



Wellcare

Prima Mensual del Plan para las Personas que reciben Ayuda Adicional de Medicare para Ayudar a Pagar los Costos de sus Medicamentos Recetados

Si usted recibe ayuda adicional de Medicare para ayudar a pagar los costos de su plan de medicamentos recetados de Medicare, su prima mensual del plan será menor de lo que sería si usted no obtuviera ayuda adicional de Medicare. La cantidad de ayuda adicional que obtiene determinará su prima mensual total del plan como miembro de nuestro Plan.

Esta tabla le muestra cuál será su prima mensual del plan si usted obtiene ayuda adicional.

Estado: AR		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
AR	H9630001000	Wellcare No Premium Medicare (HMO)	Arkansas, Benton, Bradley, Calhoun, Carroll, Chicot, Clay, Cleburne, Cleveland, Crawford, Crittenden, Cross, Dallas, Desha, Drew, Franklin, Fulton, Grant, Independence, Izard, Jackson, Jefferson, Johnson, Lawrence, Lee, Lincoln, Logan, Madison, Mississippi, Monroe, Montgomery, Nevada, Newton, Ouachita, Perry, Phillips, Pike, Poinsett, Polk, Prairie, Randolph, Scott, Searcy, Sebastian, Sharp, St. Francis, Stone, Van Buren, Washington, White, Woodruff, Yell	\$0.00	\$0.00	\$0.00	\$0.00
AR	H9630002000	Wellcare No Premium (HMO)	Benton, Clark, Conway, Craighead, Crawford, Faulkner, Garland, Greene, Hot Spring, Independence, Jackson, Lonoke, Pope, Pulaski, Saline, Sebastian, Washington, White, Woodruff	\$0.00	\$0.00	\$0.00	\$0.00

Estado: AR, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
AR	H9630003000	Wellcare No Premium Select (HMO)	Benton, Washington	\$0.00	\$0.00	\$0.00	\$0.00
AR	H9630004000	Wellcare No Premium Medicare (HMO)	Baxter, Boone, Clark, Conway, Craighead, Faulkner, Garland, Greene, Hot Spring, Lonoke, Marion, Pope, Pulaski, Saline	\$0.00	\$0.00	\$0.00	\$0.00
AR	H9630005000	Wellcare Assist (HMO)	Baxter, Boone, Clark, Conway, Craighead, Faulkner, Garland, Greene, Hot Spring, Lonoke, Marion, Pope, Pulaski, Saline	\$0.00	\$6.20	\$12.50	\$18.70
AR	H9630006000	Wellcare Assist (HMO)	Arkansas, Benton, Bradley, Calhoun, Carroll, Chicot, Clay, Cleburne, Cleveland, Crawford, Crittenden, Cross, Dallas, Desha, Drew, Franklin, Fulton, Grant, Independence, Izard, Jackson, Jefferson, Johnson, Lawrence, Lee, Lincoln, Logan, Madison, Mississippi, Monroe, Montgomery, Nevada, Newton, Ouachita, Perry, Phillips, Pike, Poinsett, Polk, Prairie, Randolph, Scott, Searcy, Sebastian, Sharp, St. Francis, Stone, Van Buren, Washington, White, Woodruff, Yell	\$0.00	\$6.40	\$12.90	\$19.30
AR	H9630008000	Wellcare Giveback (HMO)	Arkansas, Baxter, Benton, Boone, Bradley, Calhoun, Carroll, Chicot, Clark, Clay, Cleburne, Cleveland, Conway, Craighead, Crawford, Crittenden, Cross, Dallas, Desha, Drew, Faulkner, Franklin, Fulton, Garland, Grant, Greene, Hot Spring, Independence, Izard, Jackson, Jefferson, Johnson, Lawrence, Lee, Lincoln, Logan, Lonoke, Madison, Marion, Mississippi, Monroe, Montgomery, Nevada, Newton, Ouachita, Perry, Phillips, Pike, Poinsett, Polk, Pope, Prairie, Pulaski, Randolph, Saline, Scott, Searcy, Sebastian, Sharp, St. Francis, Stone, Van Buren, Washington, White, Woodruff, Yell	\$0.00	\$0.00	\$0.00	\$0.00

Estado: AR, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
AR	H9630009000	Wellcare Patriot No Premium (HMO)	Arkansas, Baxter, Benton, Boone, Bradley, Calhoun, Carroll, Chicot, Clark, Clay, Cleburne, Cleveland, Conway, Craighead, Crawford, Crittenden, Cross, Dallas, Desha, Drew, Faulkner, Franklin, Fulton, Garland, Grant, Greene, Hot Spring, Independence, Izaard, Jackson, Jefferson, Johnson, Lawrence, Lee, Lincoln, Logan, Lonoke, Madison, Marion, Mississippi, Monroe, Montgomery, Nevada, Newton, Ouachita, Perry, Phillips, Pike, Poinsett, Polk, Pope, Prairie, Pulaski, Randolph, Saline, Scott, Searcy, Sebastian, Sharp, St. Francis, Stone, Van Buren, Washington, White, Woodruff, Yell	\$0.00	\$0.00	\$0.00	\$0.00
AR	H9630010000	Wellcare Dual Access (HMO D-SNP)	Arkansas, Baxter, Bradley, Calhoun, Carroll, Chicot, Clark, Clay, Cleburne, Cleveland, Conway, Craighead, Crittenden, Cross, Dallas, Desha, Drew, Fulton, Garland, Grant, Greene, Hot Spring, Independence, Izaard, Jackson, Jefferson, Lawrence, Lee, Lincoln, Lonoke, Marion, Mississippi, Monroe, Montgomery, Nevada, Newton, Ouachita, Perry, Phillips, Pike, Poinsett, Polk, Prairie, Pulaski, Randolph, Saline, Searcy, Sharp, St. Francis, Stone, Van Buren, White, Woodruff, Yell	\$0.00	\$5.60	\$11.10	\$16.70
AR	H9630011000	Wellcare Dual Liberty (HMO D-SNP)		\$0.00	\$5.70	\$11.40	\$17.10

Estado: AZ		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
AZ	H0351038000	Wellcare Specialty No Premium (HMO C-SNP)	Maricopa, Pima, Pinal	\$0.00	\$0.00	\$0.00	\$0.00
AZ	H0351052000	Wellcare No Premium (HMO)	Maricopa, Pima, Pinal, Yavapai	\$0.00	\$0.00	\$0.00	\$0.00

Estado: AZ, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
AZ	H0351053000	Wellcare No Premium (HMO)	Cochise, Mohave, Santa Cruz, Yuma	\$0.00	\$0.00	\$0.00	\$0.00
AZ	H0351054000	Wellcare Giveback (HMO)		\$0.00	\$0.00	\$0.00	\$0.00
AZ	H0351057000	Wellcare Specialty No Premium (HMO C-SNP)	Cochise, Mohave, Santa Cruz, Yavapai, Yuma	\$0.00	\$0.00	\$0.00	\$0.00
AZ	H5590007000	Wellcare Assist (HMO)	Cochise, Mohave, Santa Cruz, Yuma	\$0.00	\$6.40	\$12.70	\$19.10
AZ	H5590005000	Wellcare No Premium Essentials (HMO)	Maricopa, Pinal	\$0.00	\$0.00	\$0.00	\$0.00
AZ	H5590008000	Wellcare Dual Liberty (HMO D-SNP)	Cochise, Gila, Graham, Greenlee, La Paz, Maricopa, Pima, Pinal, Santa Cruz, Yuma	\$0.00	\$10.00	\$20.00	\$30.00
AZ	H5590009000	Wellcare Dual Liberty (HMO D-SNP)	Apache, Coconino, Mohave, Navajo, Yavapai	\$0.00	\$10.00	\$20.00	\$30.00
AZ	H0351055000	Wellcare Assist (HMO)	Maricopa, Pima, Pinal, Yavapai	\$0.00	\$8.70	\$17.50	\$26.20
AZ	H0351056000	Wellcare Giveback (HMO)		\$0.00	\$0.00	\$0.00	\$0.00

