

## TIPS FOR EFFECTIVE USE OF THE NEW MEDICARE PLAN FINDER

10/15/19 \*This is a working document – changes may have been made since printing\*

- Google Chrome is currently the preferred browser when using the Plan Finder. Problems with both Microsoft Edge and Firefox have been reported, in particular regarding printing issues. CMS is working on improving the user experience on these alternate browsers.
- You must have a MyMedicare.gov account username and password to log in to the Plan Finder. This is the only way to access personalized data and save a drug list. **Be sure to log in or create the account through the Plan Finder page.**
- You can do an Anonymous search by selecting the “Continue without logging in” link on the Plan Finder home page. This is not recommended. If you need to do an Anonymous search, you will not be able to save the drug list.
- After launching Plan Finder for 2020 plans, the first screen will ask:
  - What type of 2020 coverage are you looking for? Select either Medicare Advantage Plan or Drug Plan (Part D) to proceed. You’ll be able to see both options later.
  - You will be required to enter the beneficiary’s zip code, which will prompt the county of residence to populate. You must click on “Select your location” to proceed (if there is more than one county, click on the correct one first).
- Subsidy level: For Anonymous searches, you must indicate whether you receive help with drug costs (e.g Extra Help). If you are logged in to an account, it will ask if the help you get is different from the subsidy level shown. If it is different, you can change it. Click on the box and then select the appropriate level of help.
- Plan Finder will ask if you want to see drug costs when you compare plans. Always select “Yes.”
- When the PlanFinder asks “how do you normally fill your prescriptions?” (retail or mail order), you can select retail, mail order or both. If you select retail, you will be able to add mail order later. It’s best not to choose mail order only.
- When logging in to the Plan Finder using your MyMedicare.gov account username and password, a list of your recent drug claims will populate, which you can edit or add drugs to. Be careful to confirm drug dosage, quantity and frequency.
- In either a logged in search or an anonymous search, you will have the option (through this OEP only) to retrieve a saved drug list from the legacy Plan Finder. You will need the drug list ID and password date. After entering those, the list will come up, but it can only be viewed or printed. You will still need to enter the drugs into the new Plan Finder.
- When adding a drug, start typing the name and then you will need to click on the drug name in the list below, and then click on “Add Drug”. After selecting the dosage and frequency from the drop down menu, and entering the quantity, click on “Add to My Drug List”. When editing a drug, after you have made a change, you must click on “Add to My Drug List” for it to be changed.
- When building a drug list, be careful not to enter the same drug more than once. The new Plan Finder does not give a warning if this is done.
- Be cautious when selecting a drug from a drop down list. Note that certain descriptions that were abbreviated on the old Plan Finder may now be spelled out fully and/or listed as the first part of the full drug name. (eg. Hcl may now be listed as Hydrochloride; Lisinopril HCTZ may now be listed as Hydrochlorothiazide/Lisinopril, etc.). Also, be sure to use the drop down menu when selecting dosage information to verify you have the correct form of the drug.
- On the Pharmacy selection page, you can select up to three retail pharmacies, or two plus mail order. To expand the pharmacy list, you can “Change Location” to a different zip code OR you can scroll to the bottom of the screen

and click on the “More Pharmacies” link. To remove a selected pharmacy, you can click on the “x” in the box below for the pharmacy you want to remove.

- Be aware that the default sort for plan results is currently “Lowest monthly premium.” On the right, above the listed plans on the plans available page, use the drop down menu to change the sort to “Lowest drug + premium cost.” Always check to be sure this is the sort you are using.
- The Plans available page includes a filter option, but as before, we suggest in most cases you DO NOT use this option.
- To view detailed information for a plan, click on “Plan Details”.
- If you need to add, edit, or remove a drug from the list, click on “Edit/Remove drugs” below “My drug list” on the Plan Details page.
- In order to change pharmacy selections:
  - If you are on the Plans available page, hit the previous page/back arrow once and uncheck the current pharmacy selections and replace.
  - If you are in Plan details, click on the “Edit/Remove drugs” link under My Drugs list. Re-confirm the drug list by hitting “Done”. This will bring you back to the Pharmacy selection page.
- In order to switch between viewing PDP plans and MA plans, you will see a link at the top right of the Plan Results page for each option, that will bring you to the alternate list of plans. There is no longer a “View all” option to scroll through all of the MA or PDP plans on one screen; you will need to use the page forward function at the bottom of the screen.
- In order to view 2019 plans, there is a link at the top left side of the Plans available page.
- When viewing MA plans, the plan benefits will be shown in detail. There is no longer a separate tab for drug costs. To see the drug cost details, you need to scroll to the bottom of the screen or click on one of the links on the left hand side of the screen to go directly to a specific section.
- Restrictions, including quantity limits (QL), are noted in the “other drug information” section of the Plan Details page, but there is no link to take you to the details of the restriction. Instead, you will see a notification to call the plan directly. CMS has indicated they are working on adding the QL amounts for OEP.
- Pharmacies are not tabbed as before and are not necessarily listed in order of lowest total cost on the Plan Details page. Be sure to scroll all the way down to identify which pharmacy has the lowest cost. Also, note that monthly costs are not totaled on the Plan Details page, in addition to monthly costs.
- The Plan Finder has only three frequency options: every month, every 2 months and every 3 months. There is currently no option for every 12 months/once per year. If a drug list has a drug frequency with a frequency of once per year, it is recommended that it be left out initially to find the lowest cost plan, then it can be added in at a frequency of every 3 months to see how the lowest cost plans cover it. As before, we recommend that you do NOT use the every 2 month option.
- The “Lower your Drug Costs” link on the Plan Results page of the legacy Plan Finder has been replaced by a link on each individual Plan Details page on the new Plan Finder (under the Drug Costs and Coverage section) that says “See if there’s help to lower costs for drugs you take.” Clicking this link takes you out of the Plan Finder to a Medicare.gov page with general information that is not specific to the drugs you entered.
- Plan detail printouts can run up to 5 pages for one plan. To minimize the number of pages, it may be possible to change the “scale” on your print settings to a custom setting of “55” to reduce the total number of pages. CMS is working on improving print capabilities.