



First Look

MICHIGAN | PLAN YEAR 2027



Confidentiality reminder

This document contains proprietary information intended for use only by contracted brokers. It is confidential and not for distribution to the general public nor for solicitation purposes.

Any dissemination of Devoted Health Plans information for the upcoming plan year prior to 10/1 is strictly prohibited. Failure to comply with these guidelines may result in corrective actions against you and your agency.

Plans, benefits, and costs described here are subject to change as they are not yet CMS approved. This information will be updated following Medicare's National Average Bid Amount (NABA).

Confidential

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Since being founded in 2017, Devoted has had one **mission**:

To dramatically improve the health and well-being of older Americans by caring for every person **like family**



Devoted Health aims to help members live better, longer lives through a unified experience **built from 5 core ingredients**

- 1 Devoted Health plans**
Comprehensive Medicare Advantage plans designed to meet members' healthcare and lifestyle needs
- 2 Devoted Health Guides**
A U.S.A.-based support team dedicated to helping members get the most from their plans
- 3 Health systems and physician group collaboration**
An ever-growing network of providers helping to ensure that members get quality care
- 4 Devoted Medical™**
In-house medical clinicians who can provide on-demand care by phone or video 24/7
- 5 Orinoco™: AI-enabled core infrastructure**
Our homegrown end-to-end technology platform that powers our work

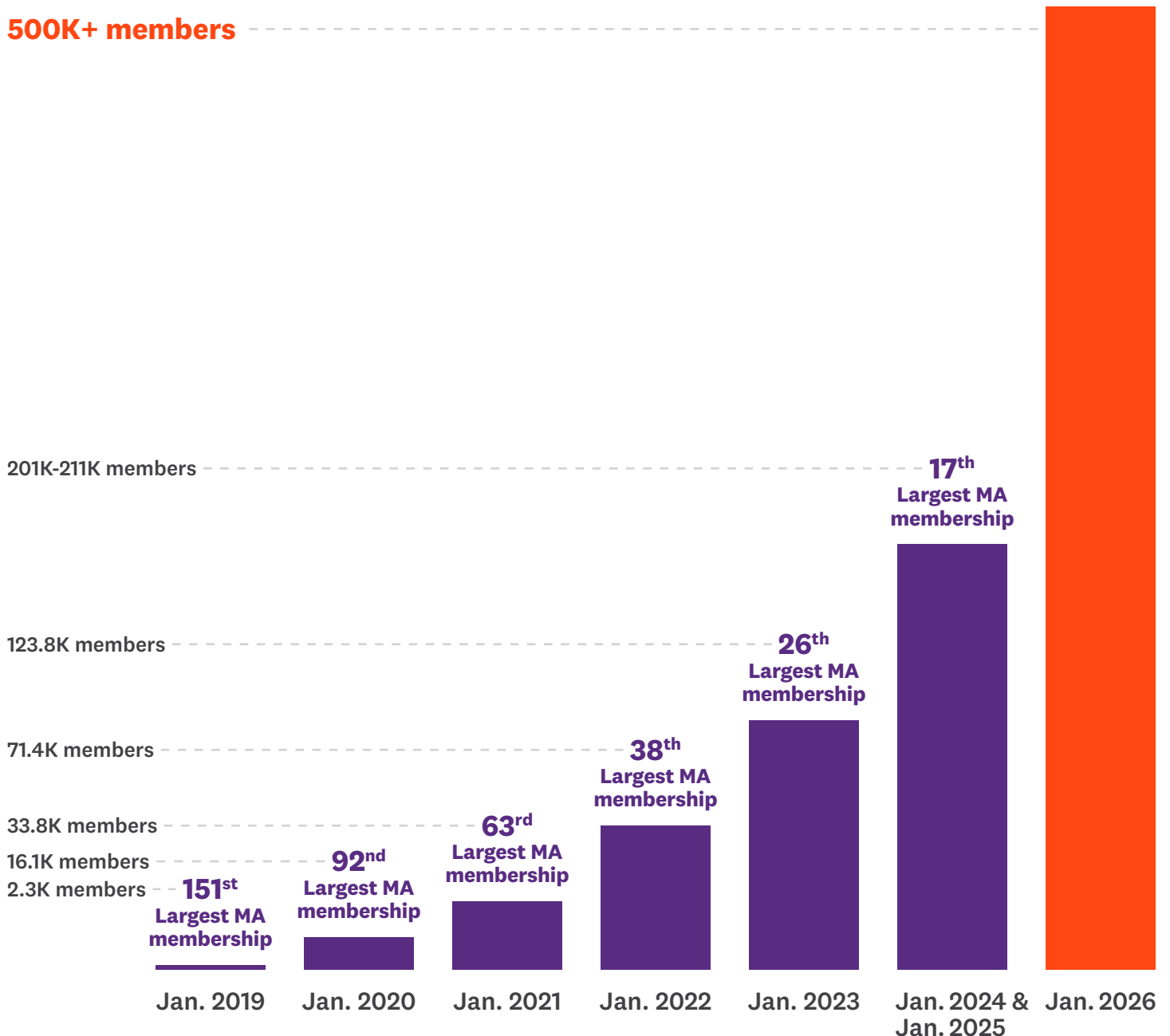
Devoted Health and Devoted Medical are under common control or ownership and part of the Devoted Health, Inc. family of companies. Devoted Medical is the medical group practice of Devoted Health. Devoted Health accepts other providers.

