aetna®

Michigan highlights

- Our robust product portfolio of MAPD, MA-only, D-SNP and C-SNP plans. We're maintaining stable benefits and a strong network of providers.
- Aetna Medicare Signature Extra PPO in SE MI and SW MI 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, robust dental, vision, hearing, and OTC.
- All SNPs have comprehensive care management.
- HIDE D-SNP (in 10 counties) & Coordinated D-SNP (in 29 counties) includes 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. Robust coverage for dental, vision and hearing.
- Chronic Care C-SNP is for individuals who want a $0 premium plan to help manage diabetes mellitus, chronic heart failure, and/or certain cardiovascular disorders. Offers $0 copays for PCP and certain in-network specialists; dental, vision, hearing; $0 Tier 1 drugs; and low cost-shares for certain drugs used for qualifying chronic conditions. It also offers 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 Individual Medicare Advantage plans in Alger, Baraga, Gladwin, Houghton, Iron, Keweenaw, Luce, Ogemaw and Ontonagon 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.

Aetna Medicare Eagle (PPO)
Plan number
H5521-286
Star rating

Best suited for
For veterans or other clients with existing Rx coverage who are interested in Part C and supplemental coverage.
Submarket
Middle, Northern, Southeast, Southwest, Upper Peninsula
Current counties

Arenac, Barry, Bay, Benzie, Branch, Calhoun, Clinton, Crawford, Delta, Dickinson, Eaton, Emmet, Genesee, Grand Traverse, Gratiot, Hillsdale, Ingham, Ionia, Jackson, Kalamazoo, Kalkaska, Kent, Lake, Lenawee, Livingston, Macomb, Manistee, Marquette, Mason, Mecosta, Menominee, Missaukee, Monroe, Montcalm, Muskegon, Newaygo, Oakland, Osceola, Ottawa, Roscommon, Saginaw, Sanilac, Shiawassee, St. Clair, St. Joseph, Tuscola, Van Buren, Washtenaw, Wayne, Wexford
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		
H3192-003	H3192-010	H5521-219
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		

Southeast	Middle, Northern	Southwest
Current counties		
Clinton, Genesee, Hillsdale, Ingham, Jackson, Lapeer, Lenawee, Livingston, Macomb, Monroe, Oakland, Shiawassee, St. Clair, Washtenaw, Wayne	Antrim, Arenac, Bay, Benzie, Charlevoix, Crawford, Emmet, Grand Traverse, Gratiot, Kalkaska, Leelanau, Manistee, Missaukee, Otsego, Roscommon, Saginaw, Sanilac, Tuscola, Wexford	Barry, Branch, Calhoun, Eaton, Ionia, Kalamazoo, Kent, Lake, Mason, Mecosta, Montcalm, Muskegon, Newaygo, Osceola, Ottawa, Van Buren
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		
$45	$45	$45
Inpatient hospital		
$350 per day, days 1-7; $0 per day, days 8-90	$375 per day, days 1-7; $0 per day, days 8-90	$330 per day, days 1-7; $0 per day, days 8-90
Outpatient hospital services		
$0 - $350	$0 - $350	$35 - $300
Medical deductible in network		

$0	$0	$0
Out-of-pocket in-network max		
$6,750	$6,350	$5,200
Supplemental benefits		
Dental: $1,000 every year Vision: $100 every year Hearing: $500 per ear every year SilverSneakers® $15 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products.	Dental: $1,000 every year Vision: $100 every year Hearing: $500 per ear every year OTC: $15 quarterly SilverSneakers®	Dental: $1,250 every year Vision: $175 every year Hearing: $1,000 per ear every year OTC: $25 quarterly SilverSneakers®
Prescription drug coverage (at preferred pharmacies)		
Rx deductible		
$500	$400	$500
Tier 1 preferred generic		
$0	$0	$0
Tier 2 generic		
$5	$0	$5
Tier 3 preferred brand		
17%	13%	17%
Tier 4 nonpreferred drug		
28%	30%	28%
Tier 5 specialty		
28%	29%	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	
Aetna Medicare Signature (PPO)	Aetna Medicare Signature (PPO)	Aetna Medicare Enhanced (PPO)
Plan number		
H5521-214	H5521-285	H5521-194
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 willing to pay a premium for additional Part C and supplemental coverage.
Submarket		
Southeast	Middle, Northern, Upper Peninsula	Southwest
Current counties		
Clinton, Genesee, Hillsdale, Ingham, Jackson, Lenawee, Livingston, Macomb, Oakland, Shiawassee, St. Clair, Washtenaw, Wayne	Arenac, Bay, Benzie, Crawford, Delta, Dickinson, Emmet, Grand Traverse, Gratiot, Kalkaska, Manistee, Marquette, Menominee, Missaukee, Roscommon, Saginaw, Sanilac, Tuscola, Wexford	Barry, Branch, Calhoun, Eaton, Ionia, Kalamazoo, Kent, Lake, Mason, Mecosta, Montcalm, Muskegon, Newaygo, Osceola, Ottawa, Van Buren
Expansion counties		
N/A	N/A	N/A

