

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
Macon	Humana	Humana Gold Plus SNP-DE H6622-027 (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H6622	27
Macon	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Madison	Humana	Humana Gold Plus SNP-DE H6622-027 (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H6622	27
Madison	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Madison	WellCare	WellCare Access (HMO SNP)	Local HMO	Dual-Eligible	\$21.90	\$415.00	No	H0712	25
Martin	Gateway Health Medicare Assured	Gateway Health Medicare Assured Diamond (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H9190	7
Martin	Gateway Health Medicare Assured	Gateway Health Medicare Assured Ruby (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H9190	8
Martin	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
McDowell	Humana	Humana Gold Plus SNP-DE H6622-027 (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H6622	27
McDowell	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
McDowell	WellCare	WellCare Access (HMO SNP)	Local HMO	Dual-Eligible	\$21.90	\$415.00	No	H0712	25
Mecklenburg	Humana	Humana Gold Plus SNP-DE H1036-167 (HMO SNP)	Local HMO	Dual-Eligible	\$28.40	\$235.00	No	H1036	167
Mecklenburg	UnitedHealthcare	Erickson Advantage Champion (HMO-POS SNP)	Local HMO	Chronic or Disab	\$195.00	\$-	No	H5652	4
Mecklenburg	UnitedHealthcare	Erickson Advantage Guardian (HMO-POS SNP)	Local HMO	Institutional	\$33.10	\$-	No	H5652	3
Mecklenburg	UnitedHealthcare	UnitedHealthcare Assisted Living Plan (HMO-POS SNP)	Local HMO	Institutional	\$28.90	\$200.00	No	H5253	43
Mecklenburg	UnitedHealthcare	UnitedHealthcare Dual Complete (HMO SNP)	Local HMO	Dual-Eligible	\$26.30	\$415.00	No	H5253	41
Mecklenburg	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Mecklenburg	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (HMO SNP)	Local HMO	Institutional	\$28.90	\$415.00	No	H5253	42
Mecklenburg	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (PPO SNP)	Local PPO	Institutional	\$28.90	\$415.00	No	H0710	34
Mitchell	Humana	Humana Gold Plus SNP-DE H6622-027 (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H6622	27
Mitchell	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Montgomery	Humana	HumanaChoice SNP-DE H5525-036 (PPO SNP)	Local PPO	Dual-Eligible	\$28.90	\$395.00	No	H5525	36
Montgomery	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1

*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