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Georgia

2007

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Medicare Advantage Cost Plans and Demonstrations

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Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Appling	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Appling	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Appling	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Appling	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Appling	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Appling	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Appling	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Appling	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Appling	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Appling	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Appling	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Appling	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Appling	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Atkinson	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Atkinson	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Atkinson	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Atkinson	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Atkinson	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Atkinson	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Atkinson	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Atkinson	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Atkinson	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Atkinson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Atkinson	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Atkinson	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Atkinson	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Atkinson	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Bacon	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Bacon	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Bacon	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Bacon	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Bacon	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Bacon	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Bacon	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Bacon	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Bacon	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Bacon	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Bacon	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Bacon	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Bacon	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Baker	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Baker	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Baker	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Baker	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Baker	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Baker	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Baker	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Baker	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Baker	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Baker	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Baker	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Baker	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Baker	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Baldwin	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					

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Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Baldwin	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Baldwin	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Baldwin	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Baldwin	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Baldwin	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Baldwin	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Baldwin	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Baldwin	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Baldwin	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Baldwin	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Baldwin	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Baldwin	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Baldwin	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Baldwin	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Baldwin	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Baldwin	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Baldwin	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Baldwin	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Baldwin	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Baldwin	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Baldwin	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Baldwin	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Baldwin	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Banks	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Banks	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Banks	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Banks	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Banks	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Banks	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Banks	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Banks	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Banks	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Banks	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Banks	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Banks	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Banks	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Banks	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Banks	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Banks	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Banks	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Banks	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Banks	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Barrow	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Barrow	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Barrow	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Barrow	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Barrow	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Barrow	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Barrow	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Barrow	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Barrow	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Barrow	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Barrow	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Barrow	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•

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* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Barrow	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Barrow	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Barrow	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Barrow	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Barrow	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Barrow	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Barrow	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Barrow	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Barrow	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Barrow	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Barrow	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Barrow	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Bartow	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Bartow	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Bartow	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Bartow	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Bartow	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Bartow	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Bartow	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Bartow	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Bartow	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Bartow	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Bartow	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Bartow	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Bartow	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Bartow	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Bartow	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Bartow	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Bartow	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Bartow	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Bartow	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Bartow	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Bartow	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Ben Hill	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Ben Hill	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Ben Hill	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Ben Hill	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Ben Hill	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Ben Hill	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Ben Hill	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Ben Hill	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Ben Hill	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Ben Hill	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Ben Hill	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
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Ben Hill	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Ben Hill	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
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Ben Hill	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
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Berrien	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					

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Berrien	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
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Berrien	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Berrien	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Berrien	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Berrien	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Berrien	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Berrien	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Berrien	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Berrien	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Berrien	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Berrien	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Berrien	WellCare	Summit (H1340-006)	PFFS	$91.00	$0.00	$0	Enhanced		•
Bibb	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Bibb	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Bibb	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Bibb	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Bibb	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Bibb	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Bibb	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Bibb	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Bibb	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Bibb	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Bibb	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Bibb	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Bibb	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Bibb	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Bibb	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Bibb	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Bibb	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Bibb	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Bibb	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Bleckley	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Bleckley	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Bleckley	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Bleckley	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Bleckley	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Bleckley	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Bleckley	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Bleckley	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Bleckley	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Bleckley	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Bleckley	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Bleckley	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Bleckley	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Brantley	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Brantley	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Brantley	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Brantley	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Brantley	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Brantley	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Brantley	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Brantley	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Brantley	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Brantley	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Brantley	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Brantley	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Brantley	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Brantley	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Brooks	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Brooks	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Brooks	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Brooks	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Brooks	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Brooks	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Brooks	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Brooks	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Brooks	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Brooks	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Brooks	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Brooks	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Brooks	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Brooks	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Brooks	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Bryan	Advantra	Advantra Silver (H5302-003)	Local HMO	$0.00	$0.00	$0	Basic		•
Bryan	Advantra	Advantra Gold (H5302-004)	Local HMO	$58.00	$13.40	$0	Enhanced	Generics	•
Bryan	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Bryan	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Bryan	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Bryan	Arcadian Health Plan of Georgia	Southeast Community Care - Plus (H5578-002)	Local HMO	$0.00	$0.00	$0	Enhanced	Generics	•
Bryan	Arcadian Health Plan of Georgia	Southeast Community Care - Premier (H5578-003)	Local HMO	$41.00	$37.40	$0	Enhanced	Generics	•
Bryan	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-005)	Local HMO	$42.00	$22.20	$0	Enhanced		•
Bryan	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Bryan	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Bryan	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Bryan	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Bryan	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Bryan	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Bryan	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Bryan	InStil Health Insurance Company	InStil InCare (H4204-020)	PFFS *	$22.00					
Bryan	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Bryan	Instil Health Insurance Company	InStil InChoice - Option I (H4206-007)	Local PPO	$65.00	$41.30	$0	Basic		•
Bryan	Instil Health Insurance Company	InStil InChoice - Option II (H4206-008)	Local PPO	$113.00	$53.30	$0	Enhanced	Generics	•
Bryan	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Bryan	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Bryan	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Bryan	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Bryan	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Bryan	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Bryan	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Bryan	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Bryan	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Bulloch	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Bulloch	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Bulloch	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Bulloch	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Bulloch	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Bulloch	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Bulloch	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Bulloch	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Bulloch	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Bulloch	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Bulloch	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Bulloch	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Bulloch	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Bulloch	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Burke	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Burke	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Burke	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Burke	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Burke	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Burke	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Burke	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Burke	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Burke	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Burke	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Burke	Instil Health Insurance Company	InStil InChoice - Option I (H4206-005)	Local PPO	$29.00	$29.00	$0	Basic		•
Burke	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Burke	Instil Health Insurance Company	InStil InChoice - Option II (H4206-006)	Local PPO	$76.00	$53.30	$0	Enhanced	Generics	•
Burke	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Burke	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Burke	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Burke	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Burke	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Burke	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Burke	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Burke	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Burke	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Burke	WellCare	Freedom (H1340-012)	PFFS	$0.00	$0.00	$0	Enhanced		•
Burke	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Burke	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Butts	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Butts	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Butts	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Butts	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Butts	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Butts	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Butts	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Butts	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Butts	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Butts	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Butts	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

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County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Butts	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Butts	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Butts	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Butts	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Butts	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Butts	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Butts	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Butts	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Butts	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Butts	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Calhoun	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Calhoun	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Calhoun	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Calhoun	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Calhoun	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Calhoun	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Calhoun	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Calhoun	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Calhoun	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Calhoun	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Calhoun	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Calhoun	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Calhoun	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Calhoun	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Camden	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Camden	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Camden	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Camden	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Camden	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Camden	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Camden	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Camden	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Camden	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Camden	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Camden	InStil Health Insurance Company	InStil InCare (H4204-020)	PFFS *	$22.00					
Camden	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Camden	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Camden	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Camden	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Camden	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Camden	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Camden	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Camden	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Camden	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Camden	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Camden	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Camden	WellCare	Summit (H1340-008)	PFFS	$140.90	$16.20	$0	Enhanced		•
Candler	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Candler	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Candler	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Candler	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Candler	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Candler	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Candler	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Candler	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Candler	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Candler	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Candler	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Candler	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Candler	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Candler	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Candler	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Candler	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Candler	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Candler	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Candler	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Candler	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Candler	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Candler	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Candler	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Carroll	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Carroll	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Carroll	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Carroll	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Carroll	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Carroll	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Carroll	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Carroll	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Carroll	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Carroll	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Carroll	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Carroll	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Carroll	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Carroll	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Carroll	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Carroll	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Carroll	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Carroll	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Carroll	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Carroll	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Carroll	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Carroll	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Carroll	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Catoosa	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Catoosa	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Catoosa	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Catoosa	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Catoosa	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Catoosa	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Catoosa	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Catoosa	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Catoosa	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Catoosa	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Catoosa	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Catoosa	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Catoosa	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Catoosa	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Catoosa	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Catoosa	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Catoosa	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Catoosa	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Catoosa	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Catoosa	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Catoosa	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Charlton	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Charlton	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Charlton	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Charlton	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Charlton	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Charlton	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Charlton	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Charlton	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Charlton	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Charlton	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Charlton	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Charlton	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Charlton	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Charlton	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Charlton	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Chatham	Advantra	Advantra Silver (H5302-003)	Local HMO	$0.00	$0.00	$0	Basic		•
Chatham	Advantra	Advantra Gold (H5302-004)	Local HMO	$58.00	$13.40	$0	Enhanced	Generics	•
Chatham	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Chatham	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Chatham	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	$0.00	$0.00	$0	Basic		•
Chatham	Arcadian Health Plan of Georgia	Southeast Community Care - Plus (H5578-002)	Local HMO	$0.00	$0.00	$0	Enhanced	Generics	•
Chatham	Arcadian Health Plan of Georgia	Southeast Community Care - Premier (H5578-003)	Local HMO	$41.00	$37.40	$0	Enhanced	Generics	•
Chatham	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-005)	Local HMO	$42.00	$22.20	$0	Enhanced		•
Chatham	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Chatham	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Chatham	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Chatham	InStil Health Insurance Company	InStil InCare (H4204-020)	PFFS *	$22.00					
Chatham	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Chatham	Instil Health Insurance Company	InStil InChoice - Option I (H4206-007)	Local PPO	$65.00	$41.30	$0	Basic		•
Chatham	Instil Health Insurance Company	InStil InChoice - Option II (H4206-008)	Local PPO	$113.00	$53.30	$0	Enhanced	Generics	•
Chatham	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Chatham	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Chatham	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Chatham	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Chatham	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Chatham	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Chatham	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Chatham	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Chatham	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Chatham	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Chatham	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Chatham	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Chatham	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Chattahoochee	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Chattahoochee	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Chattahoochee	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Chattahoochee	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

