Your guide to Aetna® Dual Eligible Special Needs Plans (D-SNPs)

People who qualify for both Medicare and Medicaid may be eligible for a Dual Eligible Special Needs Plan.

aetna®

What's inside

What is a D-SNP, anyway?

If you qualify for both Medicare and Medicaid, you may be eligible for an Aetna Dual Eligible Special Needs Plan, or D-SNP. These low-cost health insurance plans include all the benefits of Original Medicare and so much more.

With Aetna D-SNPs, you'll get dental, vision and hearing coverage. Plus, you'll get a monthly allowance on an Extra Benefits Card to help with certain everyday expenses like over-the-counter (OTC) health and wellness products. Check out the benefits included in an Aetna D-SNP:

	What you may have with Original Medicare	What you have with an Aetna D-SNP
Coverage for hospital and outpatient care	✓	✓
Coverage for doctor visits	✓	✓
Prescription drug coverage*		✓
Personal care team		✓
Dental, vision and hearing benefits		✓
A monthly allowance to help pay for certain everyday expenses like over-the-counter (OTC) health and wellness products**		✓

We're here to answer your questions

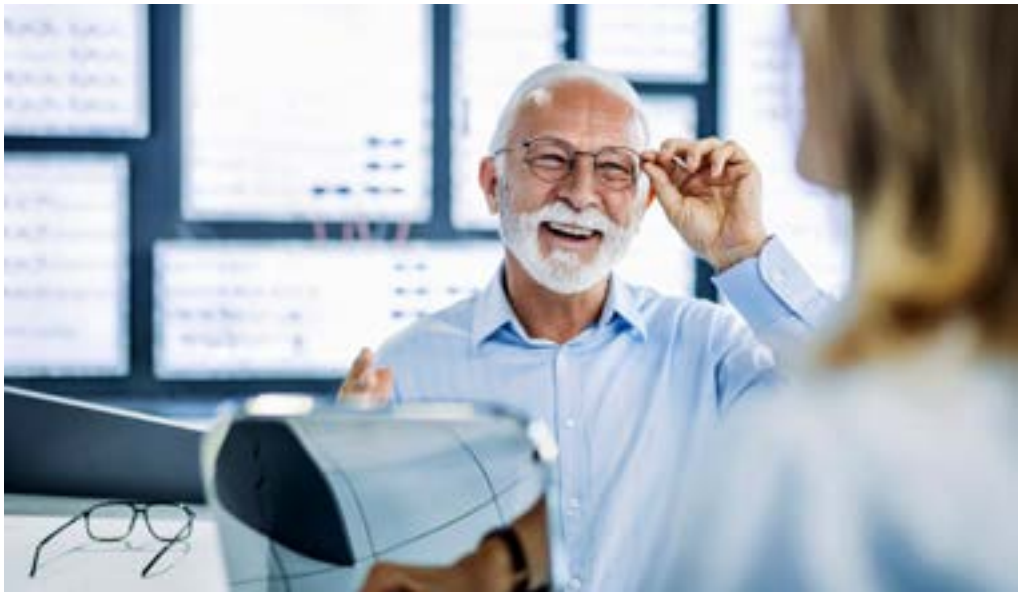
Call 1-844-514-8291 (TTY: 711) to ask a licensed Aetna agent about Aetna D-SNPs.

Licensed agents are available from:
- 8 AM to 8 PM, 7 days a week, October 1 to March 31
- 8 AM to 8 PM, Monday to Friday, April 1 to September 30

Se habla español.

*Prescription drug coverage includes Part D and limited drug coverage with Part B. ** FOR MONTHLY ALLOWANCES: Benefits vary by plans.

Smile! Dental, vision and hearing are covered.



Usually, Medicare Advantage plans offer dental, vision and hearing coverage. But with an Aetna® D-SNP, you get more complete care. Our D-SNPs include:*

- Prescription drug coverage
- An annual benefit amount (allowance) for covered dental services
- An annual benefit amount for covered prescription eyewear and a routine eye exam
- An annual benefit amount for hearing aids through NationsHearing®

Call us to learn more — it can't hurt!

Have questions about D-SNP benefits and eligibility? Dial 1-844-514-8291 (TTY: 711) to talk to a licensed agent about Aetna plans.

