Louisiana Medicare Advantage Plans (by parish) and their Drug Plans

Description				Cost				Coverage		Convenience
Parish	**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**
Acadia	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Acadia	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Acadia	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Acadia	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Acadia	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Allen	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Allen	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Allen	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Allen	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Allen	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	$25.00	-					
Allen	SecureHorizons Direct	SecureHorizons Direct Premier Plan 100	PFFS	$95.00	-					
Allen	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Ascension	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 001	Local PPO	$43.00	$27.44	$0	•		99	•
Ascension	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 005	Local HMO	$0.00	$0.00	$0	•	G	99	•
Ascension	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 009	Local HMO	$0.00	-					
Ascension	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
Ascension	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Ascension	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Ascension	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Ascension	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	$0.00	-					
Ascension	SecureHorizons Direct	SecureHorizons Direct Premier Plan 200	PFFS	$85.00	-					
Ascension	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Ascension	WellCare	WellCare Value	Local HMO	$0.00	$0.00	$0	•		86	•
Ascension	WellCare	WellCare Choice	Local HMO	$0.00	$0.00	$0	•		86	•

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	**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**
Ascension	WellCare	WellCare Advance	Local HMO	$0.00	-					
Assumption	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-001	PFFS	$12.97	$12.97	$0	•		99	•
Assumption	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Assumption	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Assumption	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Assumption	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	$0.00	-					
Assumption	SecureHorizons Direct	SecureHorizons Direct Premier Plan 200	PFFS	$85.00	-					
Assumption	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Avoyelles	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
Avoyelles	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Avoyelles	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Avoyelles	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Avoyelles	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Beauregard	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
Beauregard	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Beauregard	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Beauregard	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Beauregard	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Bienville	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Bienville	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Bienville	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Bienville	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Bienville	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Bossier	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 003	Local PPO	$59.00	$27.44	$0	•		99	•