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* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Chattahoochee	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Chattahoochee	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Chattahoochee	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Chattahoochee	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Chattahoochee	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Chattahoochee	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Chattahoochee	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Chattahoochee	Instil Health Insurance Company	InStil InChoice - Option I (H4206-009)	Local PPO	$0.00	$0.00	$0	Basic		•
Chattahoochee	Instil Health Insurance Company	InStil InChoice - Option II (H4206-010)	Local PPO	$46.00	$45.90	$0	Enhanced	Generics	•
Chattahoochee	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Chattahoochee	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Chattahoochee	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Chattahoochee	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Chattahoochee	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Chattahoochee	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Chattahoochee	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Chattahoochee	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Chattahoochee	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Chattahoochee	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Chattahoochee	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Chattahoochee	WellCare	Summit (H1340-006)	PFFS	$91.00	$0.00	$0	Enhanced		•
Chattooga	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Chattooga	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Chattooga	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Chattooga	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Chattooga	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Chattooga	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Chattooga	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Chattooga	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Chattooga	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Chattooga	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Chattooga	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Chattooga	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Chattooga	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Chattooga	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Cherokee	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Cherokee	Aetna Medicare	Aetna Golden Medicare Value Plan (H1109-001)	Local HMO	$0.00	$0.00	$0	Basic		•
Cherokee	Aetna Medicare	Aetna Golden Medicare Standard Plan (H1109-002)	Local HMO	$53.00	$41.50	$0	Enhanced	Generics	•
Cherokee	Aetna Medicare	Aetna Golden Medicare Premier Plan (H1109-003)	Local HMO	$88.00	$41.60	$0	Enhanced	Generics	•
Cherokee	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Cherokee	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-002)	Local HMO	$32.00	$21.20	$0	Enhanced		•
Cherokee	Humana Insurance Company	HumanaChoicePPO PPO H5214-003 (H5214-003)	Local PPO	$35.00	$25.40	$0	Enhanced		•
Cherokee	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Cherokee	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Cherokee	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Cherokee	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Cherokee	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Cherokee	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Cherokee	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
Cherokee	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Cherokee	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Cherokee	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Cherokee	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Cherokee	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Cherokee	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Cherokee	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Cherokee	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Clarke	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Clarke	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Clarke	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Clarke	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Clarke	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Clarke	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Clarke	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Clarke	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Clarke	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Clarke	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Clarke	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Clarke	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Clarke	Instil Health Insurance Company	InStil InChoice - Option I (H4206-001)	Local PPO	$54.00	$41.30	$0	Basic		•
Clarke	Instil Health Insurance Company	InStil InChoice - Option II (H4206-002)	Local PPO	$102.00	$53.30	$0	Enhanced	Generics	•
Clarke	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Clarke	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Clarke	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Clarke	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Clarke	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Clarke	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Clarke	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Clarke	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Clarke	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Clarke	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Clarke	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Clarke	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Clarke	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Clay	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Clay	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Clay	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Clay	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Clay	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Clay	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Clay	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Clay	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Clay	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Clay	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Clay	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Clay	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Clay	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Clay	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Clay	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Clay	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Clay	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Clay	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Clay	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Clay	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Clay	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Clay	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Clay	WellCare	Summit (H1340-008)	PFFS	$140.90	$16.20	$0	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Clayton	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Clayton	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Clayton	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-002)	Local HMO	$32.00	$21.20	$0	Enhanced		•
Clayton	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Clayton	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Clayton	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Clayton	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Clayton	Humana Insurance Company	HumanaChoicePPO PPO H5214-003 (H5214-003)	Local PPO	$35.00	$25.40	$0	Enhanced		•
Clayton	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Clayton	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Clayton	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Clayton	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Clayton	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Clayton	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Clayton	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
Clayton	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Clayton	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Clayton	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Clayton	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Clayton	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Clayton	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Clayton	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Clayton	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Clayton	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Clayton	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Clayton	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Clinch	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Clinch	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Clinch	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Clinch	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Clinch	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Clinch	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Clinch	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Clinch	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Clinch	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Clinch	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Clinch	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Clinch	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Clinch	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Clinch	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Cobb	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Cobb	Aetna Medicare	Aetna Golden Medicare Value Plan (H1109-001)	Local HMO	$0.00	$0.00	$0	Basic		•
Cobb	Aetna Medicare	Aetna Golden Medicare Standard Plan (H1109-002)	Local HMO	$53.00	$41.50	$0	Enhanced	Generics	•
Cobb	Aetna Medicare	Aetna Golden Medicare Premier Plan (H1109-003)	Local HMO	$88.00	$41.60	$0	Enhanced	Generics	•
Cobb	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	$0.00	$0.00	$0	Basic		•
Cobb	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-002)	Local HMO	$32.00	$21.20	$0	Enhanced		•
Cobb	Humana Insurance Company	HumanaChoicePPO PPO H5214-003 (H5214-003)	Local PPO	$35.00	$25.40	$0	Enhanced		•
Cobb	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Cobb	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Cobb	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Cobb	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Cobb	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Cobb	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Cobb	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
Cobb	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Cobb	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Cobb	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Cobb	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Cobb	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Cobb	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Cobb	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Cobb	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Cobb	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Cobb	WellCare	Concert (H1340-016)	PFFS	$109.00	$49.70	$0	Enhanced		•
Coffee	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Coffee	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Coffee	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Coffee	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Coffee	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Coffee	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Coffee	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Coffee	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Coffee	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Coffee	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Coffee	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Coffee	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Coffee	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Colquitt	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Colquitt	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Colquitt	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Colquitt	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Colquitt	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Colquitt	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Colquitt	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Colquitt	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Colquitt	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Colquitt	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Colquitt	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Colquitt	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Colquitt	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Colquitt	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Colquitt	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Colquitt	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Colquitt	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Colquitt	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Colquitt	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Columbia	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Columbia	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Columbia	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Columbia	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Columbia	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Columbia	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Columbia	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Columbia	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Columbia	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Columbia	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

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* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Columbia	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Columbia	Instil Health Insurance Company	InStil InChoice - Option I (H4206-005)	Local PPO	$29.00	$29.00	$0	Basic		•
Columbia	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Columbia	Instil Health Insurance Company	InStil InChoice - Option II (H4206-006)	Local PPO	$76.00	$53.30	$0	Enhanced	Generics	•
Columbia	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Columbia	SecureHorizons	MedicareComplete Plus Plan 1 (H1111-002)	Local HMO	$0.00	$0.00	$0	Enhanced		•
Columbia	SecureHorizons	MedicareComplete Plus Plan 2 (H1111-003)	Local HMO *	$0.00					
Columbia	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Columbia	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Columbia	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Columbia	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Columbia	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Columbia	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Columbia	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Columbia	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Columbia	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Columbia	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Columbia	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Columbia	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Columbia	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Cook	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Cook	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Cook	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Cook	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Cook	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Cook	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Cook	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Cook	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Cook	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Cook	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Cook	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Cook	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Cook	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Cook	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Coweta	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Coweta	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Coweta	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Coweta	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-002)	Local HMO	$32.00	$21.20	$0	Enhanced		•
Coweta	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Coweta	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Coweta	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Coweta	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Coweta	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Coweta	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Coweta	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Coweta	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Coweta	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Coweta	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Coweta	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
Coweta	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 1 (H5435-001)	PFFS *	$0.00					
Coweta	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Rx Plan 54 (H5435-013)	PFFS	$10.00	$10.00	$0	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Coweta	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Rx Plan 55 (H5435-014)	PFFS	$10.30	$10.30	$265	Basic		
Coweta	Sierra Optima	Sierra Optima (H4449-004)	PFFS *	$0.00					
Coweta	Sierra Optima	Sierra Optima Plus (H4449-009)	PFFS *	$53.10					
Coweta	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Coweta	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Coweta	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Coweta	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Coweta	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Coweta	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Coweta	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Coweta	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Coweta	WellCare	Summit (H1340-007)	PFFS	$121.00	$0.00	$0	Enhanced		•
Crawford	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Crawford	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Crawford	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Crawford	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Crawford	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Crawford	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Crawford	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Crawford	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Crawford	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Crawford	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Crawford	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Crawford	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Crawford	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Crawford	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Crawford	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Crawford	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Crisp	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Crisp	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Crisp	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Crisp	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Crisp	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Crisp	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Crisp	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Crisp	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Crisp	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Crisp	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Crisp	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Crisp	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Crisp	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Crisp	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Crisp	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Crisp	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Crisp	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Crisp	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Crisp	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Crisp	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Crisp	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Crisp	WellCare	Freedom (H1340-012)	PFFS	$0.00	$0.00	$0	Enhanced		•
Crisp	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Crisp	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Dade	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Dade	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Dade	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Dade	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Dade	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Dade	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Dade	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Dade	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Dade	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Dade	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Dade	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Dade	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Dade	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Dade	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Dade	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Dade	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Dade	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Dade	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Dade	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Dade	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Dade	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Dawson	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Dawson	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Dawson	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Dawson	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Dawson	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Dawson	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Dawson	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Dawson	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Dawson	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Dawson	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Dawson	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Dawson	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Dawson	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Dawson	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Dawson	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Dawson	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Dawson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Dawson	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Dawson	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Dawson	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Dawson	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Dawson	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Dawson	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Decatur	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Decatur	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Decatur	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Decatur	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Decatur	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Decatur	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Decatur	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Decatur	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Decatur	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Decatur	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Decatur	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

