













# Overview of the 2024 Aetna<sup>®</sup> Medicare Extra Benefits Card

In 2024, some Aetna Medicare plans will offer an **Extra Benefits Card**, provided by NationsBenefits<sup>®</sup>, at no added cost. With this benefit, eligible members receive a monthly, quarterly or annual allowance to use toward certain spending categories.

The Extra Benefit Card allowance dollars are bundled into “wallets” that align to certain spending categories. Wallets, allowance amounts and frequencies vary by plan.

## What are the wallet options in 2024?

There are four different wallet options. Plans may have up to two of these wallets loaded to their Extra Benefits Card. Please refer to the Getting Started flyer for details and examples of items covered in the various categories (e.g., personal care items, pet care supplies, transportation, utilities and rent/mortgage assistance categories, etc.).

<b>Extra Supports Wallet</b> What's covered:	<b>Healthy Foods Wallet</b> What's covered:	<b>Over-the-Counter (OTC) Wallet</b> What's covered:	<b>Dental, Vision, Hearing Wallet</b> What's covered:
<ul style="list-style-type: none"> <li> <b>Food</b></li> <li> <b>Over-the-counter (OTC) items*</b></li> <li> <b>Personal care items</b></li> <li> <b>Pet care supplies**</b></li> <li> <b>Transportation</b></li> <li> <b>Utilities</b></li> <li> <b>Rent/Mortgage assistance</b></li> </ul>	<ul style="list-style-type: none"> <li> <b>Food</b></li> <li>• Beans and legumes</li> <li>• Dairy</li> <li>• Fresh, frozen or canned fruits and vegetables</li> <li>• Grains such as bread and pasta</li> <li>• Meat and seafood</li> <li>• Nutrition shakes/bars</li> <li>• Pantry staples like flour and spices</li> <li>• Soups</li> <li>• Water</li> </ul>	<ul style="list-style-type: none"> <li> <b>OTC</b></li> <li>• Cold and flu remedies</li> <li>• Dental care supplies like toothbrushes, denture adhesive, toothpaste and floss</li> <li>• Eye and ear care items</li> <li>• First aid supplies</li> <li>• Pain relievers</li> <li>• Sunscreen</li> </ul>	<ul style="list-style-type: none"> <li> <b>Dental</b></li> <li>• Dental fillings</li> <li>• Extractions and implants</li> <li>• Crowns and dentures</li> <li> <b>Vision</b></li> <li>• Annual eye exams</li> <li>• Eyeglass frames and lenses</li> <li>• Contact lenses</li> <li>• Prescription sunglasses</li> <li> <b>Hearing</b></li> <li>• Hearing aids and exams</li> </ul>

\*OTC items are only included in the Extra Supports Wallet for D-SNPs and Georgia/Gulf States market plans

\*\*Pet care supplies are excluded from the NJ FIDE plan.

Wallet allowance frequencies vary by plan and can be monthly, monthly with carryover, quarterly, or annual.

## High value provider (HVP) bonus

A high value provider (HVP) bonus is available on 39 plans for members who have an existing Extra Supports Wallet. Qualifying members (based on chronic condition or Extra Help/LIS) can get additional dollars added to their Extra Supports Wallet when they choose a PCP at Oak Street Health, ChenMed, Sage Health, One Medical, CenterWell or other select HVP groups.

The bonus only goes into effect when eligible members have a qualifying PCP on file with Aetna. Please see the separate HVP broker flyer for details on how this benefit works.

## Eligibility requirements

Some Extra Benefit Card wallets are offered automatically to all members of the plan. Other wallets require a member to qualify. See the plan list section for wallets and eligibility requirements by plan. Below are the eligibility requirements that certain wallets may have.

**Aetna Assist Program (D-SNP plans)** All plan members are eligible for wallets with this criteria because they qualify for LIS (Extra Help). No care management or clinical intervention is required.

**Aetna Assist Program (non-D-SNP plans)** To receive wallets with this criteria, members must receive LIS status (Extra Help) from CMS to qualify for the Aetna Assist Program. No care management or clinical intervention is required.

**Healthy Heart Partnership** To qualify for wallets with this criteria, members must have a Congestive Heart Failure (CHF) diagnosis, must opt in to the Healthy Heart Partnership program and must participate in care management.

**Special Supplemental Benefits for the Chronically Ill (SSBCI)** To qualify for a wallet with this criteria, members must be diagnosed with one or more of the following conditions. Qualification is determined through medical claims submission, or new members may self-attest to having one of the conditions below by calling the Member Services phone number on their ID card.

<b>Autoimmune disorders limited to:</b> Polyarteritis nodosa Polymyalgia rheumatica Polymyositis Pneumatoid arthritis Systemic lupus erythematosus	<b>Chronic heart failure</b>  <b>Chronic lung disorders limited to:</b> Asthma Chronic bronchitis Chronic obstructive pulmonary disease (COPD) Emphysema Pulmonary fibrosis Pulmonary hypertension	<b>Neurologic disorders limited to:</b> Amyotrophic lateral sclerosis (ALS) Epilepsy Extensive paralysis (i.e., hemiplegia, quadriplegia, paraplegia, monoplegia) Huntington's disease Multiple sclerosis (MS) Parkinson's disease Polyneuropathy Spinal stenosis Stroke-related neurologic deficit
<b>Cancer</b>	<b>Dementia</b>	<b>Severe hematologic disorders limited to:</b> Aplastic anemia Hemophilia Immune thrombocytopenic purpura Myelodysplastic syndrome Sickle-cell disease (excluding sickle-cell trait) Chronic venous thromboembolic disorder
<b>Cardiovascular disorders limited to:</b> Cardiac arrhythmias Coronary artery disease Peripheral vascular disease Chronic venous thromboembolic disorder	<b>Diabetes</b>	
<b>Chronic alcohol and other drug dependence</b>	<b>End-stage liver disease</b>	
<b>Chronic and disabling mental health conditions limited to:</b> Bipolar disorders Major depressive disorders Paranoid disorder Schizophrenia Schizoaffective disorder	<b>End-stage renal disease (ESRD) requiring dialysis</b>	
	<b>HIV/AIDS</b>	
	<b>Hyperlipidemia</b>	<b>Stroke</b>
	<b>Hypertension</b>	

