



Plans > Arizona > Central, Northern, Phoenix, Tucson

Medicare Advantage (MA-only) plans

Aetna® Medicare Eagle™ plans offer additional benefits for veterans or individuals that already have prescription drug coverage. With a \$0 premium, all 2026 Aetna MA-only plans include dental, eyewear, hearing aid coverage, a SilverSneakers® fitness benefit, and an OTC allowance. These plans also offer \$0 copays for in-network PCP visits, labs, colonoscopies, and routine eye and hearing exams. Most also include a Part B premium reduction benefit.

	Aetna Medicare Eagle (PPO)	Feedback
Plan number	H5521-329	
Star rating	★★★★★	
Submarket	Central, Tucson, Phoenix	
Current counties	Maricopa, Pima, Pinal	
Expansion counties	N/A	
Premium		



YES

PCP in network

\$0

Specialist in network

Coming soon

Inpatient hospital

\$400 per day, days 1-7; \$0 per day, days 8-90

Outpatient hospital services

\$450

Medical deductible in network

Coming soon

Out-of-pocket in-network max

Coming soon

Supplemental benefits

Dental

Vision

Hearing

OTC

SilverSneakers®

Quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products



Our 2026 MAPD plans will continue to offer valuable benefits:

- Dental: All plans include a dental benefit, and many plans offer an allowance for services like dentures, crowns and more
- Hearing: All plans provide a \$0 routine hearing exam and hearing aids starting at \$0
- Vision: All plans provide a \$0 routine eye exam and an allowance for eyewear
- Fitness: We offer a SilverSneakers® fitness membership to all members at no additional cost
- Drug coverage: Members can access Tier 1 drugs for \$0 with no deductible
- \$0 copays for important tests and services including colonoscopies and diagnostic mammograms

Most plan names are changing this AEP. This year, you'll see clearer, more consistent plan names that make it easier to match members with the right coverage. Watch for more info coming soon.

	LEAD PLAN	LEAD PLAN	LEAD PLAN	LEAD PLAN	NEW FOR 2026
	Aetna Medicare Prime Extra (HMO)	Aetna Medicare Signature (PPO)	Aetna Medicare Signature Advantage (HMO)	Aetna Medicare Signature Extra (HMO)	Aetna Medicare Value Care (PPO)

Plan number				
H3931-092	H5521-554	H3931-146	H3931-129	H5521-649
Star rating				
★★★★	★★★★	★★★★	★★★★	★★★★
Submarket				
Phoenix	Central, Tucson, Phoenix	Tucson	Central, Tucson, Phoenix	Central, Tucson, Phoenix
Current counties				
Maricopa	Maricopa, Pima, Pinal	Pima	Maricopa, Pima, Pinal	Maricopa, Pima, Pinal
Expansion counties				



Coming soon				
Part B giveback				
NO	NO	NO	NO	NO
PCP in network				
\$0	\$0	\$0	\$0	\$0
Specialist in network				
Coming soon				
Inpatient hospital				
\$225 per day, days 1-7; \$0 per day, days 8-90	\$375 per day, days 1-7; \$0 per day, days 8-90	\$225 per day, days 1-7; \$0 per day, days 8-90	\$300 per day, days 1-7; \$0 per day, days 8-90	\$375 per day, days 1-7; \$0 per day, days 8-90
Outpatient hospital services				
\$225	\$375	\$225	\$300	\$375
Medical deductible in network				
Coming soon				
Out-of-pocket in-network max				
Coming soon				
Supplemental benefits				
Dental	Dental	Dental	Dental	Dental
Vision	Vision	Vision	Vision	Vision





Quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products

Quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products

All members receive a quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products. Members with a qualifying chronic condition and Extra Help also get a quarterly Extra Supports allowance to help pay for certain everyday expenses, including healthy foods, OTC products, personal care products, transportation and utilities. An additional allowance is added when members select a high value PCP.