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* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Decatur	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Decatur	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Decatur	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Decatur	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Decatur	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Decatur	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Decatur	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Decatur	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Decatur	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Decatur	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Decatur	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Decatur	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Decatur	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Decatur	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
DeKalb	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
DeKalb	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
DeKalb	Aetna Medicare	Aetna Golden Medicare Value Plan (H1109-001)	Local HMO	$0.00	$0.00	$0	Basic		•
DeKalb	Aetna Medicare	Aetna Golden Medicare Standard Plan (H1109-002)	Local HMO	$53.00	$41.50	$0	Enhanced	Generics	•
DeKalb	Aetna Medicare	Aetna Golden Medicare Premier Plan (H1109-003)	Local HMO	$88.00	$41.60	$0	Enhanced	Generics	•
DeKalb	Aetna Medicare	Aetna Golden Choice Standard Plan (H1110-001)	Local PPO	$93.00	$19.40	$0	Basic		•
DeKalb	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	$0.00	$0.00	$0	Basic		•
DeKalb	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-002)	Local HMO	$32.00	$21.20	$0	Enhanced		•
DeKalb	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
DeKalb	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
DeKalb	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
DeKalb	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
DeKalb	Humana Insurance Company	HumanaChoicePPO PPO H5214-003 (H5214-003)	Local PPO	$35.00	$25.40	$0	Enhanced		•
DeKalb	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
DeKalb	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
DeKalb	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
DeKalb	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
DeKalb	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
DeKalb	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
DeKalb	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
DeKalb	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
DeKalb	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
DeKalb	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
DeKalb	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
DeKalb	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
DeKalb	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
DeKalb	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
DeKalb	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
DeKalb	WellCare	WellCare Advance (H1112-003)	Local HMO *	$0.00					
DeKalb	WellCare	WellCare Choice (H1112-001)	Local HMO	$0.00	$0.00	$0	Enhanced	Generics	•
DeKalb	WellCare	WellCare Value (H1112-011)	Local HMO	$0.00	$0.00	$0	Enhanced		•
DeKalb	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
DeKalb	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Dodge	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Dodge	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Dodge	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Dodge	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Dodge	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Dodge	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Dodge	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Dodge	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Dodge	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Dodge	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Dodge	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Dodge	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Dodge	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Dooly	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Dooly	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Dooly	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Dooly	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Dooly	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Dooly	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Dooly	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Dooly	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Dooly	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Dooly	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Dooly	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Dooly	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Dooly	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Dooly	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Dooly	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Dooly	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Dooly	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Dooly	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Dooly	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Dooly	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Dougherty	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Dougherty	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Dougherty	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Dougherty	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Dougherty	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Dougherty	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Dougherty	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Dougherty	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Dougherty	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Dougherty	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Dougherty	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Dougherty	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Dougherty	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Dougherty	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Dougherty	WellCare	Concert (H1340-017)	PFFS	$139.00	$49.50	$0	Enhanced		•
Douglas	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Douglas	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Douglas	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Douglas	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Douglas	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Douglas	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Douglas	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Douglas	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Douglas	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Douglas	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Douglas	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Douglas	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Douglas	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
Douglas	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Douglas	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Douglas	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Douglas	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Douglas	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Douglas	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Douglas	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Douglas	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Douglas	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Douglas	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Douglas	WellCare	Summit (H1340-009)	PFFS	$161.00	$33.20	$0	Enhanced		•
Early	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Early	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Early	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Early	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Early	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Early	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Early	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Early	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Early	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Early	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Early	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Early	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Early	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Early	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Early	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Early	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Early	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Early	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Early	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Early	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Early	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Early	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Early	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Echols	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Echols	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Echols	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Echols	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Echols	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Echols	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Echols	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Echols	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Echols	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Echols	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Echols	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Echols	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Echols	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Echols	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Echols	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Echols	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Echols	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Echols	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Echols	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Echols	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Echols	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Effingham	Advantra	Advantra Silver (H5302-003)	Local HMO	$0.00	$0.00	$0	Basic		•
Effingham	Advantra	Advantra Gold (H5302-004)	Local HMO	$58.00	$13.40	$0	Enhanced	Generics	•
Effingham	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Effingham	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Effingham	Arcadian Health Plan of Georgia	Southeast Community Care - Plus (H5578-002)	Local HMO	$0.00	$0.00	$0	Enhanced	Generics	•
Effingham	Arcadian Health Plan of Georgia	Southeast Community Care - Premier (H5578-003)	Local HMO	$41.00	$37.40	$0	Enhanced	Generics	•
Effingham	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-005)	Local HMO	$42.00	$22.20	$0	Enhanced		•
Effingham	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Effingham	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Effingham	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Effingham	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Effingham	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Effingham	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Effingham	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Effingham	InStil Health Insurance Company	InStil InCare (H4204-020)	PFFS *	$22.00					
Effingham	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Effingham	Instil Health Insurance Company	InStil InChoice - Option I (H4206-007)	Local PPO	$65.00	$41.30	$0	Basic		•
Effingham	Instil Health Insurance Company	InStil InChoice - Option II (H4206-008)	Local PPO	$113.00	$53.30	$0	Enhanced	Generics	•
Effingham	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Effingham	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Effingham	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Effingham	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Effingham	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Effingham	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Effingham	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Effingham	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Effingham	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Effingham	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Effingham	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Effingham	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Elbert	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Elbert	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Elbert	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Elbert	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Elbert	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Elbert	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Elbert	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Elbert	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Elbert	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Elbert	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Elbert	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Elbert	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Elbert	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Elbert	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Elbert	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Elbert	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Elbert	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Elbert	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Elbert	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Elbert	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Elbert	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Elbert	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Elbert	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Elbert	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Emanuel	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Emanuel	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Emanuel	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Emanuel	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Emanuel	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Emanuel	Instil Health Insurance Company	InStil InChoice - Option I (H4206-005)	Local PPO	$29.00	$29.00	$0	Basic		•
Emanuel	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Emanuel	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Emanuel	Instil Health Insurance Company	InStil InChoice - Option II (H4206-006)	Local PPO	$76.00	$53.30	$0	Enhanced	Generics	•
Emanuel	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Emanuel	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Emanuel	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Emanuel	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Emanuel	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Emanuel	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Emanuel	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Emanuel	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Evans	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Evans	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Evans	Aetna Medicare	Aetna Medicare Open Plan (H5736-002)	PFFS	$80.00	$21.80	$265	Basic		
Evans	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Evans	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Evans	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Evans	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Evans	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Evans	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Evans	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Evans	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Evans	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Evans	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Evans	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Evans	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	$0.00					
Evans	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Evans	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Evans	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Evans	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Evans	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Evans	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Evans	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Evans	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Evans	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Evans	WellCare	Summit (H1340-007)	PFFS	$121.00	$0.00	$0	Enhanced		•
Fannin	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Fannin	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Fannin	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Fannin	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Fannin	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Fannin	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Fannin	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Fannin	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Fannin	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Fannin	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Fannin	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Fannin	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Fannin	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Fannin	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Fannin	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Fannin	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Fannin	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Fannin	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Fannin	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Fannin	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Fannin	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Fannin	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Fannin	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Fayette	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Fayette	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Fayette	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Fayette	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Fayette	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Fayette	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Fayette	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Fayette	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Fayette	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Fayette	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Fayette	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Fayette	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Fayette	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Fayette	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
Fayette	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Fayette	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Fayette	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Fayette	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Fayette	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Fayette	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Fayette	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Fayette	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Fayette	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Fayette	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Fayette	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Fayette	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Floyd	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Floyd	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Floyd	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Floyd	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Floyd	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Floyd	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Floyd	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Floyd	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Floyd	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Floyd	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Floyd	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Floyd	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Floyd	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Floyd	WellCare	Duet (H1340-002)	PFFS *	$0.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Forsyth	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Forsyth	Aetna Medicare	Aetna Golden Medicare Value Plan (H1109-001)	Local HMO	$0.00	$0.00	$0	Basic		•
Forsyth	Aetna Medicare	Aetna Golden Medicare Standard Plan (H1109-002)	Local HMO	$53.00	$41.50	$0	Enhanced	Generics	•
Forsyth	Aetna Medicare	Aetna Golden Medicare Premier Plan (H1109-003)	Local HMO	$88.00	$41.60	$0	Enhanced	Generics	•
Forsyth	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Forsyth	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-002)	Local HMO	$32.00	$21.20	$0	Enhanced		•
Forsyth	Humana Insurance Company	HumanaChoicePPO PPO H5214-003 (H5214-003)	Local PPO	$35.00	$25.40	$0	Enhanced		•
Forsyth	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Forsyth	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Forsyth	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Forsyth	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Forsyth	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Forsyth	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Forsyth	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
Forsyth	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Forsyth	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Forsyth	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Forsyth	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Forsyth	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Forsyth	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Forsyth	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Forsyth	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Forsyth	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Forsyth	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Franklin	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Franklin	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Franklin	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Franklin	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Franklin	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Franklin	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Franklin	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Franklin	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Franklin	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Franklin	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Franklin	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Franklin	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Franklin	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Franklin	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Franklin	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Franklin	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Franklin	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Franklin	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Franklin	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Franklin	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Franklin	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Franklin	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Fulton	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Fulton	Aetna Medicare	Aetna Golden Medicare Value Plan (H1109-001)	Local HMO	$0.00	$0.00	$0	Basic		•
Fulton	Aetna Medicare	Aetna Golden Medicare Standard Plan (H1109-002)	Local HMO	$53.00	$41.50	$0	Enhanced	Generics	•
Fulton	Aetna Medicare	Aetna Golden Medicare Premier Plan (H1109-003)	Local HMO	$88.00	$41.60	$0	Enhanced	Generics	•
Fulton	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	$0.00	$0.00	$0	Basic		•
Fulton	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-002)	Local HMO	$32.00	$21.20	$0	Enhanced		•

