# 2017
# Medicare Advantage Plans for NC

* Indicates plan does not offer Part D drug coverage.
** MOOP: Maximum Out-of-Pocket (MOOP) limit on enrollee spending. Includes costs for all in-network Part A and B Services.
N/A = Not Applicable

| County | Organization Name | Plan Name | Type of Medicare Health Plan | Plan Premium (For Part C and D Coverage) | Annual Drug Plan Deductible | Drug Benefit Type | Covg in Gap? | Contract ID | Plan ID | In-network MOOP Amount ** |
|---|---|---|---|---|---|---|---|---|---|---|
| Cabarrus | Aetna Medicare | Aetna Medicare Premier Plan (PPO) | Local PPO | $0.00 | $195.00 | Enhanced | Yes | H5521 | 81 | $4,950 |
| Cabarrus | Aetna Medicare | Aetna Medicare Value Plan (HMO) | Local HMO | $0.00 | $0.00 | Enhanced | Yes | H3931 | 81 | $4,950 |
| Cabarrus | Blue Cross & Blue Shield of NC | Blue Medicare HMO Essential (HMO) | Local HMO | $34.60 | $295.00 | Enhanced | No | H3449 | 23 | $6,700 |
| Cabarrus | Blue Cross & Blue Shield of NC | Blue Medicare HMO Medical Only (HMO) | Local HMO * | $0.00 | | | | H3449 | 12 | $5,700 |
| Cabarrus | Blue Cross & Blue Shield of NC | Blue Medicare PPO Enhanced (PPO) | Local PPO | $86.00 | $0.00 | Enhanced | No | H3404 | 1 | $5,500 |
| Cabarrus | Humana Insurance Company | HumanaChoice H6609-152 (PPO) | Local PPO | $53.00 | $400.00 | Enhanced | Yes | H6609 | 152 | $5,900 |
| Cabarrus | Humana Insurance Company | HumanaChoice R5826-063 (Regional PPO) | Regional PPO * | $0.00 | | | | R5826 | 63 | $4,900 |
| Cabarrus | Humana Insurance Company | HumanaChoice R5826-079 (Regional PPO) | Regional PPO | $81.00 | $325.00 | Basic | No | R5826 | 79 | $6,700 |
| Cabarrus | Humana Medical Plan, Inc. | Humana Gold Plus H1036-137 (HMO) | Local HMO | $26.90 | $400.00 | Enhanced | Yes | H1036 | 137 | $6,700 |
| Cabarrus | UnitedHealthcare | AARP MedicareComplete Essential (HMO) | Local HMO * | $0.00 | | | | H5253 | 40 | $4,900 |
| Cabarrus | UnitedHealthcare | AARP MedicareComplete Plan 1 (HMO) | Local HMO | $32.00 | $170.00 | Enhanced | No | H5253 | 37 | $4,900 |
| Cabarrus | UnitedHealthcare | AARP MedicareComplete Plan 2 (HMO) | Local HMO | $0.00 | $170.00 | Enhanced | No | H5253 | 38 | $6,700 |
| Cabarrus | ***Cigna-Healthspring | Cigna-HealthSpring Preferred (HMO) | Local HMO | $0.00 | $275.00 | Enhanced | No | H9725 | 1 | $6,700 |

***** - Indicates sanctioned by CMS. Will be allowed to maintain customer base. No new enrollees accepted at this time.**

As of 9/22/16