

Medicare Advantage Fact Sheet

What is a Medicare Advantage Plan?

Medicare Advantage is an alternative to Original Medicare and supplement coverage. Medicare Advantage Plans are also referred to as Medicare Health Plans or Part C. Medicare Part C/Medicare Advantage Plans are offered by private insurance companies.



What do Medicare Advantage Plans cover?

With a Medicare Advantage plan, you receive all of your needed coverage in one plan. Medicare Advantage Plans cover the same services Part A (inpatient) and Part B (outpatient) cover. Most plans also include drug coverage (Part D). Some plans offer extra benefits, like dental and vision.

How much do Medicare Advantage Plans cost?

Monthly Premiums: All Medicare Advantage Plan enrollees must **continue to pay the Medicare Part B premium, \$144.60**. Medicare Advantage Plans may also charge an additional premium which will vary based on the plan. **Additional Premiums range from \$0 - \$145.**

Deductibles/Copays: Medicare Advantage Plans can have a deductible up to \$1,000 per year, depending on the plan. With a Medicare Advantage plan you will owe a copay for each service each time you receive it. For Example: **Doctor's Visit - \$10***, **Specialist - \$40***, **Outpatient Surgery - \$300***, **Inpatient Hospital Stay - up to \$1,750 per stay***. **Other copays will apply.**

Out-of-Pocket Maximum: All Medicare Advantage plans have an out-of-pocket limit. This is the maximum a person can spend on medical expenses for the year. Once the out-of-pocket amount is reached, the plan covers 100% of cost. Each plan determines their specific out-of-pocket limit. Prescription drug costs never count towards this dollar amount.

Premium Cost:

Medicare Part A -	\$0
Medicare Part B -	\$144.60
Medicare Advantage -	\$29*
Monthly Premiums	\$173.60*

Out-of-Pocket Costs*:

Inpatient Care -	Up to \$1,750* per hospital stay
Outpatient Care -	\$10* Doctor, \$40* Specialist, \$300* Outpatient Surgery
Out-of-Pocket -	\$6,700* out-of-pocket maximum limit
Drug Coverage -	\$0-\$435 deductible plus copays for medications

*These prices are an average. Price will depend on the plan and company selected.

Medicare Advantage Fact Sheet

Who is eligible for a Medicare Advantage Plan?

Medicare Advantage Plans accept all Medicare beneficiaries, including those on Medicare due to disability. The exception to this rule are those with End-Stage Renal Disease (kidney failure). You must first have Medicare Part A and Part B in order to join a Medicare Advantage Plan. Your options will vary depending on where you live. Many counties in Nebraska do NOT have these plans as an option.

When can I get a Medicare Advantage Plan?

You can join a Medicare Advantage Plan when you first begin Medicare, whether by age or disability. If you work past age 65 and delay Medicare, you can choose a Medicare Advantage Plan when you retire.

Medicare Advantage plans are a one year commitment. Each year the plan can change costs and coverage. Since the plan can change its benefits you also get the chance to make changes. Every year, between October 15 and December 7, you get the opportunity to review Medicare Advantage Plan options. If you enroll in a new plan during this period, it will take effect January 1 of the following year.

How do I sign up for a Medicare Advantage Plan?

Contact the Nebraska SHIP for a comparison of Medicare Advantage Plan options in your area. Once you have selected a plan, SHIP can assist you in enrolling.

Is there anything else to consider when choosing a Medicare Advantage Plan?

Provider Choice: Medicare Advantage plans are sold by private insurance companies. This means that you must see doctors and other healthcare providers that accept that particular insurance plan. Prior to enrolling, be sure to check with the Advantage Plan to ensure that your providers are in the plan's network.

Supplements: Medicare Supplements are an alternative option to a Medicare Advantage Plan. You should never have both a Medicare Supplement and a Medicare Advantage Plan. The two options will not work together. Choose the option that best meets your needs.

Nebraska SHIP
1033 O Street, Suite 307 - Lincoln, NE 68508
1-800-234-7119 - www.doi.nebraska.gov/SHIP

NEBRASKA
SHIP

Local help for Nebraskans
with Medicare

2021 Nebraska Medicare Advantage and Cost Plans

Below is a list of counties and the plans available in each county. The following pages contain the plan details for each plan.

Adams County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Antelope County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Arthur County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Banner County

UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Blaine County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Boone County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Box Butte

UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Boyd County

Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Brown County

No plans available in Brown County

Buffalo County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Below is a list of counties and the plans available in each county. The following pages contain the plan details for each plan.

