

**Medicare Advantage Plans
Stark County - 2024**

Plan Name Phone Number	Overall Star Rating	Monthly Premium	Drug Coverage	Drug Deductible	Copays for Primary Care Physicians	Doctor Choice	Maximum Out-of-Pocket Limit
AARP Medicare Advantage HMO-POS 1-800-555-5757	4.5	\$0.00	Yes	\$395.00	\$0.00	NO	\$6,500.00 - In Network
AARP Medicare Advantage HMO-POS 1-800-555-5757	4.5	\$0.00	Yes	\$0.00	\$0.00	NO	\$5,500.00 - In Network
AARP Medicare Advantage HMO-POS 1-800-555-5757	4.5	\$104.00	Yes	\$0.00	\$0.00	NO	\$3,400.00 - In Network
AARP Medicare Advantage HMO-POS 1-800-555-5757	4.5	\$0.00	Yes	\$0.00	\$0.00	NO	\$4,500.00 - In Network
AARP Medicare Advantage HMO-POS 1-800-555-5757	4.5	\$29.00	Yes	\$0.00	\$0.00	NO	\$4,200.00 - In Network
AARP Medicare Advantage HMO-POS 1-800-555-5757	4.5	\$24.00	Yes	\$0.00	\$0.00	NO	\$3,500.00 - In Network
AARP Medicare Advantage, PPO 1-800-555-5757	4.0	\$0.00	Yes	\$0.00	\$0.00	Yes	\$5,100.00 - In Network \$9,550.00 - In & Out of Network
Aetna Medicare Premier, HMO-POS 1-833-859-6031	4.0	\$0.00	Yes	\$0.00	\$0.00	NO	\$4,500.00 - In Network
Aetna Medicare Smart Fit, PPO 1-833-859-6031	4.0	\$0.00	Yes	\$400.00	\$0.00	Yes	\$3850.00 - In Network \$5,750.00 - In & Out of Network
Aetna Medicare Premier 1, PPO 1-833-859-6031	4.0	\$110.00	Yes	\$0.00	\$0.00	Yes	\$5,500.00 - In Network \$8,950.00 - In & Out of Network
Aetna Medicare Premier 2, PPO 1-833-859-6031	4.0	\$92.00	Yes	\$0.00	\$0.00	Yes	\$4,800.00 - In Network \$8,950.00 - In & Out of Network
Aetna Medicare Premier Plus 1 Regional, PPO 1-833-859-6031	4.0	\$208.00 \$250.00 Health Plan Deductible	Yes	\$0.00	\$5.00	Yes	\$4,900.00 - In Network \$8,950.00 - In & Out of Network

**Medicare Advantage Plans
Stark County - 2024**

Plan Name Phone Number	Overall Star Rating	Monthly Premium	Drug Coverage	Drug Deductible	Copays for Primary Care Physicians	Doctor Choice	Maximum Out-of-Pocket Limit
Aetna Medicare Premier Plus 2 Regional, PPO 1-833-859-6031	4.0	\$149.00 \$250.00 Health Plan Deductible	Yes	\$250.00	\$0.00	Yes	\$5,100.00 - In Network \$8,950.00 - In & Out of Network
Aetna Medicare Value Plan, HMO-POS 1-833-859-6031	4.0	\$0.00	Yes	\$0.00	\$5.00	NO	\$7,550.00 - In Network
Aetna Medicare Value Plan, PPO 1-833-859-6031	4.0	\$0.00	Yes	\$0.00	\$5.00	Yes	\$5,300.00 - In Network \$8,950.00 - In & Out of Network
Anthem Medicare Advantage Regional, PPO 1-855-793-1936	3.5	\$73.00 \$1,000.00 Health Plan Deductible	Yes	\$50.00	\$10.00	Yes	\$6,050.00 - In Network \$9,550.00 - In & Out of Network
Anthem Medicare Advantage 4, PPO 1-855-679-0545	3.5	\$69.00	Yes	\$40.00	\$0.00	Yes	\$4,300.00 - In Network \$8,950.00 - In & Out of Network
Anthem Medicare Advantage 3, PPO 1-855-679-0545	3.5	\$49.00 \$1,000.00 Health Plan Deductible	Yes	\$0.00	\$0.00	Yes	\$5,500.00 - In Network \$8,950.00 - In & Out of Network
Anthem Medicare Advantage 2, PPO 1-855-679-0546	3.5	\$25.00	Yes	\$0.00	\$0.00	Yes	\$3,400.00 - In Network
Anthem Extra Help, HMO 1-855-679-0543	3.5	\$19.20	Yes	\$545.00	\$0.00	NO	\$7,550.00 - In Network
Anthem Medicare Advantage 3, HMO 1-855-679-0543	3.5	\$37.00	Yes	\$0.00	\$0.00	NO	\$4,100.00 - In Network
Anthem Medicaare Advantage, HMO 1-855-679-0543	3.5	\$0.00	Yes	\$0.00	\$0.00	NO	\$4,200.00 - In Network
Cigna Preferred Plus, HMO 1-800-313-0973	3.0	\$29.00	Yes	\$0.00	\$0.00	NO	\$3,500.00 - In Network
Cigna Preferred Savings, HMO 1-800-313-0973	3.0	\$0.00	Yes	\$0.00	\$0.00	NO	\$5,600.00 - In Network

