

AEP 2022 First Look



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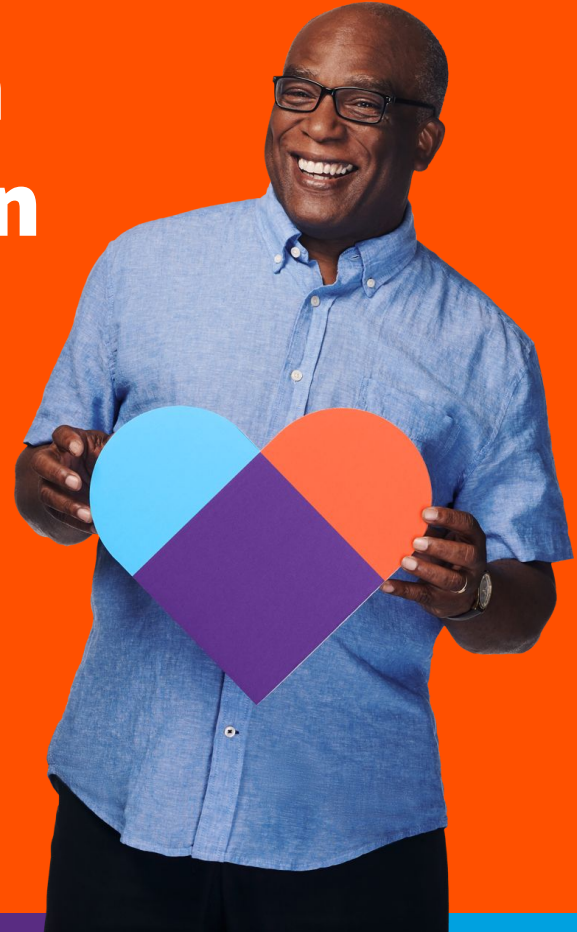


Devoted Health's mission

We want to make your client's healthcare easier, more affordable, and a whole lot more caring by treating them like family.

We're a Next-Generation Medicare Advantage Plan

By partnering with quality doctors and combining cutting-edge technology with personalized care teams, we give members easy access to high-quality healthcare they deserve.



Message from our co-founders Todd & Ed Park

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Leadership and funding behind Devoted Health

Our founders, Todd and Ed Park, previously co-founded Athenahealth, a highly innovative, \$6B health information technology and service company dedicated to helping physicians and healthcare practitioners.

Our principal institutional investors are Venrock and Andreessen Horowitz. These distinguished venture capital firms have invested in some of America's most innovative and successful companies including Athenahealth, Gilead, Apple, Intel, Nest, Facebook and Twitter.

Deep with experience in healthcare and technology, our leadership team includes veterans of Humana, Aetna, Google, Wayfair and McKinsey. And Dr. Neil Wagle, one of the country's leading physicians and expert on healthcare improvement, leads our clinical team and brings thorough understanding of patient-centric thinking.



Ed Park

Co-founder and
Chief Executive Officer



Todd Park

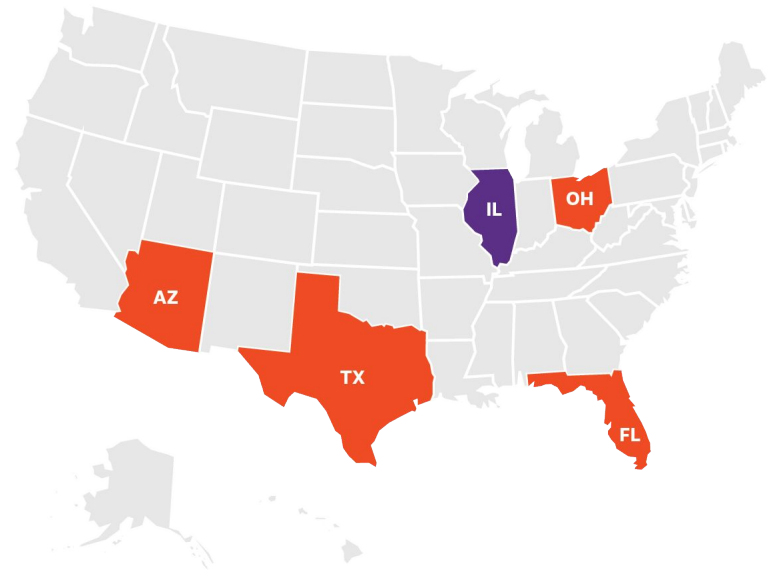
Co-founder and
Executive Chairman



Devoted Health is the fastest-growing new MA plan in the last decade

Although Devoted Health's membership growth has been phenomenal, we are proudest of our operational accomplishments:

- 40,000+ members
- Net Promoter Score of 83 (*7x insurance avg*)
- Locations: FL, TX, OH, AZ, IL
- 78% of calls answered within 30 seconds
- > 80% of member issues resolved same day
- > 90% of claims adjudicated in 3 days
- Approve authorizations in <3 days



- Existing states
- New states



The Devoted Health difference

Next-generation Medicare Advantage health plan



We're a new MA plan with the right team, financial stability, and a 20-year plan

Homegrown tech & data platform



To a member, this means a **better experience** with their healthcare providers and getting the care they need when they need it

Partnerships with value-based physicians



Many of whom have contracts that benefit them financially for **keeping their members healthy** and out of the hospital.

Devoted Health Guides



Our Guides are our secret sauce and unlike any other customer service team

Devoted Medical



They provide additional virtual and in-home care to members above and beyond what they receive from their physicians.



Devoted Health coverage



2022 COVERAGE AREA:

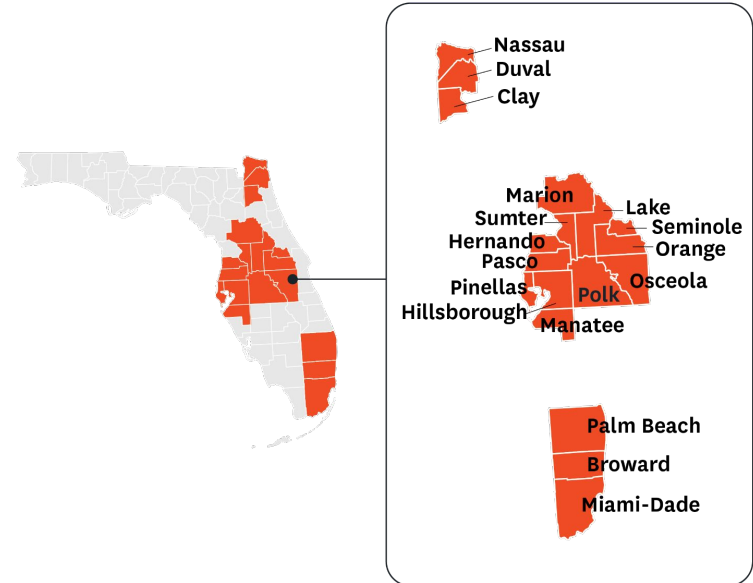
Florida

Core HMO, Prime HMO, Essentials HMO, Dual HMO
D-SNP, and Latitude PPO* **(New)**

FL Counties

- Miami-Dade
- Broward
- Palm Beach
- Hillsborough
- Pinellas
- Seminole
- Osceola
- Polk
- Nassau
- Duval
- Clay
- Marion
- Lake
- Sumter
- Orange
- Hernando
- Pasco
- Manatee

