## 2025 Medicare Advantage cost per plan

		High cost	medications mo	nthly cost per p	lan at preferred	d pharmacy		
		Drug	Brilinta	Eliquis	Entresto	Farxiga	Jardiance	Xarelto
Plan	Premium	Deductible						
AARP Medicare Advantage CareFlex from UHC FL-34 (HMO- POS) - H1045- 059-0	<b>\$0</b>	\$495	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00
AARP Medicare Advantage from UHC FL-003P (HMO-POS) H1045-045-0	<b>\$0</b>	\$175	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00
AARP Medicare Advantage from UHC FL-0006 (HMO-POS) - H1045-028-0	\$0	\$175	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00
AARP Medicare Advantage from UHC FL-0010 (HMO-POS) - H1045-034-0	\$0	\$175	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00
AARP Medicare Advantage from UHC FL-0017 (PPO) - H2406- 009-0	\$0	\$420	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00
AARP Medicare Advantage from UHC FL-0019 (PPO)	\$0	\$420	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00

H2406-011-0								
AARP Medicare Advantage from UHC FL-0031 (Regional PPO) R0759-001-0	\$23	\$570	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00
Advantage Care (HMO) H9917-005-0	<b>\$0</b>	\$400	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00
Aetna Medicare Choice (HMO- POS) - H1609- 028-0	\$0	\$590	\$113.82	\$143.91	\$166.55	\$140.97	\$147.95	\$137.90
Aetna Medicare FL Explorer Premier (PPO) - H5521-438-0	\$0	\$590	\$113.82	\$143.91	\$166.55	\$140.97	\$147.95	\$137.90
Aetna Medicare FL Select (HMO) - H1609-025-0	\$0	\$0	\$159.34	\$149.90	\$173.49	\$146.84	\$154.11	\$143.65
Aetna Medicare Premier (PPO) - H5521-033-0 H5521-272-0	<b>\$0</b>	\$590	\$113.82	\$143.91	\$166.55	\$140.97	\$147.95	\$137.90
Aetna Medicare Value (HMO) - H1609-026-0	\$0	\$0	\$159.22	\$149.82	\$173.40	\$146.75	\$154.02	\$143.56
BayCarePlus Complete (HMO) H2235-001-0	\$0	\$420	\$35.00	\$35.00	\$35.00	\$35.00	\$35.00	\$35.00
BayCarePlus Rewards (HMO) H2235-002-0	\$0	\$0	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00

BayCarePlus Premier (HMO) H2235-003-0	\$49	\$0	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00
BlueMedicare Classic (HMO) - H1035-019-0	\$0	\$0	\$40.00	\$40.00	\$40.00	\$40.00	\$40.00	\$40.00
BlueMedicare Preferred (HMO) H1035-052-0	\$0	\$0	\$25.00	\$25.00	\$25.00	\$25.00	\$25.00	\$25.00
BlueMedicare Premier (HMO) - H1035-045-0	\$0	<b>\$0</b>	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00
BlueMedicare Select (PPO) H5434-002-0	\$112.90	\$290	\$115.49	\$151.87	\$175.81	\$148.80	\$156.20	\$145.57
BlueMedicare Value (PPO) - H5434-024-0	<b>\$0</b>	\$175	\$115.49	\$151.87	\$175.81	\$148.80	\$156.20	\$145.57
CareOne Plus (HMO) H1019-103-2	\$0	<b>\$0</b>	\$5.00	\$5.00	\$5.00	\$179.03	\$5.00	\$5.00
CareFree Giveback (HMO) H1019-104-2	\$0	<b>\$0</b>	\$30.00	\$30.00	\$30.00	\$195.81	\$30.00	\$30.00
CareAccess (HMO) H1019-144-0	\$0	<b>\$0</b>	\$30.00	\$30.00	\$30.00	\$195.81	\$30.00	\$30.00
Cigna Preferred Medicare (HMO) - H5410-029-0	\$0	\$0	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00
Cigna Preferred Savings Medicare (HMO) - H5410- 030-0	\$0	\$0	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00	\$45.00