Licensed agents are available:
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* FOR WHAT OUR D-SNPS INCLUDE: Not all benefits are available in every plan in your area.

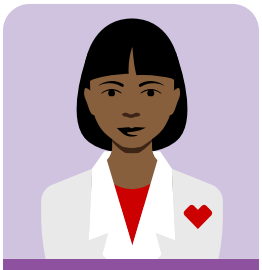
A care team is here for you and your health

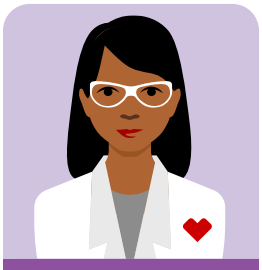
Every Aetna® D-SNP member gets a personal care team. This benefit will help you understand and better use all the services available from your plan.

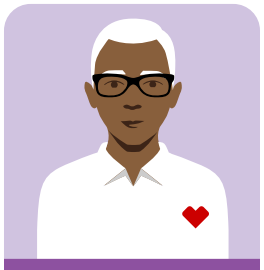
Your care team can help you:*

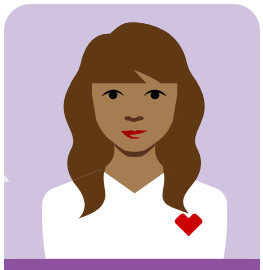
- Understand your benefits
- Develop a care plan with all your doctors
- Coordinate visits to health care providers
- Find local transportation options for traveling to and from doctor's appointments
- Understand and manage your medications
- Connect you with local and state programs for safe housing, local food resources and more
- Access your state Medicaid benefits

An Aetna D-SNP personal care team includes:*


Care coordinator


Nurse care manager


Social worker


Health survey specialist

Learn more about Aetna care teams

To learn more, call 1-844-514-8291 (TTY: 711) to talk with a licensed Aetna agent.

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Find more info anytime at **AetnaMedicare.com/Resource1**

* FOR CARE TEAM INCLUDES: Care team titles may vary by plan.

How to know if you qualify for a D-SNP

If you check these boxes, you may be eligible:*

- You are enrolled in Original Medicare (Parts A and B) ☐
- You live in a D-SNP service area ☐
- You meet the income and asset eligibility requirements, and are enrolled in applicable state Medicaid (see below)* ☐
- You meet Medicaid medical assistance requirements ☐

Learn your state's income requirements for Medicaid eligibility

Before you enroll in a D-SNP, you have to qualify for and enroll in Medicaid. Medicaid eligibility is based on your income and family size. Eligibility rules also differ among states. And they can change each year. If your income falls below the federal poverty level, there's a good chance you qualify.* To be sure, call your state Medicaid office to check. Visit **Medicaid.gov/about-us/contact-us** to find the phone number.

Or call a licensed Aetna agent at **1-844-514-8291 (TTY: 711)**, 8 AM to 8 PM, 7 days a week, October 1 to March 31; 8 AM to 8 PM, Monday to Friday, April 1 to September 30.

Number of people in your family	Federal poverty level (2025)
1	$15,650
2	$21,150
3	$26,650
4	$32,150
5	$37,650
6	$43,150
7	$48,650
8	$54,150

* FOR MAY BE ELIGIBLE: For families/households with more than eight people, add $5,380 for each additional person for 2025 coverage.

* FOR INCOME ELIGIBILITY: There may be other requirements depending on the plan you choose. Talk with a licensed Aetna agent for more details.

* FOR FEDERAL POVERTY LEVEL: **HealthCare.gov.** Federal poverty level (FPL). Available at: **https://www.healthcare.gov/glossary/federal-poverty-level-fpl** Accessed August 18, 2025.

Get to know the enrollment options

Want to learn more? Check out the chart below to find the enrollment period that's right for you.

Initial Enrollment Period (IEP):
This is when you first become eligible for Medicare. Your IEP is the 7-month period that begins 3 months before your 65th birthday, includes your birthday month and ends 3 months afterward. There is an exception if your birthday falls on the first of any month; in that case, your 7-month IEP begins and ends one month sooner.

Annual Enrollment Period (AEP):
This occurs annually from October 15 to December 7. During this time, you can pick a new D-SNP (or any Medicare Advantage plan), switch from Original Medicare to Medicare Advantage or change your Part D coverage.