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County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Fulton	Humana Insurance Company	HumanaChoicePPO PPO H5214-003 (H5214-003)	Local PPO	$35.00	$25.40	$0	Enhanced		•
Fulton	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Fulton	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Fulton	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Fulton	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Fulton	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Fulton	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Fulton	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
Fulton	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Fulton	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Fulton	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Fulton	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Fulton	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Fulton	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Fulton	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Fulton	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Fulton	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Fulton	WellCare	WellCare Advance (H1112-003)	Local HMO *	$0.00					
Fulton	WellCare	WellCare Choice (H1112-001)	Local HMO	$0.00	$0.00	$0	Enhanced	Generics	•
Fulton	WellCare	WellCare Value (H1112-011)	Local HMO	$0.00	$0.00	$0	Enhanced		•
Fulton	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Fulton	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Gilmer	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Gilmer	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Gilmer	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Gilmer	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Gilmer	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Gilmer	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Gilmer	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Gilmer	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Gilmer	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Gilmer	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Gilmer	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Gilmer	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Gilmer	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Gilmer	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Gilmer	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Gilmer	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Gilmer	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Gilmer	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Gilmer	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Gilmer	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Gilmer	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Glascock	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Glascock	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Glascock	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Glascock	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Glascock	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Glascock	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Glascock	Instil Health Insurance Company	InStil InChoice - Option I (H4206-005)	Local PPO	$29.00	$29.00	$0	Basic		•
Glascock	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Glascock	Instil Health Insurance Company	InStil InChoice - Option II (H4206-006)	Local PPO	$76.00	$53.30	$0	Enhanced	Generics	•
Glascock	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Glascock	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Glascock	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Glascock	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Glascock	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Glascock	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Glascock	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Glascock	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Glynn	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Glynn	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Glynn	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Glynn	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Glynn	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Glynn	InStil Health Insurance Company	InStil InCare (H4204-020)	PFFS *	$22.00					
Glynn	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Glynn	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Glynn	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Glynn	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Glynn	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Glynn	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Glynn	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Glynn	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Glynn	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Gordon	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Gordon	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Gordon	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Gordon	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Gordon	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Gordon	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Gordon	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Gordon	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Gordon	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Gordon	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Gordon	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Gordon	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Gordon	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Gordon	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Grady	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Grady	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Grady	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Grady	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Grady	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Grady	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Grady	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Grady	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Grady	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Grady	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Grady	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Grady	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Grady	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Grady	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Grady	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Grady	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Grady	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Grady	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Grady	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Grady	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Grady	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Grady	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Grady	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Grady	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Greene	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Greene	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Greene	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Greene	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Greene	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Greene	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Greene	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Greene	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Greene	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Greene	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Greene	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Greene	Instil Health Insurance Company	InStil InChoice - Option I (H4206-005)	Local PPO	$29.00	$29.00	$0	Basic		•
Greene	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Greene	Instil Health Insurance Company	InStil InChoice - Option II (H4206-006)	Local PPO	$76.00	$53.30	$0	Enhanced	Generics	•
Greene	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Greene	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Greene	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Greene	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Greene	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Greene	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Greene	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Greene	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Greene	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Greene	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Greene	WellCare	Summit (H1340-009)	PFFS	$161.00	$33.20	$0	Enhanced		•
Gwinnett	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Gwinnett	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan II (H5820-002)	PFFS	$0.00	$0.00	$0	Basic		•
Gwinnett	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-002)	Local HMO	$32.00	$21.20	$0	Enhanced		•
Gwinnett	Humana Insurance Company	HumanaChoicePPO PPO H5214-003 (H5214-003)	Local PPO	$35.00	$25.40	$0	Enhanced		•
Gwinnett	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Gwinnett	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Gwinnett	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Gwinnett	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Gwinnett	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Gwinnett	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Gwinnett	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
Gwinnett	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Gwinnett	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Gwinnett	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Gwinnett	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Gwinnett	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Gwinnett	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Gwinnett	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Gwinnett	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Gwinnett	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Gwinnett	WellCare	WellCare Advance (H1112-003)	Local HMO *	$0.00					
Gwinnett	WellCare	WellCare Choice (H1112-001)	Local HMO	$0.00	$0.00	$0	Enhanced	Generics	•
Gwinnett	WellCare	WellCare Value (H1112-011)	Local HMO	$0.00	$0.00	$0	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Gwinnett	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Gwinnett	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Habersham	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Habersham	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Habersham	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Habersham	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Habersham	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Habersham	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Habersham	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Habersham	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Habersham	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Habersham	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Habersham	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Habersham	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Habersham	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Habersham	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Habersham	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Habersham	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Habersham	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Habersham	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Habersham	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Habersham	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Habersham	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Habersham	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Habersham	WellCare	Summit (H1340-009)	PFFS	$161.00	$33.20	$0	Enhanced		•
Hall	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Hall	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Hall	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Hall	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Hall	Blue Cross Blue Shield of Georgia	SmartValue Plus (H1689-006)	PFFS	$46.00	$15.80	$0	Enhanced		•
Hall	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Hall	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Hall	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Hall	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Hall	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Hall	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Hall	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Hall	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Hall	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Hall	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Hall	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Hall	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Hall	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Hall	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Hall	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Hall	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Hall	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Hall	WellCare	Summit (H1340-009)	PFFS	$161.00	$33.20	$0	Enhanced		•
Hancock	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Hancock	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Hancock	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Hancock	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Hancock	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Hancock	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Hancock	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Hancock	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Hancock	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Hancock	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Hancock	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Hancock	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Hancock	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Hancock	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Hancock	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Hancock	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Hancock	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Hancock	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Hancock	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Hancock	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Hancock	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Hancock	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Hancock	WellCare	Summit (H1340-008)	PFFS	$140.90	$16.20	$0	Enhanced		•
Haralson	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Haralson	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Haralson	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Haralson	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Haralson	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Haralson	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Haralson	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Haralson	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Haralson	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Haralson	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Haralson	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Haralson	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Haralson	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Haralson	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Haralson	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Haralson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Haralson	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Haralson	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Haralson	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Haralson	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Harris	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Harris	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Harris	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Harris	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-001)	Local HMO	$0.00	$0.00	$0	Enhanced		•
Harris	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Harris	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Harris	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Harris	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Harris	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Harris	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Harris	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Harris	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Harris	Instil Health Insurance Company	InStil InChoice - Option I (H4206-009)	Local PPO	$0.00	$0.00	$0	Basic		•
Harris	Instil Health Insurance Company	InStil InChoice - Option II (H4206-010)	Local PPO	$46.00	$45.90	$0	Enhanced	Generics	•
Harris	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Harris	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Harris	SecureHorizons	MedicareComplete Plus Plan 1 (H1111-002)	Local HMO	$0.00	$0.00	$0	Enhanced		•
Harris	SecureHorizons	MedicareComplete Plus Plan 2 (H1111-003)	Local HMO *	$0.00					
Harris	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	$0.00					
Harris	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Harris	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Harris	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Harris	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Harris	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Harris	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Harris	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Harris	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Harris	WellCare	Summit (H1340-006)	PFFS	$91.00	$0.00	$0	Enhanced		•
Hart	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Hart	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Hart	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Hart	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Hart	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Hart	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Hart	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Hart	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Hart	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Hart	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Hart	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Hart	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Hart	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Hart	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Hart	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Hart	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Hart	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Hart	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Hart	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Hart	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Hart	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Heard	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Heard	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Heard	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Heard	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Heard	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Heard	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Heard	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Heard	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Heard	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Heard	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Heard	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Heard	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Heard	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Heard	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Heard	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Heard	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Heard	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Heard	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Heard	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Heard	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Heard	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Henry	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Henry	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Henry	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-002)	Local HMO	$32.00	$21.20	$0	Enhanced		•
Henry	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Henry	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Henry	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Henry	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Henry	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Henry	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Henry	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
Henry	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Henry	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Henry	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Henry	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Henry	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Henry	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Henry	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Henry	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Henry	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Henry	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Henry	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Henry	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Houston	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Houston	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Houston	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Houston	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Houston	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Houston	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Houston	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Houston	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Houston	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Houston	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Houston	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Houston	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Houston	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Houston	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Houston	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Irwin	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Irwin	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Irwin	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Irwin	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Irwin	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Irwin	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Irwin	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Irwin	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Irwin	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Irwin	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Irwin	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Irwin	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Irwin	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Irwin	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Irwin	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Irwin	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Irwin	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Irwin	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Irwin	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Irwin	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Irwin	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Jackson	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Jackson	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Jackson	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Jackson	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Jackson	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Jackson	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Jackson	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Jackson	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Jackson	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Jackson	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Jackson	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Jackson	Instil Health Insurance Company	InStil InChoice - Option I (H4206-001)	Local PPO	$54.00	$41.30	$0	Basic		•
Jackson	Instil Health Insurance Company	InStil InChoice - Option II (H4206-002)	Local PPO	$102.00	$53.30	$0	Enhanced	Generics	•
Jackson	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Jackson	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Jackson	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Jackson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Jackson	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Jackson	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Jackson	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Jackson	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Jackson	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Jackson	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Jackson	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Jasper	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Jasper	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Jasper	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Jasper	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Jasper	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Jasper	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Jasper	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Jasper	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Jasper	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Jasper	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Jasper	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Jasper	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Jasper	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Jasper	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Jasper	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Jasper	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Jasper	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Jasper	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Jasper	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Jasper	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Jasper	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Jasper	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Jeff Davis	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Jeff Davis	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Jeff Davis	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Jeff Davis	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Jeff Davis	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Jeff Davis	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Jeff Davis	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Jeff Davis	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Jeff Davis	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Jeff Davis	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Jeff Davis	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Jeff Davis	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Jeff Davis	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Jeff Davis	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Jefferson	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Jefferson	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Jefferson	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Jefferson	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Jefferson	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Jefferson	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Jefferson	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Jefferson	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Jefferson	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Jefferson	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Jefferson	Instil Health Insurance Company	InStil InChoice - Option I (H4206-005)	Local PPO	$29.00	$29.00	$0	Basic		•
Jefferson	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Jefferson	Instil Health Insurance Company	InStil InChoice - Option II (H4206-006)	Local PPO	$76.00	$53.30	$0	Enhanced	Generics	•
Jefferson	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Jefferson	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Jefferson	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Jefferson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Jefferson	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Jefferson	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Jefferson	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Jefferson	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Jenkins	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Jenkins	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Jenkins	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Jenkins	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Jenkins	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Jenkins	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Jenkins	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Jenkins	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Jenkins	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Jenkins	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Jenkins	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Jenkins	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Jenkins	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Jenkins	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Jenkins	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Jenkins	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Jenkins	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Jenkins	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Jenkins	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Jenkins	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Jenkins	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Jenkins	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Jenkins	WellCare	Summit (H1340-007)	PFFS	$121.00	$0.00	$0	Enhanced		•
Johnson	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Johnson	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Johnson	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Johnson	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Johnson	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Johnson	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Johnson	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Johnson	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Johnson	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Johnson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Johnson	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Johnson	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Johnson	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Johnson	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Jones	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Jones	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Jones	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Jones	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Jones	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Jones	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Jones	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Jones	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Jones	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Jones	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Jones	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Jones	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Jones	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Jones	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Jones	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Jones	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Jones	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Jones	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Jones	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Jones	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Jones	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Jones	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Jones	WellCare	Freedom (H1340-012)	PFFS	$0.00	$0.00	$0	Enhanced		•
Jones	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Jones	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Lamar	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Lamar	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Lamar	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Lamar	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Lamar	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Lamar	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Lamar	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Lamar	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Lamar	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Lamar	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Lamar	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Lamar	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Lamar	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Lamar	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Lamar	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Lamar	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Lamar	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Lamar	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Lamar	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Lamar	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Lamar	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Lamar	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Lanier	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Lanier	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Lanier	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Lanier	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Lanier	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Lanier	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Lanier	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Lanier	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Lanier	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Lanier	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Lanier	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Lanier	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Lanier	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Lanier	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Lanier	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Lanier	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Lanier	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Lanier	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Lanier	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Lanier	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Lanier	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Lanier	WellCare	Summit (H1340-009)	PFFS	$161.00	$33.20	$0	Enhanced		•
Laurens	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Laurens	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Laurens	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Laurens	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Laurens	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Laurens	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Laurens	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Laurens	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Laurens	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Laurens	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Laurens	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Laurens	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Laurens	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Laurens	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Laurens	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Laurens	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Laurens	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Laurens	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Laurens	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Lee	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Lee	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Lee	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Lee	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Lee	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Lee	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Lee	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Lee	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Lee	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Lee	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Lee	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Lee	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Lee	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Liberty	Advantra	Advantra Silver (H5302-003)	Local HMO	$0.00	$0.00	$0	Basic		•
Liberty	Advantra	Advantra Gold (H5302-004)	Local HMO	$58.00	$13.40	$0	Enhanced	Generics	•
Liberty	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Liberty	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Liberty	Arcadian Health Plan of Georgia	Southeast Community Care - Plus (H5578-002)	Local HMO	$0.00	$0.00	$0	Enhanced	Generics	•
Liberty	Arcadian Health Plan of Georgia	Southeast Community Care - Premier (H5578-003)	Local HMO	$41.00	$37.40	$0	Enhanced	Generics	•
Liberty	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Liberty	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Liberty	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Liberty	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Liberty	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Liberty	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Liberty	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Liberty	InStil Health Insurance Company	InStil InCare (H4204-020)	PFFS *	$22.00					
Liberty	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Liberty	Instil Health Insurance Company	InStil InChoice - Option I (H4206-007)	Local PPO	$65.00	$41.30	$0	Basic		•
Liberty	Instil Health Insurance Company	InStil InChoice - Option II (H4206-008)	Local PPO	$113.00	$53.30	$0	Enhanced	Generics	•
Liberty	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Liberty	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Liberty	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Liberty	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Liberty	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Liberty	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Liberty	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Liberty	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Liberty	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Liberty	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Lincoln	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Lincoln	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Lincoln	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Lincoln	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Lincoln	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Lincoln	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Lincoln	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Lincoln	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Lincoln	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Lincoln	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Lincoln	Instil Health Insurance Company	InStil InChoice - Option I (H4206-005)	Local PPO	$29.00	$29.00	$0	Basic		•
Lincoln	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Lincoln	Instil Health Insurance Company	InStil InChoice - Option II (H4206-006)	Local PPO	$76.00	$53.30	$0	Enhanced	Generics	•
Lincoln	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Lincoln	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Lincoln	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Lincoln	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Lincoln	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Lincoln	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Lincoln	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Lincoln	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Lincoln	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Lincoln	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Lincoln	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Long	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Long	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Long	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Long	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Long	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Long	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Long	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Long	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Long	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Long	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Long	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Long	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Long	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Lowndes	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Lowndes	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Lowndes	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Lowndes	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Lowndes	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Lowndes	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Lowndes	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Lowndes	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Lowndes	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Lowndes	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Lowndes	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Lowndes	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Lowndes	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Lumpkin	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Lumpkin	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Lumpkin	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Lumpkin	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Lumpkin	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Lumpkin	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Lumpkin	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Lumpkin	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Lumpkin	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Lumpkin	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Lumpkin	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Lumpkin	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Lumpkin	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Lumpkin	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Lumpkin	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Lumpkin	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Lumpkin	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Lumpkin	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Lumpkin	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Lumpkin	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Lumpkin	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Lumpkin	WellCare	Freedom (H1340-012)	PFFS	$0.00	$0.00	$0	Enhanced		•
Lumpkin	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Lumpkin	WellCare	Summit (H1340-009)	PFFS	$161.00	$33.20	$0	Enhanced		•
Macon	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Macon	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Macon	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Macon	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Macon	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Macon	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Macon	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Macon	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Macon	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Macon	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Macon	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Macon	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Macon	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Macon	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Macon	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Macon	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Macon	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Macon	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Macon	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Macon	WellCare	Summit (H1340-008)	PFFS	$140.90	$16.20	$0	Enhanced		•
Madison	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Madison	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Madison	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Madison	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Madison	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Madison	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Madison	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Madison	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Madison	Instil Health Insurance Company	InStil InChoice - Option I (H4206-001)	Local PPO	$54.00	$41.30	$0	Basic		•
Madison	Instil Health Insurance Company	InStil InChoice - Option II (H4206-002)	Local PPO	$102.00	$53.30	$0	Enhanced	Generics	•
Madison	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Madison	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Madison	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Madison	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Madison	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Madison	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Madison	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Madison	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Madison	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Madison	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Madison	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Marion	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Marion	Advantra® Freedom	Freedom 5 (H5227-001)	PFFS	$0.00	$0.00	$0	Enhanced	Generics	•
Marion	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Marion	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Marion	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Marion	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Marion	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Marion	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Marion	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Marion	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Marion	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Marion	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Marion	Instil Health Insurance Company	InStil InChoice - Option I (H4206-009)	Local PPO	$0.00	$0.00	$0	Basic		•
Marion	Instil Health Insurance Company	InStil InChoice - Option II (H4206-010)	Local PPO	$46.00	$45.90	$0	Enhanced	Generics	•
Marion	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Marion	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Marion	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Marion	Sierra Optima	Sierra Optima (H4449-004)	PFFS *	$0.00					
Marion	Sierra Optima	Sierra Optima Plus (H4449-009)	PFFS *	$53.10					
Marion	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Marion	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Marion	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Marion	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Marion	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Marion	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Marion	WellCare	Summit (H1340-006)	PFFS	$91.00	$0.00	$0	Enhanced		•
McDuffie	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
McDuffie	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
McDuffie	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
McDuffie	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
McDuffie	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
McDuffie	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
McDuffie	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
McDuffie	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
McDuffie	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
McDuffie	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
McDuffie	Instil Health Insurance Company	InStil InChoice - Option I (H4206-005)	Local PPO	$29.00	$29.00	$0	Basic		•
McDuffie	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
McDuffie	Instil Health Insurance Company	InStil InChoice - Option II (H4206-006)	Local PPO	$76.00	$53.30	$0	Enhanced	Generics	•
McDuffie	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
McDuffie	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
McDuffie	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
McDuffie	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
McDuffie	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
McDuffie	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
McDuffie	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
McDuffie	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
McDuffie	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
McDuffie	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
McDuffie	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
McIntosh	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
McIntosh	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
McIntosh	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
McIntosh	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
McIntosh	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
McIntosh	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
McIntosh	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
McIntosh	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
McIntosh	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
McIntosh	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
McIntosh	InStil Health Insurance Company	InStil InCare (H4204-020)	PFFS *	$22.00					
McIntosh	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
McIntosh	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
McIntosh	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
McIntosh	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
McIntosh	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
McIntosh	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
McIntosh	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
McIntosh	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
McIntosh	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
McIntosh	WellCare	Freedom (H1340-012)	PFFS	$0.00	$0.00	$0	Enhanced		•
McIntosh	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
McIntosh	WellCare	Summit (H1340-009)	PFFS	$161.00	$33.20	$0	Enhanced		•
Meriwether	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Meriwether	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Meriwether	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Meriwether	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Meriwether	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Meriwether	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Meriwether	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Meriwether	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Meriwether	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Meriwether	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Meriwether	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Meriwether	Instil Health Insurance Company	InStil InChoice - Option I (H4206-009)	Local PPO	$0.00	$0.00	$0	Basic		•
Meriwether	Instil Health Insurance Company	InStil InChoice - Option II (H4206-010)	Local PPO	$46.00	$45.90	$0	Enhanced	Generics	•
Meriwether	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Meriwether	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Meriwether	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	$0.00					
Meriwether	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Meriwether	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Meriwether	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Meriwether	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Meriwether	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Meriwether	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Meriwether	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Meriwether	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Meriwether	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Miller	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Miller	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Miller	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Miller	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Miller	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Miller	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Miller	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Miller	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Miller	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Miller	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Miller	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Miller	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Miller	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Miller	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Miller	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Miller	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Miller	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Mitchell	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Mitchell	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Mitchell	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Mitchell	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Mitchell	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Mitchell	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Mitchell	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Mitchell	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Mitchell	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Mitchell	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Mitchell	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Mitchell	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Mitchell	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Mitchell	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Mitchell	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Mitchell	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Monroe	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Monroe	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Monroe	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Monroe	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Monroe	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Monroe	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Monroe	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Monroe	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Monroe	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Monroe	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Monroe	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Monroe	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Monroe	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Monroe	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Monroe	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Monroe	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Monroe	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Montgomery	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Montgomery	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Montgomery	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Montgomery	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Montgomery	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Montgomery	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Montgomery	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Montgomery	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Montgomery	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Montgomery	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Montgomery	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Montgomery	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Montgomery	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Montgomery	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Morgan	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Morgan	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Morgan	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Morgan	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Morgan	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Morgan	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Morgan	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Morgan	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Morgan	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Morgan	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Morgan	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Morgan	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Morgan	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Morgan	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Morgan	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Morgan	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Morgan	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Morgan	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Morgan	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Morgan	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Morgan	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Morgan	WellCare	Freedom (H1340-012)	PFFS	$0.00	$0.00	$0	Enhanced		•
Morgan	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Morgan	WellCare	Summit (H1340-009)	PFFS	$161.00	$33.20	$0	Enhanced		•
Murray	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Murray	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Murray	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Murray	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Murray	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Murray	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Murray	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Murray	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Murray	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Murray	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Murray	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Murray	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Murray	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Murray	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Murray	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Murray	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Murray	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Murray	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Murray	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Muscogee	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Muscogee	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Muscogee	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Muscogee	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-001)	Local HMO	$0.00	$0.00	$0	Enhanced		•
Muscogee	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Muscogee	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Muscogee	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Muscogee	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Muscogee	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Muscogee	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Muscogee	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Muscogee	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Muscogee	Instil Health Insurance Company	InStil InChoice - Option I (H4206-009)	Local PPO	$0.00	$0.00	$0	Basic		•
Muscogee	Instil Health Insurance Company	InStil InChoice - Option II (H4206-010)	Local PPO	$46.00	$45.90	$0	Enhanced	Generics	•
Muscogee	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Muscogee	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Muscogee	SecureHorizons	MedicareComplete Plus Plan 1 (H1111-002)	Local HMO	$0.00	$0.00	$0	Enhanced		•
Muscogee	SecureHorizons	MedicareComplete Plus Plan 2 (H1111-003)	Local HMO *	$0.00					
Muscogee	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	$0.00					
Muscogee	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Muscogee	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Muscogee	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Muscogee	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Muscogee	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Muscogee	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Muscogee	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Muscogee	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Muscogee	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Muscogee	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Muscogee	WellCare	Summit (H1340-007)	PFFS	$121.00	$0.00	$0	Enhanced		•
Newton	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Newton	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Newton	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Newton	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Newton	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Newton	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Newton	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Newton	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Newton	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Newton	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Newton	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Newton	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Newton	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Newton	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Newton	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Newton	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Newton	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Newton	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Newton	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Newton	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Newton	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Newton	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Newton	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Newton	WellCare	Freedom (H1340-012)	PFFS	$0.00	$0.00	$0	Enhanced		•
Newton	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Newton	WellCare	Summit (H1340-009)	PFFS	$161.00	$33.20	$0	Enhanced		•
Oconee	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Oconee	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Oconee	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Oconee	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Oconee	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Oconee	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Oconee	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Oconee	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Oconee	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Oconee	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Oconee	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Oconee	Instil Health Insurance Company	InStil InChoice - Option I (H4206-001)	Local PPO	$54.00	$41.30	$0	Basic		•
Oconee	Instil Health Insurance Company	InStil InChoice - Option II (H4206-002)	Local PPO	$102.00	$53.30	$0	Enhanced	Generics	•
Oconee	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Oconee	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Oconee	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Oconee	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Oconee	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Oconee	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Oconee	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

