


## HMO/Medicare Advantage Plan Comparisons – Stanislaus County – January 1, 2022


 <b>3500 Coffee Road Suite 19 Modesto, CA 95355</b>  <b>209-558-4540</b>	Original Medicare	AARP Medicare Advantage Secure Horizons HMO		AARP Medicare Advantage Secure Horizons HMO	Alignment Health Plan		Anthem Blue Cross Access to CareMore Health			Blue Shield of CA		Brand New Day
	2022 Medicare 1-800-633-4227	1-800-547-5514 209-869-1924		1-800-547-5514 209-869-1924	1-888-979-2247 209-663-3105 209-268-8128		1-877-211-6614 209-226-3094			1-800-847-1222		916-658-3598 1-866-255-4795
	Plan Name	Plan 1	Plan 2	FOCUS	AllCare Preferred	My Choice	Start Smart Plus	Value	Value Plus	Advantage Optimum	Inspire	Classic Plan #37
Monthly premium	Part B TBA	\$99 + B	\$9 + B	\$0 + B	\$0 + B	\$0 + B	\$0 + B	\$0 + B	\$49 + B	\$0 + B	\$0 + B	\$0 + B
<b>Hospital coverage</b> First 60 days Day 61-90 Day 91-150	Part A Premium \$TBA Deductible \$TBA	\$200 per stay Unlimited days	\$220 per days 1-8 \$0 Unlimited	\$175 per days 1-5 \$0 Unlimited	\$0 Unlimited days	\$0 per days 1-4 \$100 per days 5-10 \$0 days 11-90	\$75 per days 1-5 \$0 Unlimited	\$75 per days 1-5 \$0 6-90	\$175 per days 1-5 \$0 6-90	\$150 per days 1-5 \$0 days 6-90	\$100 per days 1-5 \$0 days 6-90	\$100 per days 1-6
<b>Physicians/Specialists</b>	20% \$TBA B Deductible 20%	\$0 \$5 \$0 Virtual	\$0 \$15 \$0 Virtual	\$0 \$0 \$0 Virtual	\$0 \$0	\$0 \$0	\$0 \$0-\$35	\$0 \$0-\$15	\$0 \$0-\$20	\$0 \$15	\$0 \$0	\$0 \$10
<b>Outpatient Hospital and Surgery Center</b>	Varies by service	\$0	\$195	\$125	\$50/\$0	\$150/\$0	\$0-\$135	\$125	\$100	\$200	\$200	\$0-\$150
<b>Emergency ambulance Emergency Room copay</b>	20% 20%	\$260 \$90	\$265 \$90	\$270 \$90	\$50* \$75	\$100* \$85	\$195 \$120	\$100 \$90	\$195 \$120	\$200 \$85	\$200 \$85	\$75 \$100
<b>Durable Med Equip</b> <i>i.e. wheelchair, walker etc.</i>	20%	20%	20%	20%	0% \$0 -\$350 20% - \$351	20%	20%	20%	20%	\$0-20%	\$0-20%	20%
<b>Lab work/ x-rays, Tests/Therapeutic</b>	20%	\$0 / \$15 \$105	\$0 / \$15 \$195	\$0 / \$15 \$105	\$0/\$0 20%	\$0/\$0 20%	\$0, \$5 \$150	\$0, \$0 \$100	\$0, \$5 \$150	\$0, \$0 \$50	\$0, \$0 \$50	\$0 \$25 MRI
<b>Prescription drugs</b>  Tier level = T 1-3 copays T 4-6 not listed	Private Part D Plans (PDP) 25 Plans Premiums \$7.50-\$160.20	T1 \$3 T2 \$12 T3 \$47 T1 GAP	T1 \$3 T2 \$12 T3 \$47 T1 GAP	T1 \$0 T2 \$12 T3 \$47 T1 GAP	T1 \$3 T2 \$10 T3 \$40 T6 GAP	T1 \$5 T2 \$10 T3 \$40 T6 GAP	T1 -\$0 T2- \$12.50 T3-\$40	T1 -\$0 T2- \$9.50 T3-\$40	T1 -\$0 T2- \$9.50 T3-\$40	T1 -\$0 T2- \$10 T3-\$40	T1 -\$0 T2- \$10 T3-\$40	T1 \$0 T 2: \$12 T3: \$47
<b>Skilled Nursing/Rehab</b>	\$0 Copay 1-20 \$TBA 21-100	\$0 Days 1-100	\$0 Days 1-20 \$188 21-47 \$0 48-100	\$0 Days 1-20 \$188 21-47 \$0 48-100	\$0 Days 1-20 \$50 21-100	\$0 Days 1-20 \$50 21-100	\$0 Days 1-20 \$125 21-100	\$0 Days 1-20 \$75 21-100	\$0 Days 1-20 \$100 21-100	\$0 Days 1-20 \$100 21-100	\$0 Days 1-20 \$100 21-100	\$0 days 1-20 \$185.50 days 21-100
<b>Transportation</b>	No benefits	No	No	Yes	Yes	Yes	Yes	No	Yes	Yes	No	Yes
<b>Dental/Vision/Hearing</b>	No benefits	Optional/Yes/ Yes	Optional/Yes/ Yes	No/Yes/Yes	Yes/Yes/Yes	Yes/Yes/Yes	Yes/Yes/ Yes	Yes/Yes/ No	N/A	Yes/Yes/Yes	No/No/Yes	Yes/Yes/Yes
<b>Out of pocket (OOP)</b> Annual limit – except Rx	<b>N/A</b>	\$3400	\$4900	\$3400	\$999	\$2900	\$3400	\$3400	\$3400	\$3400	\$3400	\$999