Devoted has grown to serve over **500K members** across 29 states¹

Between December 2025 and May 2026, membership grew by nearly 300K beneficiaries — with more than 23K former members returning in January 2026 alone!²

500K+ members

8TH
Largest MA membership³



¹Devoted Health internal data, 2019–2026. ²Devoted Health internal data, 2026.

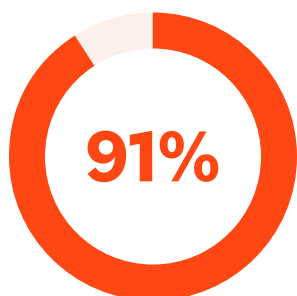
³January 2019 to January 2026, excluding employer plans. CMS Medicare Enrollment data.

As the fastest-growing MA carrier,¹ our 2026 membership growth far surpassed that of the other top 9 MA carriers.

Carrier	Growth Rate ¹	Growth Rank ¹	MA Membership Rank ¹
 Devoted Health, Inc.	121%	1	8
SCAN Group	37%	6	9
Humana Inc.	20%	9	2
Kaiser Foundation Health Plan, Inc.	2%	16	5
Healthfirst, Inc.	1%	17	10
Centene Corporation	-3%	21	6
CVS Health Corporation	-5%	23	3
UnitedHealth Group, Inc.	-9%	25	1
Health Care Service Corporation	-11%	27	7
Elevance Health, Inc.	-17%	29	4

¹December 2025 to February 2026 membership growth among the 10-largest Medicare Advantage parent organizations (by 2/1/2026 membership, excluding employer plans). CMS Medicare Enrollment data.

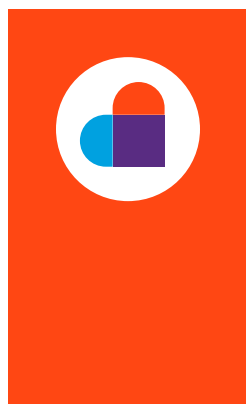
Our Star ratings: **maintaining quality even as we grow**



The percentage of members enrolled in a plan that's rated 5 Stars on the customer service measure

vs. the national average of 14%¹

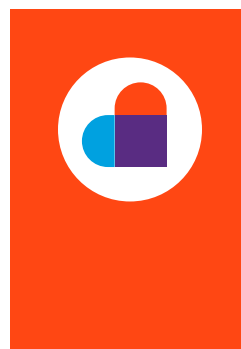
4.86 ★



3.51 ★

4.86 weighted-average customer service Star rating vs. the national average of 3.51¹

