2022

Medicare Special Needs Plan for NC

County	Organization Name	Plan Name	Type of Medicare Health Plan	Special Needs Plan Type	Monthly Consolidated Premium* (Includes	Annual Drug Deductible	Drug Benefit Type	Additional Coverage Offered in the Gap	Contract ID	Plan ID
Wake	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (PPO I-SNP)	Local PPO	I	$35.80	$480.00	Basic	NO	H0710	34
Wake	Wellcare	Wellcare Dual Access Medicare (HMO D-SNP)	Local HMO	DE	$34.00	$480.00	Enhanced	NO	H0712	25
Wake	Humana	Humana Gold Plus SNP-DE H1036-276 (HMO D-SNP)	Local HMO	DE	$33.20	$480.00	Basic	NO	H1036	276
Wake	Aetna Medicare	Aetna Medicare Assure Plan (HMO D-SNP)	Local HMO	DE	$29.70	$425.00	Enhanced	NO	H3146	2
Wake	Wellcare	Wellcare Dual Access (HMO D-SNP)	Local HMO	DE	$30.70	$480.00	Enhanced	NO	H4073	2
Wake	UnitedHealthcare	UnitedHealthcare Dual Complete (HMO-POS D-SNP)	Local HMO	DE	$35.80	$480.00	Basic	NO	H5253	41
Wake	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (HMO-POS I-SNP)	Local HMO	I	$35.80	$480.00	Basic	NO	H5253	42
Wake	UnitedHealthcare	UnitedHealthcare Assisted Living Plan (HMO-POS I-SNP)	Local HMO	I	$35.80	$200.00	Enhanced	NO	H5253	43
Wake	Alignment Health Plan	Alignment Health Plan NC Duals (HMO D-SNP)	Local HMO	DE	$1.80	$480.00	Enhanced	NO	H5296	4
Wake	Longevity Health Plan	Longevity Health Plan (HMO I-SNP)	Local HMO	I	$35.80	$480.00	Basic	NO	H5374	1
Wake	PruittHealth Premier	PruittHealth Premier (HMO I-SNP)	Local HMO	I	$35.80	$480.00	Basic	NO	H6345	1
Wake	Liberty Medicare Advantage	Liberty Medicare Advantage Nursing Home Plan (HMO I-SNP)	Local HMO	I	$35.80	$480.00	Basic	NO	H6351	1
Wake	Liberty Medicare Advantage	Liberty Medicare Healthy at Home (HMO I-SNP)	Local HMO	I	-	-	Enhanced	NO	H6351	3
Wake	Liberty Medicare Advantage	Liberty Medicare Heart and Diabetes Plan (HMO C-SNP)	Local HMO	C/D	-	-	Enhanced	NO	H6351	4
Wake	Liberty Medicare Advantage	Liberty Medicare Dual Plan (HMO D-SNP)	Local HMO	DE	$35.80	$480.00	Basic	NO	H6351	5
Wake	Wellcare	Wellcare Dual Liberty Open (PPO D-SNP)	Local PPO	DE	$35.80	$480.00	Enhanced	NO	H7175	2
Wake	Blue Cross & Blue Shield of NC	Healthy Blue + Medicare (HMO D-SNP)	Local HMO	DE	$35.80	$480.00	Enhanced	YES	H9147	1
Wake	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO D-SNP)	Regional PPO	DE	$35.70	$480.00	Basic	NO	R1548	1
Warren	Wellcare	Wellcare Dual Access Medicare (HMO D-SNP)	Local HMO	DE	$34.00	$480.00	Enhanced	NO	H0712	25
Warren	Aetna Medicare	Aetna Medicare Assure Plan (HMO D-SNP)	Local HMO	DE	$29.70	$425.00	Enhanced	NO	H3146	2
Warren	Wellcare	Wellcare Dual Access (HMO D-SNP)	Local HMO	DE	$30.70	$480.00	Enhanced	NO	H4073	2
Warren	Humana	HumanaChoice SNP-DE H5525-036 (PPO D-SNP)	Local PPO	DE	$33.70	$480.00	Basic	NO	H5525	36
Warren	Liberty Medicare Advantage	Liberty Medicare Advantage Nursing Home Plan (HMO I-SNP)	Local HMO	I	$35.80	$480.00	Basic	NO	H6351	1
Warren	Liberty Medicare Advantage	Liberty Medicare Healthy at Home (HMO I-SNP)	Local HMO	I	-	-	Enhanced	NO	H6351	3
Warren	Liberty Medicare Advantage	Liberty Medicare Heart and Diabetes Plan (HMO C-SNP)	Local HMO	C/D	-	-	Enhanced	NO	H6351	4
Warren	Liberty Medicare Advantage	Liberty Medicare Dual Plan (HMO D-SNP)	Local HMO	DE	$35.80	$480.00	Basic	NO	H6351	5
Warren	Wellcare	Wellcare Dual Liberty Open (PPO D-SNP)	Local PPO	DE	$35.80	$480.00	Enhanced	NO	H7175	2
Warren	Blue Cross & Blue Shield of NC	Healthy Blue + Medicare (HMO D-SNP)	Local HMO	DE	$35.80	$480.00	Enhanced	YES	H9147	1
Warren	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO D-SNP)	Regional PPO	DE	$35.70	$480.00	Basic	NO	R1548	1