Navigating Medicare

This information is provided as a guide only. It is not a complete schedule of benefits and costs for each plan. Go to Medicare.gov for updated information. For general information about Medicare, Medicare supplements and Part D prescription plans, call the Stanislaus County HICAP office. HICAP provides impartial, no-cost, individualized assistance to help people understand Medicare. Call for an appointment to review your Medicare benefits and options. **\*Using preferred pharmacy may lower your copays. \* Waived if Admitted With all MA plans, "You must continue to pay your Medicare Part B premium." ASK A HICAP COUNSELOR FOR HELP In understanding your MEDICARE Options... Ask HICAP about Extra Help Programs!!**

### Medicare Advantage Plan Comparisons-Stanislaus County-January 1, 2022

 <b>3500 Coffee Road Suite 19 Modesto, CA 95355 209-558-4540</b>	Original Medicare	Golden State Medicare Health Plan	Humana	Imperial		Kaiser Permanente Senior Advantage		SCAN Health Plan	WellCare By Health Net						
	2021 Medicare 1-800-633-4227	1-877-541-4111  Doctors Hospital of Modesto AllCare & CVMG	1-800-833-2364  Doctors Hospital Emmanuel Hospital Allcare, Caremore+ CVMG Network	1-800-838-5914 1-800-838-8271  Doctors Emmanuel Allcare Network	209 518 8190  Kaiser Permanente Medical Center	1-800-559-3500  Doctors, Emmanuel Hospital  CVMG & Caremore	1-800-275-4373  Doctors, Oak Valley (Sapphire I), Stanislaus Surgical Hospital, Memorial Medical (No Premium plan only 4 hospitals) Allcare & Caremore Network	Connected Care (HMO)	Gold Plus HMO H5619-032	Imperial Traditional 007	Imperial Strong 014	Basic HMO	Enhanced HMO	SCAN CLASSIC	Wellcare No Premium 120
Monthly premium	Part B TBA	\$0 + B	\$0 + B	\$0 + B	\$0+ B <small>Partial \$85 Part B paid to member</small>	\$0 + B	\$70 + B	\$0 + B	\$0 + B	\$33.20 +B					
Hospital coverage First 60 days Day 61-90 Day 91-150	Part A Premium \$TBA Deductible \$TBA	\$0 Unlimited days	\$175 days 1 - 5 \$0 days 6-90	\$150 days 1-5 \$0 days 6-90	Original Medicare Costs	\$200 days 1-5	\$150 days 1-5	\$75 days 1 - 5 \$0 days 6-90	\$190 days 1-7 \$0 days 8-90	\$2524 per Stay					
Physicians/ Specialists	20% \$TBA B Deductible 20%	\$0 \$0	\$0 \$0	\$5 \$10	20% 20%	\$15 \$25	\$5 \$10	\$0 \$0-\$10	\$0 \$10	\$0 \$0					
Outpatient Hospital Ambulatory surgery Center	Varies by service	\$0	\$100-\$150	\$0	20%	\$150	\$100	\$0-\$125	\$150	20%					
Emergency ground ambulance Emergency Room Copay	20%	\$200* \$100*	\$200 \$120	\$150 \$100	20% 20% Max \$90	\$200 \$90	\$200 \$120	\$100 \$90	\$260 \$120	20% \$120					
