

NY 2024 Medicare Advantage, and Cost Plans

* Indicates plan does not offer Part D drug coverage.

** MOOP is defined as: Maximum Out-of-Pocket (MOOP) limit on enrollee spending that includes costs for all in-network Part A and Part B Services. N/A is defined as Not Applicable

State	County	Organization Name	Plan Name	Type of Medicare Health Plan	Monthly Consolidated Premium (Includes Part C Premium)	Annual Drug Deductible	Drug Benefit Type	Additional Coverage Offered in the Gap	Contract ID	Plan ID	In-network MOOP Amount **
New York	Jefferson	Wellcare	Wellcare Premium Ultra Open (PPO)	Local PPO	\$110.00	\$0.00	Enhanced	No	H2775	105	\$3,400.00
New York	Jefferson	Wellcare	Wellcare No Premium Open (PPO)	Local PPO	\$0.00	\$450.00	Enhanced	Yes	H2775	106	\$6,700.00
New York	Jefferson	Wellcare	Wellcare Giveback Open (PPO)	Local PPO	\$0.00	\$500.00	Enhanced	No	H2775	111	\$8,300.00
New York	Jefferson	Wellcare	Wellcare Assist Open (PPO)	Local PPO	\$20.60	\$510.00	Basic	No	H2775	113	\$6,700.00
New York	Jefferson	Wellcare	Wellcare Advantage Premium Enhanced (PFFS)	PFFS *	\$40.00				H2816	037	
New York	Jefferson	Wellcare	Wellcare Advantage No Premium (PFFS)	PFFS *					H2816	038	
New York	Jefferson	MVP HEALTH CARE	MVP Medicare Preferred Gold without Part D (HMO-POS)	Local HMO *					H3305	020	\$6,700.00
New York	Jefferson	MVP HEALTH CARE	MVP Medicare Preferred Gold with Part D (HMO-POS)	Local HMO	\$147.40	\$0.00	Enhanced	Yes	H3305	021	\$5,800.00
New York	Jefferson	MVP HEALTH CARE	MVP Medicare Secure Plus with Part D (HMO-POS)	Local HMO	\$97.50	\$0.00	Enhanced	Yes	H3305	022	\$7,550.00
New York	Jefferson	MVP HEALTH CARE	MVP Medicare Secure with Part D (HMO-POS)	Local HMO	\$39.50	\$150.00	Enhanced	No	H3305	032	\$7,550.00
New York	Jefferson	Aetna Medicare	Aetna Medicare Value Plan (HMO)	Local HMO	\$0.00	\$0.00	Enhanced	Yes	H3312	048	\$7,900.00
New York	Jefferson	Excellus Health Plan, Inc	Medicare BlueEnhanced (PPO)	Local PPO	\$86.00	\$0.00	Enhanced	No	H3335	015	\$5,000.00
New York	Jefferson	Excellus Health Plan, Inc	Medicare BlueClassic (PPO)	Local PPO	\$30.40	\$0.00	Enhanced	No	H3335	038	\$7,200.00
New York	Jefferson	Excellus Health Plan, Inc	Medicare BlueSalute (PPO)	Local PPO *					H3335	043	\$4,500.00
New York	Jefferson	Excellus Health Plan, Inc	Medicare BlueEssential (PPO)	Local PPO	\$0.00	\$150.00	Enhanced	No	H3335	053	\$7,900.00
New York	Jefferson	Excellus Health Plan, Inc	Medicare BlueActive (PPO)	Local PPO	\$0.00	\$350.00	Enhanced	No	H3335	055	\$7,900.00
New York	Jefferson	Excellus Health Plan, Inc	Medicare BlueFlex (PPO)	Local PPO	\$14.40	\$275.00	Enhanced	No	H3335	058	\$7,900.00
New York	Jefferson	UnitedHealthcare	AARP Medicare Advantage from UHC NY-0006 (HMO-POS)	Local HMO	\$0.00	\$0.00	Enhanced	Yes	H3379	039	\$7,550.00
New York	Jefferson	CDPHP Medicare Advantage	CDPHP Choice (HMO)	Local HMO *	\$39.90				H3388	001	\$6,100.00
New York	Jefferson	CDPHP Medicare Advantage	CDPHP Choice Rx (HMO)	Local HMO	\$124.00	\$0.00	Enhanced	No	H3388	002	\$6,100.00
New York	Jefferson	CDPHP Medicare Advantage	CDPHP Value Rx (HMO)	Local HMO	\$53.80	\$0.00	Enhanced	No	H3388	004	\$6,400.00
New York	Jefferson	CDPHP Medicare Advantage	CDPHP Basic RX (HMO)	Local HMO	\$31.00	\$0.00	Enhanced	No	H3388	013	\$6,700.00
New York	Jefferson	CDPHP Medicare Advantage	CDPHP \$0 Medicare Rx (HMO)	Local HMO	\$0.00	\$250.00	Enhanced	No	H3388	014	\$7,000.00
New York	Jefferson	UnitedHealthcare	AARP Medicare Advantage from UHC NY-0018 (PPO)	Local PPO	\$0.00	\$0.00	Enhanced	Yes	H3418	007	\$7,550.00
New York	Jefferson	Humana	Humana Gold Plus H3533-006 (HMO)	Local HMO	\$0.00	\$350.00	Enhanced	Yes	H3533	006	\$7,550.00
New York	Jefferson	Humana	Humana Gold Plus H3533-013 (HMO)	Local HMO	\$25.00	\$275.00	Enhanced	Yes	H3533	013	\$6,000.00
New York	Jefferson	Wellcare	Wellcare No Premium (HMO)	Local HMO	\$0.00	\$425.00	Enhanced	No	H4868	019	\$8,300.00
New York	Jefferson	CDPHP Medicare Advantage	CDPHP Vital Rx (PPO)	Local PPO	\$0.00	\$300.00	Enhanced	No	H5042	009	\$7,500.00
New York	Jefferson	CDPHP Medicare Advantage	CDPHP Flex Rx (PPO)	Local PPO	\$34.80	\$0.00	Enhanced	No	H5042	011	\$6,100.00
New York	Jefferson	CDPHP Medicare Advantage	CDPHP Flex (PPO)	Local PPO *					H5042	012	\$6,100.00
New York	Jefferson	Aetna Medicare	Aetna Medicare Premier Plan (PPO)	Local PPO	\$0.00	\$150.00	Enhanced	Yes	H5521	077	\$7,550.00
New York	Jefferson	Aetna Medicare	Aetna Medicare Credit Plan (PPO)	Local PPO	\$0.00	\$250.00	Enhanced	Yes	H5521	313	\$8,500.00
New York	Jefferson	Aetna Medicare	Aetna Medicare Eagle Plan (PPO)	Local PPO *					H5521	323	\$7,000.00
New York	Jefferson	Aetna Medicare	Aetna Medicare Discover Value Plan (PPO)	Local PPO	\$28.00	\$250.00	Enhanced	Yes	H5521	340	\$8,500.00
New York	Jefferson	Aetna Medicare	Aetna Medicare Platinum Plan (PPO)	Local PPO	\$150.00	\$250.00	Enhanced	Yes	H5521	459	\$4,300.00
New York	Jefferson	Humana	HumanaChoice H5970-001 (PPO)	Local PPO	\$27.00	\$0.00	Enhanced	Yes	H5970	001	\$4,950.00
New York	Jefferson	Humana	HumanaChoice H5970-015 (PPO)	Local PPO	\$0.00	\$250.00	Enhanced	Yes	H5970	015	\$5,300.00
New York	Jefferson	Humana	Humana USAA Honor (PPO)	Local PPO *					H5970	016	\$4,500.00
New York	Jefferson	Humana	HumanaChoice H5970-018 (PPO)	Local PPO	\$0.00	\$310.00	Enhanced	Yes	H5970	018	\$5,350.00

