

2019
Medicare Special Need Plans for NC

County	Organization Name	Plan Name	Type of Medicare Health Plan	Special Needs Plan Type	Monthly Consolidated Premium* (Includes Part C + D)	Annual Drug Deductible	Coverage in Gap?	Contract ID	Plan ID
Bertie	Gateway Health Medicare Assured	Gateway Health Medicare Assured Diamond (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H9190	7
Bertie	Gateway Health Medicare Assured	Gateway Health Medicare Assured Ruby (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H9190	8
Bertie	Humana	HumanaChoice SNP-DE H5525-036 (PPO SNP)	Local PPO	Dual-Eligible	\$28.90	\$395.00	No	H5525	36
Bertie	Liberty Advantage (HMO SNP)	Liberty Advantage (HMO SNP)	Local HMO	Institutional	\$28.90	\$415.00	No	H6351	1
Bertie	Liberty Advantage (HMO SNP)	Liberty Advantage Gold (HMO SNP)	Local HMO	Institutional	\$175.00	\$-	No	H6351	2
Bertie	Liberty Advantage (HMO SNP)	Liberty at Home (HMO SNP)	Local HMO	Institutional	\$28.90	\$415.00	No	H6351	3
Bertie	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Bladen	Gateway Health Medicare Assured	Gateway Health Medicare Assured Diamond (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H9190	7
Bladen	Gateway Health Medicare Assured	Gateway Health Medicare Assured Ruby (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H9190	8
Bladen	Humana	HumanaChoice SNP-DE H5525-036 (PPO SNP)	Local PPO	Dual-Eligible	\$28.90	\$395.00	No	H5525	36
Bladen	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Brunswick	Humana	HumanaChoice SNP-DE H5525-036 (PPO SNP)	Local PPO	Dual-Eligible	\$28.90	\$395.00	No	H5525	36
Brunswick	Liberty Advantage (HMO SNP)	Liberty Advantage (HMO SNP)	Local HMO	Institutional	\$28.90	\$415.00	No	H6351	1
Brunswick	Liberty Advantage (HMO SNP)	Liberty Advantage Gold (HMO SNP)	Local HMO	Institutional	\$175.00	\$-	No	H6351	2
Brunswick	Liberty Advantage (HMO SNP)	Liberty at Home (HMO SNP)	Local HMO	Institutional	\$28.90	\$415.00	No	H6351	3
Brunswick	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Buncombe	Humana	Humana Gold Plus SNP-DE H6622-027 (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H6622	27
Buncombe	UnitedHealthcare	UnitedHealthcare Assisted Living Plan (HMO-POS SNP)	Local HMO	Institutional	\$28.90	\$200.00	No	H5253	43
Buncombe	UnitedHealthcare	UnitedHealthcare Dual Complete (HMO SNP)	Local HMO	Dual-Eligible	\$26.30	\$415.00	No	H5253	41
Buncombe	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Buncombe	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (HMO SNP)	Local HMO	Institutional	\$28.90	\$415.00	No	H5253	42
Buncombe	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (PPO SNP)	Local PPO	Institutional	\$28.90	\$415.00	No	H0710	34
Buncombe	WellCare	WellCare Access (HMO SNP)	Local HMO	Dual-Eligible	\$21.90	\$415.00	No	H0712	25

*Indicates plan does not offer Part D coverage

**MOOP: Maximum Out-of-Pocket (MOOP) limit on enrollee spending. Includes costs for all in-network Part A services

N/A = Not Applicable