

*Landscape of Plan  
Options in  
Washington*

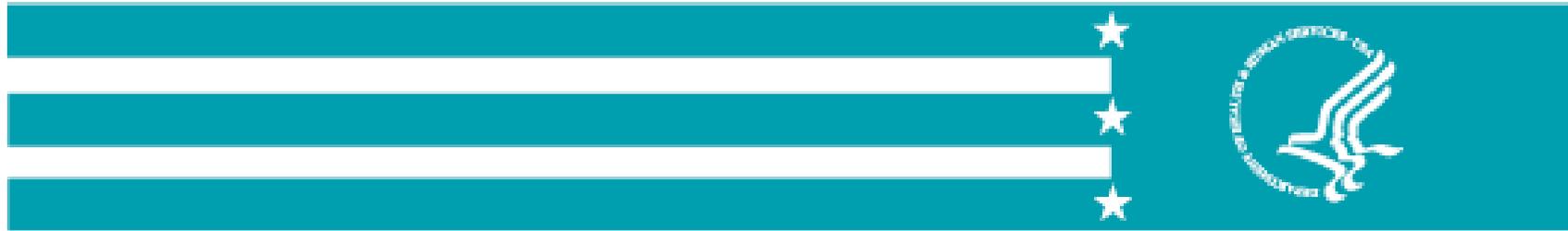
**Medicare**<sub>Rx</sub>  
Prescription Drug Coverage

**Medicare Advantage  
Cost Plans and Demonstrations**

1-800-MEDICARE  
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# CENTERS FOR MEDICARE & MEDICAID SERVICES



## Medicare Advantage, Cost Plans, and Demonstrations Landscape

### What is the Landscape of Local Plans?

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

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

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

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

#### DESCRIPTION

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

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

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

## Type of Medicare Health Plan

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

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

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

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

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

## COST

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

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

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

## COVERAGE

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

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

**Generics Only:** Plan covers generic drugs in coverage gap.

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

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

## CONVENIENCE

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

For more information about Medicare prescription drug coverage, visit [www.medicare.gov](http://www.medicare.gov) on the web.

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

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

# Washington Medicare Advantage, Cost Plans, and Demonstrations

Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
Adams	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Asotin	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Benton	Spokane Community Care	Columbia Community Care - Basic	Local HMO	\$0.00	-					
		Columbia Community Care - Plus	Local HMO	\$20.00	\$20.00	\$0	•	G	98	•
		Columbia Community Care - Premier	Local HMO	\$40.00	\$29.52	\$0	•	G	98	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Chelan	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Clallam	Regence BlueShield	MedAdvantage	Local PPO	\$99.00	-					
		MedAdvantage + Rx	Local PPO	\$116.00	\$17.40	\$250	•		100	•
	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Clark	Health Net Options Plus	Health Net Options Plus	Local PPO	\$53.00	-					
		Health Net Options Plus Rx	Local PPO	\$67.00	\$13.72	\$0	•		100	•
	Kaiser Foundation Health Plan of the NW	Senior Advantage	Local HMO	\$76.00	\$0.00	\$0	•	G	69	•
		Senior Advantage II	Demo	\$215.01	\$100.36	\$0	•	G/B	69	•
		Senior Advantage - B Only	Local HMO	\$327.00	\$0.00	\$0	•	G	69	•
	Providence Health Plan	Providence Medicare Extra Plan 2	Local HMO	\$40.00	-					
		Providence Medicare Extra Plan 1	Local HMO	\$75.00	-					
		Providence Medicare Extra Plan 2 + RX	Local HMO	\$80.00	\$30.00	\$250			89	•
		Providence Medicare Extra Plan 1 + RX	Local HMO	\$115.00	\$30.00	\$250			89	•
	Regence BlueCross BlueShield Of Oregon	First Choice Sixty-Five	Local HMO	\$69.00	-					
		MedAdvantage	Local PPO	\$72.00	-					
		First Choice Sixty-Five + Rx	Local HMO	\$87.00	\$17.90	\$250	•		100	•

