Arkansas highlights

- A complete product portfolio to meet your clients' Medicare needs: MA-only | MAPD | D-SNP | C-SNP.
- All plans come standard with $0 PCP, dental, vision, hearing, SilverSneakers.
- On plans with the Aetna High Value Provider (HVP) Incentive Program, members who meet SSBCI eligibility criteria and choose an HVP as their PCP get a bonus on their Extra Benefits Card.
- NEW! HMO-POS and PPO plans in NW and Central AR come with rich benefits.
- Signature plan offers $0 PCP, dental, vision, hearing, and $0 Tier 1 drugs at preferred pharmacies.
- Signature Care plan comes with rich benefits, a quarterly allowance on an Extra Benefits Card, and the HVP Incentive for members who qualify.
- Signature Plus plans offer $0 PCP, dental, vision, hearing and $0 Tier 1 drugs at preferred pharmacies. Members get a quarterly OTC allowance on an Extra Benefits Card. Those who meet SSBCI eligibility criteria also get a quarterly Extra Supports allowance to help pay for certain everyday expenses.
- MA-only Eagle Giveback comes with rich benefits – Great for vets or clients who already have prescription drug coverage! Members get a quarterly OTC allowance on an Extra Benefits Card.
- NEW! Chronic Care C-SNP is designed for members with diabetes mellitus, CHF, or certain cardiovascular diseases. This plan offers dental, vision, hearing, a monthly allowance on an Extra Benefits Card, and the HVP Incentive for members who qualify.
- Full Dual Care D-SNP (for "Full Only" Duals) offers rich dental, vision and hearing benefits, a monthly allowance on an Extra Benefits Card, and the HVP Incentive for members who qualify.
- Our Dual Extra Care D-SNP (Full) offers dental, vision and hearing coverage, with a monthly allowance on an Extra Benefits Card, and the HVP Incentive for members who qualify.
- We will no longer offer Individual Medicare Advantage plans in Independence, Jefferson, Little River, Marion, Sevier and Stone counties. Medicare Supplement plans and ancillary products remain available.

Medicare Advantage (MA-only) plans

Aetna® Medicare Eagle™ plans deliver value with a $0 premium—and many include a Part B premium reduction—for individuals with existing drug coverage, such as veterans.

Members can count on a consistent set of core benefits, with practical value they can take advantage of every day, including dental, vision, hearing, fitness and OTC. With $0 copays for common services like PCP visits, labs and routine exams, these plans are designed to provide predictable costs, stability and everyday affordability.

NEW PLAN

Aetna Medicare Eagle Giveback (PPO)

Plan number

H5521-724

Star rating



Best suited for

For veterans or other clients with existing Rx coverage who are interested in Part C and supplemental coverage.

Submarket

Central, East, Northwest, South

Current counties

Benton, Calhoun, Carroll, Clark, Columbia, Crawford, Crittenden, Dallas, Faulkner, Franklin, Garland, Grant, Hempstead, Hot Spring, Howard, Johnson, Lafayette, Logan, Lonoke, Madison, Miller, Montgomery, Nevada, Newton, Ouachita, Perry, Phillips, Pike, Poinsett, Polk, Pope, Pulaski, Saline, Scott, Sebastian, St. Francis, Union, Washington, Yell
Expansion counties
N/A
Premium
$0
Part B giveback
$100
PCP in network
$0
PCP required
PCP required, referrals not required
Specialist in network
$30
Inpatient hospital
$345 per day, days 1-7; $0 per day, days 8-90
Outpatient hospital services
$30 - $345
Medical deductible in network
$0
Out-of-pocket in-network max
$7,900
Supplemental benefits

Dental: $4,000 every year
Vision: $300 every year
Hearing: $500 per ear every year
Post Discharge Meals: 14 meals/7 days
SilverSneakers®
$150 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products.

Medicare Advantage Prescription Drug (MAPD) plans

Our MAPD plans are designed to deliver simple, easy-to-understand value with meaningful everyday benefits.

All Aetna MAPD plans include dental, vision, and hearing coverage—including $0 routine eye and hearing exams, as well as hearing aids starting at $0—plus $0 Tier 1 drugs. Together, these features help reduce out-of-pocket costs and remove common barriers to care. From preventive services to prescription drug coverage, these plans support members in managing their health and budgets with confidence, reinforcing consistent, day-to-day support.