Estado: CA		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
CA	H0562009000	Wellcare Premium Ultra (HMO)	Alameda, Amador, Contra Costa, San Francisco, Stanislaus	\$121.00	\$121.00	\$121.00	\$121.00

Estado: CA, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
CA	H0562012000	Wellcare No Premium (HMO)	Imperial, San Diego	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562039000	Wellcare Premium Enhanced (HMO)	Yolo	\$100.00	\$100.00	\$100.00	\$100.00
CA	H0562044000	Wellcare Patriot Giveback (HMO)	Alameda, Amador, Contra Costa, Los Angeles, Placer, Riverside, Sacramento, San Bernardino, Stanislaus	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562121000	Wellcare Dual Liberty (HMO D-SNP)	Fresno, Kern, Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Francisco, Tulare	\$0.00	\$8.30	\$16.60	\$24.90
CA	H0562079000	Wellcare No Premium Ruby (HMO)	Fresno, Kern, Madera	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562084000	Wellcare Premium Ultra (HMO)	Placer, Sacramento	\$165.00	\$165.00	\$165.00	\$165.00
CA	H0562090000	Wellcare No Premium (HMO)	Fresno	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562092000	Wellcare Specialty No Premium (HMO C-SNP)	Kern, Los Angeles, Orange	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562097000	Wellcare No Premium (HMO)	San Francisco	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562103000	Wellcare No Premium (HMO)	Amador, Contra Costa, Yolo	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562113000	Wellcare No Premium (HMO)	Alameda	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562114000	Wellcare Specialty No Premium (HMO C-SNP)	San Diego	\$0.00	\$0.00	\$0.00	\$0.00

Estado: CA, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
CA	H0562118000	Wellcare Specialty No Premium (HMO C-SNP)	Fresno, San Francisco	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562120000	Wellcare No Premium (HMO)	Santa Clara, Stanislaus	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562122000	Wellcare Plus Sapphire I (HMO)	Kern, Los Angeles, Orange, Riverside, San Bernardino, San Diego, Santa Clara, Stanislaus	\$0.00	\$8.30	\$16.60	\$24.90
CA	H0562123000	Wellcare Low Premium (HMO)	Los Angeles, Orange, Riverside, San Bernardino	\$18.00	\$18.00	\$18.00	\$18.00
CA	H0562124000	Wellcare No Premium (HMO)	Placer, Sacramento	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562125000	Wellcare No Premium (HMO)	Los Angeles, Orange	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562126000	Wellcare No Premium (HMO)	Riverside, San Bernardino	\$0.00	\$0.00	\$0.00	\$0.00
CA	H0562127000	Wellcare Assist (HMO)	Amador, Contra Costa, Fresno, Madera, Santa Clara	\$0.00	\$7.00	\$13.90	\$20.90
CA	H3561001000	Wellcare Dual Liberty Amber (HMO D-SNP)	Alameda, Amador, Fresno, Imperial, Madera, Placer, Sacramento, Stanislaus	\$0.00	\$8.30	\$16.60	\$24.90
CA	H3561002000	Wellcare Plus Sapphire II (HMO)	Alameda, Fresno, Imperial, Kern, Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Francisco, Tulare	\$0.00	\$8.30	\$16.60	\$24.90
CA	H7360001000	Wellcare No Premium Open (PPO)	Amador, Sutter	\$0.00	\$0.00	\$0.00	\$0.00

Estado: FL		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
FL	H5190001000	Wellcare Dual Medicare (HMO D-SNP)	Duval, Volusia	\$0.00	\$8.60	\$17.10	\$25.70
FL	H5190002000	Wellcare Dual Medicare (HMO D-SNP)	Hillsborough, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, Seminole	\$0.00	\$8.40	\$16.80	\$25.30
FL	H5190003000	Wellcare Dual Medicare (HMO D-SNP)	Broward	\$0.00	\$8.60	\$17.10	\$25.70
FL	H5190004000	Wellcare Dual Medicare (HMO D-SNP)	Miami-Dade	\$0.00	\$7.90	\$15.80	\$23.80
FL	H5190005000	Wellcare Dual Nurture (HMO D-SNP)	Broward, Duval, Hillsborough, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, Seminole, Volusia	\$0.00	\$8.60	\$17.10	\$25.70
FL	H5190006000	Wellcare Dual Nurture (HMO D-SNP)	Miami-Dade	\$0.00	\$8.60	\$17.10	\$25.70

Estado: GA		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
GA	H7173001000	Wellcare Dual Access Medicare (HMO D-SNP)	Butts, Chattahoochee, Clayton, Cobb, Dawson, DeKalb, Douglas, Fayette, Forsyth, Fulton, Greene, Gwinnett, Harris, Heard, Henry, Lumpkin, Marion, Morgan, Muscogee, Oconee, Paulding, Pickens, Rockdale, Spalding, Taliaferro, Troup	\$0.00	\$8.10	\$16.20	\$24.30

Estado: GA, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
GA	H7173002000	Wellcare No Premium Medicare (HMO)	Chattahoochee, Clayton, Cobb, DeKalb, Douglas, Fayette, Fulton, Greene, Gwinnett, Harris, Henry, Morgan, Muscogee, Oconee, Paulding, Rockdale, Spalding, Troup	\$0.00	\$0.00	\$0.00	\$0.00
GA	H7173007000	Wellcare Giveback Medicare (HMO)	DeKalb, Fulton, Greene, Gwinnett, Muscogee	\$0.00	\$0.00	\$0.00	\$0.00

Estado: IN		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
IN	H3499002000	Wellcare No Premium (HMO)	Adams, Allen, Bartholomew, Blackford, Boone, Brown, Carroll, Cass, Clark, Clinton, Crawford, Daviess, Dearborn, Delaware, Dubois, Elkhart, Floyd, Fulton, Grant, Greene, Hamilton, Hancock, Harrison, Hendricks, Henry, Howard, Jackson, Jay, Jefferson, Johnson, Knox, Kosciusko, La Porte, Lake, Lawrence, Madison, Marion, Marshall, Martin, Miami, Monroe, Morgan, Newton, Ohio, Orange, Owen, Perry, Pike, Porter, Posey, Putnam, Ripley, Scott, Shelby, St. Joseph, Starke, Steuben, Sullivan, Switzerland, Tippecanoe, Tipton, Vanderburgh, Warrick, Wells, White, Whitley	\$0.00	\$0.00	\$0.00	\$0.00