# Washington Medicare Advantage, Cost Plans, and Demonstrations

Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		MedAdvantage + Rx	Local PPO	\$89.00	\$17.40	\$250	•		100	•
		First Choice Sixty-Five, Part B Only	Local HMO	\$443.49	-					
		First Choice Sixty-Five Part B Only + Rx	Local HMO	\$460.00	\$17.90	\$250	•		100	•
	Secure Horizons Medicare Advantage Plan	Secure Horizons Classic Plan	Local HMO	\$87.00	\$19.98	\$0	•		82	•
	SecureHorizons Direct	SecureHorizons Direct Plan 6	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
	United Healthcare Insurance Company	UnitedHealthcare MedicareComp Essential Rx	PFFS	\$0.00	\$0.00	\$0	•		100	•
Columbia	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Cowlitz	Kaiser Foundation Health Plan of the NW	Senior Advantage	Local HMO	\$86.00	\$0.00	\$0	•	G	69	•
		Senior Advantage - B Only	Local HMO	\$327.00	\$0.00	\$0	•	G	69	•
	Secure Horizons Medicare Advantage Plan	Secure Horizons Medical Plan	Local HMO	\$0.00	-					
		Secure Horizons Classic Plan	Local HMO	\$20.00	\$0.00	\$0	•		82	•
	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	\$25.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Douglas	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Ferry	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Franklin	Spokane Community Care	Columbia Community Care - Basic	Local HMO	\$0.00	-					
		Columbia Community Care - Plus	Local HMO	\$20.00	\$20.00	\$0	•	G	98	•
		Columbia Community Care - Premier	Local HMO	\$40.00	\$29.52	\$0	•	G	98	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					

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Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
Garfield	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Grant	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Grays Harbor	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$112.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$141.00	\$21.18	\$250			79	•
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Island	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$112.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$141.00	\$21.18	\$250			79	•
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	Secure Horizons Medicare Advantage Plan	Secure Horizons Classic Plan	Local HMO	\$66.00	\$20.38	\$0	•		82	•
	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Jefferson	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
King	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$83.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$111.00	\$21.18	\$250			79	•
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	Regence BlueShield	MedAdvantage	Local PPO	\$99.00	-					

# Washington Medicare Advantage, Cost Plans, and Demonstrations

Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		MedAdvantage + Rx	Local PPO	\$116.00	\$17.40	\$250	•		100	•
	Secure Horizons Medicare Advantage Plan	Secure Horizons Classic Plan	Local HMO	\$88.00	\$19.81	\$250	•		82	•
		Secure Horizons Value Plan	Local HMO	\$95.00	\$21.06	\$0	•		82	•
	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Kitsap	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$112.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$141.00	\$21.18	\$250			79	•
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	Regence BlueShield	MedAdvantage	Local PPO	\$99.00	-					
		MedAdvantage + Rx	Local PPO	\$116.00	\$17.40	\$250	•		100	•
	SecureHorizons Direct	SecureHorizons Direct Plan 1	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Kittitas	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Klickitat	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
	United Healthcare Insurance Company	UnitedHealthcare MedicareComp Essential Rx	PFFS	\$0.00	\$0.00	\$0	•		100	•
Lewis	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$112.00	-					

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		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$141.00	\$21.18	\$250			79	•
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	Kaiser Foundation Health Plan of the NW	Senior Advantage	Local HMO	\$86.00	\$0.00	\$0	•	G	69	•
		Senior Advantage - B Only	Local HMO	\$327.00	\$0.00	\$0	•	G	69	•
	Secure Horizons Medicare Advantage Plan	Secure Horizons Medical Plan	Local HMO	\$65.00	-					
		Secure Horizons Classic Plan	Local HMO	\$88.00	\$19.81	\$250	•		82	•
		Secure Horizons Value Plan	Local HMO	\$95.00	\$21.06	\$0	•		82	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Lincoln	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Mason	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$83.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$111.00	\$21.18	\$250			79	•
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	\$25.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Okanogan	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Pacific	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Pend Oreille	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Pierce	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$83.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$111.00	\$21.18	\$250			79	•

# Washington Medicare Advantage, Cost Plans, and Demonstrations

Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	Regence BlueShield	MedAdvantage	Local PPO	\$99.00	-					
		MedAdvantage + Rx	Local PPO	\$116.00	\$17.40	\$250	•		100	•
	Secure Horizons Medicare Advantage Plan	Secure Horizons Classic Plan	Local HMO	\$88.00	\$19.81	\$250	•		82	•
		Secure Horizons Value Plan	Local HMO	\$95.00	\$21.06	\$0	•		82	•
	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
San Juan	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$112.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$141.00	\$21.18	\$250			79	•
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Skagit	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$112.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$141.00	\$21.18	\$250			79	•
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	Regence BlueShield	MedAdvantage	Local PPO	\$99.00	-					

