# Colorado highlights

- A complete product portfolio to meet your clients' Medicare needs: MA-only, MAPD, C-SNP, D-SNP.
- New for 2027: Aetna Medicare Chronic Care (HMO C-SNP) in Adams, Boulder, Broomfield and Denver counties! Our C-SNP is designed for individuals who want a $0 premium plan and are looking for support to help manage their diabetes mellitus, chronic heart failure, and/or certain cardiovascular disorders. Each member has access to a dedicated personal care team.
- NEW H5593-008 offers the richest benefits compared to our PPO offering in the same area, featuring $0 premium; $0 PCP copay; dental, vision and hearing; and $0 Tier 1 and Tier 2 drugs at preferred pharmacies. Built on a provider network anchored in value-based care and high-performing providers, this plan promotes primary care centric benefits and coordination.
- NEW HMO D-SNP H5593-005 is designed for full dual eligibles who are looking for extra benefits and easier access to care. This plan includes:
  - Dental, vision, hearing and SilverSneakers.
  - A dedicated personal care team that supports health and access to care.
  - OTC Wallet on an Extra Benefits Card that can be used for OTC products. For members who meet SSBCI eligibility criteria, the wallet upgrades to the Extra Supports Wallet to use for healthy foods and certain everyday expenses.
  - SSBCI-qualifying members who choose a High Value Provider as their PCP get an added allowance.
- Aetna Medicare Signature plans offer affordable, comprehensive coverage, featuring $0 PCP, dental, vision and hearing, with $0 annual physicals, preventive screenings, and Tier 1 drugs at preferred pharmacies. These plans include preventive dental, with optional comprehensive coverage for an additional premium.
- H5521-378 offers additional benefits for veterans or individuals who already have prescription drug coverage. It offers a Part B premium reduction; dental, vision, hearing; and a quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products.
- H5521-443 provides additional value for consumers with Extra Help or those willing to pay a low premium for richer supplemental benefits. For all members, this plan features dental, vision, hearing, SilverSneakers®, OTC coverage and $0 copays for in-network PCP.
  - Those who meet SSBCI eligibility criteria and are eligible for Extra Help get an Extra Supports Wallet to help pay for certain everyday expenses including healthy foods, utilities, and transportation.

- We will no longer offer Individual Medicare Advantage plans in Archuleta, Clear Creek, Conejos, Crowley, Custer, Elbert, Gilpin, Huerfano, Jackson, Las Animas, Lincoln, Morgan, Park, Saguache, Teller and Washington counties. Medicare Supplement plans and ancillary products remain available.
- We will no longer offer SilverScript Choice PDP in CO in 2027. Brokers are encouraged to help members find alternate coverage this AEP.

# 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.

| LEAD PLAN |
| --- |
| Aetna Medicare Eagle (PPO) |
| **Plan number** |
| H5521-378 |
| **Star rating** |
|  |
| **Best suited for** |
| For veterans or other clients with existing Rx coverage who are interested in Part C and supplemental coverage. |
| **Submarket** |
| Denver Metro, Northern, Southern, Western |
| **Current counties** |

| |
|---|
| Adams, Arapahoe, Boulder, Broomfield, Delta, Denver, Douglas, El Paso, Fremont, Grand, Jefferson, La Plata, Larimer, Mesa, Montrose, Pueblo, Weld |
| **Expansion counties** |
| N/A |
| **Premium** |
| $0 |
| **Part B giveback** |
| $85 |
| **PCP in network** |
| $0 |
| **PCP required** |
| PCP not required, referrals not required |
| **Specialist in network** |
| $40 |
| **Inpatient hospital** |
| $325 per day, days 1-5; $0 per day, days 6-90 |
| **Outpatient hospital services** |
| $325 |
| **Medical deductible in network** |
| $0 |
| **Out-of-pocket in-network max** |
| $5,500 |
| **Supplemental benefits** |

Dental: $2,000 every year
Vision: $200 every year
Hearing: $1,250 per ear every year
Post Discharge Meals: 14 meals/7 days
SilverSneakers®
$90 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.