LEAD PLAN	LEAD PLAN	LEAD PLAN
Aetna Medicare Signature Care (HMO)	Aetna Medicare Signature Plus (HMO)	Aetna Medicare Signature (HMO-POS)
Plan number		
H2663-067	H2663-039	H2663-029
Star rating		
★★★★	★★★★	★★★★
Best suited for		
For clients looking for essential coverage and value, often for a $0 monthly premium.	For clients looking for essential coverage and value, often for a $0 monthly premium.	For clients looking for essential coverage and value, often for a $0 monthly premium.
Submarket		

Central	Central, East, Northwest, South	Northwest, South
Current counties		
Faulkner, Pulaski, Saline	Arkansas, Clark, Cleburne, Columbia, Conway, Crittenden, Cross, Garland, Greene, Hot Spring, Jackson, Lafayette, Lawrence, Lee, Lonoke, Mississippi, Montgomery, Perry, Phillips, Poinsett, Polk, Pope, Prairie, Pulaski, Saline, Searcy, St. Francis, Union, Van Buren, White, Woodruff, Yell	Benton, Carroll, Crawford, Franklin, Johnson, Logan, Madison, Miller, Newton, Scott, Searcy, Sebastian, Washington
Expansion counties		
N/A	N/A	N/A
Premium		
$0	$0	$0
Part B giveback		
No	No	No
PCP in network		
$0	$0	$0
PCP required		
PCP required, referrals not required	PCP required, referrals not required	PCP required, referrals not required
Specialist in network		
$30	$40	$30
Inpatient hospital		
$305 per day, days 1-10; $0 per day, days 11-90	$388 per day, days 1-7; $0 per day, days 8-90	$380 per day, days 1-7; $0 per day, days 8-90
Outpatient hospital services		

$30 - $350	$40 - $380	$30 - $380
Medical deductible in network		
$0	$0	$0
Out-of-pocket in-network max		
$6,750	$6,750	$6,750
Supplemental benefits		
Dental: $2,500 every year Vision: $200 every year Hearing: $500 per ear every year Post Discharge Meals: 14 meals/7 days SilverSneakers® All members receive a $30 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products. Members who have a qualifying chronic condition and meet all other criteria also get a $45 quarterly Extra Supports allowance to help pay for certain everyday expenses, including healthy foods, OTC products, personal care products, transportation and utilities. Qualifying members who choose a high value provider as their PCP get a $30 quarterly allowance on the Extra Supports HVP Wallet.	Dental: $2,500 every year Vision: $200 every year Hearing: $500 per ear every year Post Discharge Meals: 14 meals/7 days SilverSneakers® All members receive a $15 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products. Members who have a qualifying chronic condition and meet all other criteria also get a $35 quarterly Extra Supports allowance to help pay for certain everyday expenses, including healthy foods, OTC products, personal care products, transportation and utilities.	Dental: $3,000 every year Vision: $250 every year Hearing: $500 per ear every year Post Discharge Meals: 14 meals/7 days SilverSneakers® $75 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products.
Prescription drug coverage (at preferred pharmacies)		
Rx deductible		
$400	$400	$400
Tier 1 preferred generic		
$0	$0	$0

Tier 2 generic		
$0	$0	$0
Tier 3 preferred brand		
13%	13%	13%
Tier 4 nonpreferred drug		
30%	30%	30%
Tier 5 specialty		
29%	29%	29%
LIS: Tier 1–5 (generic)		
$0, $1.65, $5.80	$0, $1.65, $5.80	$0, $1.65, $5.80
LIS: Tier 1–5 (brand)		
$0, $5, $14.40	$0, $5, $14.40	$0, $5, $14.40

NEW AND LEAD PLAN	NEW PLAN	NEW PLAN
Aetna Medicare Signature Extra (HMO-POS)	Aetna Medicare Elite (PPO)	Aetna Medicare Signature Extra Plus (PPO)
Plan number		
H2663-105	H5521-723	H5521-726
Star rating		
★★★★	★★★★½	★★★★½
Best suited for		

For clients looking for essential coverage and value, often for a $0 monthly premium.	For clients looking for competitive benefits and willing to pay a deductible on limited in-network services and all out-of-network services.	For clients looking for essential coverage and value, often for a $0 monthly premium.
Submarket		
Northwest	Central, Northwest	Northwest
Current counties		
Benton, Crawford, Sebastian, Washington	Benton, Carroll, Clark, Crawford, Faulkner, Franklin, Garland, Johnson, Logan, Madison, Montgomery, Newton, Perry, Pike, Pope, Pulaski, Saline, Scott, Sebastian, Washington, Yell	Benton, Crawford, Sebastian, Washington
Expansion counties		
N/A	N/A	N/A
Premium		
$0	$0	$0
Part B giveback		
No	No	No
PCP in network		
$0	$0	$0
PCP required		
PCP required, referrals not required	PCP required, referrals not required	PCP required, referrals not required
Specialist in network		
$25	$30	$38
Inpatient hospital		