33%



2%

33% of members are in 5-Star plans vs. the national average of 2%²

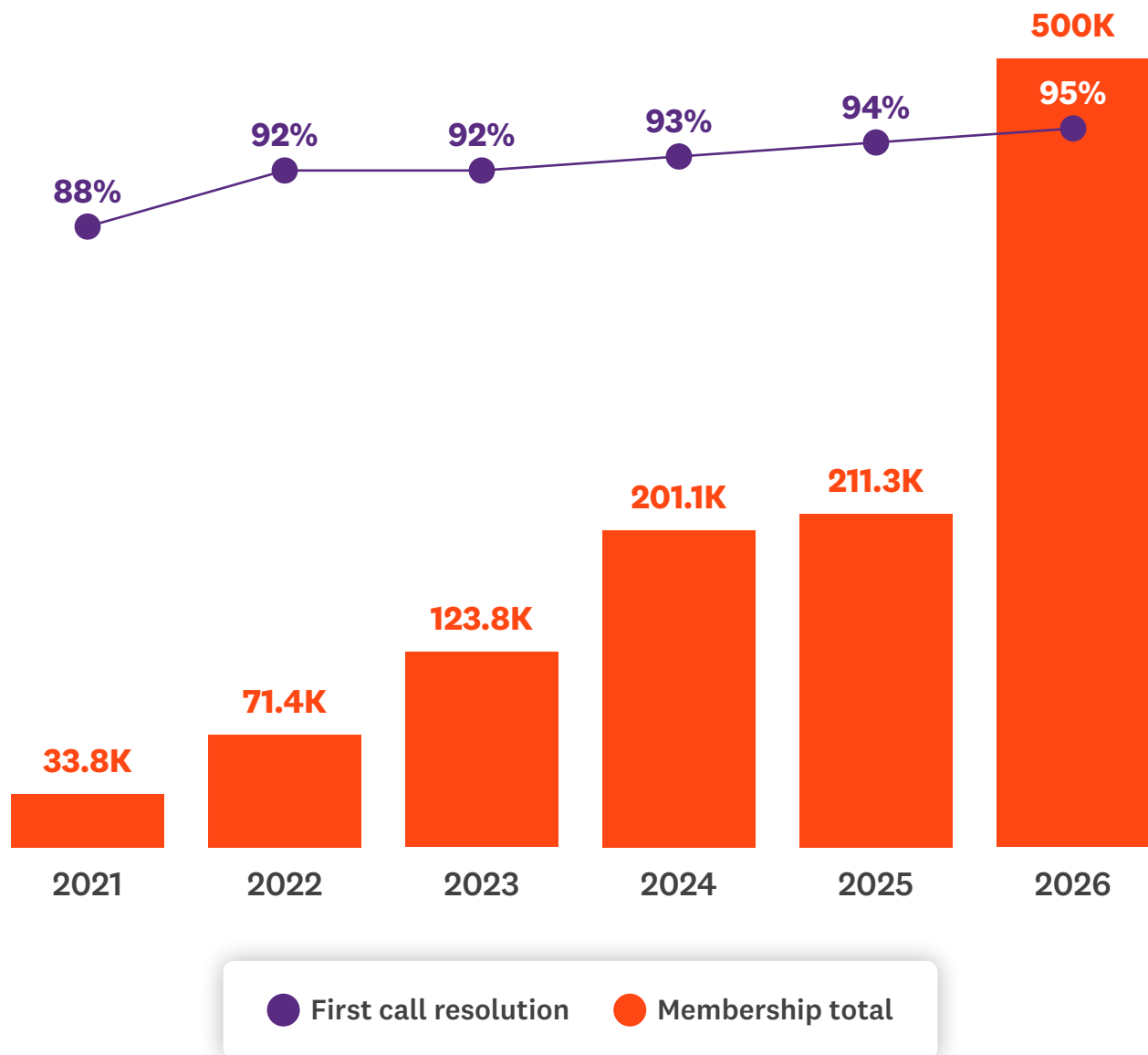
¹Based on November 2025 CMS membership and 2026 CMS Star ratings data. Devoted Health contracts H1290 (FL HMO), H7993 (IA/TX HMO), and H5299 (NC HMO) all earned 5 stars for 2026. H9884 (FL PPO) and H7028 (SC PPO) earned 4.5 stars for 2026. H4808 (CO PPO), H7147 (CO HMO), H7151 (IL HMO), H2526 (OH PPO), and H2697 (OH HMO) all earned 4 stars for 2026. H3080 (AL HMO), H9888 (AL PPO), H8173 (AZ HMO), H2686 (HI PPO), H6545 (IL PPO), H2923 (OR HMO), H7199 (OR PPO), H6018 (PA PPO), H7605 (TN HMO), H9231 (TN PPO), and H6813 (TX PPO) all earned 3.5 stars for 2026. H6586 (AZ PPO) earned 3 stars for 2026.