Prescription drug coverage (at preferred pharmacies)

Rx deductible



\$0	\$0	\$0	\$0	\$0
Tier 2 generic				
\$0	\$0	\$0	\$0	\$0
Tier 3 preferred brand				
24%	24%	24%	24%	22%
Tier 4 nonpreferred drug				
25%	25%	25%	25%	25%
Tier 5 specialty				
25%	25%	25%	25%	25%
LIS: Tier 1-5 (generic)				
\$0, \$1.60 or \$5.10	\$0, \$1.60 or \$5.10	\$0, \$1.60 or \$5.10	\$0, \$1.60 or \$5.10	\$0, \$1.60 or \$5.10
LIS: Tier 1-5 (brand)				
\$0, \$4.90 or \$12.65	\$0, \$4.90 or \$12.65	\$0, \$4.90 or \$12.65	\$0, \$4.90 or \$12.65	\$0, \$4.90 or \$12.65

	Aetna Medicare Elite (PPO)	Aetna Medicare Prime (HMO)	Aetna Medicare Signature (HMO)		
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Plan number				
H5521-363	H4835-001	H4835-002		

Star rating				
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Central, Tucson, Phoenix	Phoenix	Phoenix, Tucson, Northern
Current counties		
Maricopa, Pima, Pinal	Maricopa	Coconino, Maricopa, Mohave, Pima, Yavapai
Expansion counties		
N/A	N/A	N/A
Premium		
Coming soon	Coming soon	Coming soon
Part B giveback		
NO	NO	NO
PCP in network		
\$0	\$0	\$0
Specialist in network		
Coming soon	Coming soon	Coming soon
Inpatient hospital		
\$400 per day, days 1-6; \$0 per day, days 7-90	\$475 per day, days 1-7; \$0 per day, days 8-90	\$425 per day, days 1-7; \$0 per day, days 8-90
Outpatient hospital services		





Coming soon

Coming soon

Coming soon

Out-of-pocket in-network max

Coming soon

Coming soon

Coming soon

Supplemental benefits

Dental

Dental

Dental

Vision

Vision

Vision

Hearing

Hearing

Hearing

OTC

OTC

OTC

SilverSneakers[®]

SilverSneakers[®]

SilverSneakers[®]

Quarterly allowance on an Extra Benefits Card to help pay for approved over-the-counter (OTC) products

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

\$615

\$615

\$615

Tier 1 preferred generic

\$0

\$0

\$0

Tier 2 generic



24%	24%	24%
Tier 4 nonpreferred drug		
25%	25%	25%
Tier 5 specialty		
25%	25%	25%
LIS: Tier 1–5 (generic)		
\$0, \$1.60 or \$5.10	\$0, \$1.60 or \$5.10	\$0, \$1.60 or \$5.10
LIS: Tier 1–5 (brand)		
\$0, \$4.90 or \$12.65	\$0, \$4.90 or \$12.65	\$0, \$4.90 or \$12.65

Chronic Condition Special Needs Plans (C-SNPs)

Our Chronic Care (C-SNP) plans are designed for members diagnosed with diabetes, chronic heart failure and/or certain cardiovascular diseases. In 2026, we'll expand these plans to 18 states. These plans provide additional support for your clients by providing a dedicated personal care team that supports member health and access to care, as well as offering competitive benefits including:

- \$0 copays for PCP visits.
- \$0 copays for certain specialists related to the eligible chronic conditions.
- Dental, vision and hearing coverage, a SilverSneakers® fitness benefit, and an Extra Benefits Card to help pay for certain everyday expenses including healthy food and over-the-counter products (OTC). Members in certain plans could also qualify for a bonus on their Extra Benefits Card when they select a High Value Provider as their PCP.
- Low cost for certain prescription drugs used to treat cardiovascular, congestive heart failure, and diabetes.

NEW FOR 2026



Plan number

H3931-188

Star rating



Submarket

Phoenix

Current counties

Maricopa

Expansion counties

N/A

Premium

Coming soon

Part B giveback

NO

PCP in network

\$0

Specialist in network

Coming soon

Inpatient hospital

\$325 per day, days 1-6; \$0 per day, days 7-90

Outpatient hospital services



Coming soon

Out-of-pocket in-network max

Coming soon

Supplemental benefits

Dental

Vision

Hearing

OTC

SilverSneakers®

Members get a monthly Extra Supports allowance on an Extra Benefits Card to help pay for certain everyday expenses, including healthy foods, OTC products, personal care products, transportation and utilities. An additional allowance is added when members select a high value PCP.