* Not available in Miami-Dade, Marion, Lake, or Sumter counties



- 2022 counties



2022 COVERAGE AREA:

Texas

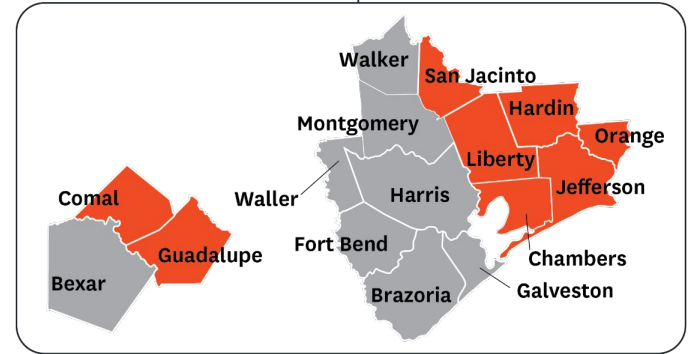
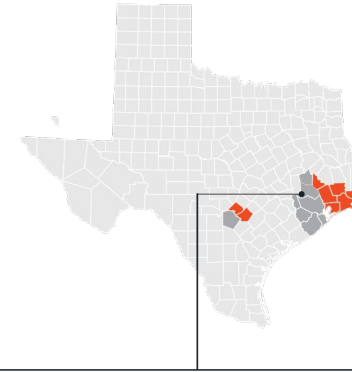
Core HMO, Prime HMO, BeWell HMO C-SNP* **(New)**

Houston Counties

- Fort Bend
- Harris
- Montgomery
- Waller
- Brazoria
- Galveston
- Walker
- Chambers **(new)**
- Hardin **(new)**
- Jefferson **(new)**
- Liberty **(new)**
- Orange **(new)**
- San Jacinto **(new)**

San Antonio Counties

- Bexar
- Comal **(new)**
- Guadalupe **(new)**



- Current counties
- 2022 new counties



2022 COVERAGE AREA:

Ohio

Core HMO, Prime HMO, and Saver HMO

Metro Cleveland

- Cuyahoga
- Lake
- Geauga
- Medina
- Lorain

Akron/Canton

- Stark
- Summit
- Portage

Sandusky

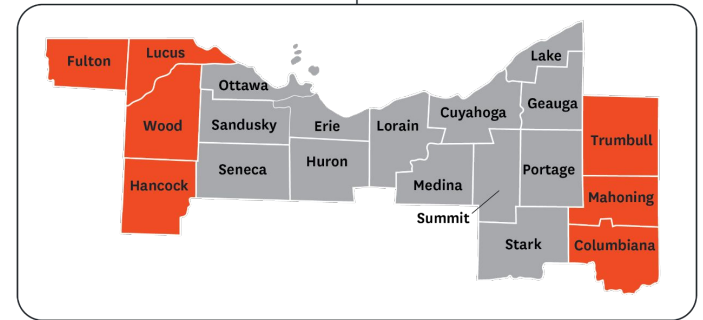
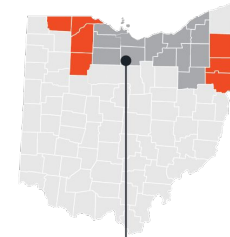
- Erie
- Huron
- Sandusky
- Ottawa
- Seneca

Toledo (New)

- Lucas
- Wood
- Fulton
- Hancock

Youngstown (New)

- Columbiana
- Mahoning
- Trumbull



- Current counties
- 2022 new counties



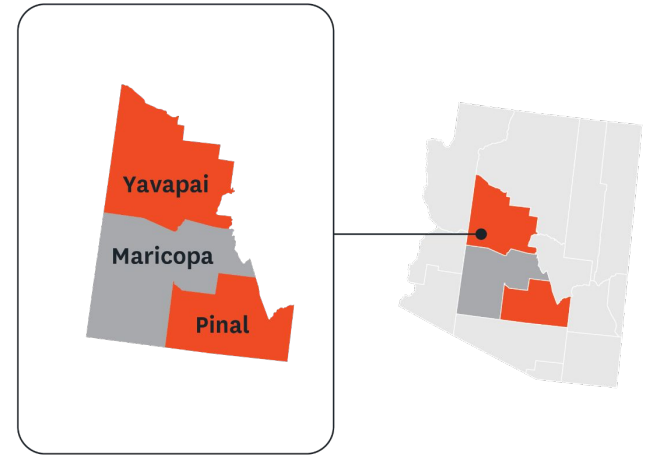
2022 COVERAGE AREA:

Arizona

Core HMO, Flex HMO*, Select HMO, Liberty HMO* **(New)**,
Advance HMO C-SNP **(New)**, Essence HMO C-SNP* **(New)**

AZ Counties

- Maricopa
- Pinal **(new)**
- Yavapai **(new)**



- Current counties
- 2022 new counties



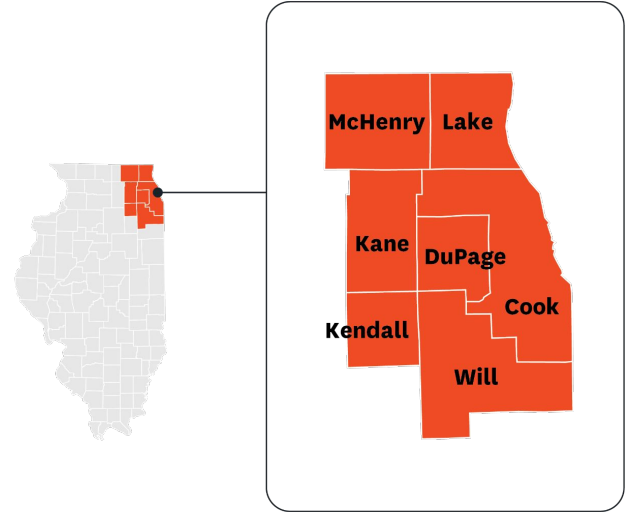
2022 EXPANSION STATE:

Illinois

Core HMO, Prime HMO, Essentials HMO

IL Counties

- Cook
- DuPage
- Kane
- Kendall
- Lake
- McHenry
- Will



- 2022 new counties



2022 plan highlights



Plan Offerings by Market

State	Market	Service Areas	Core	Prime / Select	Essentials / Saver	D-SNP	Flex	PPO	C-SNP Diabetes	C-SNP Cardiac	Liberty
FL	Miami-Dade	Miami-Dade	✓	✓	✓	✓					
	Broward / Palm Beach	Broward, Palm Beach	✓	✓	✓	✓		✓			
	Greater Orlando	Orange, Osceola, Seminole	✓	✓	✓	✓		✓			
	Greater Tampa Bay	Hillsborough, Pinellas, Polk, Manatee, Hernando, Pasco	✓	✓	✓	✓		✓			
	North Central	Lake, Marion, Sumter	✓	✓	✓	✓					
	Greater Jacksonville	Clay, Duval, Nassau	✓	✓	✓	✓		✓			
TX	Houston	Fort Bend, Harris, Montgomery, Waller, Brazoria, Galveston, Walker, Chambers, Hardin, Jefferson, Liberty, Orange, San Jacinto	✓	✓							
	San Antonio	Bexar, Comal, Guadalupe	✓	✓					✓		
AZ	Arizona	Maricopa	✓	✓			✓		✓	✓	✓
		Pinal	✓	✓			✓		✓		✓
		Yavapai	✓	✓					✓		
OH	Ohio	Cuyahoga, Erie, Geauga, Huron, Lake, Lorain, Medina, Ottawa, Portage, Sandusky, Seneca, Stark, Summit, Columbiana, Fulton, Hancock, Lucas, Mahoning, Trumbull, Wood	✓	✓	✓						
IL	Greater Chicago	Cook, Dupage, Kane, Kendall, Lake, McHenry, Will	✓	✓	✓						



Devoted Health plan options and who may be best fit?