Louisiana Medicare Advantage

Description				Cost				Coverage		Convenience
Parish	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
Bossier	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 013	Local HMO	$0.00	$0.00	$0	•		99	•
Bossier	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Bossier	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Bossier	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Bossier	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Bossier	SecureHorizons Direct	SecureHorizons Direct Plan 5	PFFS	$45.00	-					
Bossier	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Caddo	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 003	Local PPO	$59.00	$27.44	$0	•		99	•
Caddo	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 013	Local HMO	$0.00	$0.00	$0	•		99	•
Caddo	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Caddo	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Caddo	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Caddo	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Caddo	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Calcasieu	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
Calcasieu	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Calcasieu	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Calcasieu	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Calcasieu	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	$25.00	-					
Calcasieu	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Caldwell	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Caldwell	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Caldwell	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Caldwell	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	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
Caldwell	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Cameron	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
Cameron	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Cameron	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Cameron	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Cameron	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	$25.00	-					
Cameron	SecureHorizons Direct	SecureHorizons Direct Premier Plan 100	PFFS	$95.00	-					
Cameron	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Catahoula	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Catahoula	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Catahoula	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Catahoula	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Catahoula	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Claiborne	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Claiborne	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Claiborne	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Claiborne	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Claiborne	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Concordia	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Concordia	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Concordia	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Concordia	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Concordia	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
De Soto	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	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
De Soto	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
De Soto	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
De Soto	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
De Soto	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
East Baton Rouge	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 001	Local PPO	$43.00	$27.44	$0	•		99	•
East Baton Rouge	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 005	Local HMO	$0.00	$0.00	$0	•	G	99	•
East Baton Rouge	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 009	Local HMO	$0.00	-					
East Baton Rouge	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
East Baton Rouge	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
East Baton Rouge	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
East Baton Rouge	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
East Baton Rouge	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	$25.00	-					
East Baton Rouge	SecureHorizons Direct	SecureHorizons Direct Premier Plan 100	PFFS	$95.00	-					
East Baton Rouge	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
East Baton Rouge	WellCare	WellCare Choice	Local HMO	$0.00	$0.00	$0	•		86	•
East Baton Rouge	WellCare	WellCare Value	Local HMO	$0.00	$0.00	$0	•		86	•
East Baton Rouge	WellCare	WellCare Advance	Local HMO	$0.00	-					
East Carroll	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
East Carroll	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
East Carroll	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
East Carroll	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
East Carroll	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
East Feliciana	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
East Feliciana	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	**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**
East Feliciana	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
East Feliciana	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
East Feliciana	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	$25.00	-					
East Feliciana	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
East Feliciana	WellCare	WellCare Value	Local HMO	$0.00	$0.00	$0	•		86	•
East Feliciana	WellCare	WellCare Choice	Local HMO	$0.00	$0.00	$0	•		86	•
East Feliciana	WellCare	WellCare Advance	Local HMO	$0.00	-					
Evangeline	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Evangeline	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Evangeline	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Evangeline	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Evangeline	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Franklin	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Franklin	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Franklin	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Franklin	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Franklin	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Grant	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
Grant	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Grant	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Grant	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Grant	SecureHorizons Direct	SecureHorizons Direct Plan 5	PFFS	$45.00	-					
Grant	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Iberia	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	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
Iberia	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Iberia	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Iberia	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Iberia	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Iberville	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 001	Local PPO	$43.00	$27.44	$0	•		99	•
Iberville	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 005	Local HMO	$0.00	$0.00	$0	•	G	99	•
Iberville	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 009	Local HMO	$0.00	-					
Iberville	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-001	PFFS	$12.97	$12.97	$0	•		99	•
Iberville	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Iberville	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Iberville	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Iberville	SecureHorizons Direct	SecureHorizons Direct Plan 1	PFFS	$0.00	-					
Iberville	SecureHorizons Direct	SecureHorizons Direct Premier Plan 200	PFFS	$85.00	-					
Iberville	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Jackson	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Jackson	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Jackson	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Jackson	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Jackson	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Jefferson	Tenet HealthCare Select	Tenet HealthCare Select	Local PPO	$60.00	$0.00	$0	•	G/B	88	•
Jefferson	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 002	Local PPO	$43.00	$27.44	$0	•		99	•
Jefferson	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 001	Local HMO	$0.00	$0.00	$0	•		99	•
Jefferson	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 008	Local HMO	$0.00	-					
Jefferson	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	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
Jefferson	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Jefferson	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Jefferson	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Jefferson	Tenet Choices 65	Tenet Choices 65	Local HMO	$0.00	$0.00	$0	•	G/B	88	•
Jefferson	WellCare	WellCare Choice	Local HMO	$0.00	$0.00	$0	•		86	•
Jefferson	WellCare	WellCare Prescription Plus	Local HMO	$0.00	$0.00	$0	•	G	86	•
Jefferson	WellCare	WellCare Advance	Local HMO	$0.00	-					
Jefferson Davis	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Jefferson Davis	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Jefferson Davis	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Jefferson Davis	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Jefferson Davis	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
La Salle	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
La Salle	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
La Salle	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
La Salle	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
La Salle	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Lafayette	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Lafayette	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Lafayette	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Lafayette	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Lafayette	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Lafourche	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-001	PFFS	$12.97	$12.97	$0	•		99	•
Lafourche	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	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
Lafourche	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Lafourche	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Lafourche	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	$0.00	-					
Lafourche	SecureHorizons Direct	SecureHorizons Direct Premier Plan 200	PFFS	$85.00	-					
Lincoln	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Lincoln	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Lincoln	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Lincoln	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Lincoln	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Livingston	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 001	Local PPO	$43.00	$27.44	$0	•		99	•
Livingston	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 005	Local HMO	$0.00	$0.00	$0	•	G	99	•
Livingston	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 009	Local HMO	$0.00	-					
Livingston	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
Livingston	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Livingston	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Livingston	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Livingston	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Livingston	WellCare	WellCare Choice	Local HMO	$0.00	$0.00	$0	•		86	•
Livingston	WellCare	WellCare Value	Local HMO	$0.00	$0.00	$0	•		86	•
Livingston	WellCare	WellCare Advance	Local HMO	$0.00	-					
Madison	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Madison	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Madison	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Madison	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	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
Madison	SecureHorizons Direct	SecureHorizons Direct Plan 3	PFFS	$0.00	-					
Madison	SecureHorizons Direct	SecureHorizons Direct Premier Plan 100	PFFS	$95.00	-					
Madison	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Morehouse	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Morehouse	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Morehouse	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Morehouse	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Morehouse	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Natchitoches	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Natchitoches	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Natchitoches	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Natchitoches	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Natchitoches	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Orleans	Tenet HealthCare Select	Tenet HealthCare Select	Local PPO	$60.00	$0.00	$0	•	G/B	88	•
Orleans	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 002	Local PPO	$43.00	$27.44	$0	•		99	•
Orleans	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 001	Local HMO	$0.00	$0.00	$0	•		99	•
Orleans	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 008	Local HMO	$0.00	-					
Orleans	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
Orleans	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Orleans	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Orleans	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Orleans	Tenet Choices 65	Tenet Choices 65	Local HMO	$0.00	$0.00	$0	•	G/B	88	•
Orleans	WellCare	WellCare Choice	Local HMO	$0.00	$0.00	$0	•	G	86	•
Orleans	WellCare	WellCare Advance	Local HMO	$0.00	-					