Prescription drug coverage (at preferred pharmacies, if plan has preferred pharmacy network)

Rx deductible

\$615

Tier 1 preferred generic

\$0

Tier 2 generic

\$5

Tier 3 preferred brand

22%

Tier 4 nonpreferred drug



25%

LIS: Tier 1–5 (generic)

\$0, \$1.60 or \$5.10

LIS: Tier 1–5 (brand)

\$0, \$4.90 or \$12.65

Dual Eligible Special Needs Plans (D-SNPs)

Our D-SNPs provide options for your clients by eliminating barriers to care. They offer competitive benefits and services including:

- Dental, vision and hearing coverage, and a monthly allowance on an Extra Benefits Card that can be used for certain healthy foods, over-the-counter products, and more. Members in plans with “Care” in the plan name also receive a bonus on their Extra Benefits Card when they select a High Value Provider as their PCP.
- Competitive Part D coverage with \$0 Tier 1 copays at in-network pharmacies for up to a 100-day supply of eligible prescription medications
- Coordinated care, including a personal care team that’s dedicated to supporting member health and access to care

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Prescription drug plans (PDPs)

In 2026, we will offer SilverScript Choice as a non-commissionable product in 49 states and Washington, D.C. We will continue to pay renewal commissions on all existing commissionable SilverScript PDP business.

We expect SilverScript Choice to offer reduced premiums in some regions to your prospects receiving Extra Help. SilverScript Choice offers a strong combination of brand and generic drugs with more than 1,700 drugs included on our formulary. Tier 1 drugs are no more than \$2 at network pharmacies.



Plan highlights

Solid generic and brand coverage.

Monthly plan premium

\$128.10

Deductible

\$615

Rx OOP

\$2,100

90-day supply

3x retail cost sharing

Pharmacy network

Broad pharmacy network with over 63,000 pharmacies nationwide

Prescription drug coverage at any network pharmacy

Tier 1 preferred generic

\$0

Tier 2 generic

\$7

Tier 3 preferred brand



33%

Tier 5 specialty

25%

LIS: Tier 1–5 (generic)

\$0, \$1.60 or \$5.10

LIS: Tier 1–5 (brand)

\$0, \$4.90 or \$12.65

Ancillary products

The Protection SeriesSM is a complete portfolio of supplemental insurance products that offer security solutions for peace of mind protection. Benefits are paid directly to the policyholder or a designated medical provider and are paid in addition to any other health care coverage. The Protection SeriesSM of products gives you a range of tools and resources that offer meaningful and affordable solutions for your clients.

To sell these plans, you need to complete a separate contract. Your contract to sell Aetna MA/MAPD and/or SilverScript PDP does not apply to them. Contact your upline or the Aetna Senior Supplemental Insurance Agent Services team at **866-272-6630** to get started.

Products available in your state

- Accendo Final Expense Whole Life
- Protection SeriesSM Final Expense Whole Life
- Protection SeriesSM Dental, Vision and Hearing Flex
- Protection SeriesSM Cancer and Heart Attack or Stroke Plus
- Protection SeriesSM Hospital Indemnity Flex
- Protection SeriesSM Recovery Care



Accendo Final Expense Whole Life

- Issue ages 40–89
 - Level or Modified death benefits*
 - Face amounts: \$2,000 - \$50,000**
 - Riders available for Level plan only: Accelerated death, Accidental death, Children's term
 - Simplified yes/no application
 - Level or Modified death benefits*
 - Super preferred rate available
 - Billing can match Social Security deposit date
- * Plans may vary by state.
- ** Maximum amount varies by applicant age at policy issue.

Protection SeriesSM Final Expense Whole Life

- Issue ages 45–89
 - Level death benefits
 - Face amounts: \$2,000 - \$50,000**
 - Super preferred rate available
 - Riders available: Accidental death, Children's term insurance
 - Billing can match Social Security deposit date
- ** Maximum amount varies by applicant age at policy issue.