	Essentials/Saver (HMO) Available in OH, IL, FL	Core (HMO) Available in all Markets	Prime/Select (HMO) Available in All Markets	Dual (DSNP HMO) Available in FL	PPO* NEW! Available in FL
Plan highlights	<ul style="list-style-type: none"> • \$0 plan premium • Reduction in monthly part B premium (giveback plan) • Higher cost share than other Devoted Health plan options. 	<ul style="list-style-type: none"> • Competitive \$0 premium plan • Lots of extra benefits 	<ul style="list-style-type: none"> • Low monthly premium • Premium reduced to \$0 for 100% LIS • Low copays • Even more extras 	<ul style="list-style-type: none"> • SNP for those with Medicaid • \$0 cost sharing on most services • Monthly grocery benefit** 	<ul style="list-style-type: none"> • \$0 premium • \$0 PCP • \$0 tier 1 and 2 Rx • Supplemental benefits
Member Persona	<ul style="list-style-type: none"> • Values reduction in Part B premium over lower out of pocket costs • Comparing with other Part B giveback plans • FFS switchers • New to Medicare retirees 	<ul style="list-style-type: none"> • Comparing other health plans with \$0 premium • Looking for HMO with low cost share and additional benefits 	<ul style="list-style-type: none"> • Looking for strong additional benefits and low cost-sharing • Coming from a Medicare Supplement • Receives LIS/Extra Help 	Has Medicare & Medicaid <ul style="list-style-type: none"> • QMB+/QMB • SLMB+/SLMB • FBDE • QI • QDWI 	<ul style="list-style-type: none"> • Looking for flexibility - no referrals and coverage OON • Annual dental and eyewear allowance - no network requirements

*Not available in all counties within the service area **Must have chronic condition

All 2022 plans are pending CMS approval



Devoted Health plan options and who may be best fit?

	Liberty (HMO MA-Only)* NEW! Available in AZ	Advance/BeWell (HMO C-SNP Diabetes) NEW!* Available in AZ and TX	Essence* (HMO C-SNP Cardiac) NEW! Available in AZ	FLEX (HMO)* Available in AZ
Plan highlights	<ul style="list-style-type: none"> • \$0 plan premium • Reduction in monthly part B premium (giveback plan) • Higher cost share than other Devoted Health plan options • Does NOT include Part D coverage 	<ul style="list-style-type: none"> • \$0 monthly premium • Strong additional benefits and benefits geared towards those with diabetes • Continuous open enrollment 	<ul style="list-style-type: none"> • \$0 monthly premium • Strong additional benefits and benefits geared towards those with cardiovascular disease or chronic heart failure • Continuous open enrollment 	<ul style="list-style-type: none"> • Low monthly plan premium • Loaded with extras powered by myFlex benefit with no network restrictions • No referrals required
Member Persona	<ul style="list-style-type: none"> • Has prescription coverage by other means • Ideal for Veterans with VA coverage 	<ul style="list-style-type: none"> • Has diabetes • Values low cost insulin • Looking for strong supplemental benefits tailored to diabetes • Strong care and disease management programs 	<ul style="list-style-type: none"> • Has cardiovascular disorder or chronic heart failure • Looking for strong supplemental benefits tailored to cardiovascular disease/chronic heart failure • Strong care and disease management programs 	<ul style="list-style-type: none"> • Looking for greater flexibility • Consumer that values rich supplemental benefits over lower medical copays • New to Medicare retirees

*Not available in all counties within the service area

All 2022 plans are pending CMS approval



Additional benefits that set us apart

Benefit	Description	Limit/Cost Sharing	Vendor
Medical alert device	Coverage of at-home or mobile devices and monthly fees. Fall detection available	<ul style="list-style-type: none"> • \$0 copay, all plans • 1 per member 	LifeStation
Bathroom Safety Equipment	Covered when needed by member: <ul style="list-style-type: none"> • Standard raised toilet seat • Standard tub seat 	<ul style="list-style-type: none"> • \$0 copay, all plans • 1 each per member per year 	DME supplier
Wigs for Chemotherapy*	Covered when needed by the member	<ul style="list-style-type: none"> • \$500/year • As many wigs up to plan maximum 	No specific vendor, must pay out of pocket and submit reimbursement form

* Not available on all plans



Additional benefits that set us apart

Benefit	Description	Limit/Cost Sharing	Vendor
Grocery Delivery Service*	Grocery Delivery Service for chronically ill members - Excludes cost of food	<ul style="list-style-type: none"> Up to \$20 per month (up to \$240 per year) 	Reimbursement form
Healthy Food Wallet*	Receive a card that is activated and ready to use for purchase of food at a grocery store (available to members with chronic condition)	<ul style="list-style-type: none"> Set dollar amount per plan. Must use card to pay, not reimbursement. Monthly allowance 	Solutran
Medical Nutrition Therapy*	Beyond Medicare covered visits MNT instructs individuals how to use their diet to best support their medical conditions.	<ul style="list-style-type: none"> 8 visits per year (60 min or 4 15 min intervals) 	In-network providers

* Not available on all plans



Additional benefits & rewards

Benefit	Description	Limit/Cost Sharing	Vendor
<p>Wellness Bucks*</p>	<ul style="list-style-type: none"> ● Fitness classes ● Gym memberships ● Weight-management programs ● Activity fitness trackers (e.g., Apple Watch) ● Nutritional counseling and diabetes workshops ● Personal fitness equipment ● Memory fitness activities ● Cell phones/tablets for CSNP 	<p>Reimbursement of \$150 to \$300, amount varies by plan</p>	<p>No vendor, must pay out of pocket and submit reimbursement form.</p>
<p>Devoted Dollars</p>	<p>This is a rewards & incentives program where Visa gift cards are mailed to individuals homes for things like:</p> <ul style="list-style-type: none"> ● PCP visits ● Flu shots ● Cancer screenings 	<p>Reward is dependent on services received (see 2022 Summary of Benefits for more details)</p>	<p>No vendor, no forms. Visa prepaid cards are mailed out when we are notified of the claim.</p>



Florida



Devoted Health Miami-Dade HMO Plans

	Essentials Miami-Dade (HMO)	Core Miami-Dade (HMO)	Prime South Florida (HMO)
Plan Highlights	\$120 Part B premium buydown , \$0 monthly premium, \$0 Rx deductible, dental included!	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits
Premium	\$0	\$0	\$30.80 (2022 TBD)
Max out-of-pocket	\$3,400	\$1,500	\$1,500
PCP/Specialist Copay	\$0/\$0	\$0/\$0	\$0/\$0
Inpatient Hospital	\$50 D1-D5	\$0 per stay	\$0 per stay
Outpatient Surgery	\$50 ASC; \$75 OH	\$15 ASC; \$50 OH	\$0
Lab Copay (Office/Lab)	\$0	\$0	\$0
Rx Copays	\$0 / \$0 / \$30 / \$85 / 33%	\$0 / \$0 / \$0 / \$25 / 33%	\$0 / \$0 / 25% / 25% / 25%
Rx Deductible	\$0	\$0	\$480 (Tiers 3-5)
Initial Coverage Limit	\$4,430	\$9,500	\$4,430



Devoted Health Extras – Miami-Dade Plans

	Essentials Miami-Dade (HMO)	Core Miami-Dade (HMO)	Prime South Florida (HMO)
Dental	Preventive & basic restorative Up to \$750	Preventive & comprehensive Up to \$2,000 in comprehensive	Preventive & comprehensive Up to \$2,000 in comprehensive
Hearing	\$599 / \$899 copay per aid	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$25 per month	\$75 per month	\$100 per month
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 24 one-way trips Unlimited to PCP	\$0 - 30 one-way trips Unlimited to PCP	\$0 - 48 one-way trips Unlimited to PCP
Vision	\$150 per year	\$300 per year	\$350 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	N/A	\$500 per year	\$500 per year