Open Enrollment Period (OEP):
This occurs annually from January 1 to March 31. It allows beneficiaries who are already enrolled in a Medicare Advantage plan to make certain changes to their coverage.

Special Enrollment Period (SEP):
There may be other times when you can enroll in a D-SNP. This can include if you move or if there is a disaster declared by FEMA. Additionally, an SEP is available 3 months after you begin Medicaid coverage. Or an SEP is available for full-benefit dual-eligible individuals (FBDE), aligning Medicaid coverage and Medicare D-SNP so that they are provided by the same insurance company.

Questions about enrollment?

Our licensed agents can answer any questions you have about D-SNPs. Call 1-844-514-8291 (TTY: 711).

They're available from:
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Se habla español.

D-SNP frequently asked questions (FAQs)

Here are answers to some of the most common questions we get about Aetna® D-SNPs.

How can I find out if my doctor is in the Aetna network?

Go to **AetnaMedicare.com/FindProvider** to search the directory for your provider's name. Or talk to a licensed Aetna agent.

With Aetna, will it be hard to get in touch with someone about my care?

No. In fact, when you start to work with your dedicated personal care team you may find you have more support.

Will I lose my Medicaid benefits?

No! To qualify for a D-SNP, you must qualify for and enroll in a Medicaid program. That means you get to keep you Medicaid benefits.

How much does a D-SNP cost?

Aetna D-SNPs include medical, hospital and prescription drug coverage at low to no cost. You get $0 copays on covered Tier 1 Part D prescriptions at in-network pharmacies, as well as dental, vision and hearing coverage. And you get an Extra Benefits Card to help pay for certain everyday expenses like over-the-counter (OTC) health and wellness products.

Don't miss out on Aetna D-SNP coverage

Call 1-844-514-8291 (TTY: 711) to get more details on Aetna D-SNPs.

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Aetna Medicare is a HMO, PPO plan with a Medicare contract. Our DSNPs also have contracts with State Medicaid programs. Enrollment in our plans depends on contract renewal.

To send a complaint to Aetna, call the Plan or the number on your member ID card. To send a complaint to Medicare, call **1-800-MEDICARE** (TTY users should call **1-877-486-2048**), 24 hours a day/7 days a week. If your complaint involves a broker or agent, be sure to include the name of the person when filing your grievance.

Participating health care providers are independent contractors and are neither agents nor employees of Aetna. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change. Plan features and availability may vary by service area. For accommodation of persons with special needs at meetings, call **1-833-278-3924**.

The benefit(s) mentioned are part of special supplemental benefits for the chronically ill (SSBCI). SSBCI conditions include but are not limited to: hypertension, hyperlipidemia, diabetes, cardiovascular disorders, and chronic lung disorders. Eligibility is determined by whether you have a chronic condition associated with the benefit(s). Standards and conditions vary for each benefit. Contact us to confirm the specific SSBCI condition requirements for the benefit(s) for this plan and determine your eligibility.

We comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex and does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. If you speak a language other than English, free language assistance services are available. Visit our website, call the phone number listed in this material or the phone number on your benefit ID card.

In addition, our health plan provides auxiliary aids and services, free of charge, when necessary, to ensure that people with disabilities have an equal opportunity to communicate effectively with us. Our health plan also provides language assistance services, free of charge, for people with limited English proficiency. If you need these services, visit our website, call the phone number listed in this material or on your benefit ID card.

If you believe that we have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our Grievance Department (write to the address listed in your Evidence of Coverage). You can also file a grievance by phone by calling the Customer Service phone number listed on your benefit ID card (TTY: 711). If you need help filing a grievance, call Customer Service Department at the phone number on your benefit ID card.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at **https://ocrportal.hhs.gov/ocr/cp/complaint_frontpage.jsf**.

ESPAÑOL (SPANISH): Si habla un idioma que no sea inglés, se encuentran disponibles servicios gratuitos de asistencia de idiomas. Visite nuestro sitio web o llame al número de teléfono que figura en este documento.

繁體中文 **(CHINESE):** 如果您使用英文以外的語言，我們將提供免費的語言協助服務。請瀏覽我們的網站或撥打本文件中所列的電話號碼。]

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