Estado: IN, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
IN	H3499005000	Wellcare Dual Access (HMO D-SNP)	Adams, Allen, Bartholomew, Benton, Blackford, Boone, Brown, Carroll, Cass, Clark, Clay, Clinton, Crawford, Daviess, DeKalb, Dearborn, Decatur, Delaware, Dubois, Elkhart, Fayette, Floyd, Fountain, Franklin, Fulton, Gibson, Grant, Greene, Hamilton, Hancock, Harrison, Hendricks, Henry, Howard, Huntington, Jackson, Jasper, Jay, Jefferson, Jennings, Johnson, Knox, Kosciusko, La Porte, Lagrange, Lake, Lawrence, Madison, Marion, Marshall, Martin, Miami, Monroe, Montgomery, Morgan, Newton, Noble, Ohio, Orange, Owen, Parke, Perry, Pike, Porter, Posey, Pulaski, Putnam, Randolph, Ripley, Rush, Scott, Shelby, Spencer, St. Joseph, Starke, Steuben, Sullivan, Switzerland, Tippecanoe, Tipton, Union, Vanderburgh, Vermillion, Vigo, Wabash, Warren, Warrick, Washington, Wayne, Wells, White, Whitley	\$0.00	\$7.50	\$14.90	\$22.30

Estado: IN, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
IN	H3499007000	Wellcare Giveback (HMO)	Adams, Allen, Bartholomew, Benton, Blackford, Boone, Brown, Carroll, Cass, Clark, Clay, Clinton, Crawford, Daviess, DeKalb, Dearborn, Decatur, Delaware, Dubois, Elkhart, Fayette, Floyd, Fountain, Franklin, Fulton, Gibson, Grant, Greene, Hamilton, Hancock, Harrison, Hendricks, Henry, Howard, Huntington, Jackson, Jasper, Jay, Jefferson, Jennings, Johnson, Knox, Kosciusko, La Porte, Lagrange, Lake, Lawrence, Madison, Marion, Marshall, Martin, Miami, Monroe, Montgomery, Morgan, Newton, Noble, Ohio, Orange, Owen, Parke, Perry, Pike, Porter, Posey, Pulaski, Putnam, Randolph, Ripley, Rush, Scott, Shelby, Spencer, St. Joseph, Starke, Steuben, Sullivan, Switzerland, Tippecanoe, Tipton, Union, Vanderburgh, Wabash, Warren, Warrick, Washington, Wayne, Wells, White, Whitley	\$0.00	\$0.00	\$0.00	\$0.00
IN	H3499008000	Wellcare Assist (HMO)	Adams, Allen, Bartholomew, Benton, Blackford, Boone, Brown, Carroll, Cass, Clark, Clay, Clinton, Crawford, Daviess, DeKalb, Dearborn, Decatur, Delaware, Dubois, Elkhart, Fayette, Floyd, Fountain, Franklin, Fulton, Gibson, Grant, Greene, Hamilton, Hancock, Harrison, Hendricks, Henry, Howard, Huntington, Jackson, Jasper, Jay, Jefferson, Jennings, Johnson, Knox, Kosciusko, La Porte, Lagrange, Lake, Lawrence, Madison, Marion, Marshall, Martin, Miami, Monroe, Montgomery, Morgan, Newton, Noble, Ohio, Orange, Owen, Parke, Perry, Pike, Porter, Posey, Pulaski, Putnam, Randolph, Ripley, Rush, Scott, Shelby, Spencer, St. Joseph, Starke, Steuben, Sullivan, Switzerland, Tippecanoe, Tipton, Union, Vanderburgh, Wabash, Warren, Warrick, Washington, Wayne, Wells, White, Whitley	\$0.00	\$6.10	\$12.20	\$18.40

Estado: IN, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
IN	H6348002000	Wellcare No Premium Open (PPO)	Adams, Allen, Bartholomew, Benton, Blackford, Boone, Brown, Carroll, Cass, Clark, Clay, Clinton, Crawford, Daviess, Dearborn, Decatur, Delaware, Dubois, Elkhart, Floyd, Fountain, Franklin, Fulton, Gibson, Grant, Greene, Hamilton, Hancock, Harrison, Hendricks, Henry, Howard, Jackson, Jasper, Jay, Jefferson, Jennings, Johnson, Knox, La Porte, Lake, Lawrence, Madison, Marion, Martin, Miami, Monroe, Montgomery, Morgan, Newton, Ohio, Orange, Owen, Parke, Perry, Pike, Porter, Posey, Pulaski, Putnam, Randolph, Ripley, Scott, Shelby, Spencer, St. Joseph, Starke, Steuben, Sullivan, Switzerland, Tippecanoe, Tipton, Vanderburgh, Warren, Warrick, Washington, Wells, White, Whitley	\$0.00	\$0.00	\$0.00	\$0.00
IN	H6348005000	Wellcare Patriot Giveback Open (PPO)	Adams, Allen, Bartholomew, Benton, Blackford, Boone, Brown, Carroll, Cass, Clark, Clay, Clinton, Crawford, Daviess, Dearborn, Decatur, Delaware, Dubois, Elkhart, Floyd, Fountain, Franklin, Fulton, Gibson, Grant, Greene, Hamilton, Hancock, Harrison, Hendricks, Henry, Howard, Jackson, Jasper, Jay, Jefferson, Jennings, Johnson, Knox, La Porte, Lake, Lawrence, Madison, Marion, Martin, Miami, Monroe, Montgomery, Morgan, Newton, Ohio, Orange, Owen, Parke, Perry, Pike, Porter, Posey, Pulaski, Putnam, Randolph, Ripley, Scott, Shelby, Spencer, St. Joseph, Starke, Steuben, Sullivan, Switzerland, Tippecanoe, Tipton, Vanderburgh, Warren, Warrick, Washington, Wells, White, Whitley	\$0.00	\$0.00	\$0.00	\$0.00

Estado: KS		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
KS	H6550003000	Wellcare No Premium (HMO)	Allen, Bourbon, Butler, Cherokee, Cowley, Crawford, Douglas, Harvey, Jackson, Jefferson, Johnson, Kingman, Labette, Leavenworth, Linn, McPherson, Miami, Sedgwick, Shawnee, Sumner, Woodson, Wyandotte	\$0.00	\$0.00	\$0.00	\$0.00
KS	H6550004000	Wellcare Dual Access (HMO D-SNP)		\$0.00	\$8.20	\$16.40	\$24.70
KS	H6550006000	Wellcare Assist (HMO)		\$0.00	\$6.90	\$13.80	\$20.80
KS	H6550007000	Wellcare Giveback (HMO)		\$0.00	\$0.00	\$0.00	\$0.00
KS	H6550009000	Wellcare Dual Liberty (HMO D-SNP)		\$0.00	\$8.20	\$16.40	\$24.70
KS	H9387001000	Wellcare No Premium Open (PPO)		\$0.00	\$0.00	\$0.00	\$0.00
KS	H9387002000	Wellcare Patriot Giveback Open (PPO)		\$0.00	\$0.00	\$0.00	\$0.00
KS	H9387003000	Wellcare Premium Hybrid Open (PPO)		\$277.90	\$279.90	\$281.90	\$284.00

Estado: LA		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
LA	H5117003000	Wellcare No Premium Medicare (HMO)	Acadia, Ascension, East Baton Rouge, Iberville, Lafayette, Livingston, Pointe Coupee, St. James, St. Landry, St. Martin, St. Tammany, Tangipahoa, Washington, West Baton Rouge	\$0.00	\$0.00	\$0.00	\$0.00
LA	H5117004000	Wellcare Dual Access Medicare (HMO D-SNP)	Ascension, East Baton Rouge, Jefferson, Livingston, Orleans, Pointe Coupee, St. Tammany, Tangipahoa, Washington, West Baton Rouge	\$0.00	\$9.10	\$18.20	\$27.30