Devoted Health Broward County HMO Plans

	Essentials Broward (HMO)	Core Broward (HMO)	Prime South Florida (HMO)
Plan Highlights	\$110 Part B premium buydown , \$0 monthly premium, dental included!	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits
Premium	\$0	\$0	\$30.80 (2022 TBD)
Max out-of-pocket	\$3,400	\$2,500	\$3,400
PCP/Specialist Copay	\$0/\$25	\$0/ \$0	\$0/\$0
Inpatient Hospital	\$200 per day, days 1-5	\$0 per stay	\$0 per stay
Outpatient Surgery	\$50 ASC; \$200 OH	\$50 ASC; \$100 OH	\$0 ASC; \$25 OH
Lab Copay (Office/Lab)	\$0	\$0	\$0
Rx Copays	\$0 / \$0 / \$45 / \$95 / 33%	\$0 / \$0 / \$5 / \$85 / 33%	\$0 / \$0 / 25% / 25% / 25%
Rx Deductible	\$100 (Tiers 4-5)	\$0	\$480 (Tiers 3-5)



Devoted Health Extras – Broward HMO Plans

	Essentials Broward (HMO)	Core Broward (HMO)	Prime Broward (HMO)
Dental	Preventive & basic restorative Up to \$750	Preventive & comprehensive Up to \$2,000 in comprehensive	Preventive & comprehensive Up to \$2,000 in comprehensive
Hearing	\$599 / \$899 copay per aid	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$30 per month	\$75 per month	\$100 per month
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 24 one-way trips Unlimited to PCP	\$0 - 30 one-way trips Unlimited to PCP	\$0 - 48 one-way trips Unlimited to PCP
Vision	\$125 per year	\$300 per year	\$350 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	N/A	\$500 per year	\$500 per year



Devoted Health Palm Beach HMO Plans

	Essentials Palm Beach (HMO)	Core Palm Beach (HMO)	Prime South Florida (HMO)
Plan Highlights	\$110 Part B premium buydown , \$0 monthly premium, dental included!	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits
Premium	\$0	\$0	\$30.80 (2022 TBD)
Max out-of-pocket	\$3,400	\$3,400	\$3,400
PCP/Specialist Copay	\$0 / \$25	\$0 / \$5	\$0 / \$0
Inpatient Hospital	\$150 per day, days 1-6	\$35 per day, days 1-6	\$0 per stay
Outpatient Surgery	\$50 ASC; \$150 OH	\$25 ASC; \$35 OH	\$0 ASC; \$25 OH
Lab Copay (Office/Lab)	\$0	\$0	\$0
Rx Copays	\$0 / \$5 / \$45 / \$95 / 31%	\$0 / \$0 / \$15 / \$95 / 33%	\$0 / \$0 / 25% / 25% / 25%
Rx Deductible	\$100 (T4-T5)	\$0	\$480 (Tiers 3-5)



Devoted Health Extras – Palm Beach Plans

	Essentials Palm Beach (HMO)	Core Palm Beach (HMO)	Prime Palm Beach (HMO)
Dental	Preventive & basic restorative Up to \$750	Preventive & comprehensive Up to \$2,000 in comprehensive	Preventive & comprehensive Up to \$2,000 in comprehensive
Hearing	\$599 / \$899 copay per aid	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$30 per month	\$75 per month	\$100 per month
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 24 one-way trips Unlimited to PCP	\$0 - 30 one-way trips Unlimited to PCP	\$0 - 48 one-way trips Unlimited to PCP
Vision	\$125 per year	\$375 per year	\$350 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	N/A	\$500 per year	\$500 per year



Devoted Health Broward & Palm Beach PPO Plan

	Devoted Health Latitude South Florida PPO
Plan Highlights	\$0 monthly plan premium, no referrals, in and out of network, rich supplemental benefits
Premium	\$0
Max out-of-pocket	\$3,500 / \$6,500
PCP/Specialist Copay	PCP: \$0 / \$35 Specialist: \$30 / \$60
Inpatient Hospital	\$250 Days 1-5 IN & OUT
Outpatient Surgery	\$150 ASC, \$250 OH / 40%
Lab Copay (Office/Lab)	\$0 lab and office, \$25 OH / 40%
Rx Copays	\$0 / \$0 / \$47 / \$100 / 30%
Rx Deductible	\$150 (Tiers 3-5)



Devoted Health Broward & Palm Beach PPO Plan, cont.

	Devoted Health Latitude South Florida PPO
Dental & Vision	\$1,250 combined dental & vision reimbursable allowance (any provider - no network limitation)
Hearing	\$399/\$699 per aid
Over-the-Counter	\$90 every 3 months
Personal Emergency Response Device	\$0 per month
Transportation	Not Covered
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	\$500 per year



Devoted Health Greater Orlando HMO Plans

	Essentials Greater Orlando (HMO)	Core Greater Orlando (HMO)	Prime (HMO)
Plan Highlights	\$115 Part B premium buydown , \$0 monthly premium, \$0 Rx deductible, dental included!	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits
Service Area	Osceola, Seminole, & Orange Counties	Osceola, Seminole, & Orange Counties	Osceola, Seminole, & Orange Counties
Premium	\$0	\$0	\$30.80 (2022 TBD)
Max out-of-pocket	\$3,400	\$2,750	\$3,400
PCP/Specialist Copay	\$0/\$20	\$0 / \$10	\$0/\$0
Inpatient Hospital	\$225 per day, days 1-7	\$50 per day, days 1-5	\$0
Outpatient Surgery	\$100 ASC; \$225 OH	\$25 ASC; \$50 OH	\$0 ASC; \$25 OH
Lab Copay (Office/Lab)	\$0	\$0	\$0
Rx Copays	\$0 / \$5 / \$47 / \$95 / 33%	\$0 / \$0 / \$25 / \$85 / 33%	\$0 / \$0 / 25% / 25% / 25%
Rx Deductible	\$0	\$0	\$480 (Tiers 3-5)



Devoted Health Extras – Greater Orlando Plans

	Essentials Greater Orlando (HMO)	Core Greater Orlando (HMO)	Prime Greater Orlando (HMO)
Dental	Preventive & basic restorative Up to \$750	Preventive & comprehensive Up to \$2,000 for comprehensive	Preventive & comprehensive Up to \$2,000 for comprehensive
Hearing	\$599 / \$899 copay per aid	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$30 per month	\$50 per month	\$100 per month
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 24 one-way trips Unlimited to PCP	\$0 - 30 one-way trips Unlimited to PCP	\$0 - 48 one-way trips Unlimited to PCP
Vision	\$125 per year	\$400 per year	\$300 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$300 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	N/A	\$500 per year	\$500 per year



Devoted Health Greater Orlando PPO Plan

	Devoted Health Latitude Greater Orlando PPO
Plan Highlights	\$0 monthly plan premium, no referrals, in and out of network, rich supplemental benefits
Premium	\$0
Max out-of-pocket	\$4,900 / \$10,000
PCP/Specialist Copay	PCP: \$0 / \$35 Specialist: \$30 / \$60
Inpatient Hospital	\$285 Days 1-6 INN & OUT
Outpatient Surgery	\$150 ASC, \$270 OH / 40%
Lab Copay (Office/Lab)	\$0 lab and office, \$25 OH / 40%
Rx Copays	\$0 / \$0 / \$47 / \$100 / 30%
Rx Deductible	\$150 (Tiers 3-5)



Devoted Health Greater Orlando PPO Plan, cont.

