



First Look at Aetna's 2017 Individual Medicare Advantage and Part D Product Offerings







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- You can't share this First Look document with beneficiaries.
- You can't post it on any public websites.
- You can't discuss any information in this document (i.e., 2017 plans or benefits) with beneficiaries until on or after 10/1.
- Information in this document is subject to change until fully approved by CMS.

THANKS FOR YOUR COOPERATION AND COMPLIANCE WITH THIS GUIDANCE.



Now that Aetna and Coventry Health Care have come together as one team, our Individual Medicare Advantage product offering is stronger than ever!

- Aetna Medicare Advantage plans (MA, MAPD) are available in 38 states plus D.C., and our standalone Medicare prescription drug plans (PDP) are in all 50 states.
- We have expanded products to 134 counties, 102 of them will have \$0 premium plans.*
- We have more \$0 premium plans than ever before 656 out of 863 counties will have \$0 premium plan options.
- Coverage for a free membership to a fitness facility is included for most plans.





Prescription Drug Plans

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Power up your portfolio with Aetna and Coventry Medicare Part D!

We offer three PDPs in all 50 states and D.C.: Aetna Saver, First Health Value Plus, and First Health Premier Plus. All of our PDP plans are fully commissionable. And the Aetna Saver plan is below the LIS benchmark in every state except for Florida.

PDP referral program

Through our referral program, you can earn a one-time referral payment for each referred client who chooses to enroll in an Aetna or Coventry PDP. To participate in the referral program, you must be contracted with Aetna, but you don't have to complete the annual certification process.

Aetna's family of prescription drug plans will give you additional opportunities in 2017. Here are some highlights of our exciting PDP portfolio:

- 3-plan PDP product portfolio available in all 50 states and D.C.
- Saver plan with \$32 average premium projected to below the low-income subsidy benchmark everywhere except for Florida
- Value Plus plan with \$40 average premium, \$0 deductible, and gap coverage
- Premium Plus plan with \$103 average premium, \$0 deductible, and enhanced gap coverage
- Saver and Premier Plus plans offer \$1 tier 1 preferred generic copays at over 20,000 preferred pharmacies
- Simplified network structure including 60k pharmacies with more than 20,000 preferred options
- Formularies with enhanced generic coverage

*MA State/County Penetration – May 2016, CMS.gov



Return to QuickFind Map Benefit designs [*] All three plans are eligible for new business and renewal commissions in 2017.			
Why You Should Sell This Plan	Offers essential Part D coverage for beneficiaries to meet their prescription drug needs while enjoying low monthly plan premiums and cost-sharing	Delivers the value demanded for predictable out-of-pocket costs and more robust coverage	Offers our highest level of medication coverage, protecting members against skyrocketing drug costs for unexpected illnes
Monthly Plan Premium (plan premi	ums vary by CMS region) ²		
Monthly Premium	\$32.18 ²	\$39.71 ²	\$103.04 ²
Deductible: The amount the memb	er pays before the plan begins to pay		
Deductible	\$400 ²	\$0	\$0
Initial Coverage: Once the deductib	le is reached, member cost-share is paid for dru	gs until the member's total drug expenditure (re	egardless of who pays) reaches \$3,700
	30 day retail copay/coinsurance (preferred cost-share pharmacies/standard cost-share pharmacies)		
Tier 1 - Preferred Generic	\$1/\$7	\$2/\$10	\$1/\$10
Tier 2 - Generic	\$2/\$15 ²	\$5/\$20	\$2/\$20
Tier 3 - Preferred Brand	30 ²	\$47 ²	\$34
Tier 4 - Non-Preferred Brand	35%²	50%	50%
Tier 5 - Specialty	25%	33%	33%
Coverage Gap: Member remains	in this phase until their yearly true out-of-pock	et drug costs reaches \$4,950	
	51% Generic Drugs 40% Brand Drugs	T1, T2 coverage at ICL cost-share All remaining formulary drugs 51% Generic Drugs 40% Brand Drugs	T1, T2 and partial T4 coverage at ICL cost-share All remaining formulary drugs 51% Generic Drugs 40% Brand Drugs

Catastrophic Coverage: After member true out-of-pocket costs exceed \$4,950 a small copay or coinsurance is required for each covered prescription

Greater of 5% coinsurance, or \$3.30 for Generic Drugs (including brand drugs dispensed as generic) or \$8.25 for Brand Drugs

Network

Over 60,000 retail pharmacies with more than 20,000 preferred options

Footnotes

¹ available in all 50 states and District of Columbia

² Premiums and member deductible/copays/coinsurance vary by CMS region



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Over 60,000 retail pharmacies with more than 20,000 preferred

Albertsons, including:

- ACME Pharmacy*
- Osco
- Sav-on*
- Shaws*
- Star Market*
- United Supermarkets of Texas
- BI-LO Pharmacy, including:
- Harveys*
- Winn-Dixie

Brookshire Grocery Company, including:

- Super 1 Foods Cardinal MCC, including:
- Brookshire Brothers
- Discount Drug Mart
- fred's Pharmacy*
- Fruth Pharmacy
- Hen House
- House Calls
- Market 32
- Price Chopper*
- Ritzman
- Weis Market

Coborn's Costco Giant Eagle Harmon's Whole Health

- H-E-B
- Hy-Vee
- Kmart
- Kroger, including:
- Baker's
- City Market*
- Copps
- Dillons
- Fred Meye
- Harris Teeter
- King Soopers
- Kroger Sav-on
- Mariano's
- QF
- Pick 'n Save
- Ralph's*
- Roundy's
- Smith's*

Meijer Publix QuickChek Safeway, including:

- Carrs
- Pavilions
- Randalls
- Tom Thumb
- Vons
- Sam's Club
- Save Mart
- SUPERVALU, including:
- Cub
- Farm Fresh
- Shop 'n Save
- Thrifty White*
- Walgreens, including:
- Duane Reade
- Eaton Apothecary Walmart

*Not all pharmacies with this name are part of the preferred chain. Please consult the online directory.