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	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
Ouachita	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Ouachita	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Ouachita	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Ouachita	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Ouachita	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Plaquemines	Tenet HealthCare Select	Tenet HealthCare Select	Local PPO	$60.00	$0.00	$0	•	G/B	88	•
Plaquemines	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 002	Local PPO	$43.00	$27.44	$0	•		99	•
Plaquemines	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 001	Local HMO	$0.00	$0.00	$0	•		99	•
Plaquemines	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 008	Local HMO	$0.00	-					
Plaquemines	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
Plaquemines	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Plaquemines	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Plaquemines	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Plaquemines	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	$0.00	-					
Plaquemines	SecureHorizons Direct	SecureHorizons Direct Premier Plan 200	PFFS	$85.00	-					
Plaquemines	Tenet Choices 65	Tenet Choices 65	Local HMO	$0.00	$0.00	$0	•	G/B	88	•
Pointe Coupee	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-001	PFFS	$12.97	$12.97	$0	•		99	•
Pointe Coupee	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Pointe Coupee	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Pointe Coupee	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Pointe Coupee	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	$0.00	-					
Pointe Coupee	SecureHorizons Direct	SecureHorizons Direct Premier Plan 200	PFFS	$85.00	-					
Pointe Coupee	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Pointe Coupee	WellCare	WellCare Choice	Local HMO	$0.00	$0.00	$0	•		86	•

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	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
Pointe Coupee	WellCare	WellCare Value	Local HMO	$0.00	$0.00	$0	•		86	•
Pointe Coupee	WellCare	WellCare Advance	Local HMO	$0.00	-					
Rapides	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
Rapides	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Rapides	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Rapides	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Rapides	SecureHorizons Direct	SecureHorizons Direct Plan 5	PFFS	$45.00	-					
Rapides	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Red River	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Red River	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Red River	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Red River	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Red River	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Richland	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Richland	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Richland	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Richland	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Richland	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Sabine	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Sabine	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Sabine	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Sabine	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Sabine	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
St. Bernard	Tenet HealthCare Select	Tenet HealthCare Select	Local PPO	$60.00	$0.00	$0	•	G/B	88	•

Louisiana Medicare Advantage

Description				Cost				Coverage		Convenience
Parish	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
St. Bernard	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 002	Local PPO	$43.00	$27.44	$0	•		99	•
St. Bernard	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 001	Local HMO	$0.00	$0.00	$0	•		99	•
St. Bernard	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 008	Local HMO	$0.00	-					
St. Bernard	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
St. Bernard	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
St. Bernard	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
St. Bernard	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
St. Bernard	Tenet Choices 65	Choices Plus	Local HMO	$0.00	$0.00	$0	•	G/B	88	•
St. Bernard	WellCare	WellCare Choice	Local HMO	$0.00	$0.00	$0	•	G	86	•
St. Bernard	WellCare	WellCare Advance	Local HMO	$0.00	-					
St. Charles	Tenet HealthCare Select	Tenet HealthCare Select	Local PPO	$60.00	$0.00	$0	•	G/B	88	•
St. Charles	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 002	Local PPO	$43.00	$27.44	$0	•		99	•
St. Charles	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 001	Local HMO	$0.00	$0.00	$0	•		99	•
St. Charles	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 008	Local HMO	$0.00	-					
St. Charles	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
St. Charles	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
St. Charles	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
St. Charles	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
St. Charles	Tenet Choices 65	Choices Plus	Local HMO	$0.00	$0.00	$0	•	G/B	88	•
St. Helena	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
St. Helena	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
St. Helena	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
St. Helena	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
St. Helena	Sterling Option I	Sterling Option I	PFFS	$9.00	-					

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	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
St. James	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
St. James	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
St. James	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
St. James	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
St. James	SecureHorizons Direct	SecureHorizons Direct Plan 1	PFFS	$0.00	-					
St. James	SecureHorizons Direct	SecureHorizons Direct Premier Plan 200	PFFS	$85.00	-					
St. John the Baptist	Tenet HealthCare Select	Tenet HealthCare Select	Local PPO	$60.00	$0.00	$0	•	G/B	88	•
St. John the Baptist	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
St. John the Baptist	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
St. John the Baptist	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
St. John the Baptist	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
St. John the Baptist	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	$25.00	-					
St. John the Baptist	Tenet Choices 65	Choices Plus	Local HMO	$0.00	$0.00	$0	•	G/B	88	•
St. Landry	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
St. Landry	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
St. Landry	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
St. Landry	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
St. Landry	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
St. Martin	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
St. Martin	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
St. Martin	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
St. Martin	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
St. Martin	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
St. Mary	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-001	PFFS	$12.97	$12.97	$0	•		99	•