	Devoted Health Latitude Greater Orlando PPO
Dental & Vision	\$1,250 combined dental & vision reimbursable allowance (any provider - no network limitation)
Hearing	\$399/\$699 per aid
Over-the-Counter	\$60 every 3 months
Personal Emergency Response Device	\$0 per month
Transportation	Not Covered
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	\$500 per year



Devoted Health Greater Tampa Bay HMO Plans

	Essentials Greater Tampa Bay (HMO)	Core Greater Tampa Bay (HMO)	Prime Greater Tampa Bay (HMO)
Plan Highlights	\$148.50 Part B premium buydown , \$0 monthly premium, \$0 Rx deductible, dental included!	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits
Service Area	Hillsborough, Pinellas, & Hernando, & Pasco Counties	Hillsborough, Pinellas, Hernando, & Pasco Counties	Hillsborough, Pinellas, Hernando, & Pasco Counties
Premium	\$0	\$0	\$30.80 (2022 TBD)
Max out-of-pocket	\$3,400	\$1,900	\$2,900
PCP/Specialist Copay	\$0/\$30	\$0/\$5	\$0/\$0
Inpatient Hospital	\$195 per day, days 1-6	\$25 per day, days 1-5	\$0
Outpatient Surgery	\$95 ASC; \$195 OH	\$25 ASC; \$90 OH	\$0 ASC; \$25 OH
Lab Copay (Office/Lab)	\$0	\$0	\$0
Rx Copays	\$0 / \$5 / \$47 / \$100 / 33%	\$0 / \$0 / \$8 / \$100 / 33%	\$0 / \$0 / 25% / 25% / 25%
Rx Deductible	\$0	\$0	\$480 (Tiers 3-5)



Devoted Health Extras – Greater Tampa Bay Plans

	Essentials Greater Tampa Bay (HMO)	Core Greater Tampa Bay (HMO)	Prime (HMO)
Dental	Preventive & basic restorative Up to \$750	Preventive & comprehensive Up to \$2,000 comprehensive	Preventive & comprehensive Up to \$2,000 in comprehensive
Hearing	\$599 / \$899 copay per aid	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$30 per month	\$75 per month	\$100 per month
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 20 one-way trips Unlimited to PCP	\$0 - 30 one-way trips Unlimited to PCP	\$0 - 48 one-way trips Unlimited to PCP
Vision	\$150 per year	\$400 per year	\$400 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$300 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	N/A	\$500 per year	\$500 per year



Devoted Health Greater Tampa Bay PPO Plan

	Devoted Health Latitude Greater Tampa Bay PPO
Plan Highlights	\$0 monthly plan premium, no referrals, in and out of network, rich supplemental benefits
Premium	\$0
Max out-of-pocket	\$4,900 / \$10,000
PCP/Specialist Copay	PCP: \$0 / \$45 Specialist: \$30 / \$60
Inpatient Hospital	\$295 Days 1-5 INN & OUT
Outpatient Surgery	\$150 ASC, \$295 OH / 40%
Lab Copay (Office/Lab)	\$0 lab and office, \$25 OH / 40%
Rx Copays	\$0 / \$0 / \$47 / \$100 / 30%
Rx Deductible	\$150 (Tiers 3-5)



Devoted Health Greater Tampa Bay PPO Plan, cont.

	Devoted Health Latitude Greater Tampa Bay PPO
Dental & Vision	\$1,250 combined dental & vision reimbursable allowance (any provider - no network limitation)
Hearing	\$399/\$699 per aid
Over-the-Counter	\$60 every 3 months
Personal Emergency Response Device	\$0 per month
Transportation	Not Covered
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	\$500 per year



Devoted Health - Polk County HMO Plans

	Essentials Polk (HMO)	Core Greater Tampa Bay (HMO)	Prime Greater Tampa Bay (HMO)
Plan Highlights	\$148.50 Part B premium buydown , \$0 monthly premium, \$0 Rx deductible, dental included!	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits
Service Area	Polk County	Polk County	Polk County
Premium	\$0	\$0	\$30.80 (2022 TBD)
Max out-of-pocket	\$3,400	\$2,900	\$2,900
PCP/Specialist Copay	\$0/\$35	\$0/\$10	\$0/\$0
Inpatient Hospital	\$250 per day, days 1-6	\$50 per day, days 1-7	\$0
Outpatient Surgery	\$95 ASC; \$250 OH	\$25 ASC; \$90 OH	\$0 ASC; \$25 OH
Lab Copay (Office/Lab)	\$0	\$0	\$0
Rx Copays	\$0 / \$5 / \$47 / \$100 / 33%	\$0 / \$0 / \$8 / \$100 / 33%	\$0 / \$0 / 25% / 25% / 25%
Rx Deductible	\$0	\$0	\$480 (Tiers 3-5)



Devoted Health Extras – Polk County Plans

	NEW! Essentials Polk (HMO)	Core Greater Tampa Bay (HMO)	Prime (HMO)
Dental	Preventive & basic restorative Up to \$750	Preventive & comprehensive Up to \$2,000 comprehensive	Preventive & comprehensive Up to \$2,000 in comprehensive
Hearing	\$599 / \$899 copay per aid	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$30 per month	\$75 per month	\$100 per month
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 20 one-way trips Unlimited to PCP	\$0 - 30 one-way trips Unlimited to PCP	\$0 - 48 one-way trips Unlimited to PCP
Vision	\$150 per year	\$400 per year	\$400 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	N/A	\$500 per year	\$500 per year



Devoted Health Polk PPO Plan

	Devoted Health Latitude Polk PPO
Plan Highlights	\$0 monthly plan premium, no referrals, in and out of network, rich supplemental benefits
Premium	\$0
Max out-of-pocket	\$5,500 / \$10,000
PCP/Specialist Copay	PCP: \$0 / \$45 Specialist: \$30 / \$70
Inpatient Hospital	\$295 Days 1-5 INN & OUT
Outpatient Surgery	\$150 ASC, \$295 OH / 40%
Lab Copay (Office/Lab)	\$0 lab and office, \$25 OH / 40%
Rx Copays	\$0 / \$0 / \$47 / \$100 / 30%
Rx Deductible	\$150 (Tiers 3-5)



Devoted Health Polk PPO Plan, cont.

	Devoted Health Latitude Polk PPO
Dental & Vision	\$1,250 combined dental & vision reimbursable allowance (any provider - no network limitation)
Hearing	\$399/\$699 per aid
Over-the-Counter	\$60 every 3 months
Personal Emergency Response Device	\$0 per month
Transportation	Not Covered
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	\$500 per year



Devoted Health North Central HMO Plans

	NEW! Essentials (HMO)	Core (HMO)	Prime (HMO)
Plan Highlights	\$105 Part B premium buydown, \$0 monthly premium, \$0 Rx deductible, dental included!	\$0 monthly premium, \$0 Rx deductible, rich benefits, dental included!	Low monthly premium (\$0 for full LIS), rich benefits
Service Area	Marion, Sumter, & Lake Counties	Marion, Sumter, & Lake Counties	Marion, Sumter, & Lake Counties
Premium	\$0	\$0	\$30.80 (2022 TBD)
Max out-of-pocket	\$3,400	\$2,750	\$2,750
PCP/Specialist Copay	\$0/\$20	\$0 / \$5	\$0/\$0
Inpatient Hospital	\$225 per day, days 1-6	\$40 per day, days 1-5	\$25 per day, days 1-5
Outpatient Surgery	\$100 ASC; \$200 OH	\$25 ASC; \$50 OH	\$0 ASC; \$25 OH
Lab Copay (Office/Lab)	\$0	\$0	\$0
Rx Copays	\$0 / \$5 / \$35 / \$85 / 33%	\$0 / \$0 / \$20 / \$85 / 33%	\$0 / \$0 / \$15 / \$85 / 33%
Rx Deductible	\$0	\$0	\$0



Devoted Health Extras – North Central Plans

	NEW! Essentials (HMO)	Core (HMO)	Prime (HMO)
Dental	Preventive & basic restorative Up to \$750	Preventive & basic restorative Up to \$2,000 in comprehensive	Preventive & comprehensive Up to \$3,000 in comprehensive
Hearing	\$599 / \$899 copay per aid	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$40 per month	\$75 per month	\$100 per month
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 30 one-way trips Unlimited to PCP	\$0 - 30 one-way trips Unlimited to PCP	\$0 - 48 one-way trips Unlimited to PCP
Vision	\$200 per year	\$400 per year	\$400 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$300 Devoted Wellness Bucks
Wigs for Chemotherapy	N/A	\$500 per year	\$500 per year