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* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Oconee	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Oconee	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Oconee	WellCare	Freedom (H1340-012)	PFFS	$0.00	$0.00	$0	Enhanced		•
Oconee	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Oconee	WellCare	Summit (H1340-008)	PFFS	$140.90	$16.20	$0	Enhanced		•
Oglethorpe	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Oglethorpe	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Oglethorpe	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Oglethorpe	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Oglethorpe	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Oglethorpe	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Oglethorpe	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Oglethorpe	Instil Health Insurance Company	InStil InChoice - Option I (H4206-001)	Local PPO	$54.00	$41.30	$0	Basic		•
Oglethorpe	Instil Health Insurance Company	InStil InChoice - Option II (H4206-002)	Local PPO	$102.00	$53.30	$0	Enhanced	Generics	•
Oglethorpe	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Oglethorpe	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Oglethorpe	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Oglethorpe	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Oglethorpe	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Oglethorpe	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Oglethorpe	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Paulding	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Paulding	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Paulding	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Paulding	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Paulding	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Paulding	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Paulding	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Paulding	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Paulding	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Paulding	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Paulding	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Paulding	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Paulding	Kaiser Permanente Senior Advantage	Kaiser Permanente Senior Advantage (H1170-002)	Local HMO	$49.00	$0.00	$0	Basic		•
Paulding	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Paulding	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Paulding	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Paulding	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Paulding	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Paulding	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Paulding	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Paulding	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Paulding	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Paulding	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Peach	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Peach	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Peach	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Peach	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Peach	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Peach	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Peach	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Peach	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Peach	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Peach	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Peach	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Peach	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Peach	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Peach	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Peach	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Peach	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Peach	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Peach	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Peach	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Peach	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Peach	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Peach	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Pickens	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Pickens	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Pickens	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Pickens	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Pickens	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Pickens	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Pickens	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Pickens	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Pickens	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Pickens	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Pickens	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Pickens	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Pickens	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Pickens	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Pickens	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Pickens	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Pickens	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Pickens	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Pickens	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Pickens	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Pickens	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Pierce	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Pierce	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Pierce	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Pierce	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Pierce	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Pierce	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Pierce	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Pierce	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Pierce	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Pierce	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Pierce	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Pierce	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Pierce	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Pike	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Pike	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Pike	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Pike	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Pike	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Pike	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Pike	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Pike	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Pike	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Pike	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Pike	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Pike	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Pike	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Pike	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Pike	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Pike	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Pike	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Pike	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Pike	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Pike	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Pike	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Polk	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Polk	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Polk	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Polk	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Polk	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Polk	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Polk	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Polk	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Polk	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Polk	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Polk	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Polk	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Polk	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Pulaski	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Pulaski	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Pulaski	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Pulaski	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Pulaski	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Pulaski	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Pulaski	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Pulaski	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Pulaski	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Pulaski	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Pulaski	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Pulaski	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Pulaski	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Putnam	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Putnam	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Putnam	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Putnam	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Putnam	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Putnam	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Putnam	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Putnam	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Putnam	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Putnam	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Putnam	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Putnam	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Putnam	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Putnam	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Putnam	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Quitman	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Quitman	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Quitman	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Quitman	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Quitman	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Quitman	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Quitman	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Quitman	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Quitman	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Quitman	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Quitman	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Quitman	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Quitman	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Quitman	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Quitman	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Quitman	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Quitman	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Quitman	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Quitman	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Rabun	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Rabun	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Rabun	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Rabun	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Rabun	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Rabun	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Rabun	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Rabun	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Rabun	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Rabun	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Rabun	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Rabun	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Rabun	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Rabun	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Rabun	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Randolph	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Randolph	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Randolph	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Randolph	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Randolph	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Randolph	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Randolph	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Randolph	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Randolph	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Randolph	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Randolph	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Randolph	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Randolph	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Randolph	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Randolph	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Randolph	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Randolph	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Richmond	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Richmond	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Richmond	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Richmond	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Richmond	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Richmond	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Richmond	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Richmond	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Richmond	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Richmond	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Richmond	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Richmond	Instil Health Insurance Company	InStil InChoice - Option I (H4206-005)	Local PPO	$29.00	$29.00	$0	Basic		•
Richmond	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Richmond	Instil Health Insurance Company	InStil InChoice - Option II (H4206-006)	Local PPO	$76.00	$53.30	$0	Enhanced	Generics	•
Richmond	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Richmond	SecureHorizons	MedicareComplete Plus Plan 1 (H1111-002)	Local HMO	$0.00	$0.00	$0	Enhanced		•
Richmond	SecureHorizons	MedicareComplete Plus Plan 2 (H1111-003)	Local HMO *	$0.00					
Richmond	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 2 (H5435-002)	PFFS *	$0.00					
Richmond	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Richmond	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Richmond	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Richmond	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Richmond	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Richmond	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Richmond	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Richmond	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Richmond	WellCare	Duet (H1340-002)	PFFS *	$0.00					
Richmond	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Richmond	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Rockdale	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Rockdale	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Rockdale	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Rockdale	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-002)	Local HMO	$32.00	$21.20	$0	Enhanced		•
Rockdale	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Rockdale	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Rockdale	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Rockdale	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Rockdale	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Rockdale	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Rockdale	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Rockdale	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Rockdale	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Rockdale	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Rockdale	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Rockdale	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Rockdale	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Rockdale	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Rockdale	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Rockdale	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Rockdale	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Rockdale	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Rockdale	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Rockdale	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Schley	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Schley	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Schley	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Schley	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Schley	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Schley	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Schley	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Schley	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Schley	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Schley	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Schley	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Schley	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Schley	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Screven	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Screven	Arcadian Health Plan of Georgia	Southeast Community Care - Plus (H5578-002)	Local HMO	$0.00	$0.00	$0	Enhanced	Generics	•
Screven	Arcadian Health Plan of Georgia	Southeast Community Care - Premier (H5578-003)	Local HMO	$41.00	$37.40	$0	Enhanced	Generics	•
Screven	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Screven	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Screven	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Screven	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Screven	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Screven	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Screven	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Screven	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Screven	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Screven	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Screven	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Screven	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Screven	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Seminole	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Seminole	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Seminole	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Seminole	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Seminole	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Seminole	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Seminole	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Seminole	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Seminole	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Seminole	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Seminole	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Seminole	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Seminole	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Seminole	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Seminole	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Spalding	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Spalding	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Spalding	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Spalding	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Spalding	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Spalding	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Spalding	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Spalding	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Spalding	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Spalding	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Spalding	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Spalding	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Spalding	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Spalding	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Spalding	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Spalding	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Statewide	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Statewide	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Statewide	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Stephens	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Stephens	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Stephens	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Stephens	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Stephens	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Stephens	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Stephens	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Stephens	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Stephens	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Stephens	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Stephens	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Stephens	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Stephens	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Stephens	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Stephens	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Stephens	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Stephens	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Stephens	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Stephens	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Stephens	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Stephens	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Stephens	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Stephens	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Stewart	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Stewart	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Stewart	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Stewart	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Stewart	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Stewart	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Stewart	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Stewart	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Stewart	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Stewart	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Stewart	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Stewart	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Stewart	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Stewart	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Stewart	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Stewart	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Stewart	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Stewart	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Stewart	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Stewart	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Stewart	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Stewart	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Stewart	WellCare	Summit (H1340-008)	PFFS	$140.90	$16.20	$0	Enhanced		•
Sumter	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Sumter	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