Devoted CORE Florida (HMO) H1290-025-0	\$0	\$590	\$105.34	\$138.76	\$160.61	\$135.92	\$142.66	\$132.97
Devoted SELECT Florida (HMO) H1290-044-3	\$0	\$590	\$105.34	\$138.76	\$160.61	\$135.92	\$142.66	\$132.97
Devoted EXTRA Florida (HMO) H1290-061-0	<b>\$0</b>	\$590	\$105.34	\$138.76	\$160.61	\$135.92	\$142.66	\$132.97
Devoted GIVEBACK Florida (HMO) H1290-032-0	<b>\$0</b>	\$590	\$105.34	\$138.76	\$160.61	\$135.92	\$142.66	\$132.97
Freedom Máximo (HMO-POS) H5427-113-0	\$0	\$0	\$70.00	\$35.00	\$35.00	\$35.00	\$35.00	\$35.00
Freedom Medicare Plan Rx (HMO) - H5427- 060-0	\$0	\$0	\$95.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00
Freedom Platinum Plan Rx (HMO) - H5427- 091-0	\$0	\$0	\$75.00	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00
Freedom Platinum Rewards Plan Rx (HMO) - H5427- 103-0	\$0	\$0	\$85.00	\$35.00	\$35.00	\$35.00	\$35.00	\$35.00
Gold Advantage (HMO-POS) - H1526-005-0	\$0	\$0	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00

HumanaChoice R5826-074 (Regional PPO) R5826-074-0	\$23	\$395	\$47.00	\$47.00	\$47.00	\$268.54	\$47.00	\$47.00
HumanaChoice R5826-005 (Regional PPO) R5826-005-0	\$172	\$100	\$47.00	\$47.00	\$47.00	\$279.73	\$47.00	\$47.00
Humana Full Access Giveback H5216-393 (PPO) - H5216-393-0	\$0	<b>\$0</b>	\$30.00	\$30.00	\$30.00	\$184.62	\$30.00	\$30.00
Humana Gold Plus Giveback H1036-265 (HMO) - H1036- 265-2	\$0	\$0	\$30.00	\$30.00	\$30.00	\$195.81	\$30.00	\$30.00
Humana Gold Plus H1036-025 (HMO)	\$0	\$0	\$5.00	\$5.00	\$5.00	\$55.00	\$5.00	\$5.00
Humana Gold Plus H1036-074 (HMO) - H1036- 074-0	\$0	\$0	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00	\$10.00
HumanaChoice Florida Giveback H5216-452 (PPO) - H5216-452-0	\$0	<b>\$0</b>	\$30.00	\$30.00	\$30.00	\$195.81	\$30.00	\$30.00
HumanaChoice Florida H5216- 072 (PPO) - H5216-072-0	\$0	\$250	\$47.00	\$47.00	\$47.00	\$212.59	\$47.00	\$47.00
HumanaChoice Florida H5216-	\$0	\$300	\$47.00	\$47.00	\$47.00	\$195.81	\$47.00	\$47.00

304 (PPO) - H5216-304-0								
Optimum Gold Plan (HMO) - H5594-019-0	\$0	\$0	\$95.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00
Optimum Gold Rewards Plan (HMO) H5594-001-0	\$0	\$0	\$15.00	\$5.00	\$5.00	\$5.00	\$5.00	\$5.00
Optimum Platinum Plan (HMO) H5594-002-0	\$0	\$0	\$50.00	\$5.00	\$5.00	\$5.00	\$5.00	\$5.00
Premier by Ultimate (HMO) - H2962-047-0	\$0	\$0	\$25.00	\$25.00	\$75.00	\$25.00	\$25.00	\$25.00
Simply Freedom (PPO) - H9469- 007-0	\$0	\$125	\$42.00	\$42.00	\$42.00	\$42.00	\$42.00	\$42.00
Simply Extra (HMO) H5471-108-0	\$0	\$0	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00
Simply Extra Platinum (HMO) H5471-117-0	\$0	\$0	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00	\$47.00
Simply More (HMO) H5471-078-0	<b>\$0</b>	<b>\$0</b>	\$35.00	\$35.00	\$35.00	\$35.00	\$35.00	\$35.00
Solis Healthy Living Plan (HMO) H0982-009-0	\$0	\$0	\$15.00	\$15.00	\$15.00	\$15.00	\$15.00	\$15.00

Wellcare Giveback (HMO) - H1032-198-0 H1032-200-0	\$0	\$420	\$103.11	\$142.56	\$157.11	\$132.89	\$139.49	\$130.04
Wellcare Simple (HMO) - H1032- 199-0 H1032-201-0	\$0	\$420	\$103.11	\$142.56	\$157.11	\$132.89	\$139.49	\$130.04

PREFERRED PHARMACY BY PLAN											
	CVS	Publix	Walgreens	Walmart	Mail-order	No preferred, ALL In-network					
PLAN											
AETNA	Χ	X									
Advantage						X					
Baycare						X					
CarePlus						X					
CIGNA		X	X								
DEVOTED						X					
Florida Blue						X					
Freedom	Χ	Χ		X							
GOLD						X					
HUMANA						X					
Optimum	Χ	X		X							
Simply Freedom	Χ	Χ		X							
Solis						X					
Ultimate (Premier)						X					
United Healthcare (AARP)					Х						
Wellcare	Χ	Χ	Х								