$290 per day, days 1-10; $0 per day, days 11-90	$395 per day, days 1-7; $0 per day, days 8-90	$395 per day, days 1-7; $0 per day, days 8-90
Outpatient hospital services		
$25 - $350	$30 - $340	$38 - $395
Medical deductible in network		
$0	$750	$0
Out-of-pocket in-network max		
$4,900	$6,750	$6,500
Supplemental benefits		
Dental: $2,000 every year Vision: $225 every year Hearing: $500 per ear every year Post Discharge Meals: 14 meals/7 days SilverSneakers® $60 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products.	Dental: $3,000 every year Vision: $300 every year Hearing: $500 per ear every year Post Discharge Meals: 14 meals/7 days SilverSneakers® $170 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products.	Dental: $1,500 every year Vision: $200 every year Hearing: $500 per ear every year Post Discharge Meals: 14 meals/7 days SilverSneakers® All members receive a $15 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products. Members who have a qualifying chronic condition and meet all other criteria also get a $30 quarterly Extra Supports allowance to help pay for certain everyday expenses, including healthy foods, OTC products, personal care products, transportation and utilities.
Prescription drug coverage (at preferred pharmacies)		
Rx deductible		
$400	$600	$600
Tier 1 preferred generic		
$0	$0	$0

Tier 2 generic		
$0	$4	$4
Tier 3 preferred brand		
13%	17%	17%
Tier 4 nonpreferred drug		
30%	28%	28%
Tier 5 specialty		
29%	26%	26%
LIS: Tier 1–5 (generic)		
$0, $1.65, $5.80	$0, $1.65, $5.80	$0, $1.65, $5.80
LIS: Tier 1–5 (brand)		
$0, $5, $14.40	$0, $5, $14.40	$0, $5, $14.40

NEW PLAN	NEW PLAN	
Aetna Medicare Signature Giveback (PPO)	Aetna Medicare Signature Plus (PPO)	
Plan number		
H5521-725	H5521-722	
Star rating		
★★★★½	★★★★½	
Best suited for		
For clients looking for essential coverage and value, often for a $0 monthly premium.	For clients looking for essential coverage and value, often for a $0 monthly premium.	

Submarket		
Central, East, Northwest	Central, East, Northwest, South	
Current counties		
Benton, Crawford, Faulkner, Garland, Lonoke, Pulaski, Saline, Sebastian, Washington	Benton, Calhoun, Carroll, Clark, Columbia, Crawford, Crittenden, Dallas, Faulkner, Franklin, Garland, Grant, Hempstead, Hot Spring, Howard, Johnson, Lafayette, Logan, Lonoke, Madison, Miller, Montgomery, Nevada, Newton, Ouachita, Perry, Phillips, Pike, Poinsett, Polk, Pope, Pulaski, Saline, Scott, Sebastian, St. Francis, Union, Washington, Yell	
Expansion counties		
N/A	N/A	
Premium		
$0	$0	
Part B giveback		
$68	No	
PCP in network		
$0	$0	
PCP required		
PCP required, referrals not required	PCP required, referrals not required	
Specialist in network		
$50	$40	
Inpatient hospital		

$388 per day, days 1-7; $0 per day, days 8-90	$388 per day, days 1-7; $0 per day, days 8-90	
Outpatient hospital services		
$50 - $450	$40 - $395	
Medical deductible in network		
$0	$0	
Out-of-pocket in-network max		
$9,250	$9,250	
Supplemental benefits		
Dental: $1,500 every year Vision: $100 every year Hearing: $500 per ear every year Post Discharge Meals: 14 meals/7 days SilverSneakers®	Dental: $2,000 every year Vision: $150 every year Hearing: $500 per ear every year Post Discharge Meals: 14 meals/7 days SilverSneakers® All members receive a $15 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products. Members who have a qualifying chronic condition and meet all other criteria also get a $30 quarterly Extra Supports allowance to help pay for certain everyday expenses, including healthy foods, OTC products, personal care products, transportation and utilities.	
Prescription drug coverage (at preferred pharmacies)		
Rx deductible		
$600	$600	
Tier 1 preferred generic		
$0	$0	