Burt County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Butler County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Advantage Solution H3632-001 (PPO)
Medica Advantage Solution with CHI Health (HMO)
Medical Associates Nebraska Senior Plan (Cost)

Cass County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Humana Gold Plus H0028-011 (HMO)
Humana Honor (PPO)
Humana Value Plus H5216-171 (PPO)
HumanaChoice H5216-014 (PPO)
Medica Advantage Solution H3632-001 (PPO)
Medica Advantage Solution with CHI Health (HMO)

Cedar County

AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Chase County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)

Cherry County

No plans available in Cherry County

Cheyenne County

Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Clay County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

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Colfax County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Cuming County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Custer County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)

Custer County continued

AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Dakota County

AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Humana Gold Plus H0028-011 (HMO)

Dawes County

Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Dawson County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Deuel County

No plans available in Deuel county

Dixon County

AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Dodge County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Bright Advantage (HMO)
Bright Advantage Choice (PPO)
Bright Advantage Choice Plus (PPO)
Bright Advantage Plus (HMO)
Humana Gold Plus H0028-011 (HMO)
Humana Honor (PPO)
Humana Value Plus H5216-171 (PPO)
HumanaChoice H5216-014 (PPO)
Medica Advantage Solution H3632-001 (PPO)
Medica Advantage Solution with CHI Health (HMO)

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Douglas County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Aetna Medicare Prime (HMO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Bright Advantage (HMO)
Bright Advantage Choice (PPO)
Bright Advantage Choice Plus (PPO)
Bright Advantage Plus (HMO)
Humana Gold Plus H0028-011 (HMO)
Humana Honor (PPO)
HumanaChoice H5216-014 (PPO)
HumanaChoice H5216-254 (PPO)
Medica Advantage Solution H3632-001 (PPO)
Medica Advantage Solution with CHI Health (HMO)

Dundy County

No plans available in Dundy county

Fillmore County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)

More on next column

2021 Nebraska Medicare Advantage and Cost Plan Options

Fillmore County Continued

AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
Medical Associates Nebraska Senior Plan (Cost)

Franklin County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Frontier County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)

Medica Prime Solution Core (Cost)

More on next column

Frontier County continued

Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Furnas County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Gage County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
Medical Associates Nebraska Senior Plan (Cost)

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Garfield County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Garden County

No plans available in Garden County

Gosper County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Grant County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)

Greeley County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Hall County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Hamilton County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Harlan County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Hayes County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)

Below is a list of counties and the plans available in each county. The following pages contain the plan details for each plan.

Hitchcock County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)

Holt County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Hooker County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Howard County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Jefferson County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
Medical Associates Nebraska Senior Plan (Cost)

Johnson County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
Medical Associates Nebraska Senior Plan (Cost)

Kearney County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Keith County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Keya Paha

UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Kimball County

No plans in Kimball County

Below is a list of counties and the plans available in each county. The following pages contain the plan details for each plan.

Knox County

AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Lancaster County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Humana Gold Plus H0028-011 (HMO)
Humana Honor (PPO)
Humana Value Plus H5216-171 (PPO)
HumanaChoice H5216-014 (PPO)
HumanaChoice H5216-254 (PPO)
Medica Advantage Solution H3632-001 (PPO)
Medica Advantage Solution with CHI Health (HMO)
Medical Associates Nebraska Senior Plan (Cost)

Lincoln County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)

Logan County
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Loup County

Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Madison County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

McPherson County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Merrick County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Morrill County

UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Below is a list of counties and the plans available in each county. The following pages contain the plan details for each plan.

Nance County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Nemaha County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Nuckolls County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)

More in next Column

Nuckolls County Continued

Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
Medical Associates Nebraska Senior Plan (Cost)

Otoe County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
Medical Associates Nebraska Senior Plan (Cost)

Pawnee County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)

More in next Column

Pawnee County Continued

Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
Medical Associates Nebraska Senior Plan (Cost)

Perkins County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Phelps County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Below is a list of counties and the plans available in each county. The following pages contain the plan details for each plan.

