

Essex/Middlesex Counties Medicare Advantage Plans 2023

Health Plan	Plan Types	Premiums	Counties
Aetna Medicare 833-859-6031 https://www.aetnamedicare.com/	HMO- POS PPO	\$0	Essex, Middlesex
Blue Cross Blue Shield of MA 800-678-2265 https://medicare.bluecrossma.com/	HMO HMO- POS PPO	\$0-\$258	Essex, Middlesex
Commonwealth Care Alliance 866-275-1222 https://www.commonwealthcarealliance.org/ma/become-a-member/	PPO	\$0-\$50	Essex, Middlesex
eternalHealth 800-831-5431 https://eternalhealth.com/	HMO PPO	\$0-\$35	Middlesex
Fallon Health 800-325-5669 https://fallonhealth.org/medicare	HMO	\$0-\$238	Essex, Middlesex
Mass General Brigham 855-833-3668 https://massgeneralbrighamadvantage.org	HMO- POS PPO	\$0-\$140	Essex, Middlesex
Molina Healthcare (Senior Whole Health) 866-566-3526 https://www.molinahealthcare.com/	HMO	\$0	Essex
Tufts Health Plan 877-218-4835 https://www.tuftsmedicarepreferred.org/	HMO PPO	\$0-\$256	Essex, Middlesex
UnitedHealthcare 800-555-5757 https://www.aarpmedicareplans.com/	HMO HMO- POS PPO RPPO	\$0-\$53	Essex, Middlesex
Wellcare 844-917-0175 https://www.wellcare.com/medicare	HMO PPO	\$0-\$60	Essex, Middlesex
Lasso Healthcare 833-925-2776 https://lassohealthcare.com/	MSA		Essex, Middlesex

Medicare Health Maintenance Organization

(HMO) Plan

Can I go anywhere to receive care?

- No, you may use network providers only, unless you have an emergency or urgent situation.

What is HMO-POS?

- POS benefit may allow you to use doctors, hospitals, and other providers who are not in the HMO network.

Do I need a referral to see a specialist?

- With an HMO plan, you need a referral to see a specialist.

Medicare Preferred Provider Organization

(PPO) Plan

Can I go anywhere to receive care?

- PPO plans have a network of providers. You may have the option of choosing out of network providers but you will usually pay higher out-of-pocket costs.

Do I need a referral to see a specialist?

- In most cases, you do not need a referral to see a specialist.

Medical Savings Account Plans

(MSA) Plan

Can I go anywhere to receive care?

- Any provider or specialist you choose to see must accept Medicare AND agree to see you.

Consider when choosing a Medicare Advantage Plan:

- Do your medical providers accept the plan or are you willing to change providers?
- How much are the premiums, co-pays and co-insurance?
- What is the plan's maximum out-of-pocket cost for the year?
- Do you need to get referral to see a specialist?
- Are your prescription drugs on the plan's formulary and what is the cost and
- Are there any restrictions?

Medicare Advantage Plans

Pros:

- Convenience of having only one plan (drug plan can be included)
- More choices available (HMOs, PPOs, MSAs...)
- Some plans have lower premiums than Medigap plans
- Potential for better coordination of care (HMOs provide this)
- Additional limited benefits such as hearing, vision, dental, and wellness benefits
- Annual physical exams covered
- No hospital stay required for Skilled Nursing Facility (rehab) coverage
- There is a yearly limit on your out-of-pocket costs

Cons:

- Cannot live outside service area for more than 6 consecutive months
- Usually need referrals to see specialists
- Frequently has co-pays and deductibles
- Limited network of providers
- When outside of designated area, only urgent and emergency services covered