aetna®

Indiana highlights

- Our robust product portfolio of MAPD, MA-only and C-SNP plans includes $0 premium, $0 PCP, and $0 tier 1 copays at preferred pharmacies. Maintaining stable benefits and a strong network of providers.
- Aetna Medicare Signature Extra PPO in NW & NE Indiana is designed for members looking for comprehensive “extras” to complement their medical coverage, such as a quarterly fitness allowance.
- EAGLE GIVEBACK PPO: $0 premium plan for veterans or individuals who already have prescription drug coverage. Plan features a Part B premium reduction, $0 PCP, dental, vision, hearing, and OTC.
- NEW! Chronic Care C-SNP in Central and NW Indiana. Designed for individuals who want a $0 premium plan to help manage diabetes mellitus, chronic heart failure, and/or certain cardiovascular disorders.
- Continue to offer the Chronic Care Total C-SNP plans in Central and NW Indiana. Both C-SNPs include comprehensive care management and $0 PCP; $0 copay for certain in-network specialists; dental, vision, hearing; $0 Tier 1; and low cost-shares for certain drugs used to treat cardiovascular, congestive heart failure, and diabetes mellitus. They also include an OTC Wallet on an Extra Benefits Card that can be used for OTC products — and for those who meet SSBCI eligibility criteria, it upgrades to the Extra Supports Wallet to use for healthy foods and certain everyday expenses. Qualifying members who choose a High Value Provider as their PCP get an added allowance.
- We will no longer offer SilverScript Choice PDP in IN 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.

Aetna Medicare Eagle (PPO)
Plan number
H5521-286
Star rating
★★★★½
Best suited for
For veterans or other clients with existing Rx coverage who are interested in Part C and supplemental coverage.
Submarket
Central, Northeast, Northwest, Southern, Southwest
Current counties

Allen, Bartholomew, Benton, Blackford, Boone, Brown, Carroll, Clay, De Kalb, Dubois, Elkhart, Floyd, Franklin, Fulton, Greene, Hamilton, Hancock, Hendricks, Huntington, Jasper, Jay, Johnson, Knox, La Porte, Lake, Madison, Marion, Marshall, Martin, Miami, Montgomery, Newton, Orange, Parke, Posey, Putnam, Shelby, Spencer, St. Joseph, Starke, Sullivan, Wabash, Washington, Whitley
Expansion counties
N/A
Premium
$0
Part B giveback
$70
PCP in network
$0
PCP required
PCP not required, referrals not required
Specialist in network
$40
Inpatient hospital
$300 per day, days 1-6; $0 per day, days 7-90
Outpatient hospital services
$40 - $300
Medical deductible in network
$0
Out-of-pocket in-network max
$5,200
Supplemental benefits

Dental: $3,750 every year
Vision: $300 every year
Hearing: $1,250 per ear every year
Post Discharge Meals: 14 meals/7 days
SilverSneakers®
$100 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
Aetna Medicare Signature (HMO-POS)	Aetna Medicare Signature (HMO-POS)	Aetna Medicare Signature (PPO)
Plan number		
H3192-020	H3192-005	H5521-099
Star rating		
★★★	★★★	★★★★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 clients looking for essential coverage and value, often for a $0 monthly premium.
Submarket		

Southern, Southwest	Northwest	Northeast
Current counties		
Daviess, Dubois, Floyd, Gibson, Knox, Martin, Orange, Pike, Posey, Spencer, Vanderburgh, Warrick, Washington	Benton, Carroll, Cass, Fulton, Jasper, Lake, Marshall, Miami, Porter, Pulaski, St. Joseph, Starke	Allen, Blackford, Elkhart, Huntington, Wabash, Whitley
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 not required, referrals not required
Specialist in network		
$50	$50	$50
Inpatient hospital		
$400 per day, days 1-7; $0 per day, days 8-90	$350 per day, days 1-7; $0 per day, days 8-90	$325 per day, days 1-7; $0 per day, days 8-90
Outpatient hospital services		
$0 - $325	$0 - $315	$40 - $325
Medical deductible in network		
$0	$0	$0

Out-of-pocket in-network max		
$6,500	$6,750	$5,000
Supplemental benefits		
Dental: Preventive Dental Covered Vision: $100 every year Hearing: $500 per ear every year OTC: $15 quarterly Optional dental SilverSneakers®	Dental: Preventive Dental Covered Vision: $100 every year Hearing: $750 per ear every year OTC: $15 quarterly Optional dental SilverSneakers®	Dental: Preventive Dental Covered Vision: $125 every year Hearing: $500 per ear every year Optional dental SilverSneakers®
Prescription drug coverage (at preferred pharmacies)		
Rx deductible		
$700	$500	$500
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%	28%	28%
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 Signature (PPO)
Plan number		
H5521-223	H5521-231	H5521-211
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 clients looking for essential coverage and value, often for a $0 monthly premium.
Submarket		
Northwest	Central	Southern, Southwest
Current counties		
Benton, Carroll, Fulton, Jasper, La Porte, Lake, Marshall, Miami, Newton, St. Joseph, Starke	Bartholomew, Boone, Brown, Clay, Franklin, Greene, Hamilton, Hancock, Hendricks, Johnson, Madison, Marion, Montgomery, Parke, Putnam, Shelby, Sullivan	Dubois, Floyd, Knox, Martin, Orange, Posey, Spencer, 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 not required, referrals not required	PCP not required, referrals not required	PCP not required, referrals not required
Specialist in network		
$40	$40	$45
Inpatient hospital		
$375 per day, days 1-7; $0 per day, days 8-90	$325 per day, days 1-7; $0 per day, days 8-90	$300 per day, days 1-6; $0 per day, days 7-90
Outpatient hospital services		
$40 - $375	$35 - $325	$40 - $275
Medical deductible in network		
$0	$0	$0
Out-of-pocket in-network max		
$6,350	$5,900	$5,200
Supplemental benefits		
Dental: $750 every year Vision: $100 every year Hearing: $500 per ear every year SilverSneakers®	Dental: Preventive Dental Covered Vision: $100 every year Hearing: $500 per ear every year Optional dental SilverSneakers®	Dental: $750 every year Vision: $150 every year Hearing: $750 per ear every year OTC: $15 quarterly SilverSneakers®
Prescription drug coverage (at preferred pharmacies)		