Pierce County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Platte County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Polk County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)

More plans in next column

Polk County Continued

AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)

Red Willow County

No plans available in Red Willow County

Richardson County

No plans available in Richardson County

Rock County

Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Saline County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)

More plans in next column

Saline County Continued

Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
Medical Associates Nebraska Senior Plan (Cost)

Sarpy County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Aetna Medicare Prime (HMO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Bright Advantage (HMO)
Bright Advantage Choice (PPO)
Bright Advantage Choice Plus (PPO)
Bright Advantage Plus (HMO)
Humana Gold Plus H0028-011 (HMO)
Humana Honor (PPO)
Humana Value Plus H5216-171 (PPO)
HumanaChoice H5216-014 (PPO)
HumanaChoice H5216-254 (PPO)
Medica Advantage Solution H3632-001 (PPO)
Medica Advantage Solution with CHI Health (HMO)

Below is a list of counties and the plans available in each county. The following pages contain the plan details for each plan.

Saunders

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Humana Honor (PPO)
Humana Value Plus H5216-171 (PPO)
HumanaChoice H5216-014 (PPO)
Medica Advantage Solution H3632-001 (PPO)
Medica Advantage Solution with CHI Health (HMO)

Scotts Bluff County

UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Seward County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)

More in next Column

Seward County Continued

Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
Medical Associates Nebraska Senior Plan (Cost)

Sheridan County

UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Sherman County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Sioux County

No plans Available in Sioux County

Stanton County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Thayer County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
Medical Associates Nebraska Senior Plan (Cost)

Below is a list of counties and the plans available in each county. The following pages contain the plan details for each plan.

Thomas County

Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

Thurston County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Valley County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Washington County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
More on next Column

Washington County continued

Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Choice (HMO-POS)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Humana Gold Plus H0028-011 (HMO)
Humana Honor (PPO)
Humana Value Plus H5216-171 (PPO)
HumanaChoice H5216-014 (PPO)
Medica Advantage Solution H3632-001 (PPO)
Medica Advantage Solution with CHI Health (HMO)

Wayne County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Webster County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
More on next Column

Webster County Continued

Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)

Wheeler County

Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
UnitedHealthcare MedicareDirect Patriot (PFFS)
UnitedHealthcare MedicareDirect Rx (PFFS)

York County

AARP Medicare Advantage (HMO-POS)
AARP Medicare Advantage Choice (PPO)
AARP Medicare Advantage Patriot (PPO)
Aetna Medicare Elite (PPO)
Aetna Medicare Premier (HMO)
Aetna Medicare Premier (PPO)
Blue Cross Blue Shield Nebraska MA Access (PPO)
Blue Cross Blue Shield Nebraska MA Core (HMO)
Medica Prime Solution Core (Cost)
Medica Prime Solution Premier (Cost)
Medica Prime Solution Thrift (Cost)
Medical Associates Nebraska Senior Plan (Cost)

Understanding Medicare Advantage Plan Benefits

Plan Overview

Monthly Premium - The dollar amount you owe to have this insurance. Part B premiums are paid in addition to this monthly premium.

Medicare Deductible - The amount you pay for health care services before your insurance begins to pay. Reach out to the plan for details on what applies to the deductible. Prescription drug costs do not count towards this deductible.

Out-of-Pocket Limit - The most you could pay for covered services in the year. After you spend this amount on deductibles, copayments, and coinsurance, your plan pays 100% of the costs of covered benefits. The **out-of-pocket** limit doesn't include monthly premiums or the cost of prescriptions.

Benefits and Costs

Copays - A set amount that you pay for a specific health care service. Each service has its own unique copay. Typically you pay copays after your deductible has been met.

Coinsurance - A percentage you pay for a specific health care service. Typically you pay coinsurance after your deductible has been met.

Prescription Coverage

Most Medicare Advantage plans have prescription coverage included, therefore you cannot purchase a separate Part D plan. In some instances, such as a Cost Plan, a Part D plan may be added. Deductibles, copays and coinsurance will apply to prescriptions and do not count towards the Medical Deductible or out-of-pocket limit.

	Nebraska Sample MA Plan (PPO) A1234-567
Phone Number	555-555-555
Regional Counties Offered	Butler, Lancaster, Saline, Saunders, Seward
Plan Overview	
Monthly Premium	\$0
Medical Deductible	\$0
Out-of-pocket Limit	\$4,500
Benefits and Costs	
Primary Doctor Copay	\$5
Specialist Doctor Copay	\$45
Urgent Care Copay	\$30-\$40
Labs/Test/X-rays Copay	\$10 / \$30 /\$14
Physical Therapy Copay	\$40
Emergency Room Copay	\$90
Ground Ambulance Copay	\$225
Inpatient Hospital Copay	\$395 per day for days 1-4 \$0 days 5-90 <i>Potential Total = \$1,580</i>
Outpatient Hospital Copay	\$295 - \$395
Skilled Nursing Facility Care Copay	\$0/day 1-20, \$160/day 21-51, \$0/day 52-100 <i>Out-of-pocket limit = \$4,900</i>
Extra Benefits	
Dental Coverage	Yes - up to \$1,500
Vision Coverage	Yes - up to \$200
Additional Benefits	Hearing, Fitness, OTC
Prescription Coverage	
Drug Coverage Included	Yes - <i>copays apply</i>
Your Total Drug Cost	\$ _____

Plan Name, Plan Type and Number

HMO - This type of plan has a network of providers (doctors, hospitals, specialist, etc.). Enrollees must use in-network providers in order for the plan to cover the service, some plans may offer exceptions to this policy.