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		MedAdvantage + Rx	Local PPO	\$116.00	\$17.40	\$250	•		100	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Skamania	SecureHorizons Direct	SecureHorizons Direct Plan 1	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
	United Healthcare Insurance Company	UnitedHealthcare MedicareComp Essential Rx	PFFS	\$0.00	\$0.00	\$0	•		100	•
Snohomish	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$112.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$141.00	\$21.18	\$250			79	•
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	Regence BlueShield	MedAdvantage	Local PPO	\$99.00	-					
		MedAdvantage + Rx	Local PPO	\$116.00	\$17.40	\$250	•		100	•
	Secure Horizons Medicare Advantage Plan	Secure Horizons Classic Plan	Local HMO	\$66.00	\$20.38	\$0	•		82	•
	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Spokane	Asuris Northwest Health	MedAdvantage	Local PPO	\$89.00	-					
		MedAdvantage + Rx	Local PPO	\$106.00	\$17.40	\$250	•		100	•
	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$83.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$111.00	\$21.18	\$250			79	•
	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Spokane Community Care	Spokane Community Care - Plus	Local HMO	\$0.00	\$0.00	\$0	•	G	98	•

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		Spokane Community Care - Basic	Local HMO	\$0.00	-					
		Spokane Community Care - Premier	Local HMO	\$35.00	\$30.60	\$0	•	G	98	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Stevens	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	\$25.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Thurston	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$83.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$111.00	\$21.18	\$250			79	•
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	Regence BlueShield	MedAdvantage	Local PPO	\$99.00	-					
		MedAdvantage + Rx	Local PPO	\$116.00	\$17.40	\$250	•		100	•
	Secure Horizons Medicare Advantage Plan	Secure Horizons Classic Plan	Local HMO	\$88.00	\$19.81	\$250	•		82	•
		Secure Horizons Value Plan	Local HMO	\$95.00	\$21.06	\$0	•		82	•
	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Wahkiakum	Kaiser Foundation Health Plan of the NW	Senior Advantage	Local HMO	\$86.00	\$0.00	\$0	•	G	69	•
		Senior Advantage - B Only	Local HMO	\$327.00	\$0.00	\$0	•	G	69	•
	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Walla Walla	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	\$0.00	-					

# Washington Medicare Advantage, Cost Plans, and Demonstrations

Description				Cost			Coverage			Convenience
County	Organization Name	Plan Name	Type of Medicare Health Plan	Total Premium (Including Drug Premium)	Drug Premium	Drug Deductible	Offers Variable Copayments (Tiers)	Type of Extra Coverage Offered in the Gap (G=generics; G/B=generics & brands)	Number of Top 100 Drugs on Formulary	Mail Order Offered
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Whatcom	Group Health Cooperative	GHC Medicare Plan (Medicare Parts A&B)	Local HMO	\$112.00	-					
		GHC Medicare Plan (Medicare Parts A,B,&D)	Local HMO	\$141.00	\$21.18	\$250			79	•
		GHC Medicare A,B,&D High Option Plan	Local HMO	\$260.00	\$120.07	\$0	•	G/B	79	•
		GHC Medicare Plan (Medicare Parts B,&D)	Local HMO	\$411.00	\$21.12	\$250			79	•
		GHC Medicare B,&D High Option Plan	Local HMO	\$693.00	\$147.12	\$0	•	G/B	79	•
	Regence BlueShield	MedAdvantage	Local PPO	\$99.00	-					
		MedAdvantage + Rx	Local PPO	\$116.00	\$17.40	\$250	•		100	•
	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Whitman	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					
Yakima	Regence BlueShield	MedAdvantage	Local PPO	\$99.00	-					
		MedAdvantage + Rx	Local PPO	\$116.00	\$17.40	\$250	•		100	•
	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	\$0.00	-					
		SecureHorizons Direct Premier Plan 200	PFFS	\$85.00	-					
	Spokane Community Care	Columbia Community Care - Basic	Local HMO	\$0.00	-					
		Columbia Community Care - Plus	Local HMO	\$20.00	\$20.00	\$0	•	G	98	•
		Columbia Community Care - Premier	Local HMO	\$40.00	\$29.52	\$0	•	G	98	•
	Sterling Option I	Sterling Option I	PFFS	\$9.00	-					