

2022
Medicare Advantage Plans for NC

| County | Organization Name | Plan Name | Type of Medicare Health Plan | Monthly Consolidated Premium (Includes Part C + D) | Annual Drug Deductible | Drug Benefit Type | Additional Coverage Offered in the Gap | Drug Benefit Type Detail | Contract ID | Plan ID | Segment ID | In-network MOOP Amount ** |
|--------|----------------------------------|---|------------------------------|--|------------------------|-------------------|--|--------------------------|-------------|---------|------------|---------------------------|
| Jones | Blue Cross and Blue Shield of NC | Blue Medicare Enhanced (HMO) | Local HMO | \$ 49.00 | \$ - | Enhanced | Yes | EA | H3449 | 024 | 3 | \$ 4,900 |
| Jones | Blue Cross and Blue Shield of NC | Blue Medicare Essential (HMO) | Local HMO | \$ - | \$ 375.00 | Enhanced | Yes | EA | H3449 | 027 | 2 | \$ 5,900 |
| Jones | Blue Cross and Blue Shield of NC | Blue Medicare Essential Plus (HMO) | Local HMO | \$ 26.00 | \$ 195.00 | Enhanced | Yes | EA | H3449 | 023 | 5 | \$ 5,900 |
| Jones | Blue Cross and Blue Shield of NC | Blue Medicare Freedom+ (PPO) | Local PPO * | \$ - | | | | | H3404 | 004 | 0 | \$ 7,550 |
| Jones | Blue Cross and Blue Shield of NC | Blue Medicare Medical Only (HMO) | Local HMO * | \$ - | | | | | H3449 | 012 | 0 | \$ 3,900 |
| Jones | Blue Cross and Blue Shield of NC | Blue Medicare PPO Enhanced (PPO) | Local PPO | \$ 49.00 | \$ - | Enhanced | Yes | EA | H3404 | 003 | 2 | \$ 5,900 |
| Jones | Exemplar Health | Exemplar Health Freedom 1 (MSA) | MSA * | | | | | | H9295 | 001 | 0 | \$ - |
| Jones | Exemplar Health | Exemplar Health Freedom 2 (MSA) | MSA * | | | | | | H9295 | 002 | 0 | \$ - |
| Jones | Exemplar Health | Exemplar Health Freedom 3 (MSA) | MSA * | | | | | | H9295 | 003 | 0 | \$ - |
| Jones | Humana | Humana Honor R1390-003 (Regional PPO) | Regional PPO * | \$ - | | | | | R1390 | 003 | 0 | \$ 7,550 |
| Jones | Humana | HumanaChoice H5525-035 (PPO) | Local PPO | \$ - | \$ 265.00 | Enhanced | No | EA | H5525 | 035 | 0 | \$ 7,550 |
| Jones | Humana | HumanaChoice H5525-049 (PPO) | Local PPO | \$ 25.00 | \$ 95.00 | Enhanced | No | EA | H5525 | 049 | 0 | \$ 5,900 |
| Jones | Humana | HumanaChoice H5525-050 (PPO) | Local PPO | \$ - | \$ 265.00 | Enhanced | No | EA | H5525 | 050 | 0 | \$ 6,200 |
| Jones | Humana | HumanaChoice R1390-001 (Regional PPO) | Regional PPO * | \$ - | | | | | R1390 | 001 | 0 | \$ 6,950 |
| Jones | Humana | HumanaChoice R1390-002 (Regional PPO) | Regional PPO | \$ 98.80 | \$ 480.00 | Enhanced | No | EA | R1390 | 002 | 0 | \$ 7,550 |
| Jones | Lasso Healthcare | Lasso Healthcare Growth (MSA) | MSA * | | | | | | H1924 | 001 | 0 | \$ - |
| Jones | Lasso Healthcare | Lasso Healthcare Growth Plus (MSA) | MSA * | | | | | | H1924 | 004 | 0 | \$ - |
| Jones | UnitedHealthcare | AARP Medicare Advantage Choice (PPO) | Local PPO | \$ - | \$ 95.00 | Enhanced | Yes | EA | H2577 | 004 | 0 | \$ 6,700 |
| Jones | UnitedHealthcare | AARP Medicare Advantage Choice Plan 2 (PPO) | Local PPO | \$ 26.00 | \$ - | Enhanced | Yes | EA | H2577 | 018 | 0 | \$ 5,900 |
| Jones | UnitedHealthcare | AARP Medicare Advantage Patriot (PPO) | Local PPO * | \$ - | | | | | H2577 | 019 | 0 | \$ 3,600 |

*Indicates plan does not offer Part D drug coverage.

**MOOP: Maximum Out of Pocket limit enrollee spending. Includes cost for all in network Part A Services

N/A - Non Applicable