Protection SeriesSM Dental, Vision and Hearing Flex

- Issue ages 18-89
- For individuals, couples and families
- Guaranteed acceptance
- Freedom to choose both in or out of network providers
- No waiting period for dental services
- Preventive services covered at 100% • 15% multiple policy discount available



- \$1,000-\$3,000 maximum benefit per policy year per person
- Choice of deductibles: \$0, \$50, \$100 or \$100 vanishing
- Includes higher benefit amounts for teeth whitening, implants & orthodontics
- Includes higher coinsurance and benefit amounts for vision & hearing
- Option 2:
 - \$1,000-\$4,000 maximum benefit per policy year per person
 - Choice of deductibles: \$0, \$50, \$100 or \$100
 - Includes benefits for teeth whitening, implants & orthodontics
 - Includes coverage for vision & hearing
 - Credit for prior coverage available
- Option 3:
 - \$1,000-\$3,000 maximum benefit per policy year per person
 - \$100 deductible
- Dental only

Protection SeriesSM Cancer and Heart Attack or Stroke Plus

- Issue ages 18–89
- Benefit amounts \$5,000 – \$75,000
- Available plans:
 - cancer
 - cancer with recurrence benefit
 - heart attack
 - heart attack with recurrence benefit
- Choose a cancer plan or a heart attack/stroke plan or one of each, with different benefit amounts
- For individuals, individual and spouse/domestic partner, individual and child(ren), and family
- Same lump sum benefit amount for each covered person
- Lump sum benefit paid directly to insured or someone designated



- Guaranteed acceptance for ages 64 ½ to 67 (not available in CA, ID, NM, UT)
- Pays indemnity benefits of up to:
 - \$4,000 hospital admission
 - \$1,000/day daily hospital
 - \$500/day optional daily skilled nursing facility care
 - \$100/visit optional doctor's office visit
 - \$3,000 optional outpatient surgical procedure
 - \$600/visit optional hospital emergency room visit or ambulance service
 - \$2,500, \$5,000, \$10,000, \$15,000, or \$20,000 optional lump sum cancer
 - \$250/visit optional outpatient rehabilitation
- Pays benefits directly to the insured unless assigned to provider

Protection SeriesSM Recovery Care

- Issue ages 50–89
- Pays indemnity benefits of up to:
 - \$400 daily nursing facility including assisted living and bed reservation
 - \$400 daily hospital
 - \$1200 weekly optional home care rider
- Pays benefits directly to the insured unless assigned to provider

Protection SeriesSM Home Care Plus

- Issue ages 50–89
- Pays benefits for medically necessary home care
- Home care indemnity up to \$1,500/week
- Daily hospital indemnity up to \$400
- Optional lump sum cancer fixed indemnity rider
- Optional hospital emergency room visit or ambulance service
- Pays benefits directly to insured unless assigned to provider



 No network constraints; choice of any licensed doctor or hospital that is eligible to receive reimbursement from Medicare

 Portable plans; policyholders don't have to worry about losing coverage when they relocate

 12-month rate guarantee (all plans)

 No waiting period for pre-existing conditions

 Household premium discount (availability varies by state)

 7% household discount available

 Applications accepted year-round for eligible applicants

 Underwritten by:
Aetna Health and Life Insurance Company

	Plan A	Plan B	Plan C†	Plan D	Plan F†*	Plan G	Plan N
Basic benefits (including hospice care)	✓	✓			✓	✓	✓
Part B coinsurance	✓	✓			✓	✓	✓**
Part A deductible		✓			✓	✓	✓
Skilled nursing facility coinsurance					✓	✓	✓
Foreign travel emergency					✓	✓	✓
Part B excess charges					✓	✓	
Part B deductible					✓		



before 2020 only.

* **High Deductible Plan F** also available. Same benefits as Plan F after the calendar year deductible is paid.

** **Plan N** requires a \$20 copayment for office visits and a \$50 copayment for emergency rooms visits. Copayments do not count toward the annual Part B deductible.

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