Estado: MS		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
MS	H9811001000	Wellcare No Premium Medicare (HMO)	Desoto, George, Hancock, Harrison, Hinds, Jackson, Lafayette, Madison, Panola, Rankin, Stone, Tate	\$0.00	\$0.00	\$0.00	\$0.00
MS	H9811006000	Wellcare Dual Access Medicare (HMO D-SNP)	George, Hancock, Harrison, Hinds, Jackson, Madison, Rankin, Stone	\$0.00	\$7.30	\$14.60	\$21.90
MS	H9811008000	Wellcare Giveback Boost (HMO)	George, Hancock, Harrison, Jackson	\$0.00	\$0.00	\$0.00	\$0.00
MS	H9811009000	Wellcare Assist Complement (HMO)		\$0.00	\$6.00	\$11.90	\$17.90

Estado: NM		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
NM	H2134001000	Wellcare Dual Liberty (HMO D-SNP)	Bernalillo, Chaves, Cibola, Curry, Dona Ana, Luna, McKinley, Quay, Rio Arriba, Roosevelt, San Juan, Sandoval, Santa Fe, Taos, Torrance, Valencia	\$0.00	\$8.60	\$17.10	\$25.70

Estado: NM, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
NM	H2134002000	Wellcare Giveback (HMO)	Bernalillo, Dona Ana, Rio Arriba, Sandoval, Santa Fe, Torrance, Valencia	\$0.00	\$0.00	\$0.00	\$0.00
NM	H2134003000	Wellcare Dual Access (HMO D-SNP)	Bernalillo, Chaves, Cibola, Curry, Dona Ana, Luna, McKinley, Quay, Rio Arriba, Roosevelt, San Juan, Sandoval, Santa Fe, Taos, Torrance, Valencia	\$0.00	\$8.60	\$17.10	\$25.70
NM	H2134004000	Wellcare Assist (HMO)	Bernalillo, Dona Ana, Rio Arriba, Sandoval, Santa Fe, Torrance, Valencia	\$0.00	\$8.10	\$16.20	\$24.40
NM	H2134005000	Wellcare No Premium (HMO)		\$0.00	\$0.00	\$0.00	\$0.00
NM	H2134006000	Wellcare Patriot No Premium (HMO)		\$0.00	\$0.00	\$0.00	\$0.00
NM	H9976001000	Wellcare Assist Open (PPO)	Bernalillo, Chaves, Cibola, Curry, Dona Ana, Luna, McKinley, Quay, Rio Arriba, Roosevelt, Sandoval, Santa Fe, Taos, Torrance, Valencia	\$0.00	\$6.00	\$11.90	\$17.90
NM	H9976002000	Wellcare No Premium Open (PPO)		\$0.00	\$0.00	\$0.00	\$0.00
NM	H9976003000	Wellcare Low Premium Open (PPO)		\$27.00	\$29.00	\$31.00	\$33.00
NM	H9976004000	Wellcare Giveback Open (PPO)		\$0.00	\$0.00	\$0.00	\$0.00

Estado: NV		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
NV	H6446001000	Wellcare No Premium P3 (HMO)	Clark, Nye	\$0.00	\$0.00	\$0.00	\$0.00
NV	H6446003000	Wellcare Giveback P3 (HMO)		\$0.00	\$0.00	\$0.00	\$0.00
NV	H6446004000	Wellcare Giveback USHS (HMO)		\$0.00	\$0.00	\$0.00	\$0.00
NV	H6446005000	Wellcare Giveback (HMO)	Carson City, Lyon, Washoe	\$0.00	\$0.00	\$0.00	\$0.00
NV	H6446009000	Wellcare No Premium USHS (HMO)	Clark, Nye	\$0.00	\$0.00	\$0.00	\$0.00
NV	H6446010000	Wellcare No Premium (HMO)	Carson City, Lyon, Washoe	\$0.00	\$0.00	\$0.00	\$0.00
NV	H6446011000	Wellcare Assist P3 (HMO)	Clark, Nye	\$0.00	\$7.10	\$14.20	\$21.30
NV	H6446012000	Wellcare Assist USHS (HMO)		\$0.00	\$7.40	\$14.90	\$22.30
NV	H6446013000	Wellcare Assist (HMO)	Carson City, Lyon, Washoe	\$0.00	\$7.00	\$14.00	\$21.00
NV	H6446014000	Wellcare Dual Access P3 (HMO D-SNP)	Clark, Nye	\$0.00	\$7.80	\$15.50	\$23.30
NV	H6446015000	Wellcare Dual Access USHS (HMO D-SNP)		\$0.00	\$7.90	\$15.90	\$23.80

Estado: NV, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
NV	H6446016000	Wellcare Dual Access (HMO D-SNP)	Carson City, Lyon, Washoe	\$0.00	\$7.90	\$15.90	\$23.80
NV	H6446017000	Wellcare Specialty No Premium P3 (HMO C-SNP)	Clark	\$0.00	\$0.00	\$0.00	\$0.00
NV	H6446018000	Wellcare Specialty No Premium USHS (HMO C-SNP)		\$0.00	\$0.00	\$0.00	\$0.00
NV	H8458001000	Wellcare No Premium Open (PPO)		\$0.00	\$0.00	\$0.00	\$0.00
NV	H8458002000	Wellcare Patriot Giveback Open (PPO)		\$0.00	\$0.00	\$0.00	\$0.00
NV	H8458003000	Wellcare No Premium Open (PPO)	Lyon, Washoe	\$0.00	\$0.00	\$0.00	\$0.00

Estado: NY		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
NY	H5599001000	Wellcare Fidelis Dual Access (HMO D-SNP)	Albany, Allegany, Bronx, Broome, Cattaraugus, Cayuga, Chemung, Chenango, Clinton, Columbia, Cortland, Delaware, Dutchess, Erie, Essex, Franklin, Fulton, Greene, Hamilton, Herkimer, Kings, Lewis, Montgomery, Nassau, New York, Niagara, Oneida, Onondaga, Orange, Orleans, Oswego, Otsego, Putnam, Queens, Rensselaer, Richmond, Rockland, Saratoga, Schenectady, Schoharie, Schuyler, Seneca, St. Lawrence, Steuben, Suffolk, Sullivan, Tioga, Ulster, Warren, Washington, Westchester, Wyoming, Yates	\$0.00	\$5.00	\$10.00	\$15.00
NY	H5599002000	Wellcare Fidelis Assist (HMO-POS)	Albany, Allegany, Bronx, Broome, Cattaraugus, Cayuga, Chemung, Chenango, Clinton, Cortland, Delaware, Dutchess, Erie, Essex, Fulton, Hamilton, Herkimer, Lewis, Montgomery, New York, Niagara, Oneida, Onondaga, Orleans, Oswego, Otsego, Rensselaer, Richmond, Rockland, Saratoga, Schenectady, Schoharie, Schuyler, Seneca, St. Lawrence, Steuben, Tioga, Ulster, Warren, Washington, Westchester, Wyoming, Yates	\$0.00	\$4.30	\$8.50	\$12.80
NY	H5599003000	Wellcare Fidelis Dual Plus (HMO D-SNP)	Bronx, Kings, Nassau, New York, Queens, Richmond, Rockland, Suffolk, Westchester	\$0.00	\$4.60	\$9.10	\$13.70
NY	H5599004000	Wellcare Fidelis No Premium (HMO)	Albany, Allegany, Bronx, Broome, Cattaraugus, Cayuga, Chemung, Chenango, Clinton, Cortland, Delaware, Dutchess, Erie, Essex, Fulton, Hamilton, Herkimer, Lewis, Montgomery, New York, Niagara, Oneida, Onondaga, Orleans, Oswego, Otsego, Rensselaer, Richmond, Rockland, Saratoga, Schenectady, Schoharie, Schuyler, Seneca, St. Lawrence, Steuben, Tioga, Ulster, Warren, Washington, Westchester, Wyoming, Yates	\$0.00	\$0.00	\$0.00	\$0.00