*Indicates plan does not offer Part D coverage.

MOOP: Maximum Out of Pocket limit on enrollee spending. Including Cost of all in network Part A **services.

N/A - Non Applicable

2022

Medicare Special Needs Plan for NC

Washington	Humana	HumanaChoice SNP-DE H5525-036 (PPO D-SNP)	Local PPO	DE	$33.70	$480.00	Basic	NO	H5525	36
Washington	Blue Cross & Blue Shield of NC	Healthy Blue + Medicare (HMO D-SNP)	Local HMO	DE	$35.80	$480.00	Enhanced	YES	H9147	1
Washington	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO D-SNP)	Regional PPO	DE	$35.70	$480.00	Basic	NO	R1548	1
Watauga	Wellcare	Wellcare Dual Access Medicare (HMO D-SNP)	Local HMO	DE	$34.00	$480.00	Enhanced	NO	H0712	25
Watauga	Wellcare	Wellcare Dual Access (HMO D-SNP)	Local HMO	DE	$30.70	$480.00	Enhanced	NO	H4073	2
Watauga	Humana	HumanaChoice SNP-DE H5525-036 (PPO D-SNP)	Local PPO	DE	$33.70	$480.00	Basic	NO	H5525	36
Watauga	Liberty Medicare Advantage	Liberty Medicare Advantage Nursing Home Plan (HMO I-SNP)	Local HMO	I	$35.80	$480.00	Basic	NO	H6351	1
Watauga	Liberty Medicare Advantage	Liberty Medicare Healthy at Home (HMO I-SNP)	Local HMO	I	-	-	Enhanced	NO	H6351	3
Watauga	Liberty Medicare Advantage	Liberty Medicare Heart and Diabetes Plan (HMO C-SNP)	Local HMO	C/D	-	-	Enhanced	NO	H6351	4
Watauga	Liberty Medicare Advantage	Liberty Medicare Dual Plan (HMO D-SNP)	Local HMO	DE	$35.80	$480.00	Basic	NO	H6351	5
Watauga	Wellcare	Wellcare Dual Liberty Open (PPO D-SNP)	Local PPO	DE	$35.80	$480.00	Enhanced	NO	H7175	2
Watauga	Blue Cross & Blue Shield of NC	Healthy Blue + Medicare (HMO D-SNP)	Local HMO	DE	$35.80	$480.00	Enhanced	YES	H9147	1
Watauga	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO D-SNP)	Regional PPO	DE	$35.70	$480.00	Basic	NO	R1548	1
Wayne	UnitedHealthcare	UnitedHealthcare Nursing Home Plan (PPO I-SNP)	Local PPO	I	$35.80	$480.00	Basic	NO	H0710	34
Wayne	Aetna Medicare	Aetna Medicare Assure Plan (HMO D-SNP)	Local HMO	DE	$29.70	$425.00	Enhanced	NO	H3146	2
Wayne	Longevity Health Plan	Longevity Health Plan (HMO I-SNP)	Local HMO	I	$35.80	$480.00	Basic	NO	H5374	1
Wayne	Humana	HumanaChoice SNP-DE H5525-036 (PPO D-SNP)	Local PPO	DE	$33.70	$480.00	Basic	NO	H5525	36
Wayne	Blue Cross & Blue Shield of NC	Healthy Blue + Medicare (HMO D-SNP)	Local HMO	DE	$35.80	$480.00	Enhanced	YES	H9147	1
Wayne	UnitedHealthcare	UnitedHealthcare Dual Complete RP (Regional PPO D-SNP)	Regional PPO	DE	$35.70	$480.00	Basic	NO	R1548	1

*Indicates plan does not offer Part D coverage.

MOOP: Maximum Out of Pocket limit on enrollee spending. Including Cost of all in network Part A **services.

N/A - Non Applicable