Premium		
$0	$0	$30
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	$45	$40
Inpatient hospital		
$295 per day, days 1-7; $0 per day, days 8-90	$315 per day, days 1-6; $0 per day, days 7-90	$400 per day, days 1-6; $0 per day, days 7-90
Outpatient hospital services		
$35 - $295	$45 - $315	$35 - $275
Medical deductible in network		
$0	$0	$0
Out-of-pocket in-network max		
$5,200	$5,200	$4,900
Supplemental benefits		

Dental: $2,500 every year Vision: $175 every year Hearing: $1,500 per ear every year SilverSneakers® $75 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products.	Dental: $500 every year Vision: $125 every year Hearing: $500 per ear every year SilverSneakers®	Dental: $1,500 every year Vision: $275 every year Hearing: $1,500 per ear every year SilverSneakers®
Prescription drug coverage (at preferred pharmacies)		
Rx deductible		
$400	$400	$500
Tier 1 preferred generic		
$0	$0	$0
Tier 2 generic		
$0	$0	$5
Tier 3 preferred brand		
13%	13%	17%
Tier 4 nonpreferred drug		
30%	30%	28%
Tier 5 specialty		
29%	29%	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 Signature Extra (PPO)	Aetna Medicare Value Care (PPO)
Plan number		
H5521-404	H5521-407	H5521-399
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		
Southeast	Southwest	Southeast
Current counties		
Clinton, Genesee, Hillsdale, Ingham, Jackson, Lenawee, Livingston, Macomb, Oakland, Shiawassee, St. Clair, Washtenaw, Wayne	Barry, Branch, Calhoun, Eaton, Ionia, Kalamazoo, Kent, Lake, Mason, Mecosta, Montcalm, Muskegon, Newaygo, Osceola, Ottawa, Van Buren	Clinton, Genesee, Hillsdale, Ingham, Jackson, Lenawee, Livingston, Macomb, Oakland, Shiawassee, St. Clair, Washtenaw, Wayne
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	$45	$20
Inpatient hospital		
$300 per day, days 1-8; $0 per day, days 9-90	$325 per day, days 1-8; $0 per day, days 9-90	$300 per day, days 1-7; $0 per day, days 8-90
Outpatient hospital services		
$35 - $300	$35 - $300	$20 - $300
Medical deductible in network		
$0	$0	$0
Out-of-pocket in-network max		
$4,900	$5,200	$5,900
Supplemental benefits		

Dental: $2,000 every year Vision: $175 every year Hearing: $1,000 per ear every year SilverSneakers® $60 quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products.	Dental: $1,000 every year Vision: $125 every year Hearing: $500 per ear every year SilverSneakers®	Dental: $2,750 every year Vision: $250 every year Hearing: $1,250 per ear every year SilverSneakers® All members receive a $100 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	$400	$400
Tier 1 preferred generic		
$0	$0	$0
Tier 2 generic		
$5	$0	$0
Tier 3 preferred brand		
17%	13%	13%
Tier 4 nonpreferred drug		
28%	30%	30%

Tier 5 specialty		
28%	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

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.

Aetna Medicare Chronic Care (HMO C-SNP)
Plan number
H3192-033
Star rating
★★★

Best suited for
For clients looking for a C-SNP to help manage their chronic condition.
Submarket
Southeast
Current counties
Clinton, Genesee, Hillsdale, Ingham, Jackson, Lapeer, Lenawee, Livingston, Macomb, Monroe, Oakland, Shiawassee, St. Clair, Washtenaw, Wayne
Expansion counties
N/A
Premium
$0
PCP in network
$0
PCP required
PCP required, referrals not required
Specialist in network
$0 - $25
Inpatient hospital
$436 per day, days 1-7; $0 per day, days 8-90
Outpatient hospital services
$400
Medical deductible in network
$0
Out-of-pocket in-network max

$7,150
Supplemental benefits
Dental: $2,000 every year Vision: $200 every year Hearing: $1,000 per ear every year SilverSneakers® Members get a $27 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
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

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.

Aetna Medicare Dual Care (HMO D-SNP)	Aetna Medicare HIDE (HMO D-SNP)	
Plan number		
H3192-007	H9314-001	
Star rating		

★★★	Not yet available	
Designed for		
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.	Designed for full dual-eligibles. Enrolling: QMB+, SLMB+, FBDE. Must be enrolled in full Medicaid benefits and in managed care. Integrated SEP available.	
Submarket		
Middle, Southeast, Southwest	Southeast, Southwest	
Current counties		
Allegan, Clinton, Eaton, Genesee, Hillsdale, Huron, Ingham, Ionia, Jackson, Kent, Lake, Lapeer, Lenawee, Livingston, Mason, Mecosta, Monroe, Montcalm, Muskegon, Newaygo, Oakland, Oceana, Osceola, Ottawa, Sanilac, Shiawassee, St. Clair, Tuscola, Washtenaw	Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, Macomb, St. Joseph, Van Buren, Wayne	
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: $2,000 every year Vision: $250 every year Hearing: $1,000 per ear every year Post Discharge Meals: 14 meals/7 days SilverSneakers Fall Prevention: $150 every year Chiropractic: twelve visits every year Members get a $191 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: $2,000 every year Vision: $250 every year Hearing: $1,500 per ear every year Transportation: Covered Post Discharge Meals: 28 meals/14 days SilverSneakers Fall Prevention: $100 every year Chiropractic: twelve visits every year Members get a $229 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.	
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	
9%	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
$100.50
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