Estado: NY, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
NY	H5599005000	Wellcare Fidelis Patriot No Premium (HMO-POS)	Allegany, Broome, Cattaraugus, Cayuga, Chemung, Chenango, Cortland, Delaware, Erie, Herkimer, Lewis, Niagara, Oneida, Onondaga, Orleans, Oswego, Otsego, Schuyler, Seneca, St. Lawrence, Steuben, Tioga, Wyoming, Yates	\$0.00	\$0.00	\$0.00	\$0.00
NY	H5599008000	Wellcare Fidelis Dual Plus (HMO D-SNP)	Albany, Allegany, Broome, Cattaraugus, Cayuga, Chemung, Chenango, Clinton, Columbia, Cortland, Delaware, Dutchess, Erie, Essex, Franklin, Fulton, Greene, Hamilton, Lewis, Montgomery, Niagara, Oneida, Onondaga, Orange, Orleans, Oswego, Otsego, Putnam, Rensselaer, Saratoga, Schenectady, Schoharie, Schuyler, Seneca, St. Lawrence, Steuben, Sullivan, Tioga, Ulster, Warren, Washington, Wyoming, Yates	\$0.00	\$5.80	\$11.60	\$17.50

Estado: OH		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
OH	H0724001000	Wellcare No Premium Medicare (HMO)	Adams, Allen, Ashland, Athens, Auglaize, Belmont, Brown, Butler, Carroll, Champaign, Clark, Clermont, Clinton, Columbiana, Coshocton, Crawford, Cuyahoga, Darke, Defiance, Delaware, Erie, Fairfield, Fayette, Franklin, Fulton, Gallia, Geauga, Greene, Guernsey, Hamilton, Hancock, Hardin, Harrison, Henry, Highland, Hocking, Holmes, Huron, Jackson, Jefferson, Knox, Lake, Lawrence, Licking, Logan, Lorain, Lucas, Madison, Mahoning, Marion, Medina, Meigs, Mercer, Miami, Monroe, Montgomery, Morgan, Morrow, Muskingum, Noble, Ottawa, Paulding, Perry, Pickaway, Pike, Portage, Preble, Putnam, Richland, Ross, Sandusky, Scioto, Seneca, Shelby, Stark, Summit, Trumbull, Tuscarawas, Union, Van Wert, Vinton, Warren, Washington, Wayne, Williams, Wood, Wyandot	\$0.00	\$0.00	\$0.00	\$0.00
OH	H0724005000	Wellcare Patriot No Premium (HMO)		\$0.00	\$0.00	\$0.00	\$0.00
OH	H0724006000	Wellcare Assist Complement (HMO)		\$0.00	\$4.40	\$8.80	\$13.20
OH	H0724007000	Wellcare Giveback Boost (HMO)		\$0.00	\$0.00	\$0.00	\$0.00
OH	H0908001000	Wellcare Dual Access (HMO D-SNP)	Adams, Allen, Ashland, Ashtabula, Auglaize, Brown, Butler, Carroll, Champaign, Clark, Clermont, Clinton, Columbiana, Coshocton, Crawford, Cuyahoga, Darke, Defiance, Delaware, Erie, Fairfield, Fayette, Fulton, Geauga, Greene, Guernsey, Hamilton, Hancock, Hardin, Harrison, Henry, Highland, Hocking, Holmes, Huron, Jackson, Jefferson, Lake, Logan, Lorain, Lucas, Madison, Mahoning, Medina, Meigs, Mercer, Miami, Monroe, Montgomery, Morgan, Morrow, Noble, Ottawa, Paulding, Perry, Pickaway, Pike, Portage, Preble, Putnam, Sandusky, Seneca, Shelby, Stark, Summit, Trumbull, Tuscarawas, Van Wert, Vinton, Warren, Wayne, Williams, Wood, Wyandot	\$0.00	\$8.00	\$16.00	\$24.00

Estado: OH, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
OH	H0908003000	Wellcare No Premium (HMO)	Adams, Allen, Ashland, Auglaize, Brown, Butler, Carroll, Champaign, Clark, Clermont, Clinton, Columbiana, Coshocton, Crawford, Cuyahoga, Darke, Defiance, Delaware, Erie, Fairfield, Fayette, Fulton, Geauga, Greene, Guernsey, Hamilton, Hancock, Hardin, Harrison, Henry, Highland, Hocking, Holmes, Huron, Jackson, Jefferson, Lake, Logan, Lorain, Lucas, Madison, Mahoning, Medina, Meigs, Mercer, Miami, Monroe, Montgomery, Morgan, Morrow, Noble, Ottawa, Paulding, Perry, Pickaway, Pike, Portage, Preble, Putnam, Sandusky, Seneca, Shelby, Stark, Summit, Trumbull, Tuscarawas, Van Wert, Vinton, Warren, Wayne, Williams, Wood, Wyandot	\$0.00	\$0.00	\$0.00	\$0.00
OH	H0908004000	Wellcare Assist (HMO)	Adams, Allen, Ashland, Auglaize, Brown, Butler, Carroll, Champaign, Clark, Clermont, Clinton, Columbiana, Coshocton, Crawford, Cuyahoga, Darke, Defiance, Delaware, Erie, Fairfield, Fayette, Fulton, Geauga, Greene, Guernsey, Hamilton, Hancock, Hardin, Harrison, Henry, Highland, Hocking, Holmes, Huron, Jackson, Jefferson, Lake, Logan, Lorain, Lucas, Madison, Mahoning, Medina, Meigs, Mercer, Miami, Monroe, Montgomery, Morgan, Morrow, Noble, Ottawa, Paulding, Perry, Pickaway, Pike, Portage, Preble, Putnam, Sandusky, Seneca, Shelby, Stark, Summit, Trumbull, Tuscarawas, Van Wert, Vinton, Warren, Wayne, Williams, Wood, Wyandot	\$0.00	\$4.20	\$8.40	\$12.60
OH	H0908005000	Wellcare Giveback (HMO)		\$0.00	\$0.00	\$0.00	\$0.00

Estado: OH, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
OH	H7169001000	Wellcare No Premium Open (PPO)	Adams, Allen, Ashland, Athens, Auglaize, Belmont, Brown, Butler, Carroll, Champaign, Clark, Clermont, Clinton, Columbiana, Coshocton, Crawford, Cuyahoga, Darke, Defiance, Delaware, Erie, Fairfield, Fayette, Franklin, Fulton, Gallia, Geauga, Greene, Guernsey, Hamilton, Hancock, Hardin, Harrison, Henry, Highland, Hocking, Holmes, Huron, Jackson, Jefferson, Knox, Lake, Lawrence, Licking, Logan, Lorain, Lucas, Madison, Mahoning, Marion, Medina, Meigs, Mercer, Miami, Monroe, Montgomery, Morgan, Morrow, Muskingum, Noble, Ottawa, Paulding, Perry, Pickaway, Pike, Portage, Preble, Putnam, Richland, Ross, Sandusky, Scioto, Seneca, Shelby, Stark, Summit, Trumbull, Tuscarawas, Union, Van Wert, Vinton, Warren, Washington, Wayne, Williams, Wood, Wyandot	\$0.00	\$0.00	\$0.00	\$0.00