Tier 2 generic		
$4	$4	
Tier 3 preferred brand		
17%	17%	
Tier 4 nonpreferred drug		
28%	28%	
Tier 5 specialty		
26%	26%	
LIS: Tier 1–5 (generic)		
$0, $1.65, $5.80	$0, $1.65, $5.80	
LIS: Tier 1–5 (brand)		
$0, $5, $14.40	$0, $5, $14.40	

Chronic Condition Special Needs Plans (C-SNPs)

Our C-SNP portfolio reflects a focused approach to growth, expanding into six new states (AR, CA, CO, IA, KY and WA).

These plans support members with diabetes mellitus, chronic heart failure and/or certain cardiovascular disorders through coordinated care, a dedicated personal care team, and targeted benefits to meet their everyday needs. Built on high-performing, value-based networks, C-SNPs deliver a predictable, easy-to-navigate experience that supports coordination and a more seamless care journey. Aetna's C-SNPs offer some of the most robust and focused benefits in the portfolio. Members benefit from $0 copays for PCP visits and certain specialists related to eligible chronic conditions, as well as access to over 200 Tier 1 chronic condition prescription drugs with a $0 copay at in-network pharmacies. Plus, members will have a monthly allowance on an Extra Benefits Card that can be used for OTC products — and for those with a qualifying condition who meet all criteria, it can also be used additionally for certain healthy foods, personal care products, transportation and utilities.

NEW PLAN
Aetna Medicare Chronic Care (HMO C-SNP)
Plan number
H2663-104
Star rating
★★★★

Best suited for
For clients looking for a C-SNP to help manage their chronic condition.
Submarket
Central, East, Northwest
Current counties
Benton, Crawford, Garland, Lonoke, Pulaski, Saline, Sebastian, Washington
Expansion counties
N/A
Premium
$0
PCP in network
$0
PCP required
PCP required, referrals not required
Specialist in network
$0 - $49
Inpatient hospital
$388 per day, days 1-7; $0 per day, days 8-90
Outpatient hospital services
$49 - $495
Medical deductible in network
$0
Out-of-pocket in-network max

$9,250
Supplemental benefits
Dental: $2,000 every year Vision: $150 every year Hearing: $500 per ear every year SilverSneakers® Members get a $30 monthly allowance on an Extra Benefits Card for certain over-the-counter (OTC) products. Members with a qualifying chronic condition who meet all other eligibility requirements can use the monthly allowance to help pay for additional everyday expenses, including certain healthy foods, personal care products, transportation, and utilities. Qualifying members who choose a high value provider as their PCP get an added $30 monthly allowance on the Extra Supports HVP Wallet.
Prescription drug coverage (at preferred pharmacies, if plan has preferred pharmacy network)
Rx deductible
$700
Tier 1 preferred generic
$0
Tier 2 generic
$5
Tier 3 preferred brand
22%
Tier 4 nonpreferred drug
25%
Tier 5 specialty
25%
LIS: Tier 1–5 (generic)
$0, $1.65, $5.80
LIS: Tier 1–5 (brand)

$0, $5, $14.40

Dual Eligible Special Needs Plans (D-SNPs)

Aetna's D-SNPs provide coordinated care solutions for members eligible for both Medicare and Medicaid, helping reduce barriers to care and improve health outcomes through a more coordinated and connected care experience.

Through coordinated Medicare and Medicaid benefits and a dedicated personal care team, these plans bring coverage and care management together to better support the whole person. Members can count on consistent, comprehensive coverage that works with their Medicaid benefits —helping ensure access to care, medications and essential services without added complexity. Plans are designed to deliver practical, day-to-day support, including competitive prescription drug coverage with $0 Tier 1 copays, dental, vision, hearing and fitness benefits. Plus, members will have a monthly allowance on an Extra Benefits Card that can be used for OTC products — and for those with a qualifying condition who meet all criteria, it can also be used additionally for certain healthy foods, personal care products, transportation and utilities. D-SNPs with "Care" in the name offer an added monthly allowance for qualifying members who choose a High Value Provider as their PCP.

