

Clover Health

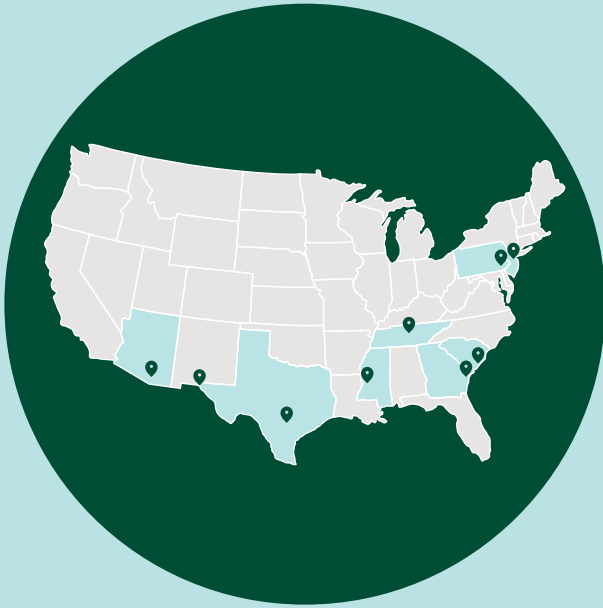
Agent Preview

2021 Medicare Advantage Plans

Texas



Clover Health



8 States



57,000+ Medicare Advantage Lives

530 Primary Care Providers



2,700 Specialists



2 Counties



We were the fastest growing Medicare Advantage plan in AEP 2020 by % Growth.*


*Only parent organizations with 50,000 or more members as of January 2020 shown. Organizations with over 250,000 non SNP/MMF/Pace/employer members as of Jan. 2020 highlighted in grey.

Source analysis of December 2019–January 2020 CPSC enrollment. Enrollment excludes 800 series (employer sponsored), SNP, and PACE plan MA enrollment.

Clover Health is a dedicated partner to the broker community.

Clover Health is committed to being the best-in-class Medicare Advantage partner to the broker community by pairing top-tier customer service with technology-enabled platforms.

We listen to you, understand your challenges, and make changes to ensure you can focus on your clients and build your book of business.



Support you can count on when you need it most



We have targeted partners

We believe in true partnerships, not broad-stroke contracting. This is why Clover Health handpicks strategic partners in each market to grow with us.



We focus on our members

We ensure your clients have access to plans with predictable costs and supplemental benefits like dental, vision, and OTC that support their comprehensive healthcare needs.



We want to grow with you

Clover Health is committed to establishing strong relationships with the broker community and building a foundation for the long term growth and success of its partners.



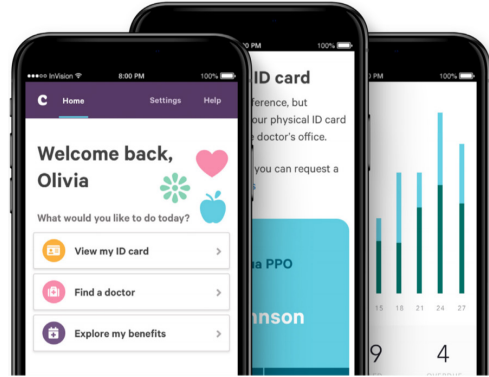
We have your back

With a dedicated broker support team, technology-enabled tools, and top-of-the-line selling materials, you can be sure Clover Health will be there to assist throughout your selling journey.

Clover Health is building a smarter kind of healthcare.

Clover Health is a Medicare Advantage company dedicated to using technology in new and innovative ways to help our members live healthier lives.

We have passionate teams of data scientists and engineers building tools that are transforming healthcare for Medicare beneficiaries, their caregivers, and providers.



Clover Health Member Portal

Members can access plan and benefit information online using a computer or a smartphone. They can also use the portal as a digital ID card and to find local doctors and specialists.



Clover Assistant for Providers

This web-based tool surfaces gaps in care, previous diagnoses, and current medications, so providers always have the most up-to-date information about their Clover Health patients.