Devoted Health Greater Jacksonville HMO Plans

	Essentials Greater Jacksonville (HMO)	Core Greater Jacksonville (HMO)	Prime Greater Jacksonville (HMO)
Plan Highlights	\$110 Part B premium buydown , \$0 monthly premium, \$0 Rx deductible, dental included!	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits
Service Area	Clay, Duval, & Nassau Counties	Clay, Duval, & Nassau Counties	Clay, Duval, & Nassau Counties
Premium	\$0	\$0	\$30.70 (2022 TBD)
Max out-of-pocket	\$3,400	\$3,400	\$3,100
PCP/Specialist Copay	\$0/ \$35	\$0 / \$10	\$0/\$0
Inpatient Hospital	\$350 per day, days 1-5	\$125 per day, days 1-5	\$100 per day, days 1-5
Outpatient Surgery	\$100 ASC; \$250 OH	\$75 ASC; \$125 OH	\$0 ASC; \$50 OH
Lab Copay (Office/Lab)	\$0	\$0	\$0
Rx Copays	\$0 / \$5 / \$47 / \$95 / 33%	\$0 / \$0 / \$45 / \$95 / 33%	\$0 / \$0 / \$45 / \$95 / 33%
Rx Deductible	\$0	\$0	\$0



Devoted Health Extras – Greater Jacksonville Plans

	Essentials Greater Jacksonville (HMO)	Core Greater Jacksonville (HMO)	Prime Greater Jacksonville (HMO)
Dental	Preventive & basic restorative Up to \$750	Preventive & comprehensive Up to \$2,000 comprehensive	Preventive & comprehensive Up to \$3,000 comprehensive
Hearing	\$599 / \$899 copay per aid	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$50 per month	\$50 per month	\$75 per month
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 24 one-way trips Unlimited to PCP	\$0 - 48 one-way trips Unlimited to PCP	\$0 - 48 one-way trips Unlimited to PCP
Vision	\$200 per year	\$400 per year	\$500 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$300 Devoted Wellness Bucks
Wigs for Chemotherapy	N/A	\$500 per year	\$500 per year



Devoted Health Greater Jacksonville PPO Plan

	Devoted Health Latitude Greater Jacksonville PPO
Plan Highlights	\$0 monthly plan premium, no referrals, in and out of network, rich supplemental benefits
Premium	\$0
Max out-of-pocket	\$4,900 / \$10,000
PCP/Specialist Copay	PCP: \$0 / \$35 Specialist: \$30 / \$60
Inpatient Hospital	\$295 Days 1-5 INN & OUT
Outpatient Surgery	\$150 ASC, \$270 OH / 40%
Lab Copay (Office/Lab)	\$0 lab and office, \$25 OH / 40%
Rx Copays	\$0 / \$0 / \$47 / \$100 / 30%
Rx Deductible	\$150 (Tiers 3-5)



Devoted Health Greater Jacksonville PPO Plan, cont.

	Devoted Health Latitude Greater Jacksonville PPO
Dental & Vision	\$1,250 combined dental & vision reimbursable allowance (any provider - no network limitation)
Hearing	\$399/\$699 per aid
Over-the-Counter	\$75 every 3 months
Personal Emergency Response Device	\$0 per month
Transportation	Not Covered
Wellness	\$0 Silversneakers & \$300 Devoted Wellness Bucks
Wigs for Chemotherapy	\$500 per year



Devoted Health Manatee HMO Plans

	Essentials Manatee (HMO)	Core Manatee (HMO)	Prime Manatee (HMO)
Plan Highlights	\$125 Part B premium buydown , \$0 monthly premium, \$0 Rx deductible, dental included!	\$0 monthly premium, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits
Service Area	Manatee County	Manatee County	Manatee County
Premium	\$0	\$0	\$30.70 (2022 TBD)
Max out-of-pocket	\$3,400	\$2,900	\$2,900
PCP/Specialist Copay	\$0/\$30	\$0/ \$10	\$0/\$0
Inpatient Hospital	\$195 per day, days 1-6	\$75 per day, days 1-5	\$45 per day, days 1-5
Outpatient Surgery	\$100 ASC; \$195 OH	\$25 ASC; \$75 OH	\$0 ASC; \$45 OH
Lab Copay (Office/Lab)	\$0	\$0	\$0
Rx Copays	\$0 / \$0 / \$47 / \$95 / 33%	\$0 / \$0 / \$10 / \$95 / 33%	\$0 / \$0 / \$10 / \$95 / 33%
Rx Deductible	\$0	\$0	\$0



Devoted Health Extras – Manatee Plans

	Essentials Manatee (HMO)	Core Manatee (HMO)	Prime Manatee (HMO)
Dental	Preventive & basic restorative Up to \$750	Preventive & comprehensive Up to \$2,000 comprehensive	Preventive & comprehensive Up to \$3,000 comprehensive
Hearing	\$599 / \$899 copay per aid	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$50 per month	\$60 per month	\$75 per month
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 24 one-way trips Unlimited to PCP	\$0 - 30 one-way trips Unlimited to PCP	\$0 - 30 one-way trips Unlimited to PCP
Vision	\$125 per year	\$300 per year	\$350 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$300 Devoted Wellness Bucks
Wigs for Chemotherapy	N/A	\$500 per year	\$500 per year



Devoted Health Manatee PPO Plan

	Devoted Health Latitude Manatee PPO
Plan Highlights	\$0 monthly plan premium, no referrals, in and out of network, rich supplemental benefits - identical in and out of network copays!
Premium	\$0
Max out-of-pocket	\$4,900 / \$4,900
PCP/Specialist Copay	PCP: \$0 / \$0 Specialist: \$30 / \$30
Inpatient Hospital	\$295 Days 1-5 IN & OUT
Outpatient Surgery	\$150 ASC, \$295 OH IN & OUT
Lab Copay (Office/Lab)	\$0 lab and office, \$25 OH IN & OUT
Rx Copays	\$0 / \$0 / \$47 / \$100 / 30%
Rx Deductible	\$150 (Tiers 3-5)



Devoted Health Manatee PPO Plan, cont.

	Devoted Health Latitude Manatee PPO
Dental & Vision	\$1,500 combined dental & vision reimbursable allowance (any provider - no network limitation)
Hearing	\$399/\$699 per aid
Over-the-Counter	\$60 every 3 months
Personal Emergency Response Device	\$0 per month
Transportation	Not Covered
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	\$500 per year



Devoted Health Dual DSNP HMO Plans

Dual DSNP HMO

Service Area

Miami-Dade, Broward, Palm Beach, Osceola, Seminole, Orange, Clay, Duval, Nassau, Hillsborough, Pinellas, & Polk Counties
New for 2022!: Lake, Marion, Sumter, Manatee, Hernando, Pasco

Medicare & Medicaid benefits

All Medicare & Medicaid benefit are \$0 except for ambulance and ER copays for partials

Grocery Wallet

All DSNP plans offer a pre-loaded card for in-store grocery purchases (member must have chronic condition)
\$75 monthly in Miami-Dade, Broward, Palm Beach, \$60 monthly in Greater Tampa Bay, \$50 monthly in all other markets

Dental

Preventive & unlimited comprehensive most plans
 Preventive & \$3,000 comprehensive dental in Greater Jacksonville

Hearing

\$0/ \$299 copay per aid

Over-the-Counter

\$100 per month

Personal Emergency Response Device

\$0 per month

Personal Home Care

\$0 - 3 hours per day up to 42 hours per year

Transportation

\$0 - Unlimited trips

Vision

\$400-\$500 per year, depending on region

Wellness

\$0 Silversneakers & \$150 Devoted Wellness Bucks most plans
 \$0 Silversneakers & \$300 Devoted Wellness Bucks in Greater Jacksonville