**Medicare Advantage Plans
Stark County - 2024**

Plan Name Phone Number	Overall Star Rating	Monthly Premium	Drug Coverage	Drug Deductible	Copays for Primary Care Physicians	Doctor Choice	Maximum Out-of-Pocket Limit
Cigna Preferred Medicare, HMO 1-800-313-0973	3.0	\$0.00	Yes	\$0.00	\$0.00	NO	\$3,850.00 - In Network
Cigna True Choice Medicare, PPO 1-800-313-0973	3.0	\$0.00	Yes	\$0.00	\$0.00	Yes	\$5,000.00 - In Network \$8,900.00 - In & Out Network
Devoted Choice Ohio, PPO 1-800-376-5889	TOO NEW	\$0.00	Yes	\$150.00	\$0.00	Yes	\$5,300.00 - In Network \$5,300.00 - In & Out Network
Devoted Health Core Ohio, HMO 1-800-376-5889	5.0	\$0.00	Yes	\$0.00	\$0.00	NO	\$3,800.00 - In Network
Devoted Health Prime Ohio, HMO 1-800-376-5889	5.0	\$14.00	Yes	\$0.00	\$0.00	NO	\$3,900.00 - In Network
Devoted Give Back Ohio, HMO 1-800-376-5889	5.0	\$0.00	Yes	\$545.00	\$0.00	NO	\$5,900.00 - In Network
Humana Choice Regional, PPO 1-800-833-2364	4.0	\$51.00	Yes	\$545.00	\$10.00	Yes	\$6,700.00 - In Network \$10,000.00 - In & Out Network
Humana Choice, PPO 1-800-833-2364	4.0	\$0.00	Yes	\$0.00	\$0.00	Yes	\$5,900.00 - In Network \$6,500.00 - In & Out Network
Humana Choice, PPO 1-800-833-2364	4.5	\$36.00	Yes	\$100.00	\$0.00	Yes	\$6,200.00 - In Network \$9,550.00 - In & Out Network
Humana Choice, PPO 1-800-833-2364	4.5	\$0.00	Yes	\$200.00	\$0.00	Yes	\$5,300.00 - In Network \$9,550.00 - In & Out Network
Humana Choice, PPO 1-800-833-2364	4.5	\$0.00	Yes	\$545.00	\$20.00	Yes	\$7,550.00 - In Network \$10,000.00 - In & Out Network
Humana Choice, PPO 1-800-833-2364	4.0	\$30.00	Yes	\$545.00	\$25.00	Yes	\$8,850.00 - In Network \$8,850.00 - In & Out Network

**Medicare Advantage Plans
Stark County - 2024**

Plan Name Phone Number	Overall Star Rating	Monthly Premium	Drug Coverage	Drug Deductible	Copays for Primary Care Physicians	Doctor Choice	Maximum Out-of-Pocket Limit
Humana Cleveland Clinic Preferred, HMO-POS 1-800-833-2364	4.0	\$0.00	Yes	\$0.00	\$0.00	NO	\$3,500.00 - In Network
Humana Choice, PPO 1-800-833-2364	4.0	\$115.00 \$200.00 Health Plan Deductible	Yes	\$100.00	\$5.00	Yes	\$3,400.00 - In Network \$3,400.00 - In & Out Network
Humana Gold Plus, HMO-POS 1-800-833-2364	4.0	\$0.00	Yes	\$0.00	\$0.00	NO	\$3,900.00 - In Network
Humana USAA Honor with Rx, PPO 1-800-833-2365	4.5	\$0.00	Yes	\$350.00	\$0.00	Yes	\$8,850.00 - In Network \$13,300.00 - In & Out Network
Humana Choice, PPO 1-800-833-2364	4.5	\$22.00	Yes	\$350.00	\$5.00	Yes	\$4,500.00 - In Network \$6,500.00 - In & Out Network
Humana Gold Plus, HMO 1-800-833-2364	4.0	\$73.00	Yes	\$125.00	\$0.00	NO	\$3,900.00 - In Network
Humana Value Plus, PPO 1-800-833-2365	4.0	\$37.10	Yes	\$260.00	\$10.00	Yes	\$8,850.00 - In Network \$13,300.00 - In & Out Network
MedMutual Advantage Access, PPO 1-877-368-0081	4.5	\$0.00	Yes	\$0.00	\$0.00	Yes	\$5,000.00 - In Network \$7,990.00 - In & Out of Network
MedMutual Advantage Choice, HMO 1-877-368-0081	4.5	\$40.00	Yes	\$55.00	\$0.00	NO	\$3,900.00 - In Network
MedMutual Advantage Classic, HMO 1-877-368-0081	4.5	\$0.00	Yes	\$95.00	\$0.00	NO	\$4800.00 - In Network
MedMutual Advantage Plus, HMO 1-877-368-0081	4.5	\$90.00	Yes	\$55.00	\$0.00	NO	\$3,450.00 - In Network
MedMutual Advantage Preferred, PPO 1-877-368-0081	4.5	\$73.00	Yes	\$55.00	\$5.00	Yes	\$6,400.00 - In Network \$11,300.00 - In & Out of Network

