

**2016 Medicare Advantage Plans**

<b>Organization Name</b>	<b>Plan Name</b>	<b>Contract ID</b>	<b>Plan ID</b>	<b>Annual Deductible</b>	<b>Total Monthly Premium</b>	<b>Maryland SPDAP Subsidy</b>	<b>Net Premium</b>	<b>SPDAP Gap Subsidy</b>
Aetna Medicare	Aetna Medicare Connect Plus (HMO)	H3931	097	\$360.00	\$4.60	\$4.60	\$0.00	No
Cigna-HealthSpring	Cigna-HealthSpring Traditions (HMO SNP)	H2108	020	\$360.00	\$33.40	\$33.40	\$0.00	Yes
Cigna-HealthSpring	Cigna-HealthSpring Preferred (HMO)	H2108	022	\$280.00	\$14.30	\$14.30	\$0.00	Yes
Cigna-HealthSpring	Cigna-HealthSpring Preferred (HMO)	H2108	028	\$280.00	\$32.00	\$32.00	\$0.00	Yes
Cigna-HealthSpring	Cigna-HealthSpring Achieve (HMO SNP)	H2108	029	\$280.00	\$33.60	\$33.60	\$0.00	Yes
Cigna-HealthSpring	Cigna-HealthSpring Achieve (HMO SNP)	H2108	030	\$280.00	\$23.90	\$23.90	\$0.00	Yes
Cigna-HealthSpring	Cigna-HealthSpring PreventiveCare (HMO)	H2108	032	\$280.00	\$0.00	\$0.00	\$0.00	Yes
Cigna-HealthSpring	Cigna-HealthSpring PreventiveCare (HMO)	H2108	033	\$280.00	\$0.00	\$0.00	\$0.00	Yes
Erickson Advantage	Erickson Advantage Signature with Drugs (HMO-POS)	H5652	001	\$0.00	\$64.60	\$40.00	\$24.60	No
Erickson Advantage	Erickson Advantage Guardian (HMO-POS SNP)	H5652	003	\$0.00	\$29.10	\$29.10	\$0.00	No
Erickson Advantage	Erickson Advantage Champion (HMO-POS SNP)	H5652	004	\$0.00	\$55.10	\$40.00	\$15.10	No
Erickson Advantage	Erickson Advantage Freedom (HMO-POS)	H5652	006	\$0.00	\$49.00	\$40.00	\$9.00	No
Humana Insurance Company	HumanaChoice H6609-103 (PPO)	H6609	103	\$350.00	\$28.40	\$28.40	\$0.00	No
Johns Hopkins	Johns Hopkins Advantage MD (PPO)	H3890	001	\$0.00	\$42.00	\$40.00	\$2.00	No
Johns Hopkins	Johns Hopkins Advantage MD Plus (PPO)	H3890	002	\$0.00	\$42.10	\$40.00	\$2.10	No
Kaiser Permanente	Kaiser Permanente Medicare Plus High w/Part D (AB) (Cost)	H2150	002	\$0.00	\$66.40	\$40.00	\$26.40	No
Kaiser Permanente	Kaiser Permanente Medicare Plus Std w/Part D (AB) (Cost)	H2150	009	\$0.00	\$19.10	\$19.10	\$0.00	No
Kaiser Permanente	Kaiser Permanente Medicare Plus Std w/Part D (B) (Cost)	H2150	029	\$0.00	\$39.90	\$39.90	\$0.00	No
Kaiser Permanente	Kaiser Permanente Medicare Plus Basic w/D (AB) (Cost)	H2150	033	\$360.00	\$19.00	\$19.00	\$0.00	No
Kaiser Permanente	Kaiser Permanente Medicare Plus Basic w/D (B) (Cost)	H2150	034	\$360.00	\$33.30	\$33.30	\$0.00	No
MedStar Family Choice, Inc	MedStar Medicare Choice (HMO)	H9915	008	\$150.00	\$0.00	\$0.00	\$0.00	No
MedStar Family Choice, Inc	MedStar Medicare Choice Care Advantage (HMO SNP)	H9915	010	\$150.00	\$0.00	\$0.00	\$0.00	No
Provider Partners Advantage	Provider Partners Advantage (HMO SNP)	H8067	001	\$360.00	\$31.00	\$31.00	\$0.00	No
UnitedHealthcare	UnitedHealthcare Nursing Home Plan (PPO SNP)	H2228	010	\$360.00	\$33.40	\$33.40	\$0.00	No
UnitedHealthcare	UnitedHealthcare Assisted Living Plan (PPO SNP)	H2228	011	\$85.00	\$23.00	\$23.00	\$0.00	No
University of Maryland Health Advantage	University of Maryland Health Advantage Complete (HMO)	H8854	001	\$0.00	\$15.00	\$15.00	\$0.00	No