

2019 Medicare Advantage Plans, Skagit County

Data as of September 5, 2018. Includes 2019 approved contracts/plans.

Notes: Data are subject to change as contracts are finalized. For the most current information, go to www.medicare.gov and click on "Find Health and Drug Plans."

SNP = Special Needs Plan. Contact plan for eligibility and costs information

| Organization Name | Plan Name | Type of Medicare Health Plan | Monthly Premium | Monthly Premium with Full Extra Help (LIS) | Annual Drug Deductible | In Network Office Visit/ Specialist Visit | Inpatient Hospital | Dental (D) Vision (V) Hearing (H) | Contract ID | Plan ID | In-network MOOP Amount ** |
|---|---|------------------------------|-----------------|--|------------------------|---|----------------------|-----------------------------------|-------------|---------|---------------------------|
| Aetna Medicare 1-833-859-6031 www.aetnamedicare.com | Aetna Medicare Choice Plan (PPO) | Local PPO | \$53.00 | \$33.80 | \$0.00 | \$15/\$50 | \$340/day (Days 1-4) | D, V, H | H5521 | 127 | \$6,700 |
| | Aetna Medicare Select Plan (PPO) | Local PPO | \$87.00 | \$64.10 | \$0.00 | \$0/\$40 | \$250/day (Days 1-4) | D, V, H | H5521 | 128 | \$5,900 |
| Community HealthFirst Medicare Advantage Plan 1-800-944-1247 healthfirst.chpw.org | Community HealthFirst MA Extra Plan (HMO) | Local HMO | \$26.00 | \$0.00 | \$0.00 | \$10/\$45 | \$450/day (Days 1-4) | V | H5826 | 010 | \$6,700 |
| | Community HealthFirst MA Pharmacy Plan (HMO) | Local HMO | \$94.00 | \$66.90 | \$0.00 | \$0/\$40 | \$450/day (Days 1-4) | D, V | H5826 | 009 | \$6,700 |
| | Community HealthFirst MA Special Needs Plan (HMO SNP) | Local HMO (Dual-Eligible) | SNP | SNP | SNP | SNP | SNP | D, V, H | H5826 | 014 | SNP |
| Humana 1-800-833-2364 www.humana.com/medicare | Humana Gold Plus H5619-114 (HMO) | Local HMO | \$0.00 | \$0.00 | \$150.00 | \$10/\$50 | \$450/day (Days 1-4) | D, V, H | H5619 | 114 | \$6,700 |
| | Humana Gold Plus H5619-115 (HMO) | Local HMO | \$33.00 | \$33.00 | \$100.00 | \$0/\$40 | \$345/day (Days 1-5) | D, V, H | H5619 | 115 | \$5,000 |
| | HumanaChoice H5216-046 (PPO) | Local PPO (No drug coverage) | \$0.00 | N/A | N/A | \$0/\$25 | \$275/day (Days 1-5) | D, V, H | H5216 | 046 | \$3,600 |
| | HumanaChoice H5216-047 (PPO) | Local PPO | \$102.00 | \$68.20 | \$320.00 | \$10/\$45 | \$300/day (Days 1-5) | D, V, H | H5216 | 047 | \$6,700 |

| Organization Name | Plan Name | Type of Medicare Health Plan | Monthly Premium | Monthly Premium with Full Extra Help (LIS) | Annual Drug Deductible | In Network Office Visit/ Specialist Visit | Inpatient Hospital | Dental (D) Vision (V) Hearing (H) | Contract ID | Plan ID | In-network MOOP Amount ** |
|--|---|------------------------------|-----------------|--|------------------------|---|----------------------|-----------------------------------|-------------|---------|---------------------------|
| Kaiser Foundation Health Plan of Washington 1-800-446-8882 kp.org/wa/medicare | Kaiser Permanente Medicare Advantage Basic (HMO) | Local HMO (No drug coverage) | \$106.00 | N/A | N/A | \$10/\$30 | \$200/day (Days 1-3) | D, V, H | H5050 | 001 | \$2,000 |
| | Kaiser Permanente Medicare Advantage Harbor (HMO) | Local HMO | \$85.00 | \$51.20 | \$175.00 | \$10/\$45 | \$360/day (Days 1-4) | D, V, H | H5050 | 017 | \$5,250 |
| Molina Healthcare of Washington, Inc. 1-866-403-8293 www.molinahealthcare.com/medicare | Molina Medicare Options Plus (HMO SNP) | Local HMO (Dual-Eligible) | SNP | SNP | SNP | SNP | SNP | D, V, H | H5823 | 006 | SNP |
| Premera Blue Cross Medicare Advantage 1-888-868-7767 premera.com/ma | Premera Blue Cross Medicare Advantage Core (HMO) | Local HMO | \$12.00 | \$2.00 | \$300.00 | \$15/\$45 | \$450/day (Days 1-4) | D, V, H | H7245 | 006 | \$6,300 |
| UnitedHealthcare 1-877-596-3258 www.uhcmedicareolutions.com | AARP MedicareComplete (HMO) | Local HMO | \$16.00 | \$0.00 | \$275.00 | \$15/\$50 | \$440/day (Days 1-4) | D, V, H | H3805 | 021 | \$6,700 |
| | UnitedHealthcare Dual Complete (HMO SNP) | Local HMO (Dual-Eligible) | SNP | SNP | SNP | SNP | SNP | D, V, H | H5008 | 002 | SNP |

2019 Medicare Advantage plans, Washington state

Key to types of Medicare Advantage plans

Local HMO: A Health Maintenance Organization is available in certain counties only. In most HMOs, the plan pays for care only with doctors, specialists, or hospitals on the plan's list - except in an emergency.

Local PPO: A Preferred Provider Organization available in certain counties only. In most PPOs, you pay less if you use doctors or hospitals, and other providers that belong to the network. For an added cost, you can use out-of-network doctors, hospitals, and other providers.

HMO-POS: An HMO plan with a Point-of-Service plan option. An HMO-POS option pays for care with doctors, providers, and hospitals outside the plan for an added cost.

SNP: Medicare "Special Needs" Plans may limit all or most of their membership to people:

- ♦ In certain long-term care facilities (like a nursing home); or
- ♦ Eligible for both Medicare and Medicaid.

Some plans may offer gym membership as an additional benefit. Check with the plan or go to: www.silversneakers.com, www.silverandfit.com, or fitnessadvantage.optum.com

Key to Abbreviations

D: Some dental coverage. Plans may require additional premium.

H: Some hearing coverage

V: Some vision coverage

****MOOP:** Maximum Out of Pocket limit on enrollee spending that includes costs for all in-network Part A and Part B services.

N/A: Not applicable

Need help?

For consumer tips before you buy a Medicare Advantage plan, call our Insurance Consumer Hotline at 1-800-562-6900 and ask to speak with a SHIBA counselor in your area.