Wigs for Chemotherapy

\$500 per year

Part D

\$0 COPAY FOR ALL COVERED DRUGS



Texas



Devoted Health Greater Houston Plans

	Core Greater Houston (HMO)	Prime Greater Houston(HMO)
Plan Highlights	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), richest supplemental benefits
Service Area	Brazoria, Chambers , Fort Bend, Galveston, Hardin , Harris, Jefferson , Liberty , Montgomery, Orange , San Jacinto , Waller, & Walker	Brazoria, Chambers , Fort Bend, Galveston, Hardin , Harris, Jefferson , Liberty , Montgomery, Orange , San Jacinto , Waller, & Walker
Premium	\$0	\$22.50 (2022 TBD)
Max out-of-pocket	\$3,400	\$3,400
PCP/Specialist Copay	\$0 / \$15	\$0 / \$0
Inpatient Hospital	\$225 per stay	\$225 per stay
Outpatient Surgery	\$75 ASC; \$150 OH	\$50 ASC; \$100 OH
Lab Copay	\$0 office & lab / \$25 OH	\$0 office & lab / \$25 OH
Rx Copays	\$0 / \$0 / \$40 / \$80 / 33%	\$0 / \$0 / \$40 / \$80 / 33%
Rx Deductible	\$0	\$0



Devoted Health Extras – Greater Houston Plans

	Core Greater Houston (HMO)	Prime Greater Houston(HMO)
Dental	Preventive & comprehensive Up to \$3,000 comprehensive	Preventive & comprehensive Up to \$5,000 comprehensive
Hearing	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$50 per month	\$65 per month
Personal Emergency Response Device	\$0 per month	\$0 per month
Transportation	\$0 - 30 one-way trips Unlimited to PCP	\$0 - 48 one-way trips Unlimited to PCP
Vision	\$200 per year	\$300 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$300 Devoted Wellness Bucks
Wigs for Chemotherapy	\$500 per year	\$500 per year



Devoted Health San Antonio Plans

	Core San Antonio (HMO)	Prime San Antonio (HMO)	New! BeWell (HMO CSNP)
Plan Highlights	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits	\$0 monthly premium, extra benefits tailored to diabetic members
Service Area	Bexar, Comal, Guadalupe	Bexar, Comal, Guadalupe	Bexar, Comal, Guadalupe
Premium	\$0	\$22.50 (2022 TBD)	\$0
Max out-of-pocket	\$3,400	\$3,400	\$3,400
PCP/Specialist Copay	\$0 / \$15	\$0 / \$10	\$0 / \$10
Inpatient Hospital	\$100 per day, days 1-5	\$100 per day, days 1-5	\$100 per day, days 1-5
Outpatient Surgery	\$50 ASC; \$100 OH	\$25 ASC; \$100 OH	\$50 ASC; \$100 OH
Lab Copay	\$0 office & lab, \$25 OH	\$0 office & lab, \$15 OH	\$0 office & lab, \$15 OH
Rx Copays	\$0 / \$0 / \$40 / \$99 / 33%	\$0 / \$0 / 25% / 25% / 25%	\$0 / \$0 / \$40 / \$99 / 33%
Rx Deductible	\$0	\$480 (Tiers 3-5)	\$0



Devoted Health Extras – San Antonio Plans

	Core San Antonio (HMO)	Prime San Antonio (HMO)	New! BeWell (HMO CSNP)
Grocery Wallet*	N/A	\$25 per month	\$50 per month
Dental	Preventive & comprehensive Up to \$3,000 comprehensive	Preventive & comprehensive Up to \$3,500 comprehensive	Preventive & comprehensive Up to \$5,000 comprehensive
Hearing	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$50 per month	\$80 per month	\$50 per month
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 24 one-way trips Unlimited to PCP	\$0 - 36 one-way trips Unlimited to PCP	\$0 - 36 one-way trips Unlimited to PCP
Vision	\$250 per year	\$300 per year	\$300 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$300 Devoted Wellness Bucks	\$0 Silversneakers & \$300 Devoted Wellness Bucks
Wigs for Chemotherapy	\$500 per year	\$500 per year	\$500 per year

*Must have chronic condition



Arizona



Devoted Health Arizona - Maricopa & Pinal Plans

	Flex (HMO)	Core (HMO)	Select (HMO)
Plan Highlights	No referrals, up to \$3,000 annual allowance toward dental, fitness, eyewear, naturopathic care and more!	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits
Service Area	Maricopa & Pinal	Maricopa & Pinal	Maricopa & Pinal
Premium	\$45	\$0	\$36.10 (2022 TBD)
Max out-of-pocket	\$4,200	\$3,200	\$3,200
PCP/Specialist Copay	\$0 / \$25	\$0 / \$15	\$0/\$5
Inpatient Hospital	\$300 per day, days 1-5	\$175 per day, days 1-7	\$175 per day, days 1-7
Outpatient Surgery	\$150 ASC; \$300 OH	\$75 ASC; \$175 OH	\$25 ASC; \$175 OH
Lab Copay	\$0	\$0	\$0
Rx Copays	\$0 / \$5 / \$45 / \$95 / 33%	\$0 / \$5 / \$45 / \$95 / 33%	\$0 / \$0 / 25% / 25% / 25%
Rx Deductible	\$0	\$0	\$480 (T3-T5)



Devoted Health Extras – Maricopa & Pinal Plans

	Flex (HMO)	Core (HMO)	Select (HMO)
Grocery Wallet	N/A	N/A	\$25 per month*
Dental	myFlex Allowance	Preventive & comprehensive Up to \$3,000 comprehensive	Preventive & comprehensive Up to \$5,000 comprehensive
Hearing	\$599 / \$899 copay per aid	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$50 every 3 months	\$75 every 3 months	\$100 every 3 months
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	Not covered	\$0 - 6 one-way trips	\$0 - 24 one-way trips
Vision	myFlex Allowance	Up to \$230 per year	Up to \$230 per year
Wellness	myFlex Allowance	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	N/A	\$500 per year	\$500 per year

*Must have chronic condition



Devoted Health Arizona - Maricopa & Pinal Plans

	New! Liberty (HMO MA Only)	New! Advance (HMO C-SNP)	New! Essence (HMO C-SNP)
Plan Highlights	\$100 Part B premium buydown, \$0 monthly premium, preventive dental, no Rx coverage	\$0 monthly premium, extra benefits tailored to diabetic members	\$0 monthly premium, extra benefits tailored to cardiac & CHF members
Service Area	Maricopa, Pinal	Maricopa, Pinal	Maricopa (no Pinal)
Premium	\$0	\$0	\$0
Max out-of-pocket	\$4,400	\$3,200	\$3,200
PCP/Specialist Copay	\$0/\$40	\$0 PCP & Endocrinologists \$15 all other specialists	\$0 PCP, Cardiologist, Pulmonologist, Nephrologist / \$15 all other specialists
Inpatient Hospital	\$225 per day, days 1-7	\$175 per day, days 1-7	\$175 per day, days 1-7
Outpatient Surgery	\$100 ASC; \$200 OH	\$75 ASC; \$175 OH	\$75 ASC; \$175 OH
Lab Copay	\$0	\$0	\$0
Rx Copays	Not Covered	\$0 / \$0 / \$45 / \$95 / 33%	\$0 / \$0 / \$45 / \$95 / 33%
Rx Deductible	Not Covered	\$0	\$0



Devoted Health Extras – Maricopa & Pinal Plans

	New! Liberty (HMO MA Only)	New! Advance (HMO C-SNP)	New! Essence (HMO C-SNP)
Grocery Wallet*	N/A	\$25 per month	\$25 per month
Dental	Preventive Only	Preventive & comprehensive Up to \$4,000 in comprehensive	Preventive & comprehensive Up to \$4,000 in comprehensive
Hearing	\$399 / \$699 copay per aid	\$399 / \$699 copay per aid	\$399 / \$699 copay per aid
Over-the-Counter	\$50 every 3 months	\$100 every 3 months	\$100 every 3 months
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 24 one-way trips Unlimited to the VA	\$0 - 48 one-way trips	\$0 - 48 one-way trips
Vision	Up to \$230 per year	Up to \$230 per year	Up to \$230 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$300 Devoted Wellness Bucks	\$0 Silversneakers & \$300 Devoted Wellness Bucks
Wigs for Chemotherapy	\$500 per year	\$500 per year	\$500 per year

