Ohio – Southwest – 2025 Medicare Advantage Plans

Anthem

Largest MA plan and #1 market share

- New Full Dual D-SNP with embedded Everyday Options Allowance for Groceries, OTC, Utilities and Assisted Devices, and all Rx at $0
- $0 HMO plans with Essential Extras provides Grocery allowance option in every county
- HMO-POS plans include OON Dental coverage to improve access to dental providers
- MA-only PPO with $150 Part B Giveback
- Enhanced Chronic Care C-SNP in Cuyahoga, Franklin and Hamilton counties

TOP PLANS	Premium	Part B Giveback	PCP / Specialist	Dental	Hearing	Vision	Everyday Options	Prescriptions
Anthem Medicare Advantage (HMO-POS) H3655-045-002	**$0**		**$0 / $30** copay	**$1,000** preventive and comprehensive allowance per year	**$0** routine exam, **$3,000** for prescription (or **$300** for OTC) hearing aids per year	**$0** routine exam, up to **$200** for eyewear per year	N/A	**$0** Tiers 1, 2 & 6
Anthem Veteran (PPO) H4036-022-000	**$0**	**$150**	**$0 / $45** copay	**$2,000** preventive and comprehensive allowance per year	**$0** routine exam, **$3,000** for prescription (or **$300** for OTC) hearing aids per year	**$0** routine exam, up to **$225** for eyewear per year	N/A	N/A
Anthem Full Dual Advantage 2 (HMO D-SNP) H3655-049-000	**$0**		**$0 / $0** copay	**$4,500** preventive and comprehensive allowance per year	**$0** routine exam, **$3,000** for prescription (or **$300** for OTC) hearing aids per year	**$0** routine exam, up to **$400** for eyewear per year	**$235** per month for Groceries, OTC, Utilities, Assistive Devices	**$0** all Tiers

FEATURED BENEFITS	Dental	Hearing	Vision	Everyday Options	OTC	Essential Extras	Transport	Silver Sneakers	PERS	Post Hosp Meals	MCRS	LiveHealth Online	Worldwide Emergency
Anthem Medicare Advantage (HMO-POS) H3655-045-002	✓	✓	✓		**$85 every quarter**	**Pick One "High"**	Available as EE selection	✓	✓	✓	✓	✓	✓
Anthem Veteran (PPO) H4036-022-000	✓	✓	✓		**$150 every quarter**	**Pick One "Low"**	Available as EE selection	✓	✓	✓	✓	✓	✓
Anthem Full Dual Advantage 2 (HMO D-SNP) H3655-049-000	✓	✓	✓	✓	Included in Everyday Options		✓	✓	✓	✓	✓	✓	✓

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Essential Extras

- Allows members to select supplemental benefits from a defined list
- Provides flexibility that will help members tailor their MA plan to their specific needs
- Continued focus on highest valued benefits
- Members can select benefit(s) based on the plan design[1]
- Provider attestation required for SSBCI/VBID

Benefit	Description	Precertification	"Low"	"Medium"	"High"
Dental, Vision & Hearing	$500/year towards Dental/Vision/Hearing	N/A	✓	✓	✓
Transportation (Plan Covered Destinations)	60 one-way trips	N/A	✓	✓	✓
Assistive Devices	$500/year towards Assistive Devices	N/A	✓	✓	✓
Utilities	$150/quarter towards Utilities	Yes[2]		✓	✓
Groceries (Grocery Card)	$50/month Grocery benefit	Yes[2]			✓

1 Benefit availability varies by plan.
2 Benefits on many D-SNPs and C-SNPs use plan eligibility to meet VBID/SSBCI conditions. General Enrollment plans will require prior approval.

Brokers/all parties cannot discuss or disclose upcoming plan year novations, plan structure, plan or market changes, or share confidential information with members or potential members or competitors prior to 10/1/2024. Disclosing confidential information to members, potential members, and other health plans prior to October 1, 2024 will result in a termination of appointment.

Not all plans are available in all counties. Monthly, quarterly, and/or annual limits apply to benefit allowance amounts. Consult plan benefit summaries for complete details. Additional services and benefits may be available. Benefit limits may apply.