

Compare types of Medicare Advantage Plans

	HMO Health Maintenance Organizations	PPO Preferred Provider Organizations	MSA Medicare Medical Savings Accounts	PFFS Private Fee-for-Service Plans	SNP Special Needs Plans
Premium Do these plans charge a monthly premium?	Yes Many charge a premium in addition to the monthly Part B premium.	Yes Many charge a premium in addition to the monthly Part B premium.	No MSA plans don't charge a premium, but you must continue to pay your Part B premium.	Yes These plans usually charge a premium in addition to the monthly Part B premium.	Yes Many charge a premium in addition to the monthly Part B premium.
Drugs Do these plans offer Medicare prescription drug coverage (Part D)?	Usually If you join an HMO Plan that doesn't offer drug coverage, you can't get a separate Medicare drug plan.	Usually If you join a PPO Plan that doesn't offer drug coverage, you can't get a separate Medicare drug plan.	No If you join a separate MSA Plan and want Medicare drug coverage, you'll have to join a separate Medicare drug plan.	Sometimes Prescription drugs may be covered. If your PFFS Plan doesn't offer drug coverage, you'll need to join a separate Medicare drug plan (Part D) to get drug coverage.	Yes All SNPs must provide Medicare drug coverage (Part D).
Providers Can I use any doctor or hospital that accepts Medicare for covered services?	Sometimes You generally must get your care and services from doctors, other health care providers, or hospitals in the plan's network (except emergency or out-of-area dialysis). In an HMO Point-of-Service (HMOPOS) Plan, you may be able to get some services out of network for a higher copayment or coinsurance.	Yes Each plan has a network of doctors, hospitals, and other health care providers that you may go to. You may also go out of the plan's network, but your costs may be higher.	Yes MSA plans generally don't have network providers. You can get covered services from any Medicare provider in the U.S. or U.S. territories.	Yes You can go to any Medicare-approved doctor, other health care provider, or hospital that accepts the plan's payment terms and agrees to treat you . If the plan has a network, you can use any of the network providers, but if you go to an out-of-network provider that accepts the plan's terms, you may pay more.	Varies by plan Some SNPs require that you get your care and services from providers and facilities in the plan's network (except for emergency care, out-of-area urgent care, or out-of-area dialysis). However, some SNPs do offer out-of-network coverage, so you can get services from any qualified provider or facility, but you'll usually pay more.

Compare types of Medicare Advantage Plans (continued)

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Primary Care Do I need to choose a primary care doctor?	Usually	No	No	No	Varies by plan Some SNPs require you to choose a primary care doctor and others don't.
Referrals Do I have to get a referral to see a specialist?	Yes	No	No	No	Varies by plan Some SNPs require referrals and others don't. Referrals may be required for certain services but not others.

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