Estado: OR		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
O	H2174001000	Wellcare Dual Select (HMO D-SNP)	Lane	\$0.00	\$10.10	\$20.30	\$30.40
O	H5439010000	Wellcare Patriot No Premium Open (PPO)	Benton, Clackamas, Douglas, Jackson, Josephine, Lane, Linn, Marion, Multnomah, Polk, Washington, Yamhill	\$0.00	\$0.00	\$0.00	\$0.00
O	H5439011000	Wellcare Premium Ultra Open (PPO)		\$85.30	\$94.20	\$103.10	\$112.10

Estado: OR, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
O	H5439015000	Wellcare Giveback Open (PPO)	Benton, Clackamas, Douglas, Jackson, Josephine, Lane, Linn, Marion, Multnomah, Polk, Washington, Yamhill	\$0.00	\$0.00	\$0.00	\$0.00
O	H5439017000	Wellcare No Premium Open (PPO)	Lane	\$0.00	\$0.00	\$0.00	\$0.00
O	H5439018000	Wellcare Low Premium Open (PPO)	Benton, Clackamas, Lane, Linn, Marion, Multnomah, Polk, Washington, Yamhill	\$2.70	\$9.50	\$16.30	\$23.20
O	H5439019000	Wellcare Low Premium Open (PPO)	Douglas, Jackson, Josephine	\$7.00	\$11.70	\$16.50	\$21.20
O	H6815038000	Wellcare No Premium (HMO)	Benton, Clackamas, Columbia, Coos, Crook, Deschutes, Jackson, Jefferson, Josephine, Lane, Linn, Marion, Multnomah, Polk, Washington, Yamhill	\$0.00	\$0.00	\$0.00	\$0.00
O	H6815037000	Wellcare Assist (HMO)	Benton, Clackamas, Columbia, Coos, Crook, Deschutes, Douglas, Jackson, Jefferson, Josephine, Lane, Linn, Marion, Multnomah, Polk, Washington, Yamhill	\$0.00	\$6.20	\$12.40	\$18.60

Estado: PA		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
PA	H2128001000	Wellcare Assist Open (PPO)	Armstrong, Beaver, Bedford, Berks, Blair, Bradford, Bucks, Butler, Cambria, Cameron, Carbon, Centre, Chester, Clarion, Clearfield, Clinton, Crawford, Cumberland, Dauphin, Delaware, Elk, Erie, Fayette, Forest, Fulton, Greene, Huntingdon, Indiana, Jefferson, Juniata, Lackawanna, Lancaster, Lawrence, Lebanon, Lehigh, Luzerne, Lycoming, McKean, Mifflin, Monroe, Montgomery, Northampton, Perry, Philadelphia, Potter, Schuylkill, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Washington, Wayne, Westmoreland, Wyoming	\$0.00	\$6.20	\$12.30	\$18.50
PA	H2128002000	Wellcare No Premium Open (PPO)		\$0.00	\$0.00	\$0.00	\$0.00
PA	H2128003000	Wellcare Low Premium Open (PPO)		\$20.80	\$22.80	\$24.90	\$26.90
PA	H2128004000	Wellcare Giveback Open (PPO)		\$0.00	\$0.00	\$0.00	\$0.00
PA	H2915002000	Wellcare Dual Access (HMO D-SNP)	Allegheny, Armstrong, Beaver, Bedford, Blair, Bucks, Butler, Cambria, Cameron, Chester, Clarion, Clearfield, Crawford, Delaware, Elk, Erie, Fayette, Forest, Greene, Indiana, Jefferson, Lawrence, McKean, Mercer, Montgomery, Philadelphia, Potter, Somerset, Venango, Warren, Washington, Westmoreland	\$0.00	\$10.20	\$20.30	\$30.50
PA	H2915003000	Wellcare No Premium (HMO)	Allegheny, Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Cameron, Carbon, Clarion, Clearfield, Clinton, Crawford, Elk, Erie, Fayette, Forest, Greene, Indiana, Jefferson, Lawrence, Lehigh, Luzerne, McKean, Mercer, Monroe, Northampton, Potter, Schuylkill, Somerset, Venango, Warren, Washington, Westmoreland	\$0.00	\$0.00	\$0.00	\$0.00
PA	H2915007000	Wellcare Dual Access (HMO D-SNP)	Adams, Berks, Bradford, Carbon, Centre, Clinton, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lackawanna, Lancaster, Lebanon, Lehigh, Luzerne, Lycoming, Mifflin, Monroe, Northampton, Perry, Pike, Schuylkill, Snyder, Sullivan, Susquehanna, Tioga, Union, Wayne, Wyoming, York	\$0.00	\$10.20	\$20.30	\$30.50

Estado: PA, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
PA	H2915013000	Wellcare Patriot Giveback (HMO)	Allegheny, Armstrong, Beaver, Bedford, Berks, Blair, Bradford, Bucks, Butler, Cambria, Cameron, Centre, Chester, Clarion, Clearfield, Crawford, Cumberland, Dauphin, Delaware, Elk, Erie, Fayette, Huntingdon, Indiana, Jefferson, Lackawanna, Lancaster, Lawrence, Lebanon, Lycoming, McKean, Mercer, Mifflin, Montgomery, Perry, Philadelphia, Potter, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Washington, Wayne, Westmoreland, Wyoming	\$0.00	\$0.00	\$0.00	\$0.00
PA	H2915011000	Wellcare Assist (HMO)	Allegheny, Armstrong, Beaver, Bedford, Berks, Blair, Bradford, Bucks, Butler, Cambria, Cameron, Carbon, Centre, Chester, Clarion, Clearfield, Clinton, Crawford, Cumberland, Dauphin, Delaware, Elk, Erie, Fayette, Forest, Fulton, Greene, Huntingdon, Indiana, Jefferson, Juniata, Lackawanna, Lancaster, Lawrence, Lebanon, Lehigh, Luzerne, Lycoming, McKean, Mercer, Mifflin, Monroe, Montgomery, Northampton, Perry, Philadelphia, Potter, Schuylkill, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Washington, Wayne, Westmoreland, Wyoming	\$0.00	\$9.00	\$18.00	\$27.00
PA	H2915012000	Wellcare Giveback (HMO)		\$0.00	\$0.00	\$0.00	\$0.00
PA	H2915016000	Wellcare No Premium (HMO)	Berks, Bradford, Bucks, Centre, Chester, Cumberland, Dauphin, Delaware, Fulton, Huntingdon, Juniata, Lackawanna, Lancaster, Lebanon, Lycoming, Mifflin, Montgomery, Perry, Philadelphia, Snyder, Sullivan, Susquehanna, Tioga, Union, Wayne, Wyoming	\$0.00	\$0.00	\$0.00	\$0.00

Estado: SC		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
SC	H1436002000	Wellcare No Premium Medicare (HMO)	Abbeville, Allendale, Bamberg, Barnwell, Beaufort, Berkeley, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Edgefield, Florence, Georgetown, Greenwood, Hampton, Jasper, Laurens, Lee, Marion, Marlboro, McCormick, Newberry, Orangeburg, Union, Williamsburg	\$0.00	\$0.00	\$0.00	\$0.00
SC	H1436004000	Wellcare No Premium Medicare (HMO)	Anderson, Calhoun, Fairfield, Greenville, Kershaw, Lexington, Oconee, Pickens, Richland, Saluda, Spartanburg	\$0.00	\$0.00	\$0.00	\$0.00
SC	H1436005000	Wellcare Dual Access (HMO D-SNP)	Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York	\$0.00	\$7.80	\$15.50	\$23.30
SC	H1436007000	Wellcare Dual Liberty (HMO D-SNP)	Darlington, Dillon, Florence, Marion, Marlboro	\$0.00	\$7.80	\$15.50	\$23.30