PPO - This type of plan has a network of providers. Enrollees who use in-network providers typically pay less out-of-pocket. If an out-of-network provider is used, the service will be more expensive.

PFF - This type of plan does NOT have a network of providers. Enrollees must check with their providers before each visit to ensure they will accept the plan.

Cost - This type of plan has a network of providers. Enrollees who use in-network providers typically pay less out-of-pocket. If an out-of-network provider is used, standard Medicare Parts A and B costs apply.

Extra Benefits

Dental Coverage - Coverage for dental expenses. The amount listed is the total the plan will pay for dental care in the calendar year. Some plans require the use of network dentists, others offer reimbursement for any dentist. Contact plan for details.

Vision Coverage - Coverage for vision expenses. The amount listed is the total the plan will pay for vision care in the calendar year. Some plans require the use of network providers, others offer reimbursement for any provider. Contact plan for details.

Additional Benefits - Benefits often include assistance with **hearing services** including hearing aids, **fitness benefits** such as a gym membership, and **over-the-counter (OTC)** medication. Contact the plan for a full list of their specific additional benefits.

	AARP Medicare Advantage (HMO-POS) H2802-001	AARP Medicare Advantage Choice (PPO) H1278-001	AARP Medicare Advantage Choice (PPO) H1278-007	AARP Medicare Advantage Patriot (PPO) H1278-018	AARP Medicare Advantage Patriot (PPO) H1278-019
Phone Number	800-555-5757	800-555-5757	800-555-5757	800-555-5757	800-555-5757
Regional Counties Offered	<i>See County List</i>				
Plan Overview					
Monthly Premium	\$0	\$19	\$0	\$0 <i>(Part B Premium reduction \$25)</i>	\$0 <i>(Part B Premium reduction \$25)</i>
Medical Deductible	\$0	\$0	\$0	\$0	
Out-of-pocket Limit	\$4,900	\$3,900 in / \$8,000 out	\$3,900 in / \$10,000 out	\$6,700 in / \$10,000 out	\$6,700 in / \$10,000 out
Benefits and Costs					
Primary Doctor Copay	\$5	\$0	\$0	\$10	\$10
Specialist Doctor Copay	\$45	\$35	\$30	\$45	\$45
Urgent Care Copay	\$30-\$40	\$30-\$40	\$30-\$40	\$30-\$40	\$30-\$40
Labs/Test/X-rays Copay	\$0 / \$30 /\$15	\$0/ \$30/\$15	\$0/ \$30/\$15	\$0 / \$30 /\$15	\$0 / \$30 /\$15
Physical Therapy Copay	\$40	\$35	\$30	\$40	\$40
Emergency Room Copay	\$90	\$90	\$90	\$90	\$90
Ground Ambulance Copay	\$250	\$250	\$250	\$250	\$250
Inpatient Hospital Copay	\$395 per day for days 1-4 \$0 days 5-90+ <i>Potential Total = \$1,580</i>	\$395 per day for days 1-4 \$0 days 5-90+ <i>Potential Total = \$1,580</i>	\$370 per day for days 1-5 \$0 days 6-90+ <i>Potential Total = \$1,850</i>	\$295 per day for days 1– 6 \$0 days 7-90+ <i>Potential Total = \$1,770</i>	\$295 per day for days 1– 6 \$0 days 7-90+ <i>Potential Total = \$1,770</i>
Outpatient Hospital Copay	\$0 - \$395 per visit	\$0 - \$395 per visit	\$0 - \$400 per visit	\$0-\$295 per visit	\$0-\$295 per visit
Skilled Nursing Facility Care Copay	\$0/day 1-20, \$184/day 21-47, \$0/day 48-100 <i>Out-of-pocket limit = \$4,900</i>	\$0/day 1-20, \$184/day 21-42, \$0/day 43-100 <i>Out-of-pocket limit = \$3,900</i>	\$0/day 1-20, \$184/day 21-42, \$0/day 43-100 <i>Out-of-pocket limit = \$3,900</i>	\$0/day 1-20, \$184/day 21-57, \$0/day 58-100 <i>Out-of-pocket limit = \$6,700</i>	\$0/day 1-20, \$184/day 21-57 \$0/day 58 -100 <i>Out-of-pocket limit = \$6,700</i>
Extra Benefits					
Dental Coverage	Yes - up to \$1,000	Yes - up to \$1,500			
Vision Coverage	Yes - up to \$200	Yes - up to \$300			
Additional Benefits	Hearing, Fitness, OTC				
Prescription Coverage					
Drug Coverage Included	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>	<i>No prescription coverage</i>	<i>No prescription coverage</i>
Your Total Drug Cost	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