# 2024 plans with the Extra Benefits Card

State	Plan name	Contract BPB	Eligibility criteria per wallet	Wallet, allowance and frequency	HVP bonus
AL	Aetna Medicare Dual Preferred (HMO D-SNP)	H3239-002	Aetna Assist Program	Extra Supports Wallet - \$175/month	
AL	Aetna Medicare Dual Preferred (HMO D-SNP)	H3239-003	Aetna Assist Program	Extra Supports Wallet - \$195/month	
AL	Aetna Medicare Dual Select (HMO D-SNP)	H3239-010	Aetna Assist Program	Extra Supports Wallet - \$125/month	
AL	Aetna Medicare Dual Signature (HMO D-SNP)	H3239-018	Aetna Assist Program	Extra Supports Wallet - \$180/month	\$30/month
AL	Aetna Medicare Dual Signature Select (HMO D-SNP)	H3239-019	Aetna Assist Program	Extra Supports Wallet - \$125/month	\$30/month
AL	Aetna Medicare Signature (HMO)	H3239-020	None SSBCI	OTC Wallet - \$105/quarter Extra Supports Wallet - \$90/quarter	\$30/quarter
AL	Aetna Medicare Freedom (PPO)	H5521-116	None SSBCI	OTC Wallet - \$75/quarter Extra Supports Wallet - \$75/quarter	
AL	Aetna Medicare Freedom (PPO)	H5521-171	None SSBCI	OTC Wallet - \$90/quarter Extra Supports Wallet - \$75/quarter	
AL	Aetna Medicare Freedom (PPO)	H5521-216	None SSBCI	OTC Wallet - \$90/quarter Extra Supports Wallet - \$75/quarter	
AL	Aetna Medicare Freedom (PPO)	H5521-222	None SSBCI	OTC Wallet - \$90/quarter Extra Supports Wallet - \$75/quarter	
AL	Aetna Medicare Freedom (PPO)	H5521-224	None SSBCI	OTC Wallet - \$105/quarter Extra Supports Wallet - \$90/quarter	
AL	Aetna Medicare Freedom (PPO)	H5521-227	None SSBCI	OTC Wallet - \$90/quarter Extra Supports Wallet - \$75/quarter	
AL	Aetna Medicare Eagle (PPO)	H5521-229	None SSBCI	OTC Wallet - \$150/quarter Extra Supports Wallet - \$150/quarter	
AL	Aetna Medicare Dual Choice (PPO D-SNP)	H5521-462	Aetna Assist Program	Extra Supports Wallet - \$160/month	
AL	Aetna Medicare Dual Select Choice (PPO D-SNP)	H5521-463	Aetna Assist Program	Extra Supports Wallet - \$125/month	
AL	Aetna Medicare Value Plus (PPO)	H5521-467	None Aetna Assist Program	OTC Wallet - \$40/month Extra Supports Wallet - \$50/month	
AR	Aetna Medicare Premier (PPO)	H1608-073	None SSBCI	OTC Wallet - \$90/quarter Extra Supports Wallet - \$105/quarter	
AR	Aetna Medicare Eagle Giveback (PPO)	H1608-074	None	OTC Wallet - \$150/quarter	
AR	Aetna Medicare Value Plus (PPO)	H1608-075	None Aetna Assist Program	OTC Wallet - \$40/month Extra Supports Wallet - \$75/month	
AR	Aetna Medicare Dual Choice (PPO D-SNP)	H1608-076	Aetna Assist Program	Extra Supports Wallet - \$190/month	
AR	Aetna Medicare Dual Select Choice (PPO D-SNP)	H1608-077	Aetna Assist Program	Extra Supports Wallet - \$85/month	
AR	Aetna Medicare Freedom (PPO)	H1608-078	None SSBCI	OTC Wallet - \$90/quarter Extra Supports Wallet - \$105/quarter	
AR	Aetna Medicare Signature (HMO)	H2663-067	None SSBCI	OTC Wallet - \$90/quarter Extra Supports Wallet - \$105/quarter	\$30/quarter
AR	Aetna Medicare Dual Preferred (HMO D-SNP)	H5325-007	Aetna Assist Program	Extra Supports Wallet - \$200/month	
AR	Aetna Medicare Dual Signature (HMO D-SNP)	H5325-010	Aetna Assist Program	Extra Supports Wallet - \$200/month	\$30/month
AR	Aetna Medicare Dual Signature Select (HMO D-SNP)	H5325-011	Aetna Assist Program	Extra Supports Wallet - \$85/month	\$30/month

