

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
Stanly	Humana	Humana Gold Plus SNP-DE H1036-167 (HMO SNP)	Local HMO	Dual-Eligible	\$28.40	\$235.00	No	H1036	167
Stanly	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Stokes	Cigna-HealthSpring	Cigna-HealthSpring TotalCare Direct (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H9725	3
Stokes	Humana	Humana Gold Plus SNP-DE H1036-168 (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$210.00	No	H1036	168
Stokes	UnitedHealthcare	UnitedHealthcare Assisted Living Plan (HMO-POS SNP)	Local HMO	Institutional	\$28.90	\$200.00	No	H5253	43
Stokes	UnitedHealthcare	UnitedHealthcare Dual Complete (HMO SNP)	Local HMO	Dual-Eligible	\$26.30	\$415.00	No	H5253	41
Stokes	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Stokes	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (HMO SNP)	Local HMO	Institutional	\$28.90	\$415.00	No	H5253	42
Stokes	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (PPO SNP)	Local PPO	Institutional	\$28.90	\$415.00	No	H0710	34
Surry	Humana	HumanaChoice SNP-DE H5525-036 (PPO SNP)	Local PPO	Dual-Eligible	\$28.90	\$395.00	No	H5525	36
Surry	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Swain	Humana	Humana Gold Plus SNP-DE H6622-027 (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H6622	27
Swain	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Swain	WellCare	WellCare Access (HMO SNP)	Local HMO	Dual-Eligible	\$21.90	\$415.00	No	H0712	25
Transylvania	Humana	Humana Gold Plus SNP-DE H6622-027 (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H6622	27
Transylvania	PruittHealth Premier (HMO SNP)	PruittHealth Premier (HMO SNP)	Local HMO	Institutional	\$28.90	\$415.00	No	H6345	1
Transylvania	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Transylvania	WellCare	WellCare Access (HMO SNP)	Local HMO	Dual-Eligible	\$21.90	\$415.00	No	H0712	25
Tyrrell	Humana	HumanaChoice SNP-DE H5525-036 (PPO SNP)	Local PPO	Dual-Eligible	\$28.90	\$395.00	No	H5525	36
Tyrrell	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Union	Cigna-HealthSpring	Cigna-HealthSpring TotalCare Direct (HMO SNP)	Local HMO	Dual-Eligible	\$28.90	\$415.00	No	H9725	3
Union	Humana	HumanaChoice SNP-DE H5525-036 (PPO SNP)	Local PPO	Dual-Eligible	\$28.90	\$395.00	No	H5525	36
Union	PruittHealth Premier (HMO SNP)	PruittHealth Premier (HMO SNP)	Local HMO	Institutional	\$28.90	\$415.00	No	H6345	1
Union	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO SNP)	Regional PPO	Dual-Eligible	\$26.30	\$415.00	No	R1548	1
Union	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (HMO SNP)	Local HMO	Institutional	\$28.90	\$415.00	No	H5253	42
Union	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (PPO SNP)	Local PPO	Institutional	\$28.90	\$415.00	No	H0710	34

*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