2025 MAPD Payment Chart												
/ermont SPAP PDP Portion Premium Benchmark \$52.52												
	Payment Corp.					CMS Payment	Vermont Payment	Beneficiary Payment (est.)	VT SPAP	VT SPAP		
MAPD Plan Name	Home Carrier	Carrier	Contract	Plan	Total Part D	100%	100%	100%	Payment (No LIS)	Beneficary Payment		
	Code	Plan Code	Number	ID	Premium	LIS	LIS	LIS				
Humana - (Choice Giveback- PPO)	QQ9	QX2	H5216	138	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
United Health Care - (UHC MA VT-PPO)			H2001	029	\$52.50	\$52.50	\$0.00	\$0.00	\$52.50	\$0.00		
United Health Group - SNP(special Needs Plan)			H5253	170	\$52.50	\$52.50	\$0.00	\$0.00	\$52.50	\$0.00		
Vermont Blue Advantage - (Freedom PPO)	QX3	QX4	H6898	001	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Vermont Blue Advantage - Freedom Plus-PPO)	QX3	QX5	H6898	002	\$41.30	\$41.30	\$0.00	\$0.00	\$41.30	\$0.00		
Vermont Blue Advantage - (Unity- HMO)	QX6	QX7	H9489	001	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		

Humana - Humana Choice H5216-057	QQ9	QQ0	H5216	057
Humana - Humana Choice		QX1	H5216	
H5216-058	QQ9			058
MVP (UVM Select)	QP3	QQE	H9615	015
	QP3	QQF	H9615	016
MVP (UVM Secure)				
MVP (UVM Preferred)	QP3	QQG	H9615	017
MVP (Gold Value w/Part D)	QT9	QT0	H3305	022
HMO/POS	Q13	<b>Q</b> 10	110000	UZZ
United Health Care - AARP				
Advantage Choice - Regional	QL1	QL1	R7444	001
PPO				
United Health Care (AARP-HMO				
plan 1)	QS7	QS8	H1944	018
United Health Care (AARP-HMO	QS7	QQ5	H1944	032
plan 3)				
United Health Care (Medicare	QV9	QW0	H0271	012
Advantage Assure)	QVS	QVV	110271	012
United Helath Care (AARP PP0)	QQU	QQV	H8768	049
WellCare - Wellcare Value (HMO)	QX8	QX9	H1862	001
Wellcare - Wellcare Value (HIVIO)	QAO	QAS	111002	001
Wellcare - ( No Premium Open		0)/(0	110504	004
PPO)	QY0	QY3	H6594	001
Wellcare - WellCare (Giveback				
· ·	QY0	QY1	H6594	002
Open PPO)	0)//0	OV2	LICEDA	002
Wellcare (Plus Open PPO)	QY0	QY2	H6594	003
Wellcare - (Assist Open PPO)	QY0	QQH	H6594	004