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* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Sumter	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Sumter	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Sumter	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Sumter	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Sumter	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Sumter	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Sumter	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Sumter	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Sumter	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Sumter	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Sumter	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Sumter	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Sumter	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Sumter	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Sumter	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Sumter	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Sumter	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Sumter	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Sumter	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Talbot	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Talbot	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Talbot	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Talbot	Blue Cross Blue Shield Healthcare Plan of Georgia	BlueValue Secure (H5422-001)	Local HMO	$0.00	$0.00	$0	Enhanced		•
Talbot	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Talbot	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Talbot	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Talbot	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Talbot	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Talbot	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Talbot	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Talbot	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Talbot	Instil Health Insurance Company	InStil InChoice - Option I (H4206-009)	Local PPO	$0.00	$0.00	$0	Basic		•
Talbot	Instil Health Insurance Company	InStil InChoice - Option II (H4206-010)	Local PPO	$46.00	$45.90	$0	Enhanced	Generics	•
Talbot	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Talbot	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Talbot	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Talbot	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Talbot	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Talbot	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Talbot	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Talbot	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Talbot	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Talbot	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Taliaferro	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Taliaferro	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Taliaferro	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Taliaferro	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Taliaferro	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Taliaferro	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Taliaferro	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Taliaferro	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Taliaferro	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Taliaferro	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Taliaferro	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Taliaferro	Instil Health Insurance Company	InStil InChoice - Option I (H4206-005)	Local PPO	$29.00	$29.00	$0	Basic		•
Taliaferro	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Taliaferro	Instil Health Insurance Company	InStil InChoice - Option II (H4206-006)	Local PPO	$76.00	$53.30	$0	Enhanced	Generics	•
Taliaferro	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Taliaferro	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Taliaferro	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Taliaferro	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Taliaferro	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Taliaferro	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Taliaferro	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Taliaferro	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Taliaferro	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Taliaferro	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Taliaferro	WellCare	Freedom (H1340-012)	PFFS	$0.00	$0.00	$0	Enhanced		•
Taliaferro	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Taliaferro	WellCare	Summit (H1340-008)	PFFS	$140.90	$16.20	$0	Enhanced		•
Tattnall	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Tattnall	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Tattnall	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Tattnall	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Tattnall	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Tattnall	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Tattnall	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Tattnall	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Tattnall	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Tattnall	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Tattnall	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Tattnall	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Tattnall	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Tattnall	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Tattnall	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Tattnall	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Tattnall	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Tattnall	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Taylor	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Taylor	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Taylor	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Taylor	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Taylor	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Taylor	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Taylor	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Taylor	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Taylor	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Taylor	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Taylor	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Taylor	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Taylor	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Taylor	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Taylor	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Taylor	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Taylor	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Taylor	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Telfair	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Telfair	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Telfair	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Telfair	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Telfair	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Telfair	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Telfair	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Telfair	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Telfair	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Telfair	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Telfair	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Telfair	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Telfair	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Terrell	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Terrell	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Terrell	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Terrell	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Terrell	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Terrell	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Terrell	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Terrell	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Terrell	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Terrell	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Terrell	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Terrell	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Terrell	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Thomas	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Thomas	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Thomas	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Thomas	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Thomas	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Thomas	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Thomas	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Thomas	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Thomas	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Thomas	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Thomas	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Thomas	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Thomas	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Thomas	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Thomas	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Thomas	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Thomas	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Tift	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Tift	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Tift	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Tift	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Tift	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Tift	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Tift	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Tift	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Tift	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Tift	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Tift	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Tift	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Tift	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Tift	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Tift	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Tift	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Tift	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Tift	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Tift	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Tift	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Tift	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Tift	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Tift	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Toombs	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Toombs	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Toombs	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Toombs	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Toombs	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Toombs	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Toombs	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Toombs	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Toombs	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Toombs	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Toombs	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Toombs	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Toombs	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Toombs	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Towns	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Towns	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Towns	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Towns	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Towns	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Towns	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Towns	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Towns	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Towns	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Towns	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Towns	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Towns	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Towns	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Towns	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Towns	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Towns	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Towns	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Towns	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Towns	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Towns	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Towns	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Towns	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Treutlen	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Treutlen	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Treutlen	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Treutlen	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Treutlen	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Treutlen	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Treutlen	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Treutlen	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Treutlen	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Treutlen	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Treutlen	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Treutlen	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Treutlen	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Treutlen	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Treutlen	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Treutlen	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Treutlen	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Treutlen	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Treutlen	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Treutlen	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Treutlen	WellCare	Summit (H1340-007)	PFFS	$121.00	$0.00	$0	Enhanced		•
Troup	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Troup	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Troup	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Troup	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Troup	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Troup	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Troup	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Troup	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Troup	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Troup	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Troup	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Troup	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Troup	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Troup	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Troup	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Troup	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Troup	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Troup	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Troup	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Troup	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Turner	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Turner	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Turner	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Turner	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Turner	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Turner	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Turner	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Turner	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Turner	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Turner	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Turner	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Turner	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Turner	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Turner	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Turner	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Turner	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Turner	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Turner	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Turner	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Turner	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Turner	WellCare	Freedom (H1340-012)	PFFS	$0.00	$0.00	$0	Enhanced		•
Turner	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Turner	WellCare	Summit (H1340-008)	PFFS	$140.90	$16.20	$0	Enhanced		•
Twiggs	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Twiggs	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Twiggs	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Twiggs	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Twiggs	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Twiggs	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Twiggs	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Twiggs	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Twiggs	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Twiggs	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Twiggs	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Twiggs	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Twiggs	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Twiggs	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Twiggs	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Twiggs	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Twiggs	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Twiggs	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Twiggs	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Twiggs	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Twiggs	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•
Union	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Union	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Union	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Union	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Union	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Union	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Union	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Union	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Union	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Union	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Union	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Union	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Union	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Union	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Union	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Union	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Union	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Union	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Union	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Union	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Union	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Union	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Upson	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Upson	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Upson	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Upson	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Upson	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Upson	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Upson	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Upson	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Upson	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Upson	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Upson	Instil Health Insurance Company	InStil InChoice - Option I (H4206-009)	Local PPO	$0.00	$0.00	$0	Basic		•
Upson	Instil Health Insurance Company	InStil InChoice - Option II (H4206-010)	Local PPO	$46.00	$45.90	$0	Enhanced	Generics	•
Upson	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Upson	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Upson	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Upson	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Upson	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Upson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Upson	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Upson	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Upson	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Upson	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Walker	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Walker	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Walker	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Walker	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Walker	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Walker	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Walker	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Walker	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Walker	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Walker	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Walker	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Walker	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Walker	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Walker	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Walker	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Walker	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Walker	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Walton	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Walton	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Walton	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Walton	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Walton	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Walton	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Walton	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Walton	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Walton	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Walton	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Walton	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Walton	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Walton	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Walton	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Walton	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Walton	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Walton	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Walton	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Walton	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Walton	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Walton	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Walton	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Walton	WellCare	Duet (H1340-002)	PFFS *	$0.00					