New York	Jefferson	MVP HEALTH CARE	MVP Medicare WellSelect Plus with Part D (PPO)	Local PPO	\$122.40	\$0.00	Enhanced	Yes	H9615	007	\$6,500.00
New York	Jefferson	MVP HEALTH CARE	MVP Medicare WellSelect with Part D (PPO)	Local PPO	\$0.00	\$250.00	Enhanced	No	H9615	008	\$7,550.00
New York	Jefferson	MVP HEALTH CARE	MVP Medicare Patriot Plan with Part D (PPO)	Local PPO	\$42.40	\$200.00	Enhanced	No	H9615	018	\$7,550.00
New York	Jefferson	UnitedHealthcare	UHC Medicare Advantage NY-0020 (Regional PPO)	Regional PPO	\$29.00	\$295.00	Enhanced	Yes	R5342	001	\$7,900.00
New York	Jefferson	UnitedHealthcare	UHC Medicare Advantage Patriot No Rx NY-MA02 (Regional PPO)	Regional PPO *					R5342	002	\$6,700.00
New York	Jefferson	UnitedHealthcare	UHC Medicare Advantage NY-0021 (Regional PPO)	Regional PPO	\$56.00	\$195.00	Enhanced	Yes	R5342	005	\$7,500.00
New York	Jefferson	UnitedHealthcare	UHC Medicare Advantage NY-0022 (Regional PPO)	Regional PPO	\$88.00	\$0.00	Enhanced	Yes	R5342	006	\$7,200.00