

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 ** |
|------------|--------------------------------|---------------------------------------|------------------------------|--|-----------------------------|-------------------|--------------|-------------|---------|---------------------------|
| Rockingham | Aetna Medicare | Aetna Medicare Premier Plan (PPO) | Local PPO | \$0.00 | \$195.00 | Enhanced | Yes | H5521 | 81 | \$4,950 |
| Rockingham | Blue Cross & Blue Shield of NC | Blue Medicare HMO Enhanced (HMO) | Local HMO | \$75.80 | \$0.00 | Enhanced | Yes | H3449 | 5 | \$4,900 |
| Rockingham | Blue Cross & Blue Shield of NC | Blue Medicare HMO Essential (HMO) | Local HMO | \$28.40 | \$295.00 | Enhanced | No | H3449 | 23 | \$6,700 |
| Rockingham | Blue Cross & Blue Shield of NC | Blue Medicare HMO Medical Only (HMO) | Local HMO * | \$0.00 | | | | H3449 | 12 | \$5,700 |
| Rockingham | Blue Cross & Blue Shield of NC | Blue Medicare PPO Enhanced (PPO) | Local PPO | \$86.00 | \$0.00 | Enhanced | No | H3404 | 1 | \$5,500 |
| Rockingham | HealthTeam Advantage | HealthTeam Advantage Plan I (PPO) | Local PPO | \$0.00 | \$0.00 | Enhanced | Yes | H9808 | 4 | \$3,400 |
| Rockingham | HealthTeam Advantage | HealthTeam Advantage Plan II (PPO) | Local PPO | \$49.00 | \$0.00 | Enhanced | Yes | H9808 | 5 | \$3,100 |
| Rockingham | Humana Insurance Company | HumanaChoice H6609-152 (PPO) | Local PPO | \$53.00 | \$400.00 | Enhanced | Yes | H6609 | 152 | \$5,900 |
| Rockingham | Humana Insurance Company | HumanaChoice R5826-063 (Regional PPO) | Regional PPO * | \$0.00 | | | | R5826 | 63 | \$4,900 |
| Rockingham | Humana Insurance Company | HumanaChoice R5826-079 (Regional PPO) | Regional PPO | \$81.00 | \$325.00 | Basic | No | R5826 | 79 | \$6,700 |
| Rockingham | Humana Medical Plan, Inc. | Humana Gold Plus H1036-138 (HMO) | Local HMO | \$0.00 | \$400.00 | Enhanced | Yes | H1036 | 138 | \$5,900 |
| Rockingham | UnitedHealthcare | AARP MedicareComplete Choice (PPO) | Local PPO | \$47.00 | \$165.00 | Enhanced | No | H2228 | 18 | \$4,500 |
| Rockingham | UnitedHealthcare | AARP MedicareComplete Essential (HMO) | Local HMO * | \$0.00 | | | | H5253 | 40 | \$4,900 |
| Rockingham | UnitedHealthcare | AARP MedicareComplete Plan 1 (HMO) | Local HMO | \$32.00 | \$170.00 | Enhanced | No | H5253 | 37 | \$4,900 |
| Rockingham | UnitedHealthcare | AARP MedicareComplete Plan 2 (HMO) | Local HMO | \$0.00 | \$170.00 | Enhanced | No | H5253 | 38 | \$6,700 |