

## 2024 PLANS | NC WINSTON-SALEM AND GREENSBORO

## **Plans at a glance**

The right Medicare Advantage plan could help you save thousands. Find and compare our most popular plans in your area.

	HMO PLANS		
	Devoted CORE North Carolina (HMO)	Devoted GIVEBACK North Carolina (HMO)	Devoted PREMIUM North Carolina (HMO)
	H5299-001-000	H5299-002-000	H5299-003-000
Monthly premium	\$0	\$0	\$29.50
Money back	Not covered	\$140 back in your Social Security check every month	Not covered
Out-of-pocket max	\$3,600	\$6,700	\$3,600
Dental	\$1,500 a year	\$500 a year	\$1,750 a year
Vision	\$350 a year for eyewear	\$200 a year for eyewear	\$400 a year for eyewear
Money for rent, utilities, and food*	\$40 a month	Not covered	\$80 a month
Over-the-counter	\$65 a quarter	Not covered	\$50 a quarter
PCP visits	\$0 copay	\$0 copay	\$0 copay
Specialist visits	\$15 copay	\$40 copay	\$15 copay
Referral required?	No	No	No
Hospital stays	\$295 a day for days 1-5	\$395 a day for days 1-5	\$295 a day for days 1-5
Hearing aids	\$399 copay per ear for advanced hearing aids \$699 copay per ear for premium hearing aids	\$399 copay per ear for advanced hearing aids \$699 copay per ear for premium hearing aids	\$199 copay per ear for advanced hearing aids \$499 copay per ear for premium hearing aids
<b>Prescription drugs</b> 30-day supply retail pharmacy	Tier 1: \$0 copay Tier 2: \$0 copay Tier 3: \$45 copay Tier 4: \$95 copay Tier 5: 33% of drug cost	Tier 1: \$0 copay Tier 2: \$0 copay Tier 3: \$47 copay Tier 4: \$100 copay Tier 5: 27% of drug cost	Tier 1: \$0 copay Tier 2: \$0 copay Tier 3: 25% of drug cost Tier 4: 25% of drug cost Tier 5: 25% of drug cost

## **Do you have Medicare and Medicaid?**

See if you qualify for a **\$0 Medicare Advantage plan** with even more benefits and savings with one of our HMO D-SNP plans.

	HMO D-SNP PLANS		
	Devoted DUAL PLUS North Carolina (HMO D-SNP)	Devoted DUAL North Carolina (HMO D-SNP)	
	H5299-006-000	H5299-009-000	
Dental	\$7,500 a year	\$6,000 a year	
Vision	\$450 a year for eyewear	\$400 a year for eyewear	
Money for rent, utilities, and food	\$300 a month if you get Extra Help	\$100 a month if you get Extra Help	
Over-the-counter	\$50 a quarter	\$50 a quarter	
PCP visits	\$0 copay	\$0 copay	
Specialist visits	\$0 copay	\$15 copay	
Referral required?	No	No	
Hearing aids	\$0 copay per ear for advanced hearing aids \$299 copay per ear for premium hearing aids	\$0 copay per ear for advanced hearing aids \$299 copay per ear for premium hearing aids	
<b>Prescription drugs</b> 30-day supply retail pharmacy	If you get Extra Help, you'll have a \$0 copay for all prescriptions	If you get Extra Help, you'll have a \$0 copay for all prescriptions	

## Call to learn more

1-800-385-0916 TTY 711

Or call your licensed sales agent



Service area: Alamance, Caswell, Davidson, Davie, Forsyth, Guilford, Randolph, Rockingham, Stokes, Yadkin

Enrollment may be limited to specific times of the year unless you meet certain criteria, such as qualifying for a Special Election Period.

\*On non-D-SNP plans, the Food and Home Card is a special supplemental benefit available only to members with eligible chronic health conditions, like diabetes or high blood pressure.

Benefits and cost sharing may vary by plan. Dental coverage limitations may apply. Devoted Health is an HMO and/or PPO plan with a Medicare contract. Our D-SNPs also have contracts with State Medicaid programs. Enrollment in our plans depends on contract renewal. Devoted Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-338-6833 (TTY 711). Y0142\_24L173\_M