**Medicare Advantage Plans
Stark County - 2024**

Plan Name Phone Number	Overall Star Rating	Monthly Premium	Drug Coverage	Drug Deductible	Copays for Primary Care Physicians	Doctor Choice	Maximum Out-of-Pocket Limit
MedMutual Advantage Premium, PPO 1-877-368-0081	4.5	\$127.00 \$1,250.00 Health Plan Deductible	Yes	\$55.00	\$0.00	Yes	\$3,450.00 - In Network \$5,150.00 - In & Out of Network
MedMutual Advantage Secure, HMO 1-877-368-0081	4.5	\$22.00	Yes	\$95.00	\$0.00	NO	\$3,500.00 - In Network
MedMutual Advantage Select, PPO 1-877-368-0081	4.5	\$44.00 \$2,000 Health Plan Deductible	Yes	\$95.00	\$10.00	Yes	\$6,400.00 - In Network \$11,300.00 - In & Out of Network
MedMutual Advantage Signature, HMO 1-877-368-0081	4.5	\$0.00	Yes	\$100.00	\$0.00	NO	\$3,000.00 - In Network
Molina Medicare Choice Care, HMO 1-866-403-8293	3.0	\$0.00	Yes	\$125.00	\$0.00	NO	\$8,300.00 - In Network
Molina Medicare Choice Care Select, HMO 1-866-403-8293	3.0	\$0.00	Yes	\$375.00	\$0.00	NO	\$8,300.00 - In Network
Prime Time Health Plan Aultimate, HMO-POS 1-855-877-1049	5.0	\$0.00	Yes	\$150.00	\$0.00	NO	\$4,300.00 - In Network
Prime Time Health Plan Classic, HMO-POS 1-855-877-1049	5.0	\$39.00	Yes	\$0.00	\$0.00	NO	\$4,100.00 - In Network
Prime Time Health Plan Plus, HMO-POS 1-855-877-1049	5.0	\$89.00	Yes	\$0.00	\$0.00	NO	\$3,900.00 - In Network
Summa Care Emerald, HMO-POS 1-888-464-8440	4.5	\$169.00	Yes	\$0.00	\$0.00	NO	\$3,400.00 - In Network
Summa Care Jade with BeneFlex TM, HMO 1-888-464-8440	4.5	\$20.00	Yes	\$0.00	\$0.00	NO	\$3,850.00 - In Network
Summa Care Ruby, HMO 1-888-464-8440	4.5	\$50.00	Yes	\$0.00	\$0.00	NO	\$3,600.00 - In Network

**Medicare Advantage Plans
Stark County - 2024**

Plan Name Phone Number	Overall Star Rating	Monthly Premium	Drug Coverage	Drug Deductible	Copays for Primary Care Physicians	Doctor Choice	Maximum Out-of-Pocket Limit
Summa Care Sapphire, HMO-POS 1-888-464-8440	4.5	\$79.00	Yes	\$0.00	\$0.00	NO	\$3,550.00 - In Network
Summa Care Topaz, HMO 1-888-464-8440	4.5	\$0.00	Yes	\$0.00	\$0.00	NO	\$3,700.00 - In Network
Summa Medicare Garnet, HMO 1-888-464-8440	4.5	\$30.00	Yes	\$0.00	\$0.00	Yes	\$3,700.00 - In Network
The Health Plan Secure Choice Optimum I, PPO 1-877-847-7915	4.0	\$0.00	Yes	\$0.00	\$0.00	Yes	\$4,900.00 - In Network \$9,550.00 - In & Out of Network
The Health Plan Secure Choice Option II, PPO 1-877-847-7915	4.0	\$93.40 \$1,500.00 Health Plan Deductible	Yes	\$100.00	\$5.00	Yes	\$6,700.00 - In Network \$10,000.00 - In & Out of Network
The Health Plan Secure Care Option II, HMO 1-877-847-7915	4.0	\$0.00	Yes	\$0.00	\$0.00	NO	\$3,700.00 - In Network
Wellcare Assist, HMO 1-844-917-0175	2.5	\$21.40	Yes	\$535.00	\$0.00	NO	\$4,700.00 - In Network
Wellcare Giveback, HMO 1-844-917-0175	2.5	\$0.00 \$225.00 Health Plan Deductible	Yes	\$275.00	\$0.00	NO	\$7,500.00 - In Network
Wellcare Dividend Giveback, HMO 1-844-917-0175	2.5	\$0.00 \$50.00 Health Plan Deductible	Yes	\$330.00	20%	NO	\$7,500.00 - In Network
Wellcare No Premium, HMO 1-844-917-0175	2.5	\$0.00	Yes	\$75.00	\$0.00	NO	\$4,700.00 - In Network
Wellcare No Premium Essential, HMO-POS 1-844-917-0175	2.5	\$0.00	Yes	\$0.00	\$0.00	NO	\$4,200.00 - In Network \$4,200.00 - In & Out of Network
Well Care No Premium Open, PPO 1-844-917-0175	2.5	\$0.00	Yes	\$300.00	\$0.00	Yes	\$5,900.00 - In Network \$8,950.00 - In & Out Network