*Must have chronic condition



Devoted Health Arizona - Yavapai Plans

	New! Core (HMO)	New! Select (HMO)	New! Advance (HMO C-SNP)
Plan Highlights	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits	\$0 monthly premium, extra benefits tailored to diabetic members
Service Area	Yavapai	Yavapai	Yavapai
Premium	\$0	TBD (2022 TBD)	\$0
Max out-of-pocket	\$3,400	\$3,400	\$3,400
PCP/Specialist Copay	\$0 / \$20	\$0 / \$5	\$0 PCP & Endocrinologists \$15 all other specialists
Inpatient Hospital	\$175 per day, days 1-7	\$150 per day, days 1-7	\$175 per day, days 1-7
Outpatient Surgery	\$75 ASC; \$175 OH	\$25 ASC; \$150 OH	\$75 ASC; \$175 OH
Lab Copay	\$0	\$0	\$0
Rx Copays	\$0 / \$5 / \$45 / \$100 / 33%	\$0 / \$5 / 25% / 25% / 25%	\$0 / \$0 / \$45 / \$95 / 33%
Rx Deductible	\$0	\$480 (T3-T5)	\$0



Devoted Health Extras – Yavapai Plans

	<i>New! Core (HMO)</i>	<i>New! Select (HMO)</i>	<i>New! Essence (HMO C-SNP)</i>
Grocery Wallet*	N/A	\$25 per month	\$25 per month
Dental	Preventive & comprehensive Up to \$3,000 in comprehensive	Preventive & comprehensive Up to \$5,000 in comprehensive	Preventive & comprehensive Up to \$4,000 in comprehensive
Hearing	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid	\$399 / \$699 copay per aid
Over-the-Counter	\$125 every 3 months	\$125 every 3 months	\$125 every 3 months
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 24 one-way trips	\$0 - 60 one-way trips	\$0 - 60 one-way trips
Vision	Up to \$230 per year	Up to \$230 per year	Up to \$230 per year
Wellness	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$300 Devoted Wellness Bucks
Wigs for Chemotherapy	\$500 per year	\$500 per year	\$500 per year

*Must have chronic condition



Ohio



Devoted Health Ohio Plans

All 2022 plans are pending CMS approval

	Saver (HMO)	Core (HMO)	Prime (HMO)
Plan Highlights	\$85 Part B premium buydown, \$0 monthly premium, dental included!	\$0 monthly premium, low out-of-pocket max, \$0 Rx deductible, rich benefits	Low monthly premium (\$0 for full LIS), rich benefits
Service Area	Cuyahoga, Erie, Geauga, Huron, Lake, Lorain, Medina, Ottawa, Portage, Sandusky, Seneca, Stark, & Summit Counties New for 2022: Columbiana, Fulton, Hancock, Lucas, Wood, Mahoning, Trumbull	Cuyahoga, Erie, Geauga, Huron, Lake, Lorain, Medina, Ottawa, Portage, Sandusky, Seneca, Stark, & Summit Counties New for 2022: Columbiana, Fulton, Hancock, Lucas, Wood, Mahoning, Trumbull	Cuyahoga, Erie, Geauga, Huron, Lake, Lorain, Medina, Ottawa, Portage, Sandusky, Seneca, Stark, & Summit Counties New for 2022: Columbiana, Fulton, Hancock, Lucas, Wood, Mahoning, Trumbull
Premium	\$0	\$0	\$22.80 (2022 TBD)
Max out-of-pocket	\$5,900	\$4,200	\$4,100
PCP/Specialist Copay	\$0 / \$40	\$0 / \$30	\$0/\$25
Inpatient Hospital	\$450 per day, days 1-4	\$310 per day, days 1-7	\$295 per day, days 1-7
Outpatient Surgery	\$250 ASC; \$450 OH	\$195 ASC; \$310 OH	\$100 ASC; \$295 OH
Lab Copay (Office/Lab)	\$0	\$0	\$0
Rx Copays	\$0 / \$10 / \$47 / \$100 / 29%	\$0 / \$0 / \$42 / \$95 / 33%	\$0 / \$0 / \$42 / \$95 / 33%
Rx Deductible	\$200 (Tiers 4-5)	\$0	\$0



Devoted Health Extras – Ohio Plans

	Saver (HMO)	Core (HMO)	Prime (HMO)
Dental	Preventive	Preventive & comprehensive Up to \$3,000 comprehensive	Preventive & comprehensive Up to \$5,000 comprehensive
Hearing	\$599 / \$899 copay per aid	\$399 / \$699 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$90 every 3 months	\$120 every 3 months	\$150 every 3 months
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	Not covered	\$0 - 24 one-way trips Unlimited to PCP	\$0 - 30 one-way trips Unlimited to PCP
Vision	\$150 per year	\$200 per year	\$350 per year
Wellness	\$0 Silversneakers & \$300 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness dollars	\$0 Silversneakers & \$150 Devoted Wellness dollars
Wigs for Chemotherapy	N/A	\$500 per year	\$500 per year



Illinois



Devoted Health Illinois Plans

	New! Essentials (HMO)	New! Core (HMO)	New! Prime (HMO)
Plan Highlights	\$85 Part B premium buydown, \$0 monthly premium, \$0 Rx deductible, dental included!	\$0 monthly premium, \$0 Rx deductible, rich benefits, dental included!	Low monthly premium (\$0 for full LIS), rich benefits
Service Area	Cook, DuPage, Kane, Will, Lake, McHenry, Kendall	Cook, DuPage, Kane, Will, Lake, McHenry, Kendall	Cook, DuPage, Kane, Will, Lake, McHenry, Kendall
Premium	\$0	\$0	2022 TBD (~\$27)
Max out-of-pocket	\$4,500	\$2,900	\$2,900
PCP/Specialist Copay	\$0 / \$40	\$0 / \$15	\$0 / \$15
Inpatient Hospital	\$395 per day, days 1-5	\$150 per day, days 1-7	\$150 per day, days 1-6
Outpatient Surgery	\$150 ASC; \$395 OH	\$95 ASC; \$150 OH	\$95 ASC; \$150 OH
Lab Copay (Office/Lab)	\$0	\$0	\$0
Rx Copays	\$0 / \$15 / \$47 / \$100 / 33%	\$0 / \$0 / \$47 / \$100 / 33%	\$0 / \$0 / 25% / 25% / 25%
Rx Deductible	\$0	\$0	\$480 T3-T5



Devoted Health Extras – Illinois

	Essentials (HMO)	Core (HMO)	Prime (HMO)
Grocery Wallet*	N/A	N/A	\$35 per month
Dental	Preventive	Preventive & comprehensive Up to \$5,000 comprehensive	Preventive & comprehensive Up to \$5,000 comprehensive
Hearing	\$599 / \$899 copay per aid	\$199 / \$499 copay per aid	\$199 / \$499 copay per aid
Over-the-Counter	\$50 every 3 months	\$175 every 3 months	\$300 every 3 months
Personal Emergency Response Device	\$0 per month	\$0 per month	\$0 per month
Transportation	\$0 - 24 one-way trips	\$0 - 24 one-way trips	\$0 - 30 one-way trips Unlimited to PCP
Vision	\$125 per year	\$350 per year	\$400 per year
Wellness	\$0 Silversneakers & \$300 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks	\$0 Silversneakers & \$150 Devoted Wellness Bucks
Wigs for Chemotherapy	\$500 per year	\$500 per year	\$500 per year



Interested in contracting with Devoted Health?

Reach out to our Agent Support
at agent-support@devoted.com





**All 2022 plans pending CMS approval and
distribution of this material prior to
October 1, 2021 is strictly prohibited**

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