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Walton	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Walton	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Ware	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Ware	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Ware	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Ware	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Ware	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Ware	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Ware	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Ware	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Ware	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Ware	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Ware	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Ware	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Ware	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
Warren	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Warren	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Warren	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Warren	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Warren	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Warren	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Warren	Instil Health Insurance Company	InStil InChoice - Option I (H4206-005)	Local PPO	$29.00	$29.00	$0	Basic		•
Warren	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Warren	Instil Health Insurance Company	InStil InChoice - Option II (H4206-006)	Local PPO	$76.00	$53.30	$0	Enhanced	Generics	•
Warren	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Warren	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Warren	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Warren	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Warren	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Warren	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Warren	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Warren	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Washington	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Washington	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Washington	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Washington	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Washington	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Washington	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Washington	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Washington	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Washington	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Washington	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Washington	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Washington	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Washington	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Washington	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Washington	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 3 (H5435-003)	PFFS *	$0.00					
Washington	Sierra Optima	Sierra Optima (H4449-010)	PFFS *	$53.10					
Washington	Sierra Optima	Sierra Optima Plus (H4449-002)	PFFS *	$121.20					
Washington	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Washington	Today's Option	Today's Options Premier (H5421-039)	PFFS *	$0.00					
Washington	Today's Option	Today's Options Value (H5421-038)	PFFS *	$0.00					
Washington	Today's Option	Today's Options Value Plus (H5421-044)	PFFS	$10.00	$10.00	$0	Basic		•
Washington	Today's Option	Today's Options Premier Plus (H5421-045)	PFFS	$45.00	$44.90	$0	Enhanced	Generics	•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Washington	WellCare	Concert (H1340-013)	PFFS	$0.00	$0.00	$0	Enhanced		•
Washington	WellCare	Summit (H1340-008)	PFFS	$140.90	$16.20	$0	Enhanced		•
Wayne	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Wayne	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Wayne	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Wayne	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Wayne	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Wayne	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Wayne	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Wayne	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Wayne	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Wayne	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Wayne	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Wayne	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Wayne	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Wayne	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Webster	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Webster	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Webster	Humana Insurance Company	Humana Gold Choice PFFS H1804-006 (H1804-006)	PFFS	$0.00	$0.00	$0	Enhanced		•
Webster	Humana Insurance Company	Humana Gold Choice PFFS H1804-166 (H1804-166)	PFFS	$20.00	$20.00	$0	Enhanced		•
Webster	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Webster	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Webster	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Webster	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Webster	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Webster	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Webster	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Webster	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Webster	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Webster	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Webster	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Webster	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Wheeler	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Wheeler	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Wheeler	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Wheeler	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Wheeler	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Wheeler	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Wheeler	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Wheeler	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Wheeler	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Wheeler	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Wheeler	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Wheeler	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Wheeler	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•
White	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
White	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
White	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
White	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
White	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
White	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
White	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
White	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
White	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
White	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
White	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
White	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
White	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
White	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
White	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
White	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
White	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
White	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Whitfield	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Whitfield	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Whitfield	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Whitfield	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Whitfield	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Whitfield	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Whitfield	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Whitfield	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Whitfield	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Whitfield	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Whitfield	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Whitfield	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Whitfield	SecureHorizons MedicareDirect	SecureHorizons MedicareDirect Plan 10 (H5435-010)	PFFS *	$0.00					
Whitfield	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Whitfield	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Whitfield	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Whitfield	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Whitfield	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Whitfield	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Whitfield	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Whitfield	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Wilcox	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Wilcox	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Wilcox	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-016)	PFFS *	$35.00					
Wilcox	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-025)	PFFS	$46.00	$18.30	$0	Enhanced		•
Wilcox	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-062)	PFFS *	$60.00					
Wilcox	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-064)	PFFS	$91.00	$27.60	$0	Enhanced	Generics	•
Wilcox	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Wilcox	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Wilcox	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Wilcox	InStil Health Insurance Company	InStil InCare (H4204-021)	PFFS *	$48.00					
Wilcox	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Wilcox	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Wilcox	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Wilcox	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Wilcox	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Wilcox	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Wilcox	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Wilcox	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Wilcox	WellCare	Freedom (H1340-012)	PFFS	$0.00	$0.00	$0	Enhanced		•
Wilcox	WellCare	Concert (H1340-014)	PFFS	$41.00	$3.30	$0	Enhanced		•
Wilcox	WellCare	Summit (H1340-010)	PFFS	$181.00	$43.10	$0	Enhanced		•
Wilkes	Advantra® Freedom	Freedom 2 (H0846-005)	PFFS *	$0.00					
Wilkes	Advantra® Freedom	Freedom 1 (H0846-004)	PFFS *	$98.00					
Wilkes	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•