²Based on November 2025 CMS membership and 2026 CMS Star ratings data. Every year, Medicare evaluates plans based on a 5-Star rating system.

We continue to deliver on our mission, **providing a consistent member experience at scale**

✓ **First-call resolution has improved between 2021 and 2025** — from 88% to 94% — and has held steady at 95% through Q1 of 2026.¹

✓ **More than 80% of member calls have been answered within 30 seconds** since 2022.²



¹Devoted Health internal data, 2021–2026.

²Devoted Health internal data, 2022–2025.

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Broker testimonials

“Devoted customer service is the best. Please don't ever change that. **I can confidently sign my clients up for Devoted knowing they will be taken care of.**”

“An outstanding support experience. **The agent support associate was polite, patient, and personable.** All while also being incredibly knowledgeable.”

Growth without compromise — **why more brokers are choosing Devoted**



Plans you can recommend with confidence



A growing opportunity for your MA business



Exceptional support for you and your clients



Devoted is built to **reliably support brokers like you**

We protect your book, pay you faster, and reward success

- **Original Agent of Record** is maintained on any internal plan changes.
- Commissions are paid on a **weekly basis**.
- Health Risk Assessments (HRAs) are paid on all **Special Needs Plans (SNPs)**.

Superior service that brokers consistently trust

- Local sales leaders, community outreach specialists, and network specialists can assist you.
- Our U.S.-based Agent Support team **answers over 90% of calls within 30 seconds**.¹
- **96% of brokers** rate our agent support above that of other carriers.²
- **97% of brokers** say that our member service reputation is better than that of other carriers.²



Devoted Agent Support team

1-877-764-9446

Oct. 15-Dec. 7:
Mon-Sun
9am to 10pm ET

Dec. 8-Oct. 14:
Mon-Fri
9am to 10pm ET



Find your local sales team

**[devoted.com/s/
broker-leader-contacts](https://devoted.com/s/broker-leader-contacts)**

¹Devoted Health internal data, 2025.

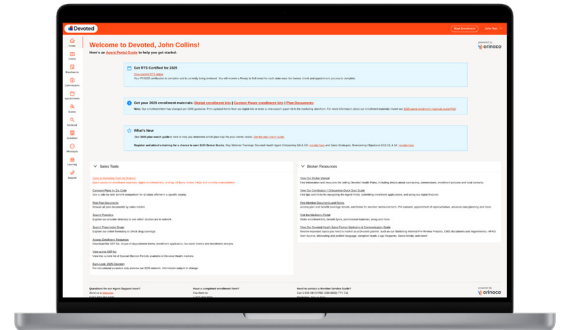
²Devoted Health survey, December 2025.

Devoted continues to expand and improve our **broker tools and resources**



Agent Portal: a one-stop shop

- Request replacement member ID cards.
- View digital ID cards.
- Upload/download C-SNP verifications.
- Request PCP changes & demographic updates.
- Complete and track enrollment applications, Scopes of Appointment (SOAs), HRAs, and more.
- Visit **agent.devoted.com** to access the Agent Portal.



Marketing Storefront: equips you for success

- Find everything from **customizable marketing tools to enrollment materials**.
- Visit **devoted.com/storefront** to access the Marketing Storefront.