# Plan list

State	Plan name	Contract BPB	Eligibility criteria per wallet	Wallet, allowance and frequency	HVP bonus
AZ	Aetna Medicare Prime Value Plus Plan (HMO-POS)	H3931-156	None	OTC Wallet - \$25/month	
			Aetna Assist Program	Healthy Foods Wallet - \$50/month	
AZ	Aetna Medicare Value Plus Plan (HMO-POS)	H3931-166	None	OTC Wallet - \$25/month	
			Aetna Assist Program	Healthy Foods Wallet - \$50/month	
AZ	Aetna Medicare Value Plus Plan (HMO-POS)	H3931-167	None	OTC Wallet - \$25/month	
			Aetna Assist Program	Healthy Foods Wallet - \$50/month	
AZ	Aetna Medicare Value Plus Plan (HMO-POS)	H3931-168	None	OTC Wallet - \$25/month	
			Aetna Assist Program	Healthy Foods Wallet - \$50/month	
AZ	Aetna Medicare Value Plus Plan (HMO-POS)	H3931-169	None	OTC Wallet - \$25/month	
			Aetna Assist Program	Healthy Foods Wallet - \$50/month	
AZ	Aetna Medicare Value Plus Plan (PPO)	H5521-424	None	OTC Wallet - \$25/month	
			Aetna Assist Program	Healthy Foods Wallet - \$50/month	
CA	Aetna Medicare Value Plus Plan (HMO-POS)	H0523-074	None	OTC Wallet - \$50/month	
			Aetna Assist Program	Healthy Foods Wallet - \$40/month	
CA	Aetna Medicare Value Plus Plan (HMO-POS)	H0523-076	None	OTC Wallet - \$50/month	
			Aetna Assist Program	Healthy Foods Wallet - \$40/month	
CA	Aetna Medicare Value Plus Plan (HMO-POS)	H0523-077	None	OTC Wallet - \$50/month	
			Aetna Assist Program	Healthy Foods Wallet - \$40/month	
CA	Aetna Medicare Value Plus Plan (HMO-POS)	H0523-078	None	OTC Wallet - \$50/month	
			Aetna Assist Program	Healthy Foods Wallet - \$40/month	
CA	Aetna Medicare Prime Value Plus Plan (HMO-POS)	H0523-079	None	OTC Wallet - \$60/month	
			Aetna Assist Program	Healthy Foods Wallet - \$40/month	
CA	Aetna Medicare Value Plus Plan (HMO-POS)	H0523-080	None	OTC Wallet - \$50/month	
			Aetna Assist Program	Healthy Foods Wallet - \$40/month	
CA	Aetna Medicare Preferred Plan (HMO D-SNP)	H4982-008	None	OTC Wallet - \$50/month	
			Aetna Assist Program	Healthy Foods Wallet - \$50/month	
CA	Aetna Medicare Preferred Plan (HMO D-SNP)	H4982-009	None	OTC Wallet - \$50/month	
			Aetna Assist Program	Healthy Foods Wallet - \$50/month	
CA	Aetna Medicare Preferred Plan (HMO D-SNP)	H4982-016	None	OTC Wallet - \$50/month	
			Aetna Assist Program	Healthy Foods Wallet - \$50/month	
CA	Aetna Medicare Value Plus Plan (HMO-POS)	H4982-017	None	OTC Wallet - \$50/month	
			Aetna Assist Program	Healthy Foods Wallet - \$40/month	
CA	Aetna Medicare Value Plus Plan (HMO-POS)	H4982-018	None	OTC Wallet - \$50/month	
			Aetna Assist Program	Healthy Foods Wallet - \$40/month	
CO	Aetna Medicare Premier 1 (HMO-POS)	H3931-153	None	OTC Wallet - \$75/quarter	
CO	Aetna Medicare Premier 2 (HMO-POS)	H3931-154	None	OTC Wallet - \$75/quarter	
CO	Aetna Medicare Elite 1 (HMO-POS)	H4711-006	None	OTC Wallet - \$75/quarter	
CO	Aetna Medicare Elite 2 (HMO-POS)	H4711-007	None	OTC Wallet - \$75/quarter	
CO	Aetna Medicare Premier 3 (HMO-POS)	H4711-008	None	OTC Wallet - \$75/quarter	
CO	Aetna Medicare Premier 3 (HMO-POS)	H4711-009	None	OTC Wallet - \$75/quarter	
CO	Aetna Medicare Eagle (HMO-POS)	H4711-010	None	OTC Wallet - \$90/quarter	
CO	Aetna Medicare Assure Premier (HMO D-SNP)	H4711-012	Aetna Assist Program	Extra Supports Wallet - \$215/month	
CO	Aetna Medicare Premier Plus 2 (PPO)	H5521-207	None	OTC Wallet - \$45/quarter	
CO	Aetna Medicare Premier Plus 1 (PPO)	H5521-250	None	OTC Wallet - \$75/quarter	
CO	Aetna Medicare Eagle 1 (PPO)	H5521-378	None	OTC Wallet - \$90/quarter	

# Plan list

State	Plan name	Contract BPB	Eligibility criteria per wallet	Wallet, allowance and frequency	HVP bonus
CO	Aetna Medicare Value Plus (PPO)	H5521-443	None	OTC Wallet - \$25/month	
			Aetna Assist Program	Healthy Foods Wallet - \$55/month	
CT	Aetna Medicare Assure Plus Plan (HMO-POS D-SNP)	H5793-017	Aetna Assist Program	Extra Supports Wallet - \$155/month (rolls over each month)	
CT	Aetna Medicare Assure Plan (HMO-POS D-SNP)	H5793-020	Aetna Assist Program	Extra Supports Wallet - \$65/month (rolls over each month)	
DC	Aetna Medicare Value Plus (HMO-POS)	H3931-095	Aetna Assist Program	Healthy Foods Wallet - \$105/month	
DE	Aetna Medicare Advantra Cares (HMO D-SNP)	H3959-063	Aetna Assist Program	Extra Supports Wallet - \$200/month	
FL	Aetna Medicare Select (HMO)	H1609-016	SSBCI	Extra Supports Wallet (excludes OTC) - \$30/month	
FL	Aetna Medicare Assure (HMO D-SNP)	H1609-017	Aetna Assist Program	Extra Supports Wallet - \$150/month	
FL	Aetna Medicare Select (HMO)	H1609-018	SSBCI	Extra Supports Wallet (excludes OTC) - \$50/month	
FL	Aetna Medicare Assure (HMO D-SNP)	H1609-019	Aetna Assist Program	Extra Supports Wallet - \$100/month	
FL	Aetna Medicare Select (HMO)	H1609-020	SSBCI	Extra Supports Wallet (excludes OTC) - \$50/month	
FL	Aetna Medicare Select (HMO)	H1609-021	SSBCI	Extra Supports Wallet (excludes OTC) - \$25/month	
FL	Aetna Medicare Select (HMO)	H1609-022	SSBCI	Extra Supports Wallet (excludes OTC) - \$50/month	
FL	Aetna Medicare Select (HMO)	H1609-025	SSBCI	Extra Supports Wallet (excludes OTC) - \$25/month	
FL	Aetna Medicare Select (HMO)	H1609-027	SSBCI	Extra Supports Wallet (excludes OTC) - \$25/month	
FL	Aetna Medicare Select (HMO)	H1609-042	SSBCI	Extra Supports Wallet (excludes OTC) - \$25/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-043	Aetna Assist Program	Extra Supports Wallet - \$285/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-044	Aetna Assist Program	Extra Supports Wallet - \$270/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-045	Aetna Assist Program	Extra Supports Wallet - \$270/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-046	Aetna Assist Program	Extra Supports Wallet - \$270/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-047	Aetna Assist Program	Extra Supports Wallet - \$270/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-048	Aetna Assist Program	Extra Supports Wallet - \$285/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-049	Aetna Assist Program	Extra Supports Wallet - \$270/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-055	Aetna Assist Program	Extra Supports Wallet - \$270/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-056	Aetna Assist Program	Extra Supports Wallet - \$270/month	
FL	Aetna Medicare Select (HMO)	H1609-059	SSBCI	Extra Supports Wallet (excludes OTC) - \$25/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-061	Aetna Assist Program	Extra Supports Wallet - \$270/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-062	Aetna Assist Program	Extra Supports Wallet - \$270/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-064	Aetna Assist Program	Extra Supports Wallet - \$270/month	
FL	Aetna Medicare Assure Plus (HMO D-SNP)	H1609-065	Aetna Assist Program	Extra Supports Wallet - \$270/month	