Estado: TX		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
TX	H0062002000	Wellcare No Premium Medicare (HMO)	Aransas, Bexar, Collin, Comal, Dallas, Denton, El Paso, Guadalupe, Jim Wells, Nueces, Rockwall, Tarrant, Wilson	\$0.00	\$0.00	\$0.00	\$0.00

Estado: TX, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
TX	H0062003000	Wellcare No Premium Medicare (HMO)	Cameron, Hidalgo, Starr	\$0.00	\$0.00	\$0.00	\$0.00
TX	H5294010000	Wellcare Dual Liberty Nurture (HMO D-SNP)	Aransas, Armstrong, Atascosa, Bailey, Bandera, Bee, Bexar, Borden, Bosque, Briscoe, Brooks, Calhoun, Cameron, Castro, Cochran, Coke, Collin, Colorado, Comal, Crosby, Dallas, Denton, DeWitt, Dickens, Dimmit, Donley, Duval, El Paso, Erath, Fayette, Fisher, Floyd, Garza, Gillespie, Glasscock, Goliad, Gonzales, Grayson, Grimes, Guadalupe, Hale, Hamilton, Hidalgo, Hill, Hockley, Hunt, Irion, Jack, Jim Hogg, Jim Wells, Karnes, Kendall, Kenedy, Kent, Kimble, Kleberg, La Salle, Lamb, Leon, Limestone, Lubbock, Lynn, Martin, Mason, Maverick, McCulloch, McMullen, Medina, Mills, Mitchell, Navarro, Nolan, Nueces, Palo Pinto, Real, Refugio, Rockwall, San Patricio, San Saba, Shackelford, Somervell, Starr, Sterling, Swisher, Tarrant, Terry, Throckmorton, Uvalde, Van Zandt, Victoria, Webb, Willacy, Wilson, Zapata, Zavala	\$0.00	\$6.30	\$12.50	\$18.80
TX	H5294011000	Wellcare No Premium (HMO)	Aransas, Bee, Brooks, Cameron, Duval, Goliad, Hidalgo, Jim Hogg, Jim Wells, Kenedy, Kleberg, La Salle, McMullen, Nueces, Refugio, San Patricio, Starr, Victoria, Webb, Willacy, Zapata	\$0.00	\$0.00	\$0.00	\$0.00
TX	H5294012000	Wellcare Giveback (HMO)		\$0.00	\$0.00	\$0.00	\$0.00
TX	H5294013000	Wellcare Complement Assist (HMO)		\$0.00	\$3.60	\$7.20	\$10.90

Estado: TX, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
TX	H5294014000	Wellcare Patriot No Premium (HMO)	Aransas, Armstrong, Atascosa, Bailey, Bandera, Bastrop, Bee, Bexar, Blanco, Borden, Bosque, Briscoe, Brooks, Burnet, Caldwell, Calhoun, Cameron, Castro, Cochran, Coke, Collin, Colorado, Comal, Crosby, Dallas, Denton, DeWitt, Dickens, Dimmit, Donley, Duval, El Paso, Erath, Fayette, Fisher, Floyd, Garza, Gillespie, Glasscock, Goliad, Gonzales, Grayson, Grimes, Guadalupe, Hale, Hamilton, Hays, Hidalgo, Hill, Hockley, Hunt, Irion, Jack, Jim Hogg, Jim Wells, Karnes, Kendall, Kenedy, Kent, Kimble, Kleberg, La Salle, Lamb, Lee, Leon, Limestone, Lubbock, Lynn, Martin, Mason, Maverick, McCulloch, McMullen, Medina, Milam, Mills, Mitchell, Navarro, Nolan, Nueces, Palo Pinto, Real, Refugio, Rockwall, San Patricio, San Saba, Shackelford, Somervell, Starr, Sterling, Swisher, Tarrant, Terry, Throckmorton, Uvalde, Van Zandt, Victoria, Webb, Willacy, Williamson, Wilson, Zapata, Zavala	\$0.00	\$0.00	\$0.00	\$0.00
TX	H5294015000	Wellcare Dual Access Harmony (HMO D-SNP)		\$0.00	\$6.30	\$12.50	\$18.80
TX	H5294016000	Wellcare Complement Assist (HMO)	Armstrong, Atascosa, Bailey, Bandera, Bastrop, Bexar, Blanco, Borden, Bosque, Briscoe, Burnet, Caldwell, Calhoun, Castro, Cochran, Coke, Collin, Colorado, Comal, Crosby, Dallas, Denton, DeWitt, Dickens, Dimmit, Donley, El Paso, Erath, Fayette, Fisher, Floyd, Garza, Gillespie, Glasscock, Gonzales, Grayson, Grimes, Guadalupe, Hale, Hamilton, Hays, Hill, Hockley, Hunt, Irion, Jack, Karnes, Kendall, Kent, Kimble, Lamb, Lee, Leon, Limestone, Lubbock, Lynn, Martin, Mason, Maverick, McCulloch, Medina, Milam, Mills, Mitchell, Navarro, Nolan, Palo Pinto, Real, Rockwall, San Saba, Shackelford, Somervell, Sterling, Swisher, Tarrant, Terry, Throckmorton, Uvalde, Van Zandt, Williamson, Wilson, Zavala	\$0.00	\$3.70	\$7.40	\$11.20

Estado: TX, Continuación		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
TX	H5294017000	Wellcare No Premium (HMO)	Atascosa, Bandera, Bexar, Comal, DeWitt, Dimmit, Gonzales, Guadalupe, Karnes, Kendall, Maverick, Medina, Real, Uvalde, Wilson, Zavala	\$0.00	\$0.00	\$0.00	\$0.00
TX	H5294018000	Wellcare No Premium (HMO)	Armstrong, Bailey, Borden, Briscoe, Castro, Cochran, Coke, Crosby, Dickens, Donley, Fisher, Floyd, Garza, Glasscock, Hale, Hockley, Irion, Kent, Lamb, Lubbock, Lynn, Martin, Mitchell, Nolan, Shackelford, Sterling, Swisher, Terry, Throckmorton	\$0.00	\$0.00	\$0.00	\$0.00
TX	H5294019000	Wellcare Giveback (HMO)		\$0.00	\$0.00	\$0.00	\$0.00

Estado: WA		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
WA	H5439010000	Wellcare Patriot No Premium Open (PPO)	Clark	\$0.00	\$0.00	\$0.00	\$0.00
WA	H5439011000	Wellcare Premium Ultra Open (PPO)		\$85.30	\$94.20	\$103.10	\$112.10
WA	H5439015000	Wellcare Giveback Open (PPO)		\$0.00	\$0.00	\$0.00	\$0.00
WA	H5439018000	Wellcare Low Premium Open (PPO)		\$2.70	\$9.50	\$16.30	\$23.20

Estado: WI		Prima Mensual para*:		Su nivel de Ayuda Adicional			
Estado	Contrato_PBP	Plan	Condados	100%	75%	50%	25%
WI	H8189001000	Wellcare Dual Access (HMO D-SNP)	Adams, Brown, Calumet, Clark, Columbia, Dane, Dodge, Fond Du Lac, Green Lake, Jefferson, Kenosha, Kewaunee, Langlade, Lincoln, Manitowoc, Marathon, Marinette, Marquette, Menominee, Milwaukee, Oconto, Outagamie, Ozaukee, Portage, Racine, Shawano, Sheboygan, Taylor, Walworth, Washington, Waukesha, Waupaca, Waushara, Winnebago, Wood	\$0.00	\$8.90	\$17.80	\$26.80

* Esto no incluye ninguna prima de Medicare Parte B que usted deba pagar.

