2021 Medicare Special Needs Plans for NC

County	Organization Name	Plan Name	Type of Medicare Health Plan		Monthly Consolida ted Premium * (Includes Part C + D)	Annual Drug Deductibl	Drug Benefit		Contract	Plan ID
Gaston	Aetna Medicare	Aetna Medicare Assure Plan (HMO D-SNP)		Dual-Eligible	\$28.80	\$130.00	Enhanced		H3146	8
Gaston	BCBS of NC Senior Health	Healthy Blue + Medicare (HMO D-SNP)	Local HMO	Dual-Eligible	\$30.30	\$445.00	 		H9147	1
Gaston	Cigna	Cigna TotalCare (HMO D-SNP)	Local HMO	Dual-Eligible	\$29.50	\$445.00	Basic	No	H9725	3
Gaston	Humana	Humana Gold Plus SNP-DE H1036-167 (HMO D-SNP)	Local HMO	Dual-Eligible	\$28.90	\$420.00	Basic	No	H1036	167
Gaston	Longevity Health Plan	Longevity Health Plan (HMO I-SNP)	Local HMO	Institutional	\$30.30	\$445.00	Basic	No	H5374	1
Gaston	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (PPO I-SNP)	Local PPO	Institutional	\$30.30	\$445.00	Basic	No	H0710	34
Gaston	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (HMO-POS I-SNP)	Local HMO	Institutional	\$30.30	\$445.00	Basic	No	H5253	42
Gaston	UnitedHealthcare	UnitedHealthcare Assisted Living Plan (HMO-POS I-SNP)	Local HMO	Institutional	\$25.00	\$200.00	Enhanced	No	H5253	43
Gaston	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO D-SNP)	Regional PPO	Dual-Eligible	\$30.60	\$445.00	Basic	No	R1548	1

^{*}Indicates plan does not offer Part D coverage

^{**}MOOP: Maximum Out-of-Pocket limit on enrollee spending. Includes cost of all in-network Part A B services N/A = Not Applicable

2021 Medicare Special Needs Plans for NC

			Type of Medicare		(Includes	Annual	Drug	Additional Coverage Offered in	Contract	
County	Organization Name		Health Plan	Туре	D)	e				Plan ID
Gates	Humana	HumanaChoice SNP-DE H5525-036 (PPO D-SNP)	Local PPO	Dual-Eligible	\$30.30	\$415.00	Basic	No	H5525	36
Gates	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO D-SNP)	Regional PPO	Dual-Eligible	\$30.60	\$445.00	Basic	No	R1548	1

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2021 Medicare Special Needs Plans for NC

					Monthly Consolida ted Premium	Annual		Additional		
			Type of	Special	(Includes	Drug	Drug	Coverage		
			Medicare	Needs Plan	Part C +	Deductibl	Benefit	Offered in	Contract	
County	Organization Name	Plan Name	Health Plan	Туре	D)	e	Туре	the Gap	ID	Plan ID
Graham	Humana	Humana Gold Plus SNP-DE H6622-027 (HMO D-SNP)	Local HMO	Dual-Eligible	\$30.30	\$425.00	Basic	No	H6622	27
Graham	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO D-SNP)	Regional PPO	Dual-Eligible	\$30.60	\$445.00	Basic	No	R1548	1

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2021 Medicare Special Needs Plans for NC

County	Organization Name		Type of Medicare Health Plan		(Includes	Annual	Drug Benefit	Additional Coverage Offered in the Gap		Plan ID
	Aetna Medicare	Aetna Medicare Assure Plan (HMO D-SNP)	Local HMO	Dual-Eligible	\$30.30	\$130.00	Enhanced		H3146	2
Granville	Humana	HumanaChoice SNP-DE H5525-036 (PPO D-SNP)	Local PPO	Dual-Eligible	\$30.30	\$415.00	Basic	No	H5525	36
Granville	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO D-SNP)	Regional PPO	Dual-Eligible	\$30.60	\$445.00	Basic	No	R1548	1

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2021 Medicare Special Needs Plans for NC

			Type of	Special	(Includes	Annual Drug	Drug	Additional Coverage		
County	Organization Name		Medicare Health Plan	Needs Plan Type	Part C + D)	Deductibl		Offered in the Gap		Plan ID
Greene	Humana		Local PPO	Dual-Eligible	\$30.30	\$415.00			H5525	36
Greene	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO D-SNP)	Regional PPO	Dual-Eligible	\$30.60	\$445.00	Basic	No	R1548	1

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2021 Medicare Special Needs Plans for NC

County	Organization Name	Plan Name	Type of Medicare Health Plan	Special Needs Plan Type	•	Annual Drug Deductibl e	Benefit	Additional Coverage Offered in the Gap	Contract ID	Plan ID
Guilford	Aetna Medicare	Aetna Medicare Assure Plan (HMO D-SNP)	Local HMO	Dual-Eligible	\$30.30	\$130.00	Enhanced	•	H3146	3
Guilford	BCBS of NC Senior Health	Healthy Blue + Medicare (HMO D-SNP)		Dual-Eligible	\$30.30			No	H9147	1
Guilford	CARE N' CARE INSURANCE C	HealthTeam Advantage Diabetes & Heart Care (HMO C-SNP)	Local HMO	Chronic or Dis	\$-	\$-	Enhanced	Yes	H2624	1
Guilford	Cigna	Cigna TotalCare (HMO D-SNP)	Local HMO	Dual-Eligible	\$29.50	\$445.00	Basic	No	H9725	3
Guilford	Humana	Humana Gold Plus SNP-DE H1036-168 (HMO D-SNP)	Local HMO	Dual-Eligible	\$30.30	\$425.00	Basic	No	H1036	168
Guilford	Liberty Advantage	Liberty Advantage (HMO I-SNP)	Local HMO	Institutional	\$30.30	\$445.00	Basic	No	H6351	1
Guilford	Liberty Advantage	Liberty at Home (HMO I-SNP)	Local HMO	Institutional	\$46.00	\$-	Enhanced	No	H6351	3
Guilford	Longevity Health Plan	Longevity Health Plan (HMO I-SNP)	Local HMO	Institutional	\$30.30	\$445.00	Basic	No	H5374	1
Guilford	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (PPO I-SNP)	Local PPO	Institutional	\$30.30	\$445.00	Basic	No	H0710	34
Guilford	UnitedHealthcare	UnitedHealthcare Dual Complete (HMO-POS D-SNP)	Local HMO	Dual-Eligible	\$30.30	\$445.00	Basic	No	H5253	41
Guilford	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (HMO-POS I-SNP)	Local HMO	Institutional	\$30.30	\$445.00	Basic	No	H5253	42
Guilford	UnitedHealthcare	UnitedHealthcare Assisted Living Plan (HMO-POS I-SNP)	Local HMO	Institutional	\$25.00	\$200.00	Enhanced	No	H5253	43
Guilford	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO D-SNP)	Regional PPO	Dual-Eligible	\$30.60	\$445.00	Basic	No	R1548	1
Guilford	WellCare	WellCare Access (HMO D-SNP)	Local HMO	Dual-Eligible	\$29.80	\$445.00	Enhanced	No	H0712	25
Guilford	WellCare	WellCare Imperial (PPO D-SNP)	Local PPO	Dual-Eligible	\$30.30	\$445.00	Enhanced	No	H7175	2

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