Clover Analytics

Our proprietary software analyzes data from disparate sources in order to form a full picture of our member's healthcare experience. It is a "learning engine" powered by AI that gets smarter over time, allowing us to identify actionable insights that help us prevent serious health problems and improve outcomes through early intervention.

- 30% fewer hospitalizations compared to competitors
- 84% accuracy in predicting customers that are most at risk of a hospital admission
- 137% improvement in percentage of diabetics with blood sugar under control
- 63% improvement in percentage of hypertensive customers with blood pressure under control

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2021 Benefits Preview

Confidential and proprietary information for agent use only. Distribution to any party is prohibited and grounds for contract termination. Plan and benefit information in this document is pending government approval and is subject to change. Final 2021 plan information may be discussed with beneficiaries on or after October 1st, 2020.

	Classic HMO – H8010-005	Choice PPO – H5141-025
County	Bexar	Bexar
Monthly premium, includes Part D	\$0	\$0
Plan deductible	\$0	\$0
Max yearly out-of-pocket	\$3,400 INN/OON	\$7,550 INN/OON
Primary care visits (unlimited)	\$0	\$0 INN/\$5 OON
Specialist visits (unlimited)	\$15	\$25 INN/\$35 OON
Inpatient hospital stay	\$125/day, days 1–5	\$200/day, days 1–5 INN; \$320/day, days 1–5 OON
Outpatient surgery: hospital	\$150	\$150 INN/\$250 OON
Part D deductible	\$0	\$0
Prescription costs (30-day supply, preferred pharmacy)	Tier 1: \$0, Tier 2: \$10, Tier 3: \$40, Tier 4: \$95, Tier 5: 33%	Tier 1: \$0, Tier 2: \$10, Tier 3: \$40, Tier 4: \$95, Tier 5: 33%
Prescription costs (90-day supply mail order)	Tier 1: \$0, Tier 2: \$0	Tier 1: \$0, Tier 2: \$0
Comprehensive dental allowance	\$1,500 per year	\$1,000 per year
Over-the-counter items	\$100 every 3 months	\$50 every 3 months
Eyeglasses or contacts allowance	\$100 per year	\$100 per year
TruHearing hearing aids* (one per ear per year)	\$699–\$999	\$699–\$999
Diabetes monitoring services	\$0	\$0 INN/35% OON
Health-related transportation	10 one-way rides/year to approved locations	N/C
Fitness membership	SilverSneakers**	SilverSneakers**
Telehealth	\$0–\$15	\$0–\$25

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	Classic HMO – H8010-008	Choice PPO – H5141-035
County	El Paso	El Paso
Monthly premium, includes Part D	\$0	\$0
Plan deductible	\$0	\$0
Max yearly out-of-pocket	\$2,900 INN/OON	\$3,400 INN/OON
Primary care visits (unlimited)	\$0	\$0 INN/\$5 OON
Specialist visits (unlimited)	\$20	\$20 INN/\$30 INN
Inpatient hospital stay	\$200/day, days 1–5	\$250/day, days 1–5 INN; \$320/day, days 1–5 OON
Outpatient surgery: hospital	\$150	\$200 INN/\$250 OON
Part D deductible	\$0	\$0
Prescription costs (30-day supply, preferred pharmacy)	Tier 1: \$0, Tier 2: \$10, Tier 3: \$40, Tier 4: \$95, Tier 5: 33%	Tier 1: \$0, Tier 2: \$10, Tier 3: \$40, Tier 4: \$95, Tier 5: 33%
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TruHearing hearing aids* (one per ear per year)	\$699–\$999	\$699–\$999
Diabetes monitoring services	\$0	\$0 INN/35% OON
Health-related transportation	10 one-way rides/year to approved locations	10 one-way rides/year to approved locations
Fitness membership	SilverSneakers**	SilverSneakers**
Telehealth	\$0–\$20	\$0–\$20
Worldwide coverage	N/A	Yes—emergency & urgent care

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* TruHearing is a registered trademark.

** SilverSneakers is a registered trademark of Tivity Health, Inc.

This information is for internal and training purposes/use only and is not to be shared or distributed. Also, the benefits and service area expansion information are subject to change as benefits and applications are currently being reviewed by CMS.

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