

CT Benchmark Part D Plans 2019

Phone Number	Plan Name	Plan ID	Company Name	Monthly Premium	Premium for beneficiaries w/Full LIS (EXTRA HELP)
866-477-5704	Express Scripts Medicare-Value (PDP)	S 5660-105	Express Scripts	\$35.20	\$0
833-856-5680	Aetna Medicare Rx Saver (PDP)	S 5810-036	Aetna Medicare	\$33.20	\$0
800-706-0872	Humana Preferred Rx Plan (PDP)	S 5884-102	Humana	\$34.80	\$0
866-552-6106	SilverScript Choice (PDP)	S 5601-004	Silverscript	\$34.20	\$0
888-867-5564	AARP MedicareRX Saver Plus (PDP)	S 5921-348	United Healthcare	\$34.90	\$0
888-293-5151	WellCare Classic (PDP)	S 4802-076	WellCare	\$35.10	\$0
888-377-1439	EnvisionRxPlus (PDP)	S 7694-002	Envision	\$14.50	\$0