# Plan list

State	Plan name	Contract BPB	Eligibility criteria per wallet	Wallet, allowance and frequency	HVP bonus
FL	Aetna Medicare Select Plus (HMO)	H1609-066	SSBCI	Extra Supports Wallet (excludes OTC) - \$50/month	
FL	Aetna Medicare Select Plus (HMO)	H1609-067	SSBCI	Extra Supports Wallet (excludes OTC) - \$50/month	
GA	Aetna Medicare Value Plus (PPO)	H2293-001	None	OTC Wallet - \$40/month	
			Aetna Assist Program	Extra Supports Wallet - \$60/month	
GA	Aetna Medicare Dual Signature Choice (PPO D-SNP)	H2293-002	Aetna Assist Program	Extra Supports Wallet - \$190/month	\$30/month
GA	Aetna Medicare Dual Signature Select (PPO D-SNP)	H2293-003	Aetna Assist Program	Extra Supports Wallet - \$80/month	\$30/month
GA	Aetna Medicare Dual Signature Select (PPO D-SNP)	H2293-004	Aetna Assist Program	Extra Supports Wallet - \$80/month	\$30/month
GA	Aetna Medicare Dual Signature Choice (PPO D-SNP)	H2293-005	Aetna Assist Program	Extra Supports Wallet - \$190/month	\$30/month
GA	Aetna Medicare Signature (PPO)	H2293-006	None	OTC Wallet - \$90/quarter	
			SSBCI	Extra Supports Wallet - \$60/quarter	
GA	Aetna Medicare Freedom Plus (PPO)	H2293-007	None	OTC Wallet - \$90/quarter	
			SSBCI	Extra Supports Wallet - \$75/quarter	\$30/quarter
GA	Aetna Medicare Freedom Plus (PPO)	H2293-008	None	OTC Wallet - \$75/quarter	
			SSBCI	Extra Supports Wallet - \$75/quarter	
GA	Aetna Medicare Eagle Plus (PPO)	H2293-009	None	OTC Wallet - \$90/quarter	
			SSBCI	Extra Supports Wallet - \$90/quarter	
GA	Aetna Medicare Value Plus (PPO)	H2293-011	None	OTC Wallet - \$45/month	
			Aetna Assist Program	Extra Supports Wallet - \$60/month	
GA	Aetna Medicare Dual Choice (PPO D-SNP)	H2293-021	Aetna Assist Program	Extra Supports Wallet - \$190/month	
GA	Aetna Medicare Dual Select Choice (PPO D-SNP)	H2293-022	Aetna Assist Program	Extra Supports Wallet - \$80/month	
GA	Aetna Medicare Value Plus Signature (PPO)	H2293-023	None	OTC Wallet - \$45/month	
			Aetna Assist Program	Extra Supports Wallet - \$60/month	\$30/month
GA	Aetna Medicare Eagle (PPO)	H3288-034	None	OTC Wallet - \$90/quarter	
			SSBCI	Extra Supports Wallet - \$90/quarter	
GA	Aetna Medicare Dual Signature (HMO D-SNP)	H5302-012	Aetna Assist Program	Extra Supports Wallet - \$195/month	\$30/month
GA	Aetna Medicare Dual Preferred (HMO D-SNP)	H5302-013	Aetna Assist Program	Extra Supports Wallet - \$190/month	
GA	Aetna Medicare Dual Preferred (HMO D-SNP)	H5302-014	Aetna Assist Program	Extra Supports Wallet - \$190/month	
GA	Aetna Medicare Dual Select (HMO D-SNP)	H5302-020	Aetna Assist Program	Extra Supports Wallet - \$80/month	
GA	Aetna Medicare Signature (PPO)	H5521-360	None	OTC Wallet - \$90/quarter	
			SSBCI	Extra Supports Wallet - \$90/quarter	\$30/quarter
GA	Aetna Medicare Value Plus Signature (PPO)	H5521-364	None	OTC Wallet - \$45/month	
			Aetna Assist Program	Extra Supports Wallet - \$60/month	\$30/month
IA	Aetna Medicare Elite (PPO)	H1608-037	None	OTC Wallet - \$45/quarter	
IA	Aetna Medicare Premier Plus (PPO)	H1608-048	None	OTC Wallet - \$45/quarter	
IA	Aetna Medicare SmartFit (PPO)	H1608-065	None	OTC Wallet - \$45/quarter	
IA	Aetna Medicare Premier (HMO-POS)	H1609-001	None	OTC Wallet - \$105/quarter	
IA	Aetna Medicare Eagle (HMO-POS)	H1609-058	None	OTC Wallet - \$90/quarter	
IA	Aetna Medicare Value Plus (HMO-POS)	H1609-068	None	OTC Wallet - \$35/month	
			Aetna Assist Program	Healthy Foods Wallet - \$50/month	
IA	Aetna Medicare SmartFit (HMO-POS)	H1609-069	None	OTC Wallet - \$105/quarter	