| NEW AND LEAD PLAN | NEW PLAN | NEW PLAN |
|---|---|---|
| Aetna Medicare Prime (HMO) | Aetna Medicare Signature (HMO) | Aetna Medicare Signature (HMO) |
| **Plan number** | | |
| H5593-008 | H5593-006 | H5593-007 |
| **Star rating** | | |
| ★★★★ | ★★★★ | ★★★★ |
| **Best suited for** | | |
| For clients looking for affordability and enhanced benefits, who are comfortable with a specific provider network. | 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** | | |

| | | |
|---|---|---|
| Denver Metro | Denver Metro | Southern, Western |
| **Current counties** | | |
| Adams, Arapahoe, Denver, Douglas, Jefferson | Adams, Arapahoe, Denver, Douglas, Jefferson | El Paso, Fremont, La Plata, Mesa, Pueblo |
| **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 required | PCP required, referrals not required | PCP required, referrals not required |
| **Specialist in network** | | |
| $30 | $40 | $45 |
| **Inpatient hospital** | | |
| $375 per day, days 1-5; $0 per day, days 6-90 | $400 per day, days 1-5; $0 per day, days 6-90 | $400 per day, days 1-5; $0 per day, days 6-90 |
| **Outpatient hospital services** | | |
| $375 | $400 | $400 |
| **Medical deductible in network** | | |
| $0 | $0 | $0 |
| **Out-of-pocket in-network max** | | |

| | | |
|---|---|---|
| $5,000 | $5,900 | $5,900 |
| **Supplemental benefits** | | |
| Dental: $1,250 every year<br>Vision: $250 every year<br>Hearing: $1,250 per ear every year<br>Post Discharge Meals: 14 meals/7 days<br>SilverSneakers®<br>$30 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products. | Dental: $500 every year<br>Vision: $100 every year<br>Hearing: $1,250 per ear every year<br>Post Discharge Meals: 14 meals/7 days<br>SilverSneakers®<br>$25 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products. | Dental: $500 every year<br>Vision: $100 every year<br>Hearing: $1,250 per ear every year<br>Post Discharge Meals: 14 meals/7 days<br>SilverSneakers®<br>$30 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 | $700 |
| **Tier 1 preferred generic** | | |
| $0 | $0 | $0 |
| **Tier 2 generic** | | |
| $0 | $0 | $5 |
| **Tier 3 preferred brand** | | |
| 17% | 13% | 17% |
| **Tier 4 nonpreferred drug** | | |
| 30% | 30% | 28% |
| **Tier 5 specialty** | | |
| 29% | 29% | 25% |
| **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 |

| LEAD PLAN | LEAD PLAN | LEAD PLAN |
|---|---|---|
| Aetna Medicare Signature (PPO) | Aetna Medicare Signature (PPO) | Aetna Medicare Value Care (PPO) |
| **Plan number** | | |
| H5521-207 | H5521-250 | H5521-443 |
| **Star rating** | | |
| ★★★★½ | ★★★★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. | For LIS-eligible clients that need to balance cost & coverage, as well as non-LIS clients who want additional benefits over the Signature plan. |
| **Submarket** | | |
| Southern, Western | Denver Metro, Northern | Denver Metro, Northern, Southern, Western |
| **Current counties** | | |
| El Paso, Fremont, La Plata, Mesa, Montrose, Pueblo | Adams, Denver, Grand, Jefferson, Larimer | Adams, Arapahoe, Boulder, Broomfield, Delta, Denver, Douglas, El Paso, Fremont, Grand, Jefferson, La Plata, Larimer, Mesa, Montrose, Weld |
| **Expansion counties** | | |
| N/A | N/A | N/A |
| **Premium** | | |

