Plans, and Demonstrations

Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		Oxford Medicare Advantage Balance	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Oxford Medicare Advantage Essential	Local HMO	\$0.00	-					
Hunterdon	Aetna Medicare	Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	SecureHorizons Direct	SecureHorizons Direct Plan 5	PFFS	\$45.00	-					
Mercer	Aetna Medicare	Aetna Golden Medicare Basic Plan	Local HMO	\$0.00	\$0.00	\$0	•		86	•
		Aetna Golden Medicare Metro Value Plan	Local HMO	\$0.00	-					
		Aetna Golden Medicare Metro Standard Plan	Local HMO	\$35.00	\$35.00	\$0	•	G	86	•
		Aetna Golden Choice Metro Value Plan	Local PPO	\$89.00	\$32.25	\$250	•		86	•
		Aetna Golden Medicare Premier Plan	Local HMO	\$99.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Metro Standard Plan	Local PPO	\$99.00	\$43.21	\$0	•	G	86	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
		Aetna Golden Choice Premier Plan	Local PPO	\$149.00	\$58.95	\$0	•	G	100	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	Oxford Health Plans (NJ), Inc.	Oxford Medicare Advantage Balance	Local HMO	\$0.00	\$0.00	\$0	•		100	•
Middlesex	Aetna Medicare	Aetna Golden Choice Standard Plan	Local PPO	\$65.00	\$32.25	\$250	•		86	•
		Aetna Golden Choice Premier Plan	Local PPO	\$95.00	\$43.21	\$0	•	G	86	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					

New Jersey Medicare Advantage, Cost Plans, and Demonstrations

Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	Oxford Health Plans (NJ), Inc.	Oxford Medicare Advantage Balance	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Sterling Option I	PFFS	\$9.00	-					
Monmouth	Aetna Medicare	Aetna Golden Choice Standard Plan	Local PPO	\$65.00	\$32.25	\$250	•		86	•
		Aetna Golden Choice Premier Plan	Local PPO	\$95.00	\$43.21	\$0	•	G	86	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	Oxford Health Plans (NJ), Inc.	Oxford Medicare Advantage Balance	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Sterling Option I	PFFS	\$9.00	-					
	United HealthCare Insurance Company	Erickson Advantage No Rx	Demo	\$90.00	-					
		Erickson Advantage	Demo	\$132.00	\$41.81	\$0	•		100	•
Morris	Aetna Medicare	Aetna Golden Medicare Standard Plan w/Rx	Local HMO	\$50.00	\$32.25	\$250	•		86	•
		Aetna Golden Choice Standard Plan	Local PPO	\$65.00	\$32.25	\$250	•		86	•
		Aetna Golden Choice Premier Plan	Local PPO	\$95.00	\$43.21	\$0	•	G	86	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Evercare Plan H	Evercare Plan H	Local HMO	\$28.56	\$28.56	\$0	•		100	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	United HealthCare Insurance Company	Erickson Advantage No Rx	Demo	\$90.00	-					
		Erickson Advantage	Demo	\$132.00	\$41.81	\$0	•		100	•
Ocean	Aetna Medicare	Aetna Golden Medicare Value Plan	Local HMO	\$0.00	\$0.00	\$0	•	G	86	•

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		Aetna Golden Medicare Basic Plan	Local HMO	\$0.00	-					
		Aetna Golden Medicare Standard Plan w/Rx	Local HMO	\$30.00	\$30.00	\$0	•	G	86	•
		Aetna Golden Choice Standard Plan	Local PPO	\$50.00	\$32.25	\$250	•		86	•
		Aetna Golden Medicare Premier Plan	Local HMO	\$75.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Premier Plan	Local PPO	\$90.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	Oxford Health Plans (NJ), Inc.	Oxford Medicare Advantage Balance	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Oxford Medicare Advantage Signature	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Oxford Medicare Advantage Essential	Local HMO	\$0.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Passaic	Aetna Medicare	Aetna Golden Medicare Value Plan	Local HMO	\$0.00	\$0.00	\$0	•	G	86	•
		Aetna Golden Medicare Basic Plan	Local HMO	\$0.00	-					
		Aetna Golden Medicare Standard Plan w/Rx	Local HMO	\$30.00	\$30.00	\$0	•	G	86	•
		Aetna Golden Choice Standard Plan	Local PPO	\$50.00	\$32.25	\$250	•		86	•
		Aetna Golden Medicare Premier Plan	Local HMO	\$75.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Premier Plan	Local PPO	\$90.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Evercare Plan H	Evercare Plan H	Local HMO	\$28.56	\$28.56	\$0	•		100	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•

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	Oxford Health Plans (NJ), Inc.	Oxford Medicare Advantage Balance	Local HMO	\$0.00	\$0.00	\$0	•		100	•
Salem	Aetna Medicare	Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	AmeriHealth 65	AmeriHealth 65 Plus Medical Only	Local HMO	\$75.00	-					
		AmeriHealth 65 Plus Rx Option II	Local HMO	\$107.00	\$26.20	\$0	•		93	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
		Sterling Option I	PFFS	\$9.00	-					
Somerset	Aetna Medicare	Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Evercare Plan H	Evercare Plan H	Local HMO	\$28.56	\$28.56	\$0	•		100	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
Sussex	Aetna Medicare	Aetna Golden Medicare Standard Plan w/Rx	Local HMO	\$50.00	\$32.25	\$250	•		86	•
		Aetna Golden Choice Standard Plan	Local PPO	\$65.00	\$32.25	\$250	•		86	•
		Aetna Golden Choice Premier Plan	Local PPO	\$95.00	\$43.21	\$0	•	G	86	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
Union	Aetna Medicare	Aetna Golden Medicare Value Plan	Local HMO	\$0.00	\$0.00	\$0	•		86	•
		Aetna Golden Medicare Basic Plan	Local HMO	\$0.00	-					
		Aetna Golden Medicare Standard Plan w/Rx	Local HMO	\$30.00	\$30.00	\$0	•	G	86	•
		Aetna Golden Choice Standard Plan	Local PPO	\$60.00	\$32.25	\$250	•		86	•

New Jersey Medicare Advantage, Cost Plans, and Demonstrations

Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		Aetna Golden Medicare Premier Plan	Local HMO	\$70.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Premier Plan	Local PPO	\$90.00	\$58.95	\$0	•	G	100	•
		Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Evercare Plan H	Evercare Plan H	Local HMO	\$28.56	\$28.56	\$0	•		100	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•
	Oxford Health Plans (NJ), Inc.	Oxford Medicare Advantage Signature	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Oxford Medicare Advantage Balance	Local HMO	\$0.00	\$0.00	\$0	•		100	•
		Oxford Medicare Advantage Essential	Local HMO	\$0.00	-					
Warren	Aetna Medicare	Aetna Golden Choice Regional Plan	Regional PPO	\$99.00	\$32.25	\$250	•		86	•
	Horizon Healthcare of New Jersey, Inc.	Horizon Medicare Value Plus	Local HMO	\$0.00	\$0.00	\$250	•		98	•
		Horizon Medicare Blue	Local HMO	\$53.94	-					
		Horizon Medicare Blue Plus	Local HMO	\$83.58	\$29.64	\$250	•		98	•