# Plan list

State	Plan name	Contract BPB	Eligibility criteria per wallet	Wallet, allowance and frequency	HVP bonus
IA	Aetna Medicare Assure Premier (HMO D-SNP)	H5593-001	Aetna Assist Program	Extra Supports Wallet - \$205/month	
IA	Aetna Medicare Premier (PPO)	H1608-001	None	OTC Wallet - \$45/quarter	
IL	Aetna Medicare Value Plus (PPO)	H7301-014	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$30/month	\$30/month
IL	Aetna Medicare Discover Value Plus (PPO)	H7301-017	Aetna Assist Program	Healthy Foods Wallet - \$50/month	
IL	Aetna Medicare Option 2 (HMO)	H2663-002	SSBCI	Healthy Foods Wallet - \$30/month	
IN	Aetna Medicare Assure Premier (HMO D-SNP)	H3192-008	None	OTC Wallet - \$80/month	
			Aetna Assist Program	Healthy Foods Wallet - \$60/month	
IN	Aetna Medicare Assure Premier (HMO D-SNP)	H3192-009	None	OTC Wallet - \$80/month	
			Aetna Assist Program	Healthy Foods Wallet - \$60/month	
IN	Aetna Medicare Value Plus (PPO)	H5521-302	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$30/month	\$30/month
KS	Aetna Medicare Value Plus Plan (HMO)	H2663-053	Aetna Assist Program	Healthy Foods Wallet - \$100/month	
KS	Aetna Medicare Value Plus Plan (HMO)	H2663-054	Aetna Assist Program	Healthy Foods Wallet - \$100/month	
KS	Aetna Medicare Value Plus Plan (HMO)	H2663-055	Aetna Assist Program	Healthy Foods Wallet - \$75/month	
KS	Aetna Medicare Assure (HMO D-SNP)	H5325-001	Aetna Assist Program	Extra Supports Wallet - \$250/month	
KS	Aetna Medicare Assure (HMO D-SNP)	H5325-002	Aetna Assist Program	Extra Supports Wallet - \$250/month	
KS	Aetna Medicare Assure (HMO D-SNP)	H5325-009	Aetna Assist Program	Extra Supports Wallet - \$250/month	
KS	Aetna Medicare Value Plus Plan (HMO)	H2663-052	Aetna Assist Program	Healthy Foods Wallet - \$75/month	
KS	Aetna Medicare Value Plus Plan (HMO)	H2663-056	Aetna Assist Program	Healthy Foods Wallet - \$75/month	
KS	Aetna Medicare Value Plus Plan (HMO)	H2663-064	Aetna Assist Program	Healthy Foods Wallet - \$180/month	
KY	Aetna Medicare Premier (HMO-POS)	H0628-009	SSBCI	Extra Supports Wallet (excludes OTC) - \$35/month	
KY	Aetna Medicare Assure 1 (HMO D-SNP)	H0628-012	Aetna Assist Program	Extra Supports Wallet - \$185/month	
KY	Aetna Medicare Eagle (HMO)	H0628-014	SSBCI	Extra Supports Wallet (excludes OTC) - \$40/month	
LA	Aetna Medicare Dual Preferred (HMO D-SNP)	H3239-001	Aetna Assist Program	Extra Supports Wallet - \$235/month	
LA	Aetna Medicare Dual Preferred (HMO D-SNP)	H3239-006	Aetna Assist Program	Extra Supports Wallet - \$235/month	
LA	Aetna Medicare Dual Preferred (HMO D-SNP)	H3239-007	Aetna Assist Program	Extra Supports Wallet - \$235/month	
LA	Aetna Medicare Dual Select (HMO D-SNP)	H3239-011	Aetna Assist Program	Extra Supports Wallet - \$120/month	
LA	Aetna Medicare Dual Signature (HMO D-SNP)	H3239-013	Aetna Assist Program	Extra Supports Wallet - \$245/month	\$30/month
LA	Aetna Medicare Advantra (HMO)	H3928-001	None	OTC Wallet - \$120/quarter	
			SSBCI	Extra Supports Wallet - \$100/quarter	
LA	Aetna Medicare Freedom (PPO)	H5521-178	None	OTC Wallet - \$75/quarter	
			SSBCI	Extra Supports Wallet - \$75/quarter	
LA	Aetna Medicare Freedom (PPO)	H5521-230	None	OTC Wallet - \$120/quarter	
			SSBCI	Extra Supports Wallet - \$120/quarter	
LA	Aetna Medicare Freedom (PPO)	H5521-232	None	OTC Wallet - \$105/quarter	
			SSBCI	Extra Supports Wallet - \$90/quarter	
LA	Aetna Medicare Freedom (PPO)	H5521-233	None	OTC Wallet - \$75/quarter	
			SSBCI	Extra Supports Wallet - \$75/quarter	
LA	Aetna Medicare Freedom (PPO)	H5521-234	None	OTC Wallet - \$75/quarter	
			SSBCI	Extra Supports Wallet - \$90/quarter	
LA	Aetna Medicare Eagle Giveback (PPO)	H5521-235	None	OTC Wallet - \$120/quarter	

# Plan list

State	Plan name	Contract BPB	Eligibility criteria per wallet	Wallet, allowance and frequency	HVP bonus
LA	Aetna Medicare Value Plus (PPO)	H5521-326	None	OTC Wallet - \$70/month	
			Aetna Assist Program	Extra Supports Wallet - \$70/month	
LA	Aetna Medicare Signature (PPO)	H5521-365	None	OTC Wallet - \$90/quarter	
			SSBCI	Extra Supports Wallet - \$75/quarter	\$30/quarter
LA	Aetna Medicare Signature (PPO)	H5521-366	None	OTC Wallet - \$90/quarter	
			SSBCI	Extra Supports Wallet - \$75/quarter	\$30/quarter
LA	Aetna Medicare Dual Select Choice (PPO D-SNP)	H5521-468	Aetna Assist Program	Extra Supports Wallet - \$110/month	
LA	Aetna Medicare Dual Choice (PPO D-SNP)	H5521-469	Aetna Assist Program	Extra Supports Wallet - \$225/month	
LA	Aetna Medicare Dual Signature Choice (PPO D-SNP)	H5521-472	Aetna Assist Program	Extra Supports Wallet - \$225/month	\$30/month
LA	Aetna Medicare Dual Signature Select (PPO D-SNP)	H5521-473	Aetna Assist Program	Extra Supports Wallet - \$110/month	\$30/month
LA	Aetna Medicare Value Plus Signature (PPO)	H5521-474	None	OTC Wallet - \$70/month	
			Aetna Assist Program	Extra Supports Wallet - \$60/month	\$30/month
MA	Aetna Medicare Value Plus (PPO)	H5521-447	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$75/quarter	
MA	Aetna Medicare Value Plus (PPO)	H5521-448	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$150/quarter	
MD	Aetna Medicare Assure Premier (HMO D-SNP)	H3931-159	Aetna Assist Program	Extra Supports Wallet - \$120/month	
ME	Aetna Medicare Assure Plus Plan (HMO-POS D-SNP)	H3597-011	Aetna Assist Program	Extra Supports Wallet - \$150/month (rolls over each month)	
ME	Aetna Medicare Assure Plan (HMO-POS D-SNP)	H3597-012	Aetna Assist Program	Extra Supports Wallet - \$50/month (rolls over each month)	
MI	Aetna Medicare Assure Premier (HMO D-SNP)	H3192-007	Aetna Assist Program	Extra Supports Wallet - \$220/month	\$30/month
MI	Aetna Medicare Value Plus (PPO)	H5521-399	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$30/month	\$30/month
MO	Aetna Medicare Option 2 (HMO)	H2663-002	SSBCI	Healthy Foods Wallet - \$30/month	
MO	Aetna Medicare Value Plus Plan (HMO)	H2663-052	Aetna Assist Program	Healthy Foods Wallet - \$75/month	
MO	Aetna Medicare Value Plus Plan (HMO)	H2663-056	Aetna Assist Program	Healthy Foods Wallet - \$75/month	
MO	Aetna Medicare Discover Value Plus (HMO)	H2663-057	Aetna Assist Program	Healthy Foods Wallet - \$50/month	
MO	Aetna Medicare Value Plus Plan (HMO)	H2663-064	Aetna Assist Program	Healthy Foods Wallet - \$180/month	
MO	Aetna Medicare Assure (HMO D-SNP)	H5325-003	Aetna Assist Program	Extra Supports Wallet - \$250/month	
MO	Aetna Medicare Assure (HMO D-SNP)	H5325-004	Aetna Assist Program	Extra Supports Wallet - \$250/month	
MO	Aetna Medicare Assure (HMO D-SNP)	H5325-005	Aetna Assist Program	Extra Supports Wallet - \$275/month (rolls over each month)	
MO	Aetna Medicare Assure (HMO D-SNP)	H5325-006	Aetna Assist Program	Extra Supports Wallet - \$275/month (rolls over each month)	
MN	Allina Health Aetna Medicare Premier (PPO)	H3219-002	None	Dental, Vision, Hearing Wallet - \$500 annual allowance	
MN	Allina Health Aetna Medicare Grand (PPO)	H3219-003	None	Dental, Vision, Hearing Wallet - \$500 annual allowance	
MN	Allina Health Aetna Medicare Elite (PPO)	H3219-004	None	Dental, Vision, Hearing Wallet - \$500 annual allowance	
MN	Allina Health Aetna Medicare Eagle (PPO)	H3219-005	None	Dental, Vision, Hearing Wallet - \$500 annual allowance	
MN	Allina Health Aetna Medicare Value (PPO)	H3219-007	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$75/quarter	
MS	Aetna Medicare Dual Preferred (HMO D-SNP)	H3239-005	Aetna Assist Program	Extra Supports Wallet - \$200/month	