LEAD PLAN		
Aetna Medicare Full Dual Care (HMO D-SNP)	Aetna Medicare Dual Extra Care (HMO D-SNP)	
Plan number		
H2663-097	H5325-007	
Star rating		

★★★★	★★★½	
Designed for		
Designed for full dual-eligibles. Enrolling: QMB+, SLMB+, FBDE. Outside of AEP and OEP, consumers are limited to special circumstance SEPs to enroll.	Designed for QMB Only and full dual-eligibles. Enrolling: QMB, QMB+, SLMB+, FBDE. Outside of AEP and OEP, consumers are limited to special circumstance SEPs to enroll.	
Submarket		
Central, East, Northwest, South	Central, Northwest	
Current counties		
Arkansas, Benton, Calhoun, Carroll, Clark, Cleburne, Columbia, Conway, Crawford, Crittenden, Cross, Dallas, Faulkner, Franklin, Garland, Grant, Greene, Hempstead, Hot Spring, Howard, Jackson, Johnson, Lafayette, Lawrence, Lee, Logan, Lonoke, Madison, Miller, Mississippi, Montgomery, Nevada, Newton, Ouachita, Perry, Phillips, Pike, Poinsett, Polk, Pope, Prairie, Pulaski, Saline, Scott, Searcy, Sebastian, St. Francis, Union, Van Buren, Washington, White, Woodruff, Yell	Benton, Carroll, Clark, Cleburne, Crawford, Faulkner, Franklin, Garland, Hot Spring, Johnson, Logan, Madison, Montgomery, Newton, Perry, Pulaski, Saline, Scott, Searcy, Sebastian, Washington	
Expansion counties		
N/A	N/A	
PCP in network		
$0	$0	
PCP required		
PCP required, referrals not required	PCP required, referrals not required	

Specialist in network		
$0	$0	
Out-of-pocket in-network max		
$9,850	$9,850	
Supplemental benefits		
Dental: $3,250 every year Vision: $300 every year Hearing: $1,250 per ear every year Transportation: 12 one-way trips every year Post Discharge Meals: 14 meals/7 days SilverSneakers Fall Prevention: $100 every year Chiropractic: twelve visits every year Members get a $200 monthly allowance on an Extra Benefits Card for certain over-the-counter (OTC) products. Members with a qualifying chronic condition who meet all other eligibility requirements can use the monthly allowance to help pay for additional everyday expenses, including certain healthy foods, personal care products, transportation, and utilities. Qualifying members who choose a high value provider as their PCP get an added $30 monthly allowance on the Extra Supports HVP Wallet.	Dental: $1,750 every year Vision: $325 every year Hearing: $500 per ear every year Transportation: 12 one-way trips every year Post Discharge Meals: 14 meals/7 days SilverSneakers Fall Prevention: $100 every year Chiropractic: twelve visits every year Members get a $130 monthly allowance on an Extra Benefits Card for certain over-the-counter (OTC) products. Members with a qualifying chronic condition who meet all other eligibility requirements can use the monthly allowance to help pay for additional everyday expenses, including certain healthy foods, personal care products, transportation, and utilities. Qualifying members who choose a high value provider as their PCP get an added $30 monthly allowance on the Extra Supports HVP Wallet.	
Prescription drug coverage		
Rx deductible		
$700	$700	
Deductible tiers		

Tier 3 - Tier 5	Tier 3 - Tier 5	
Tier 1 preferred generic		
$0	$0	
Tier 2 generic		
$0	$0	
Tier 3 preferred brand		
17%	9%	
Tier 4 nonpreferred drug		
25%	25%	
Tier 5 specialty		
25%	25%	
LIS: Tier 1–5 (generic)		
$0, $1.65, $5.80	$0, $1.65, $5.80	
LIS: Tier 1–5 (brand)		
$0, $5, $14.40	$0, $5, $14.40	

Prescription drug plans (PDPs)

In 2027, we will offer SilverScript Choice as a non-commissionable product in 22 states including Washington, D.C. We will continue to pay renewal commissions on all existing commissionable SilverScript PDP business.

SilverScript Choice
Plan highlights
Solid generic and brand coverage
Monthly plan premium
$124.10
Deductible
$700 - Tier 1 - Tier 5
Rx OOP
$2,400
90-day supply
3x retail cost sharing
Pharmacy network
Large national pharmacy network consisting of chains and local pharmacies
Prescription drug coverage at any network pharmacy
Tier 1 preferred generic
$0

Tier 2 generic
$7
Tier 3 preferred brand
23%
Tier 4 nonpreferred drug
34%
Tier 5 specialty
25%
LIS: Tier 1–5 (generic)
$0, $1.65, $5.80
LIS: Tier 1–5 (brand)
$0, $5, $14.40