

Medicare's Planfinder for MAPs and stand-alone Part D plans (rev. August 2025)

Go to [Medicare.gov](https://www.medicare.gov) and click the button "Find health & drug plans". Make sure to click the correct year it gives you a choice.

Note: Medicare makes changes to the planfinder from time to time, especially at the end of the year. →

Find health & drug plans

Find & compare plans in your area

[Find Plans Now](#)

Then log in with an existing account, create an account, or click [Continue without logging in](#). **If you do log in**, the next screen may tell you "You have an employer plan." If instead you have a marketplace plan, the next screen has lots of info links about your current arrangements (your Medicare card, providers, update saved pharmacies, pay premium, edit account settings, etc., including details about the plan itself). Even from "Welcome" screen you can make changes to some things (e.g., your pharmacies, drug list).

If you don't log in, you won't be able to save your drug list, but that might be the best option on a public computer. Enter your zip code, hit [Continue](#), then the type of coverage your looking for. Pick one of the first two (MAPD or Drug Plan), then [Find Plans](#). Answer these two questions:

Do you get help with costs from one of these programs? Select from the drop-down menu, then click [Next](#).

Do you want to see drug costs when you compare plans? Click [Yes](#) in most cases, then click [Next](#).

Add your prescription drug(s): Start typing drug name and when it appears, click [Add Drug](#). If you asked for a brand name, it will let you know if a generic is available and asks if you'd prefer it. (Add both the brand and the generic separately if you want to compare both; it will price out both, then add them together for a final cost, so be careful of that, since you don't want both of them at the same time.) Enter dosage, quantity and frequency, then click [Add to My Drug List](#). Look for [Remove drug](#) or [Edit drug](#) to change things you've just added. (If logged in, there's an option to "Add recently filled drugs.") Click [Add Another Drug](#) or [Done Adding Drugs](#). **Warning:** if you're not logged in, add drugs pretty quickly so you don't get kicked off.

Note: When I created my account, Medicare showed my drug history claims for the last year. If this is still happening, select the ones you want to keep, and add any others. This list will be saved after you log out. If you haven't included all of them, there's a link to access to your claim history: put the missing ones in.

Choose up to 5 pharmacies: Click the first box for "Mail-order Pharmacy," choose distance from the drop-down, then up to 4 others from the list. You'll see them get added to the banner at the bottom. Click the "Continue" and the next screen lists the plans in your area, defaulting to "Lowest drug + premium cost" in the drop-down menu of options.

Lowest yearly drug deductible

Lowest health plan deductible

Lowest drug + premium cost

Lowest Monthly premium

Other links on this screen include changing your zipcode and plan type, and adding filters: [Plan benefits](#), [Insurance Carrier](#), [Drug Coverage](#), [Star Ratings](#), plus some others at the [View all filters](#) link. Details for each plan listed include: name of plan, star rating, monthly premium, yearly drug & premium cost, deductible, drug deductible, In- & Out-of-pocket maximum, "extras," and copays/co-insurance.

Click on [View drugs & their costs](#) for pricing comparisons and a lot of detailed information.

Scroll down and use the buttons for many more drugs and benefits details, including preferred pharmacies, tiering, coverage gap, drug restrictions (quantity, frequency, step therapy) and all the "extras."

[+ View more drug coverage](#)

[+ View more extra benefits](#)

Back in the previous screen, click the "Add to compare" box for up to 3 plans, then the button at the bottom right corner of the screen to lay these out side-by-side.

[Enroll](#) [Plan Details](#) Add to compare

Major comparison categories are: Overview, Benefits & Costs, Extra Benefits, and Drug coverage & Costs. Print using the icon at the top right corner of the screen. At the bottom of each plan are the "Enroll" and "Plan Details" buttons.