Louisiana Medicare Advantage

Description				Cost				Coverage		Convenience
Parish	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
St. Mary	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
St. Mary	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
St. Mary	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
St. Mary	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	$0.00	-					
St. Mary	SecureHorizons Direct	SecureHorizons Direct Premier Plan 200	PFFS	$85.00	-					
St. Mary	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
St. Tammany	Tenet HealthCare Select	Tenet HealthCare Select	Local PPO	$60.00	$0.00	$0	•	G/B	88	•
St. Tammany	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 002	Local PPO	$43.00	$27.44	$0	•		99	•
St. Tammany	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 001	Local HMO	$0.00	$0.00	$0	•		99	•
St. Tammany	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 008	Local HMO	$0.00	-					
St. Tammany	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
St. Tammany	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
St. Tammany	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
St. Tammany	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
St. Tammany	Tenet Choices 65	Tenet Choices 65	Local HMO	$0.00	$0.00	$0	•	G/B	88	•
Tangipahoa	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Tangipahoa	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Tangipahoa	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Tangipahoa	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Tangipahoa	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Tensas	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Tensas	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Tensas	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Tensas	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	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
Tensas	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Terrebonne	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-001	PFFS	$12.97	$12.97	$0	•		99	•
Terrebonne	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Terrebonne	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Terrebonne	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Terrebonne	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	$25.00	-					
Terrebonne	SecureHorizons Direct	SecureHorizons Direct Premier Plan 100	PFFS	$95.00	-					
Union	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Union	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Union	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Union	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Union	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Vermilion	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Vermilion	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Vermilion	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Vermilion	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Vermilion	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Vernon	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Vernon	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Vernon	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Vernon	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Vernon	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Washington	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 001	Local HMO	$0.00	$0.00	$0	•		99	•
Washington	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 008	Local HMO	$0.00	-					

Louisiana Medicare Advantage

Description				Cost			Coverage			Convenience
Parish	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
Washington	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Washington	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Washington	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Washington	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Washington	SecureHorizons Direct	SecureHorizons Direct Plan 4	PFFS	$25.00	-					
Washington	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
Webster	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Webster	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Webster	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Webster	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Webster	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
West Baton Rouge	Humana Health Benefit Plan Of LA	HumanaChoicePPO PPO H1905 001	Local PPO	$43.00	$27.44	$0	•		99	•
West Baton Rouge	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 005	Local HMO	$0.00	$0.00	$0	•	G	99	•
West Baton Rouge	Humana Health Benefit Plan Of Louisiana Inc	Humana Gold Plus HMO H1951 009	Local HMO	$0.00	-					
West Baton Rouge	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-002	PFFS	$83.00	$27.38	$0	•		99	•
West Baton Rouge	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
West Baton Rouge	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
West Baton Rouge	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
West Baton Rouge	SecureHorizons Direct	SecureHorizons Direct Plan 2	PFFS	$0.00	-					
West Baton Rouge	SecureHorizons Direct	SecureHorizons Direct Premier Plan 200	PFFS	$85.00	-					
West Baton Rouge	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
West Baton Rouge	WellCare	WellCare Value	Local HMO	$0.00	$0.00	$0	•		86	•
West Baton Rouge	WellCare	WellCare Choice	Local HMO	$0.00	$0.00	$0	•		86	•
West Baton Rouge	WellCare	WellCare Advance	Local HMO	$0.00	-					

Louisiana Medicare Advantage

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
West Carroll	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
West Carroll	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
West Carroll	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
West Carroll	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
West Carroll	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
West Feliciana	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
West Feliciana	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
West Feliciana	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
West Feliciana	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
West Feliciana	Sterling Option I	Sterling Option I	PFFS	$9.00	-					
West Feliciana	WellCare	WellCare Choice	Local HMO	$0.00	$0.00	$0	•		86	•
West Feliciana	WellCare	WellCare Value	Local HMO	$0.00	$0.00	$0	•		86	•
West Feliciana	WellCare	WellCare Advance	Local HMO	$0.00	-					
Winn	Humana Health Plan of LA, Inc.	Humana Gold Choice PFFS H1906-003	PFFS	$103.00	$27.38	$0	•		99	•
Winn	Humana Insurance Company	HumanaChoicePPO PPO R5826 025	Regional PPO	$37.00	-					
Winn	Humana Insurance Company	HumanaChoicePPO PPO R5826 039	Regional PPO	$74.00	$18.84	$250			99	•
Winn	Humana Insurance Company	HumanaChoicePPO PPO R5826 011	Regional PPO	$85.00	$28.98	$0	•		99	•
Winn	Sterling Option I	Sterling Option I	PFFS	$9.00	-					