	Aetna Medicare Elite (PPO) H1608-038	Aetna Medicare Premier (HMO) H7149-001	Aetna Medicare Premier (PPO) H1608-012	Aetna Medicare Prime (HMO) H7149-004	BlueCross Blue Shield MA Access (PPO) H8181-001
Phone Number	855-335-1407	855-335-1407	855-335-1407	855-335-1407	844-899-6060
Regional Counties Offered	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>
Plan Overview					
Monthly Premium	\$0	\$0	\$33	\$0	\$26
Medical Deductible	\$1,000* (<i>specific services</i>)	\$0	\$0	\$0	\$0
Out-of-pocket Limit	\$6,100 in / \$8,000 out	\$5,900	\$6,100 in / \$11,300 out	\$5,000	\$4,500 in / \$6,900 out
Benefits and Costs					
Primary Doctor Copay	\$0	\$0	\$15	\$0	\$5
Specialist Doctor Copay	\$35	\$40	\$40	\$35	\$30
Urgent Care Copay	\$65	\$65	\$65	\$65	\$65
Labs/Test/X-rays Copay	\$0 / \$35 / \$20	\$0/ \$40 / \$15	\$0/ \$40 / \$20	\$0/ \$35 / \$10	\$0/ \$20-350 / \$15-350
Physical Therapy Copay	\$40	\$40	\$40	\$40	\$40
Emergency Room Copay	\$90	\$90	\$90	\$90	\$90
Ground Ambulance Copay	\$350	\$350	\$350	\$300	Not listed
Inpatient Hospital Copay	\$390 per day for days 1-5 \$0 days 6-90 (<i>plus deductible</i>) <i>Potential Total = \$2,950*</i>	\$390 per day for days 1-5 \$0 days 6-90 <i>Potential Total = \$1,950</i>	\$390 per day for days 1-5 \$0 days 6-90 <i>Potential Total = \$1,950</i>	\$390 per day for days 1-5 \$0 days 6-90 <i>Potential Total = \$1,950</i>	\$420 per day for days 1-4 \$0 days 5-90+ <i>Potential Total = \$1,680</i>
Outpatient Hospital Copay	\$300 - \$400 per visit*	\$300 - \$400 per visit	\$250 - \$350 per visit	\$250 - \$350 per visit	\$350 per visit
Skilled Nursing Facility Care Copay	\$0 day 1-20, \$184 per day/days 21-100* <i>Out-of-pocket limit = \$6,100</i>	\$0 day 1-20, \$184 per day/days 21-100 <i>Out-of-pocket limit = \$5,900</i>	\$0 day 1-20, \$184 per day/days 21-100 <i>Out-of-pocket limit = \$6,100</i>	\$0 day 1-20, \$184 per day/days 21-100 <i>Out-of-pocket limit = \$5,000</i>	\$0 day 1-20, \$179 /day 21-46, \$0/day 47-100 <i>Out-of-pocket limit = \$4,500</i>
Extra Benefits					
Dental Coverage	Yes - up to \$1,000	Yes - up to \$1,300	Yes - up to \$500	Yes - up to \$1,000	Yes - up to \$1,350
Vision Coverage	Yes - up to \$310	Yes - up to \$270	Yes - up to \$100	Yes - up to \$100	Yes - up to \$200
Additional Benefits	Hearing, Fitness, OTC	Hearing, Fitness, OTC	Hearing, Fitness, OTC	Hearing, Fitness, OTC	Hearing, Fitness, OTC
Prescription Coverage					
Drug Coverage Included	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>
Your Total Drug Cost	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