MVP Medicare Secure Plus with Part D (HMO-POS)

MVP HEALTH CARE | Plan ID: H3305-022-0

Star rating: ★★★★★

MONTHLY PREMIUM

\$96.20 Includes: Health & drug coverage
Doesn't include: \$185.00 Standard Part B premium

TOTAL DRUG & PREMIUM COST (for the rest of 2025)

\$782.66 Retail pharmacy: Estimated total drug + premium cost
Doesn't include: Health costs

OTHER COSTS

\$0.00 Health deductible

\$0.00 Drug deductible

\$6,000 In-network
Maximum you pay for health services

PLAN BENEFITS

- ✓ Vision
- ✓ Dental
- ✓ Hearing
- ✓ Transportation
- ✓ Fitness benefits
- [See more benefits](#) ^
- ✓ Over-the-counter drugs
- ✓ Worldwide emergency
- ✓ Telehealth
- ✗ In-home support
- ✗ Home safety devices & modifications
- ✗ Personal Emergency Response System (PERS)

COPAYS/COINSURANCE

Primary doctor: \$0 copay
Specialist: \$40 copay

DRUGS

- ✓ Includes drug coverage
- [View drugs & their costs](#)

SAMPLE link expansions

PREVENTIVE SERVICES	
Health care to prevent illness or detect illness at an early stage, when treatment to work best (like Pap tests, flu shots, and screening mammograms).	
Learn more about your costs for preventive services	
Preventive services	In-network: \$0 copay Out-of-network: 30% coinsurance
AMBULANCE	
Ground ambulance	In-network: \$175 copay Out-of-network: \$175-\$300 copay
THERAPY SERVICES	
Occupational therapy visit	In-network: \$20 copay Out-of-network: 30% coinsurance
Physical therapy & speech & language therapy visit	In-network: \$20 copay Out-of-network: 30% coinsurance

Learn more about your costs for preventive services

You'll pay nothing for some preventive services, like:

- Flu shots
- Colonoscopies
- Cervical and vaginal cancer screenings (like Pap tests)
- Breast cancer screenings (mammograms)

You'll have to pay a coinsurance for some other preventive services, like:

- Glaucoma tests
- Diabetes self-management training
- Barium enemas
- EKG or ECG screenings as part of your "Welcome to Medicare" preventive visit

Costs shown don't include preventive services with copays.
[Contact the plan](#) to find out more about your costs for preventive services.

Benefits & Costs

DOCTOR SERVICES	
View Provider Network Directory	
Primary doctor visit	In-network: \$0 copay Out-of-network: 30% coinsurance
Specialist visit	In-network: \$40 copay Out-of-network: 30% coinsurance
TESTS, LABS, & IMAGING	
Diagnostic tests & procedures ▼	In-network: \$10 copay Out-of-network: 30% coinsurance
Lab services	In-network: \$0 copay Out-of-network: 30% coinsurance
Diagnostic radiology services (like MRI)	In-network: \$40-\$225 copay Out-of-network: 30% coinsurance
Outpatient x-rays	In-network: \$40 copay Out-of-network: 30% coinsurance
Emergency care	\$95 copay
Urgent care	\$30 copay

HOSPITAL SERVICES	
Inpatient hospital coverage	In-network: Tier 1 \$350 per day for days 1-5 \$0 per day for days 6-90 \$0 per stay Out-of-network: 30% per stay
Outpatient hospital coverage	In-network: \$300 copay Out-of-network: 30% coinsurance
SKILLED NURSING FACILITY	
Skilled nursing facility	In-network: Tier 1 \$0 per day for days 1-20 \$214 per day for days 21-100

YEARLY DRUG COSTS BY PHARMACY

Drug costs shown vary based on the plan and pharmacy that you use. Contact the plan if you have specific questions about drug costs. [Can my drug costs change by pharmacy?](#)

	CVS Pharmacy #05058 ✓ In-network	Save Mor Drugs ✓ In-network	Robbins Pharmacy ✓ In-network	Mail Order Pharmacy ✓ In-network
Restasis 0.05% emulsion	\$270.00	\$270.00	\$270.00	\$180.00
Synthroid 125mcg tablet	\$67.86	\$67.86	\$67.86	\$68.88
Total yearly drug cost	\$397.86	\$397.86	\$397.86	\$308.88