La prima de Wellcare incluye cobertura tanto para servicios médicos como para medicamentos recetados.

Si no está recibiendo ayuda adicional, puede ver si califica llamando al:

- 1-800-Medicare o los usuarios de TTY pueden llamar al **1-877-486-2048** (las 24 horas del día, los 7 días de la semana),
- la oficina de Medicaid de su estado o
- la Administración del Seguro Social al **1-800-772-1213**. Los usuarios de TTY deben llamar al **1-800-325-0778** de 7 a.m. a 7 p.m., de lunes a viernes.

Si tiene alguna pregunta sobre su estado y plan, llame a la línea gratuita de Servicios para Miembros al número que figura en las siguientes páginas de lunes a viernes, de 8 a.m. a 8 p.m. Entre el 1 de octubre y el 31 de marzo, nuestros representantes estarán disponibles de lunes a domingo, de 8 a.m. a 8 p.m., en todas las zonas horarias.

Nuestros planes usan una lista de medicamentos.

Para los miembros de los planes Allwell New Mexico D-SNP: Estos servicios son financiados en parte con el estado de New Mexico.

Comuníquese con su plan para obtener más información.

ATENCIÓN: Si habla español, contamos con servicios de asistencia lingüística que se encuentran disponibles para usted de manera gratuita. Llame al número de Servicios para Miembros que se indica para su estado en la página siguiente.

注意：如果您說中文，您可以免費獲得語言援助服務。請撥打針對您所在州列示於下一頁的會員服務部電話號碼。

Chú ý: Nếu quý vị nói tiếng Việt, dịch vụ hỗ trợ ngôn ngữ có sẵn miễn phí dành cho quý vị. Hãy gọi số điện thoại của bộ phận Dịch Vụ Thành Viên thuộc bang của quý vị ở trang tiếp theo.

주의사항: 한국어를 구사할 경우, 언어 보조 서비스를 무료로 이용 가능합니다. 다음 페이지에서 가입자의 주에 해당하는 목록 내 가입자 서비스부 번호로 전화해 주십시오.

Atensyon: Kung nagsasalita ka ng Tagalog, may mga available na libreng tulong sa wika para sa iyo. Tumawag sa numero ng Mga Serbisyo para sa Miyembro na nakalista para sa iyong estado sa susunod na page.

Dumngeg: No agsasau ka iti Ilokano, dagiti tulong nga serbisio, a libre, ket available para kaniyam. Awagam iti numero dagiti serbisio iti Miembro a nakalista para iti estadom iti sumaruno a panid.

La Silafia: Afai e te tautala i le gagana Samoa, o lo’o avanoa ia te oe ‘au’aunaga fesoasoani i le gagana, e leai se totogi. Vala’au le Member Services numera lisiina mo lou setete i le isi itulau.

Maliu: Ke wala’au Hawai’i ‘oe, loa’a ke kōkua ma ka unuhi ‘ōlelo me ke kākī ‘ole. E kelepona i ka helu kelepona o ka Māhele Kōkua Hoa i hō’ike ‘ia no kou moku’āina ma kēia ‘ao’ao a’e.

Estamos a Solo Una Llamada de Distancia

ARKANSAS

+ HMO, HMO D-SNP

☎ 1-855-565-9518

🖥 O bien, visite www.wellcare.com/allwellAR

ARIZONA

+ HMO, HMO C-SNP, HMO D-SNP

☎ 1-800-977-7522

🖥 O bien, visite www.wellcare.com/allwellAZ

CALIFORNIA

+ HMO, HMO C-SNP, HMO D-SNP, PPO

☎ 1-800-275-4737

🖥 O bien, visite www.wellcare.com/healthnetCA

FLORIDA

+ HMO D-SNP

☎ 1-877-935-8022

🖥 O bien, visite www.wellcare.com/allwellFL

GEORGIA

+ HMO

☎ 1-844-890-2326

+ HMO D-SNP

☎ 1-877-725-7748

🖥 O bien, visite www.wellcare.com/allwellGA

INDIANA

+ HMO, PPO

☎ 1-855-766-1541

+ HMO D-SNP

☎ 1-833-202-4704

🖥 O bien, visite www.wellcare.com/allwellIN

KANSAS

+ HMO, PPO

☎ 1-855-565-9519

+ HMO D-SNP

☎ 1-833-402-6707

🖥 O bien, visite www.wellcare.com/allwellKS

LOUISIANA

+ HMO

☎ 1-855-766-1572

+ HMO D-SNP

☎ 1-833-541-0767

🖥 O bien, visite www.wellcare.com/allwellLA

MISSOURI

+ HMO

☎ 1-855-766-1452

+ HMO D-SNP

☎ 1-833-298-3361

🖥 O bien, visite www.wellcare.com/allwellMO

MISSISSIPPI

 HMO
 1-844-786-7711

 HMO D-SNP
 1-833-260-4124

 O bien, visite www.wellcare.com/allwellMS

NEBRASKA

 HMO, PPO
 1-833-542-0693

 HMO D-SNP, PPO D-SNP
 1-833-853-0864

 O bien, visite www.wellcare.com/NE

NEVADA

 HMO, HMO C-SNP, PPO
 1-833-854-4766

 HMO D-SNP
 1-833-717-0806

 O bien, visite www.wellcare.com/allwellNV

NEW MEXICO

 HMO, PPO
 1-833-543-0246

 HMO D-SNP
 1-844-810-7965

 O bien, visite www.wellcare.com/allwellNM

NEW YORK

 HMO, HMO-POS, HMO D-SNP
 1-800-247-1447

 O bien, visite www.wellcare.com/fidelisNY

OHIO

 HMO, PPO
 1-855-766-1851

 HMO D-SNP
 1-866-389-7690

 O bien, visite www.wellcare.com/allwellOH

OKLAHOMA

 HMO, PPO
 1-833-853-0865

 HMO D-SNP
 1-833-853-0866

 O bien, visite www.wellcare.com/OK

OREGON

 HMO, PPO
 1-844-582-5177

 O bien, visite www.wellcare.com/healthnetOR

 HMO D-SNP
 1-844-867-1156

 O bien, visite www.wellcare.com/trilliumOR

PENNSYLVANIA

 HMO, PPO
 1-855-766-1456

 HMO D-SNP
 1-866-330-9368

 O bien, visite www.wellcare.com/allwellPA

SOUTH CAROLINA

 HMO, HMO D-SNP
 1-855-766-1497

 O bien, visite www.wellcare.com/allwellSC

TEXAS

 HMO

 1-844-796-6811

 HMO D-SNP

 1-877-935-8023

 O bien, visite www.wellcare.com/allwellTX

WISCONSIN

 HMO D-SNP

 1-877-935-8024

 O bien, visite www.wellcare.com/allwellWI

WASHINGTON

 PPO

 1-844-582-5177

 O bien, visite www.wellcare.com/healthnetOR

TTY PARA TODOS LOS ESTADOS: 711

HORARIO DE ATENCIÓN

 Del 1 de octubre al 31 de marzo: de lunes a domingo, de 8 a.m. a 8 p.m.

 Del 1 de abril al 30 de septiembre: de lunes a viernes, de 8 a.m. a 8 p.m.