# Plan list

State	Plan name	Contract BPB	Eligibility criteria per wallet	Wallet, allowance and frequency	HVP bonus
MS	Aetna Medicare Dual Preferred (HMO D-SNP)	H3239-008	Aetna Assist Program	Extra Supports Wallet - \$205/month	
MS	Aetna Medicare Dual Select (HMO D-SNP)	H3239-012	Aetna Assist Program	Extra Supports Wallet - \$105/month	
MS	Aetna Medicare North Mississippi Health (HMO)	H3239-014	None	OTC Wallet - \$105/quarter	
MS	Aetna Medicare Dual Signature (HMO D-SNP)	H3239-015	Aetna Assist Program	Extra Supports Wallet - \$200/month	\$30/month
MS	Aetna Medicare Dual Signature Select (HMO D-SNP)	H3239-016	Aetna Assist Program	Extra Supports Wallet - \$100/month	\$30/month
MS	Aetna Medicare Signature (HMO)	H3239-017	None SSBCI	OTC Wallet - \$60/quarter Extra Supports Wallet - \$90/quarter	\$30/quarter
MS	Aetna Medicare Freedom (PPO)	H5521-218	None SSBCI	OTC Wallet - \$60/quarter Extra Supports Wallet - \$90/quarter	
MS	Aetna Medicare Freedom (PPO)	H5521-220	None SSBCI	OTC Wallet - \$60/quarter Extra Supports Wallet - \$75/quarter	
MS	Aetna Medicare Eagle (PPO)	H5521-324	None	OTC Wallet - \$150/quarter	
MS	Aetna Medicare Dual Choice (PPO D-SNP)	H5521-464	Aetna Assist Program	Extra Supports Wallet - \$185/month	
MS	Aetna Medicare Dual Select Choice (PPO D-SNP)	H5521-465	Aetna Assist Program	Extra Supports Wallet - \$105/month	
MS	Aetna Medicare Value Plus (PPO)	H5521-470	None Aetna Assist Program	OTC Wallet - \$40/month Extra Supports Wallet - \$90/month	
MS	Aetna Medicare Freedom (PPO)	H5521-471	None SSBCI	OTC Wallet - \$60/quarter Extra Supports Wallet - \$75/quarter	
NC	Aetna Medicare Assure Plan (HMO D-SNP)	H3146-002	None Aetna Assist Program	Dental, Vision, Hearing Wallet - \$1000 annual allowance Extra Supports Wallet - \$165/month (rolls over each month)	
NC	Aetna Medicare Assure Plan (HMO D-SNP)	H3146-003	None Aetna Assist Program	Dental, Vision, Hearing Wallet - \$1000 annual allowance Extra Supports Wallet - \$230/month (rolls over each month)	
NC	Aetna Medicare Value Plus Plan (HMO)	H3146-006	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$180/quarter	
NC	Aetna Medicare Assure Plan (HMO D-SNP)	H3146-008	None Aetna Assist Program	Dental, Vision, Hearing Wallet - \$1000 annual allowance Extra Supports Wallet - \$185/month (rolls over each month)	
NC	Aetna Medicare Assure Plan (HMO D-SNP)	H3146-009	None Aetna Assist Program	Dental, Vision, Hearing Wallet - \$1000 annual allowance Extra Supports Wallet - \$240/month (rolls over each month)	
NC	Aetna Medicare Assure Plan (HMO D-SNP)	H3146-015	None Aetna Assist Program	Dental, Vision, Hearing Wallet - \$1000 annual allowance Extra Supports Wallet - \$170/month (rolls over each month)	
NC	Aetna Medicare Assure Flex Plan (HMO D-SNP)	H3146-018	Aetna Assist Program	Extra Supports Wallet - \$320/month (rolls over each month)	
NC	Aetna Medicare Value Plus Plan (PPO)	H5521-169	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$150/quarter	
ND	Aetna Medicare Premier (PPO)	H9431-013	None	OTC Wallet - \$45/quarter	
ND	Aetna Medicare Elite (PPO)	H9431-014	None	OTC Wallet - \$45/quarter	
ND	Aetna Medicare Enhanced Select (PPO)	H9431-018	None	OTC Wallet - \$75/quarter	
NE	Aetna Medicare Premier (PPO)	H1608-012	None	OTC Wallet - \$45/quarter	