Rx deductible		
$500	$500	$500
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		
28%	28%	28%
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

Aetna Medicare Signature Extra (PPO)	Aetna Medicare Value Care (PPO)	Aetna Medicare Value Care (PPO)
Plan number		
H5521-406	H5521-496	H5521-302
Star rating		

★★★★½	★★★★½	★★★★½
Best suited for		
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.	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		
Northeast, Northwest	Northeast, Northwest	Central
Current counties		
Allen, Benton, Blackford, Carroll, Elkhart, Fulton, Huntington, Jasper, Lake, Marshall, Miami, St. Joseph, Starke, Wabash, Whitley	Allen, Benton, Blackford, Carroll, De Kalb, Elkhart, Fulton, Huntington, Jasper, Jay, La Porte, Lake, Marshall, Miami, Newton, St. Joseph, Starke, Wabash, Whitley	Bartholomew, Boone, Brown, Clay, Franklin, Greene, Hamilton, Hancock, Hendricks, Madison, Marion, Montgomery, Parke, Putnam, Shelby, Sullivan
Expansion counties		
N/A	N/A	N/A
Premium		
$0	$0	$17
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		
$40	$40	$40

Inpatient hospital		
$320 per day, days 1-7; $0 per day, days 8-90	$365 per day, days 1-8; $0 per day, days 9-90	$320 per day, days 1-7; $0 per day, days 8-90
Outpatient hospital services		
$45 - $320	$30 - $365	$35 - $315
Medical deductible in network		
$0	$0	$0
Out-of-pocket in-network max		
$6,350	$6,750	$5,200
Supplemental benefits		
Dental: $2,000 every year Vision: $125 every year Hearing: $1,000 per ear every year SilverSneakers®	Dental: $1,000 every year Vision: $100 every year Hearing: $750 per ear every year 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, get Extra Help 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. Qualifying members who choose a high value provider as their PCP get a $30 quarterly allowance on the Extra Supports HVP Wallet.	Dental: $1,500 every year Vision: $175 every year Hearing: $500 per ear every year SilverSneakers® All members receive a $25 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 $30 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		

$500	$500	$500
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		
28%	28%	28%
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	NEW PLAN	
Aetna Medicare Chronic Care (HMO C-SNP)	Aetna Medicare Chronic Care (HMO C-SNP)	Aetna Medicare Chronic Care Total (HMO C-SNP)
Plan number		
H3192-037	H3192-036	H3192-028
Star rating		
★★★	★★★	★★★

Best suited for		
For clients looking for a C-SNP to help manage their chronic condition.	For clients looking for a C-SNP to help manage their chronic condition.	For clients looking for a C-SNP to help manage their chronic condition. May be a good fit for those that are dual eligible & receive cost share protection. Medicaid is not required to enroll.
Submarket		
Northwest	Central	Northwest
Current counties		
Carroll, Lake	Boone, Brown, Hamilton, Hancock, Hendricks, Madison, Marion, Morgan, Putnam, Shelby	Carroll, Lake
Expansion counties		
N/A	N/A	N/A
Premium		
$0	$0	$0
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		
$0 - $40	$0 - $35	0% - 20%
Inpatient hospital		
$436 per day, days 1-7; $0 per day, days 8-90	$436 per day, days 1-7; $0 per day, days 8-90	$2200 per stay
Outpatient hospital services		

$400	$400	20%
Medical deductible in network		
$0	$0	$283
Out-of-pocket in-network max		
$7,150	$7,150	$9,850
Supplemental benefits		
Dental: $750 every year Vision: $125 every year Hearing: $500 per ear every year SilverSneakers® Members get a $17 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: $750 every year Vision: $100 every year Hearing: $750 per ear every year SilverSneakers® Members get a $17 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: $250 every year Hearing: $750 per ear every year SilverSneakers® Members get a $67 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	$700	$700
Tier 1 preferred generic		
$0	$0	$0
Tier 2 generic		

$5	$5	$0
Tier 3 preferred brand		
22%	22%	17%
Tier 4 nonpreferred drug		
25%	25%	25%
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

Aetna Medicare Chronic Care Total (HMO C-SNP)

Plan number
H3192-029
Star rating
★★★
Best suited for
For clients looking for a C-SNP to help manage their chronic condition. May be a good fit for those that are dual eligible & receive cost share protection. Medicaid is not required to enroll.

Submarket
Central
Current counties
Boone, Brown, Hamilton, Hancock, Hendricks, Madison, Marion, Morgan, Putnam, Shelby
Expansion counties
N/A
Premium
$0
PCP in network
$0
PCP required
PCP required, referrals not required
Specialist in network
0% - 20%
Inpatient hospital
$2241 per stay
Outpatient hospital services
20%
Medical deductible in network
$283
Out-of-pocket in-network max
$9,850

Supplemental benefits
Dental: $1,750 every year Vision: $250 every year Hearing: $750 per ear every year SilverSneakers® Members get a $67 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
$0
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