	BlueCross Blue Shield MA Choice (HMO-POS) H3170-002	BlueCross Blue Shield MA Core (HMO) H3170-003-1	BlueCross Blue Shield MA Core (HMO) H3170-003-2	Bright Advantage (HMO) H7853-007	Bright Advantage Choice Plus (PPO) H5841-010
Phone Number	844-899-6060	844-899-6060	844-899-6060	833-412-6737	833-412-6737
Regional Counties Offered	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>
Plan Overview					
Monthly Premium	\$44	\$0	\$0	\$0	\$39
Medical Deductible	\$0	\$0	\$0	\$0	\$0
Out-of-pocket Limit	\$5,700 in / \$6,700 out	\$6,250	\$6,250	\$4,700	\$4,500 in / \$10,000 out
Benefits and Costs					
Primary Doctor Copay	\$10	\$10	\$5	\$0	\$0
Specialist Doctor Copay	\$40	\$45	\$45	\$10	\$10
Urgent Care Copay	\$65	\$65	\$65	\$35	\$35
Labs/Test/X-rays Copay	\$10-350 / \$20-350 / \$20-350	\$10-395 / \$20-395 / \$20-395	\$10-395 / \$20-395 / \$20-395	\$0 / \$0-\$100 / \$0	\$10 / \$0-\$125 / \$20
Physical Therapy Copay	\$40	\$40	\$40	\$20	\$20
Emergency Room Copay	\$90	\$90	\$90	\$90	\$90
Ground Ambulance Copay	\$325	\$325	\$325	\$200	\$225
Inpatient Hospital Copay	\$420 per day for days 1-4 \$0 days 5-100 <i>Potential Total = \$1,680</i>	\$420 per day for days 1-4 \$0 days 5-90 <i>Potential Total = \$1,680</i>	\$420 per day for days 1-4 \$0 days 5-90 <i>Potential Total = \$1,680</i>	\$300 per day for days 1-6 \$0 days 7-90+ <i>Potential Total = \$1,800</i>	\$350 per day for days 1-5 \$0 days 6-90 <i>Potential Total = \$1,750</i>
Outpatient Hospital Copay	\$200 per visit	\$395 per visit	\$395 per visit	\$250 per visit	\$325 per visit
Skilled Nursing Facility Care Copay	\$0 day 1-20, \$184 /day 21- 57, \$0/day 58-100 <i>Out-of-pocket limit = \$5,700</i>	\$0 day 1-20, \$184 /day 21- 54, \$0/day 55-100 <i>Out-of-pocket limit = \$5,900</i>	\$0 day 1-20, \$184 /day 21- 54, \$0/day 55-100 <i>Out-of-pocket limit = \$6,250</i>	\$0 day 1-20, \$178 per day/days 21-100 <i>Out-of-pocket limit = \$4,700</i>	\$0 day 1-20, \$178 per day/days 21-100 <i>Out-of-pocket limit = \$4,500</i>
Extra Benefits					
Dental Coverage	Yes - up to \$700	Yes - up to \$650	Yes - up to \$650	Additional \$18 premium	Yes - up to \$1,500
Vision Coverage	Yes - up to \$100	Yes - up to \$100	Yes - up to \$100	Yes	Yes
Additional Benefits	Hearing, Fitness, OTC	Hearing, Fitness, OTC	Hearing, Fitness, OTC	Hearing, Fitness	Hearing, Fitness
Prescription Coverage					
Drug Coverage Included	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>
Your Total Drug Cost	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