# Plan list

State	Plan name	Contract PBP	Eligibility criteria per wallet	Wallet, allowance and frequency	HVP bonus
NE	Aetna Medicare SmartFit (PPO)	H1608-038	None	OTC Wallet - \$45/quarter	
NE	Aetna Medicare Premier (HMO-POS)	H7149-001	None	OTC Wallet - \$105/quarter	
NE	Aetna Medicare Assure Premier (HMO D-SNP)	H7149-006	Aetna Assist Program	Extra Supports Wallet - \$205/month	
NE	Aetna Medicare Eagle (HMO-POS)	H7149-007	None	OTC Wallet - \$90/quarter	
NE	Aetna Medicare Value Plus (HMO-POS)	H7149-008	None	OTC Wallet - \$35/month	
NE	Aetna Medicare Value Plus (HMO-POS)	H7149-008	Aetna Assist Program	Healthy Foods Wallet - \$50/month	
NE	Aetna Medicare SmartFit (HMO-POS)	H7149-009	None	OTC Wallet - \$105/quarter	
NH	Aetna Medicare Value Plus (PPO)	H5521-376	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$100/quarter	
NJ	Aetna Assure Premier Plus (HMO D-SNP)	H6399-001	Aetna Assist Program	Extra Supports Wallet (excludes pet care supplies) - \$305/month	
NV	Aetna Medicare Value Plan (HMO-POS)	H3931-152	None	OTC Wallet - \$105/quarter	
NV	Aetna Medicare Value Plus Plan (HMO-POS)	H3931-157	None	OTC Wallet - \$35/month	
NV	Aetna Medicare Value Plus Plan (HMO-POS)	H3931-157	Aetna Assist Program	Healthy Foods Wallet - \$30/month	
NV	Aetna Medicare Value Plus Plan (HMO-POS)	H3931-160	None	OTC Wallet - \$35/month	
NV	Aetna Medicare Value Plus Plan (HMO-POS)	H3931-160	Aetna Assist Program	Healthy Foods Wallet - \$30/month	
NV	Aetna Medicare Dual Prime Plan (HMO D-SNP)	H4711-011	Aetna Assist Program	Extra Supports Wallet - \$140/month (rolls over each month)	
NV	Aetna Medicare Dual Preferred Plan (HMO D-SNP)	H4711-013	Aetna Assist Program	Extra Supports Wallet - \$140/month (rolls over each month)	
NV	Aetna Medicare Dual Preferred Plan (HMO D-SNP)	H4711-013	None	OTC Wallet - \$90/quarter	
NV	Aetna Medicare Elite Plan (PPO)	H5521-303	None	OTC Wallet - \$105/quarter	
NV	Aetna Medicare Eagle Plan (PPO)	H5521-353	None	OTC Wallet - \$120/quarter	
NY	Aetna Medicare Assure Plan (HMO D-SNP)	H3312-069	Aetna Assist Program	Extra Supports Wallet - \$215/month	
NY	Aetna Medicare Assure Plan (HMO D-SNP)	H3312-070	Aetna Assist Program	Extra Supports Wallet - \$180/month	
NY	Aetna Medicare Assure Plus Plan (HMO D-SNP)	H3312-073	Aetna Assist Program	Extra Supports Wallet - \$210/month	
OH	Aetna Medicare Premier (HMO-POS)	H0628-001	SSBCI	Extra Supports Wallet (excludes OTC) - \$30/month	\$30/month
OH	Aetna Medicare Premier (HMO-POS)	H0628-003	SSBCI	Extra Supports Wallet (excludes OTC) - \$50/month	
OH	Aetna Medicare Premier (HMO-POS)	H0628-005	SSBCI	Extra Supports Wallet (excludes OTC) - \$45/month	\$30/month
OH	Aetna Medicare Assure 1 (HMO D-SNP)	H0628-013	Aetna Assist Program	Extra Supports Wallet - \$235/month	
OH	Aetna Medicare Eagle (HMO)	H0628-015	SSBCI	Extra Supports Wallet (excludes OTC) - \$30/month	
OH	Aetna Medicare Premier (HMO-POS)	H0628-017	SSBCI	Extra Supports Wallet (excludes OTC) - \$45/month	\$30/month
OK	Aetna Medicare Value Plus (PPO)	H3288-017	Aetna Assist Program	Healthy Foods Wallet - \$55/month	
OK	Aetna Medicare Value Plus (PPO)	H3288-019	Aetna Assist Program	Healthy Foods Wallet - \$60/month	
PA	Aetna Medicare Premier Plus (HMO-POS)	H3931-004	CHF	Healthy Foods Wallet - \$75/quarter	
PA	Aetna Medicare Advantra Gold (HMO-POS)	H3959-001	CHF	Healthy Foods Wallet - \$75/quarter	
PA	Aetna Medicare Advantra Gold (HMO-POS)	H3959-002	SSBCI	Healthy Foods Wallet - \$150/quarter	
PA	Aetna Medicare Advantra Gold (HMO-POS)	H3959-002	CHF	Healthy Foods Wallet - \$75/quarter	
PA	Aetna Medicare Advantra Silver (HMO-POS)	H3959-011	SSBCI	Healthy Foods Wallet - \$150/quarter	
PA	Aetna Medicare Advantra Premier (HMO-POS)	H3959-032	SSBCI	Healthy Foods Wallet - \$150/quarter	