| | | |
|---|---|---|
| $0 | $0 | $18.40 |
| **Part B giveback** | | |
| No | No | No |
| **PCP in network** | | |
| $0 | $0 | $0 |
| **PCP required** | | |
| PCP not required, referrals not required | PCP not required, referrals not required | PCP not required, referrals not required |
| **Specialist in network** | | |
| $50 | $50 | $40 |
| **Inpatient hospital** | | |
| $400 per day, days 1-5; $0 per day, days 6-90 | $400 per day, days 1-5; $0 per day, days 6-90 | $400 per day, days 1-5; $0 per day, days 6-90 |
| **Outpatient hospital services** | | |
| $400 | $400 | $400 |
| **Medical deductible in network** | | |
| $0 | $0 | $0 |
| **Out-of-pocket in-network max** | | |
| $7,150 | $7,150 | $7,150 |
| **Supplemental benefits** | | |

| | | |
|---|---|---|
| Dental: Preventive Dental Covered<br>Vision: $150 every year<br>Hearing: $1,250 per ear every year<br>Optional dental<br>SilverSneakers® | Dental: Preventive Dental Covered<br>Vision: $100 every year<br>Hearing: $500 per ear every year<br>Optional dental<br>SilverSneakers® | Dental: $1,500 every year<br>Vision: $150 every year<br>Hearing: $1,250 per ear every year<br>Post Discharge Meals: 14 meals/7 days<br>SilverSneakers®<br>All members receive a $50 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products. Members who have a qualifying chronic condition, get Extra Help and meet all other criteria also get a $50 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. |
| **Prescription drug coverage (at preferred pharmacies)** | | |
| **Rx deductible** | | |
| $700 | $700 | $700 |
| **Tier 1 preferred generic** | | |
| $0 | $0 | $0 |
| **Tier 2 generic** | | |
| $5 | $5 | $5 |
| **Tier 3 preferred brand** | | |
| 17% | 17% | 17% |
| **Tier 4 nonpreferred drug** | | |

| | | |
|---|---|---|
| 28% | 28% | 28% |
| **Tier 5 specialty** | | |
| 25% | 25% | 25% |
| **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 |

# 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** |
| H5593-004 |
| **Star rating** |
| ★★★★ |

| Best suited for |
| --- |
| For clients looking for a C-SNP to help manage their chronic condition. |
| **Submarket** |
| Denver Metro |
| **Current counties** |
| Adams, Boulder, Broomfield, Denver |
| **Expansion counties** |
| N/A |
| **Premium** |
| $0 |
| **PCP in network** |
| $0 |
| **PCP required** |
| PCP required, referrals required |
| **Specialist in network** |
| $0 - $25 |
| **Inpatient hospital** |
| $320 per day, days 1-6; $0 per day, days 7-90 |
| **Outpatient hospital services** |
| $320 |
| **Medical deductible in network** |
| $0 |
| **Out-of-pocket in-network max** |

| |
|---|
| $6,750 |
| **Supplemental benefits** |
| Dental: $1,000 every year<br>Vision: $100 every year<br>Hearing: $1,250 per ear every year<br>SilverSneakers®<br>Members get a $50 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.

| NEW PLAN |
| --- |
| Aetna Medicare Full Dual Extra Care (HMO D-SNP) |
| **Plan number** |
| H5593-005 |
| **Star rating** |

★★★★

| 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. |
| **Submarket** |
| Denver Metro, Northern, Southern, Western |
| **Current counties** |
| Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Fremont, Jefferson, La Plata, Larimer, Mesa, Pueblo, Weld |
| **Expansion counties** |
| N/A |
| **PCP in network** |
| $0 |
| **PCP required** |
| PCP required, referrals not required |
| **Specialist in network** |
| $0 |
| **Out-of-pocket in-network max** |
| $9,850 |
| **Supplemental benefits** |

Dental: $3,000 every year
Vision: $200 every year
Hearing: $1,500 per ear every year
Post Discharge Meals: 14 meals/7 days
SilverSneakers
Fall Prevention: $100 every year
Members get a $225 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 |
| **Deductible tiers** |
| Tier 3 - Tier 5 |
| **Tier 1 preferred generic** |
| $0 |
| **Tier 2 generic** |
| $0 |
| **Tier 3 preferred brand** |
| 9% |
| **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