	Bright Advantage Choice (PPO) H5841-005	Bright Advantage Plus (HMO) H7853-008	Humana Gold Plus (HMO) H0028-011	Humana Honor (PPO) H5216-086	Humana Value Plus (PPO) H5216-171
Phone Number	833-412-6737	833-412-6737	800-833-2364	800-833-2364	800-833-2364
Regional Counties Offered	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>
Plan Overview					
Monthly Premium	\$0 <i>(Part B Premium Reduction \$25)</i>	\$39	\$0	\$0 <i>(Part B Premium Reduction)</i>	\$27.80
Medical Deductible	\$100	\$0	\$0	\$0	Unavailable
Out-of-pocket Limit	\$4,500 in / \$10,000 out	\$3,900	\$3,850	\$6,700 in / \$10,000 out	\$6,700 in/\$10,000 out
Benefits and Costs					
Primary Doctor Copay	\$0	\$0	\$0	\$10	\$20
Specialist Doctor Copay	\$30	\$0	\$45	\$45	\$50
Urgent Care Copay	\$35	\$35	\$0-\$45	\$10-\$45	\$20-\$50
Labs/Test/X-rays Copay	\$10 / \$0-\$125 / \$20	\$0 /\$0-\$100 / \$0	\$0-\$25 / \$0-\$95 / \$0-\$95	\$0-\$40/ \$0-\$50 /\$10-\$50	\$0/ \$0-\$50 / \$20-\$50
Physical Therapy Copay	\$20	\$20	\$40	\$40	20% Coinsurance
Emergency Room Copay	\$90	\$90	\$90	\$90	\$90
Ground Ambulance Copay	\$225	\$200 per visit	\$290	\$290	20% Coinsurance
Inpatient Hospital Copay	\$250 per day for days 1-5 \$0 days 6-90+ <i>Potential Total = \$1,750</i>	\$325 per day for days 1-5 \$0 days 6-90 <i>Potential Total = \$1,625</i>	\$350 per day for days 1-5 \$0 days 6-90+ <i>Potential Total = \$1,750</i>	\$295 per day for days 1-6 \$0 days 7-90 + <i>Potential Total = \$1,770</i>	<i>\$2,019 per stay</i>
Outpatient Hospital Copay	\$300	\$275	\$45-\$250 per visit	\$45-\$250 per visit	\$50 or 20% per visit
Skilled Nursing Facility Care Copay	\$0 day 1-20, \$184 per day/days 21-100 <i>Out-of-pocket limit = \$4,500</i>	\$0 day 1-20, \$178 per day/days 21-100 <i>Out-of-pocket limit = \$3,900</i>	\$0 day 1-20, \$184 per day/days 21-100 <i>Out-of-pocket limit = \$6,700</i>	\$0 day 1-20, \$184 per day/days 21-100 <i>Out-of-pocket limit = \$6,700</i>	\$0 day 1-20, \$184 per days 21-100 <i>Out-of-pocket limit = \$6,700</i>
Extra Benefits					
Dental Coverage	Additional \$22 premium	Yes - up to \$1,500	Yes - up to \$1,000	Yes - up to \$1,000	Yes - up to \$2,000
Vision Coverage	Yes	Yes	Yes - up to \$100	Yes - up to \$100	Yes - up to \$100
Additional Benefits	Hearing, Fitness	Hearing, Fitness, OTC	Hearing, Fitness, OTC	Hearing, Fitness, OTC	Hearing, Fitness, OTC
Prescription Coverage					
Drug Coverage Included	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>	Yes - <i>copays apply</i>	<i>No prescription coverage</i>	Yes - <i>copays apply</i>
Your Total Drug Cost	\$_____	\$_____	\$_____	\$_____	\$_____

	Humana Choice (PPO) H5216-254	Humana Choice (PPO) H5216-014	Medica Advantage Solution (HMO) HO798-001	Medica Advantage Solution (PPO) H3632-001	Medica Prime Solution Core (Cost) H2450-046
Phone Number	800-833-2364	800-833-2364	800-906-5432	800-906-5432	800-906-5432
Regional Counties Offered	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>
Plan Overview					
Monthly Premium	\$0	\$59	\$0	\$39	\$69
Medical Deductible	\$0	\$0	\$0	\$0	\$0
Out-of-pocket Limit	\$4,050 in / \$6,700 out	\$6,700 in / \$10,000 out	\$5,500	\$5,500 in /\$7\$10,000 out	\$4,000
Benefits and Costs					
Primary Doctor Copay	\$0	\$15	\$0	\$0	\$0
Specialist Doctor Copay	\$45	\$45	\$50	\$35	\$20
Urgent Care Copay	\$0-\$45	\$15-\$45	\$0-\$45	\$0-35	\$0-\$20
Labs/Test/X-rays Copay	\$0-\$45 / \$0-\$95 /\$0-\$95	\$0-\$40 / \$0-\$95 /\$15-\$95	\$0 / 20% / 20%	\$0 / 15% / 15%	\$0 / \$10 / \$10
Physical Therapy Copay	\$40	\$40	\$40	\$35	\$20
Emergency Room Copay	\$90	\$90	\$90	\$90	\$50
Ground Ambulance Copay	\$290	\$290	\$200	\$200	\$50
Inpatient Hospital Copay	\$350 per day for days 1-5 \$0 days 6-90+ <i>Potential Total = \$1,750</i>	\$360 per day for days 1-5 \$0 days 6-90+ <i>Potential Total = \$1,800</i>	\$350 per day for days 1-5 \$0 days 6-90+ <i>Potential Total = \$1,750</i>	\$325 per day for days 1-5 \$0 days 6-90 <i>Potential Total = \$1,625</i>	\$350 per stay
Outpatient Hospital Copay	\$45-\$350 per visit	\$45-\$250 per visit	\$295 per visit	\$250 per visit	\$100 per visit
Skilled Nursing Facility Care Copay	\$0 day 1-20, \$184 per day/days 21-100 <i>Out-of-pocket limit = \$4,050</i>	\$0 day 1-20, \$184 per day/days 21-100 <i>Out-of-pocket limit = \$6,700</i>	\$0 day 1-20, \$184 per day/days 21-100 <i>Out-of-pocket limit = \$5,500</i>	\$0 day 1-20, \$184 per day/days 21-100 <i>Out-of-pocket limit = \$5,500</i>	\$0 day 1-20, \$50 day/days 21-100 <i>Out-of-pocket limit = \$4,000</i>
Extra Benefits					
Dental Coverage	Yes - up to \$1,000	Additional premium	Yes - up to \$400	Yes - up to \$750	Yes - up to \$300
Vision Coverage	Yes - up to \$100	Additional premium	Yes - up to \$100	Yes - up to \$150	Yes - up to \$100
Additional Benefits	Hearing, Fitness, OTC	Fitness, OTC	Hearing, Fitness, OTC	Hearing, Fitness, OTC	Hearing, Fitness
Prescription Coverage					
Drug Coverage Included	Yes - <i>copays apply</i>	<i>No prescription coverage</i>			
Your Total Drug Cost	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

