



2022 Medicare Advantage Plans Jefferson Davis Parish



Plan Name	Medicare Plan Type	Contract ID	Phone Number	Total Monthly Premium	PCP Co-Pay	Specialist Co-Pay	Inpatient Hospital	Pt D Coverage	Additional Benefits	Out-of-Pocket Maximum
Aetna Medicare Eagle	PPO	H5521-235	855-275-6627	\$0	\$0/\$30	\$30/\$50	\$225 days 1-7	No	Yes	\$6,400/\$11,300
Aetna Medicare Freedom	PPO	H5521-233	855-275-6627	\$0	\$5/\$25	\$35/\$50	\$245 days 1-7	Yes	Yes	\$7,000/\$11,300
Blue Advantage	HMO	H6453-010-2	800-363-9152	\$0	\$0	\$45	\$175 days 1-10	Yes	Yes	\$5,200
Blue Advantage	PPO	H1248-004	800-363-9152	\$100	\$0/50%	\$40/50%	\$140/50% days 1-7	Yes	Yes	\$4,000/\$8,000
Blue Advantage	PPO	H1248-007	800-363-9152	\$0	\$0/50%	\$50/50%	\$290/50% days 1-7	Yes	Yes	\$7,550/\$11,300
Humana Choice - LPPO	PPO	H5216-064	800-833-2364	\$45	\$5/30%	\$40/30%	\$225 days 1-7/30%	Yes	Yes	\$6,700/\$10,000
Humana Choice LPPO	PPO	H5216-202	800-833-2364	\$79	\$15/\$15-\$50	\$50	\$275 days 1-7	Yes	Yes	\$6,700/\$10,000
Humana Choice RPPO	PPO	R0110-003	800-833-2364	\$110	\$5	\$35/\$20-\$60	\$0 per day	Yes	Yes	\$7,550/\$11,300
Humana Choice RPPO	PPO	R0110-001	800-833-2364	\$0	\$0/\$35-\$50	\$35/\$50	\$195 days 1-6	No	Yes	\$7,550/\$11,300
Humana Gold Plus	HMO	H1951-052	800-833-2364	\$0	\$5	\$40	\$225 days 1-9	Yes	Yes	\$7,550
Humana Honor	PPO	H5216-201	800-833-2364	\$0	\$0/\$35-\$50	\$35/\$50	\$195 days 1-6	No	Yes	\$6,700/\$10,000
Humana Value Plus	PPO	H5216-161	800-833-2364	\$36.40	\$15/20%	20%	\$600 days 1-3	Yes	Yes	\$7,550/\$11,300
Lasso Healthcare Growth	MSA	H1924-001	866-766-2583	\$0	\$2,000 Deposit	\$5,000 Deductible	N/A	No	No	\$3,000
Lasso Healthcare Growth Plus	MSA	H1924-004	866-766-2583	\$0	\$3,000 Deposit	\$8,000 Deductible	N/A	No	No	\$5,000
Peoples Health Choices	PPO	H4544-001	800-555-5757	\$0	\$0/\$20	\$35/\$55	\$225 days 1-7/30%	Yes	Yes	\$6,700/\$10,000
Peoples Health Patroit	PPO	H4544-002	800-555-5757	\$0	\$0/\$20	\$30/\$50	\$195 days 1-6/30%	No	Yes	\$6,700/\$10,000



2022 Medicare Advantage Plans Jefferson Davis Parish



Plan Name	Medicare Plan Type	Contract ID	Phone Number	Total Monthly Premium	PCP Co-Pay	Specialist Co-Pay	Inpatient Hospital	Pt D Coverage	Additional Benefits	Out-of-Pocket Maximum
Vantage 100	HMO-POS	H5576-022	866-704-0109	\$222	\$0/50%	\$0/50%	\$0	Yes	Yes	n/a
Vantage Basic	HMO-POS	H5576-020-02	866-704-0109	\$0	\$0/50%	\$50/50%	\$318 days 1-7	Yes	Yes	\$5,900
Vantage Premium	HMO-POS	H5576-018-2	866-704-0109	\$171	\$0/50%	\$40/50%	\$250 days 1-7	Yes	Yes	\$3,500
Vantage Standard	HMO-POS	H5576-017-2	866-704-0109	\$36.40	\$0/50%	\$45/50%	\$270 days 1-7	Yes	Yes	\$4,900
Wellcare Assist	HMO	H2491-010	844-917-0175	\$21.20	\$0	\$20	\$175 days 1-9	Yes	Yes	\$3,400
Wellcare Community Assist	PPO	H3047-004	844-917-0175	\$36.40	\$0/30%	\$40/30%	\$300 days 1-7; 30% days 1-9	Yes	Yes	\$6,000/\$10,000
Wellcare Endurance	HMO	H2491-016	844-917-0175	\$0	\$0	\$40	\$250 days 1-9	Yes	Yes	\$3,400
Wellcare Giveback Open	PPO	H3047-002	844-917-0175	\$0	\$0/\$50	\$45/\$50	\$350 days 1-5; 30% days 1-9	Yes	Yes	\$7,550/\$11,300
Wellcare No Premium	HMO	H2491-007	844-917-0175	\$0	\$0	\$30	\$225 days 1-9	Yes	Yes	\$3,400
Wellcare No Premium Open	PPO	H3047-001	844-917-0175	\$0	\$0/40%	\$35/40%	\$295 days 1-5; 40% days 1-9	Yes	Yes	\$5,000/\$10,000
Wellcare Patriot	HMO	H2491-018	844-917-0175	\$0	\$0	\$30	\$100 days 1-10	No	Yes	\$5,500

Disclaimer: The information contained in this guide is subject to change and may be updated as necessary. This guide is intended to provide information to aid in a conversation with a Medicare provider.

Be sure to consult a professional to discuss your insurance needs.