Georgia 2007 Medicare Advantage, Cost, and Demonstration Plans

Data as of September 29, 2006. Includes all contracts/plans regardless of 2007 approval status. PACE, Special Needs Plans, and Employer sponsored plans (800 series) are excluded.

* Indicates plan does not offer Part D drug coverage.

County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C + D)	Monthly Drug Premium	Annual Drug Deductible	Drug Benefit Type	Type of Extra Coverage Offered in the Gap	Offers Variable Drug Co-payments
Wilkes	Blue Cross Blue Shield of Georgia	SmartValue Classic (H0540-015)	PFFS *	$0.00					
Wilkes	Blue Cross Blue Shield of Georgia	SmartValue Plus (H0540-024)	PFFS	$11.00	$11.00	$0	Enhanced		•
Wilkes	Blue Cross Blue Shield of Georgia	SmartValue Enhanced (H0540-061)	PFFS *	$25.00					
Wilkes	Blue Cross Blue Shield of Georgia	SmartValue Enhanced Plus (H0540-060)	PFFS	$56.00	$27.70	$0	Enhanced	Generics	•
Wilkes	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Wilkes	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Wilkes	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Wilkes	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Wilkes	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Wilkes	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Wilkes	Sierra Optima	Sierra Optima (H4449-006)	PFFS *	$81.40					
Wilkes	Sierra Optima	Sierra Optima Plus (H4449-003)	PFFS *	$149.20					
Wilkes	Sterling Life Insurance Company	Sterling Option I (H5006-011)	PFFS *	$9.00					
Wilkes	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Wilkes	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Wilkes	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Wilkes	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Wilkes	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Wilkes	WellCare	Concert (H1340-015)	PFFS	$80.90	$41.70	$0	Enhanced		•
Wilkes	WellCare	Summit (H1340-011)	PFFS	$211.00	$48.60	$0	Enhanced		•
Wilkinson	Advantra® Freedom	Freedom 3 (H0846-006)	PFFS *	$0.00					
Wilkinson	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Wilkinson	Humana Insurance Company	Humana Gold Choice PFFS H1804-014 (H1804-014)	PFFS	$79.00	$25.30	$0	Enhanced		•
Wilkinson	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Wilkinson	Humana Insurance Company	Humana Gold Choice PFFS H1804-168 (H1804-168)	PFFS	$99.00	$28.30	$0	Enhanced		•
Wilkinson	InStil Health Insurance Company	InStil InCare (H4204-007)	PFFS *	$7.00					
Wilkinson	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Wilkinson	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Wilkinson	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Wilkinson	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Wilkinson	Today's Option	Today's Options Value (H5421-035)	PFFS *	$12.00					
Wilkinson	Today's Option	Today's Options Premier (H5421-037)	PFFS *	$35.00					
Wilkinson	Today's Option	Today's Options Value Plus (H5421-042)	PFFS	$44.00	$31.90	$0	Basic		•
Wilkinson	Today's Option	Today's Options Premier Plus (H5421-043)	PFFS	$80.00	$44.90	$0	Enhanced	Generics	•
Worth	ANY, ANY, ANY PLAN	ANY, ANY, ANY Plan IV (H5820-004)	PFFS	$0.00	$0.00	$0	Basic		•
Worth	Humana Insurance Company	Humana Gold Choice PFFS H1804-013 (H1804-013)	PFFS	$59.00	$25.70	$0	Enhanced		•
Worth	Humana Insurance Company	Humana Gold Choice PFFS H1804-167 (H1804-167)	PFFS	$79.00	$26.70	$0	Enhanced		•
Worth	Humana Insurance Company	HumanaChoicePPO PPO R5826-004 (R5826-004)	Regional PPO	$81.00	$29.30	$0	Basic		•
Worth	InStil Health Insurance Company	InStil InCare (H4204-008)	PFFS *	$0.00					
Worth	InStil Health Insurance Company	InStil InChoice Option I - Regional (R5553-001)	Regional PPO	$53.00	$39.90	$0	Basic		•
Worth	InStil Health Insurance Company	InStil InChoice Option II - Regional (R5553-002)	Regional PPO	$121.00	$53.50	$0	Enhanced	Generics	•
Worth	Sierra Optima	Sierra Optima (H4449-007)	PFFS *	$218.20					
Worth	Sterling Life Insurance Company	Sterling Option II (H5006-010)	PFFS	$28.70	$28.70	$100	Enhanced		•
Worth	Today's Option	Today's Options Value (H5421-032)	PFFS *	$48.00					
Worth	Today's Option	Today's Options Premier (H5421-034)	PFFS *	$72.00					
Worth	Today's Option	Today's Options Value Plus (H5421-040)	PFFS	$80.00	$31.90	$0	Basic		•
Worth	Today's Option	Today's Options Premier Plus (H5421-041)	PFFS	$117.00	$44.90	$0	Enhanced	Generics	•