	Medica Prime Solution Premier (Cost) H2450-043	Medica Prime Solution Thrift (Cost) H2450-030	Medicare Associates Nebraska Senior Plan (Cost) H1651-026	UnitedHealthcare Medicare Direct Patriot (PFFS) H5435-001	UnitedHealthcare MedicareDirect Rx (PFFS) H5435-024
Phone Number	800-906-5432	800-906-5432	800-747-8900	800-555-5757	800-555-5757
Regional Counties Offered	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>	<i>See County List</i>
Plan Overview					
Monthly Premium	\$125	\$34	\$147	\$40	\$64
Medical Deductible	\$0	\$50	\$0	\$0	\$0
Out-of-pocket Limit	\$3,000	\$6,700	Not Applicable	\$6,700	\$6,700
Benefits and Costs					
Primary Doctor Copay	\$0	20%	\$0	\$25	\$25
Specialist Doctor Copay	\$0	20%	\$0	\$50	\$50
Urgent Care Copay	\$0	\$25	\$0	\$40	\$40
Labs/Test/X-rays Copay	\$0	0 /20% /20%	\$0	\$0/\$25/\$15	\$0/ \$25 / \$15
Physical Therapy Copay	\$0	20%	\$0	\$40	\$40
Emergency Room Copay	\$0	\$50	\$0	\$90	\$90
Ground Ambulance Copay	\$0	20%	\$0	\$250	\$250
Inpatient Hospital Copay	\$100 per stay	\$300/day for days 1-4; \$0/day for days 5-90 <i>Potential Total = \$1,200</i>	\$0	\$395 per day for days 1-4 \$0 days 5-90 <i>Potential Total = \$1,580</i>	\$395 per day for days 1-4 \$0 days 5-90 <i>Potential Total = \$1,580</i>
Outpatient Hospital Copay	\$0 per visit	20% per visit	\$0 per visit	\$0-395 per visit	\$0-\$395 per visit
Skilled Nursing Facility Care Copay	\$0 day 1-20, \$25 day/days 21-100 <i>Potential Total = \$2,000</i>	\$0 day 1-20, \$176.50 day/days 21-100 <i>Out-of-pocket limit = \$6,700</i>	\$0	\$0/day 1-20, \$184/day 21-57, \$0/day 58-100 <i>Out-of-pocket limit = \$6,700</i>	\$0/day 1-20, \$184/day 21-57, \$0/day 58-100 <i>Out-of-pocket limit = \$6,700</i>
Extra Benefits					
Dental Coverage	Yes - up to \$400	No	No	No	No
Vision Coverage	Yes - up to \$20	No	No	No	No
Additional Benefits	Hearing, Fitness	No	No	No	No
Prescription Coverage					
Drug Coverage Included	<i>No prescription coverage</i>	<i>No prescription coverage</i>	<i>No prescription coverage</i>	<i>No prescription coverage</i>	<i>Yes - copays apply</i>
Your Total Drug Cost	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____