# Plan list

State	Plan name	Contract BPB	Eligibility criteria per wallet	Wallet, allowance and frequency	HVP bonus
PA	Aetna Medicare Value Plus (HMO-POS)	H3959-033	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$75/quarter	\$30/quarter
PA	Aetna Medicare Advantra Cares (HMO D-SNP)	H3959-035	Aetna Assist Program	Extra Supports Wallet - \$300/month (rolls over each month)	\$30/month (rolls over each month)
PA	Aetna Medicare Advantra Cares (HMO D-SNP)	H3959-036	Aetna Assist Program	Extra Supports Wallet - \$300/month (rolls over each month)	\$30/month (rolls over each month)
PA	Aetna Medicare Advantra Premier (HMO-POS)	H3959-039	CHF	Healthy Foods Wallet - \$75/quarter	
PA	Aetna Medicare Advantra Eagle (HMO-POS)	H3959-041	SSBCI	Healthy Foods Wallet - \$150/quarter	
PA	Aetna Medicare Advantra Value (HMO-POS)	H3959-052	SSBCI	Extra Supports Wallet (excludes OTC) - \$45/quarter	\$30/quarter
PA	Aetna Medicare Advantra Philly Prime (HMO-POS)	H3959-053	SSBCI	Healthy Foods Wallet - \$150/quarter	
PA	Aetna Medicare Value Plus (PPO)	H5522-001	CHF	Healthy Foods Wallet - \$75/quarter	
PA	Aetna Medicare Advantra Premier Plus (PPO)	H5522-002	CHF	Healthy Foods Wallet - \$75/quarter	
PA	Aetna Medicare Value Plus (PPO)	H5522-005	Aetna Assist Program CHF VBID	Healthy Foods Wallet - \$75/quarter Healthy Foods Wallet - \$75/quarter	
PA	Aetna Medicare Value Plus (PPO)	H5522-013	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$75/quarter	\$30/month
PA	Aetna Medicare Dual Preferred (PPO D-SNP)	H5522-024	Aetna Assist Program	Extra Supports Wallet - \$200/month (rolls over each month)	
RI	Aetna Medicare Value Plus (PPO)	H5521-449	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$100/quarter	
RI	Aetna Medicare Prime Plan (HMO-POS)	H5793-019	SSBCI	Extra Supports Wallet (excludes OTC) - \$45/quarter	\$255/quarter
SC	Aetna Medicare Value Plus Plan (HMO)	H3146-011	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$120/quarter	
SC	Aetna Medicare Assure Plan (HMO D-SNP)	H3146-016	None Aetna Assist Program	Dental, Vision, Hearing Wallet - \$1000 annual allowance Extra Supports Wallet - \$185/month (rolls over each month)	
SC	Aetna Medicare Assure Plan (HMO D-SNP)	H3146-017	None Aetna Assist Program	Dental, Vision, Hearing Wallet - \$1000 annual allowance Extra Supports Wallet - \$135/month (rolls over each month)	
SC	Aetna Medicare Assure Flex Plan (HMO D-SNP)	H3146-019	Aetna Assist Program	Extra Supports Wallet - \$285/month (rolls over each month)	
SD	Aetna Medicare Premier (PPO)	H1608-001	None	OTC Wallet - \$45/quarter	
SD	Aetna Medicare Elite (PPO)	H1608-043	None	OTC Wallet - \$45/quarter	
SD	Aetna Medicare Eagle (PPO)	H1608-061	None	OTC Wallet - \$90/quarter	
SD	Aetna Medicare Assure Premier (PPO D-SNP)	H1608-062	Aetna Assist Program	Extra Supports Wallet - \$135/month	
SD	Aetna Medicare Enhanced Select (PPO)	H1608-064	None	OTC Wallet - \$75/quarter	
TN	Aetna Medicare Value Plus Plan (HMO)	H3146-012	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$180/quarter	
TN	Aetna Medicare Value Plus Plan (HMO)	H3146-013	Aetna Assist Program	Extra Supports Wallet (excludes OTC) - \$120/quarter	
TX	Aetna Medicare Value Plus (PPO)	H3288-001	Aetna Assist Program Aetna Assist Program	Healthy Foods Wallet - \$65/month Healthy Foods Wallet - \$65/month	
TX	Aetna Medicare Value Plus (PPO)	H3288-003	Aetna Assist Program	Healthy Foods Wallet - \$45/month	
TX	Aetna Medicare Value Plus (PPO)	H3288-004	Aetna Assist Program	Healthy Foods Wallet - \$50/month	
TX	Aetna Medicare Value Plus (PPO)	H3288-018	Aetna Assist Program	Healthy Foods Wallet - \$50/month	
TX	Aetna Medicare Value Plus (PPO)	H3288-048	Aetna Assist Program	Healthy Foods Wallet - \$65/month	

# Plan list

State	Plan name	Contract BPB	Eligibility criteria per wallet	Wallet, allowance and frequency	HVP bonus
TX	Aetna Medicare Dual Complete Plan (HMO D-SNP)	H8597-001	Aetna Assist Program	Extra Supports Wallet - \$150/month	
TX	Aetna Medicare Dual Complete Plan (HMO D-SNP)	H8597-002	Aetna Assist Program	Extra Supports Wallet - \$150/month	\$30/month
TX	Aetna Medicare Dual Complete Plan (HMO D-SNP)	H8597-003	Aetna Assist Program	Extra Supports Wallet - \$150/month	\$30/month
UT	Aetna Medicare Dual Preferred Plan (PPO D-SNP)	H5521-398	Aetna Assist Program	Extra Supports Wallet - \$120/month	
UT	Aetna Medicare Value Plus Plan (PPO)	H5521-414	None Aetna Assist Program	OTC Wallet - \$25/month Healthy Foods Wallet - \$40/month	
UT	Aetna Medicare Dual Preferred Plan (HMO D-SNP)	H8649-010	Aetna Assist Program	Extra Supports Wallet - \$120/month	
VA	Aetna Better Health of Virginia (HMO D-SNP)	H1610-001	Aetna Assist Program	Extra Supports Wallet - \$375/month	
VA	Aetna Medicare Assure Premier (HMO D-SNP)	H1610-002	Aetna Assist Program	Extra Supports Wallet - \$300/month	
VA	Aetna Medicare Assure Value (HMO D-SNP)	H1610-003	Aetna Assist Program	Extra Supports Wallet - \$240/month	
VA	Aetna Medicare Select Plan (HMO-POS)	H3931-099	Aetna Assist Program	Healthy Foods Wallet - \$110/month	
VA	Aetna Medicare Select Plan (HMO-POS)	H3931-100	Aetna Assist Program	Healthy Foods Wallet - \$145/month	
VA	Aetna Medicare UVA Health System Prime (HMO-POS)	H3931-124	Aetna Assist Program	Healthy Foods Wallet - \$60/month	
VA	Aetna Medicare Carilion Health Prime (HMO-POS)	H3931-158	Aetna Assist Program	Healthy Foods Wallet - \$50/month	
WI	Aetna Medicare Value Plus (PPO)	H5521-400	Aetna Assist Program	Healthy Foods Wallet - \$20/month	
WI	Aetna Medicare Value Plus (PPO)	H5521-411	Aetna Assist Program	Healthy Foods Wallet - \$20/month	
WV	Aetna Medicare Advantra Gold (PPO)	H1608-027	CHF	Healthy Foods Wallet - \$75/quarter	
WV	Aetna Medicare Advantra Cares (HMO D-SNP)	H1692-005	Aetna Assist Program	Extra Supports Wallet - \$200/month	



## Questions?

If you have any questions, please contact your local Aetna Medicare Broker Manager.

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