**Medicare Advantage Plans
Stark County - 2024**

Plan Name Phone Number	Overall Star Rating	Monthly Premium	Drug Coverage	Drug Deductible	Copays for Primary Care Physicians	Doctor Choice	Maximum Out-of-Pocket Limit
---------------------------	---------------------------	-----------------	------------------	--------------------	--	------------------	--------------------------------

Note: AARP is serviced by United Health Care
Source: Center for Medicare and Medicaid Services, October 2023

Key:

HMO - Health Maintenance Organization

PPO - Preferred Provider Organization

POS - Point of Service

MSA - Medicare Savings Account

Star Ratings - The Star rating is the overall rating members give to the plan. Five stars is the highest. N/A means Not available or too new to rate.
Out of Pocket - The maximum out-of-pocket limit is the maximum yearly co-payment an enrollee will have to make for services covered under Parts A and B .

**Medicare Advantage Plans
Stark County - 2024**

Plan Name Phone Number	Overall Star Rating	Monthly Premium	Drug Coverage	Drug Deductible	Copays for Primary Care Physicians	Doctor Choice	Maximum Out-of-Pocket Limit
AARP Advantage Patriot, PPO 1-800-555-5757	4.0	\$0.00	No	N/A	\$0.00	Yes	\$4,500.00 - In Network \$9,550.00 - In & Out of Network
Aetna Medicare Eagle, HMO 1-833-859-6031	4.0	\$0.00	No	N/A	\$0.00	NO	\$4,900.00 - In Network
Anthem Veteran Regional, PPO 1-855-793-1936	3.5	\$0.00	No	N/A	\$0.00	Yes	\$3,900.00 - In Network \$4,900.00 - In & Out of Network
Anthem Veteran Service, PPO 1-855-679-0545	3.5	\$0.00	No	N/A	\$0.00	Yes	\$5,900.00 - In Network \$8,950.00 - In & Out Network
Cigna True Choice Courage Medicare, PPO 1-800-313-0973	3.0	\$0.00	No	N/A	\$0.00	Yes	\$4,500.00 - In Network \$8,950.00 - In & Out Network
Humana USAA Honor, PPO 1-800-833-2364	4.5	\$0.00	No	N/A	\$15.00	Yes	\$5,900.00 - In Network \$8,950.00 - In & Out Network
Prime Time Health Plan Basic HMO-POS 1-855-877-1049	5.0	\$0.00	No	N/A	\$0.00	NO	\$3,400.00 - In Network
Summa Care Amber, HMO 1-888-464-8440	4.5	\$0.00	No	N/A	\$0.00	NO	\$3,450.00 - In Network
The Health Plan Secure Care Integrity 3, HMO 1-877-847-7915	4.0	\$0.00	No	N/A	\$0.00	NO	\$3,900.00 - In Network

**Medicare Advantage Plans
Stark County - 2024**

Plan Name Phone Number	Overall Star Rating	Monthly Premium	Drug Coverage	Drug Deductible	Copays for Primary Care Physicians	Doctor Choice	Maximum Out-of-Pocket Limit
---------------------------	---------------------------	-----------------	------------------	--------------------	--	------------------	--------------------------------

Note: AARP is serviced by United Health Care
Source: Center for Medicare and Medicaid Services, October 2023

Key:

HMO - Health Maintenance Organization

PPO - Preferred Provider Organization

POS - Point of Service

MSA - Medicare Savings Account

Star Ratings - The Star rating is the overall rating members give to the plan. Five stars is the highest. N/A means Not available or too new to rate.
Out of Pocket - The maximum out-of-pocket limit is the maximum yearly co-payment an enrollee will have to make for services covered under Parts A and B .