Durable Med Equip i.e. wheelchair, walker etc.	20%	0% \$0-500 or less 20% \$500 or more	20%	20%	20%	20%	20%	20%	20%	20%					
Lab work/ x-rays, Tests	20%	\$0/\$0 \$0	\$0, \$0, \$150	\$0, \$0, \$0	20%	\$0-\$15, \$20	\$0, \$0	\$0, \$0, \$100	\$0, \$0, \$0-\$150	\$0, \$20%, 20%					
Prescription drugs Tier level = T 1-3 copays	Private Part D Plans (PDP) 32 Plans Premiums \$	T1 \$5 T2 \$10 T3 \$45	T1-\$0/\$0 T2-\$30/\$0 T3-\$141/\$94	T1-\$0 T2-\$5 T3-\$45	25%	T1 \$3 T2 \$12 T3 \$47	T1 \$0 T2 \$10 T3 \$47	T1 \$0 T2 \$10 T3 \$40	T1 \$5 T2 \$ 8 T3 \$37	T1 \$0 T2 \$20 T3 \$47 Deductible \$480					
Skilled Nursing/Rehab	\$0 Copay 1-20 \$TBA 21-100	\$0 days 1-20 \$50 days 21-50 \$0 days 51-100	\$0 days 1 – 20 \$75 days 21-100	\$0 days 1-20	\$0 days 1-20	\$0 days 1- 20 \$100 days 21-100	\$0 days 1- 20 \$100 days 21-100	\$0 days 1- 20 \$75 days 21-100	\$0 days 1- 20 \$125 days 21-100	\$0 days 1- 20 \$184 days 21-100					
Transportation	No benefits	Yes	Yes	Yes	No	No	No	No	No	No					
Dental/Vision/Hearing	No benefits	Yes/Yes/Yes	Yes/Yes/Yes	Yes/Yes/Yes	Yes/Yes/Yes	Yes/Optional/ Optional	Yes/Optional/ Optional	Yes/Yes/Yes	Yes/Yes/Yes	No/Yes/Yes					
Out of pocket (OOP) Annual limit – except Rx	N/A	\$1499	\$3400	\$2999	\$7,550	\$5900	\$3400	\$2900	\$3450	\$3450					

**Original Medicare**  
 Pays 80% Deductibles apply, Part A free to most, Part B premium usually deducted automatically from Social Security, Part D: Most MA Plans include prescription drug coverage. If Prescription Plan is a stand-alone the premium varies greatly.

**Medicare Advantage Plans**  
 Provides your Medicare benefits once a "member" \$0- \$124 additional premium  
 Covers deductibles  
 Reduced hospital costs  
 Includes Prescription Drug plan  
 Have established maximum out of pocket costs  
 Offers additional benefits  
 Most common are HMOs  
 Usually must use network physicians & vendors

**Medicare Supplements or "Medi-Gap"**  
 Pays the costs that Medicare doesn't cover (Secondary)  
 Generally higher premiums  
 Most cover deductibles, co-payments  
 Allows freedom to choose physician, hospital etc....  
 Does NOT include prescription drug plan  
 High deductible plans with lower premiums usually sold by independent insurance brokers

Note: Extra help can help pay for Part D premium and Rx copays thru the Limited Income Subsidy (LIS) Program. The Coverage Gap for Rx coverage starts at \$4,430, some MA plans provide limited coverage during the GAP.



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