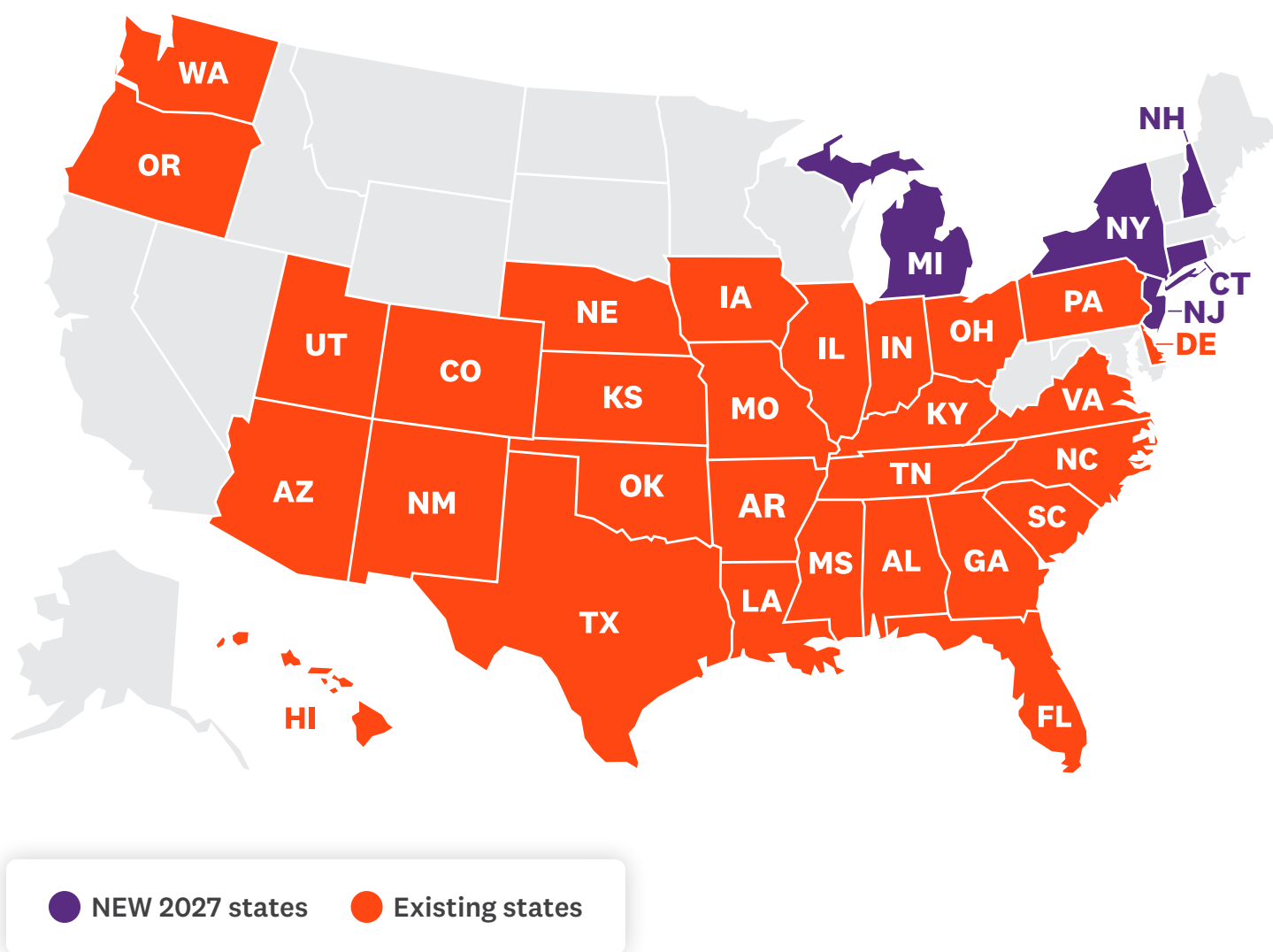


Learning Center: go-to for training resources

- Access our repository of FAQs, guides, and manuals.
- Join us for **live national training webinars 1 to 2 times per month**.
- Visit **devoted.com/brokers/broker-learning-center** to access the Learning Center.

In 2027, we're expanding to **5 new states***

- ✓ **34** total states
- ✓ **1,341** total counties, including **342** new counties
- ✓ Devoted Health's footprint will cover **55% of the individual Medicare Advantage population**¹



*All 2027 service areas and plan details are pending final CMS approval. Any dissemination of Devoted Health plans information for the upcoming plan year prior to 10/1 is strictly prohibited.

¹CMS Medicare Enrollment data, June 2026.

Launching in new markets: how we ensure long-term success



Start with the right markets

Enter markets strategically by evaluating MA eligibles and penetration, competitive landscape, provider network strength, and distribution dynamics.



Build strong local partnerships and earn trust

Invest early in relationships with providers, agencies, brokers, and prospects.



Establish a focused network, then expand

Meet adequacy through key hospital systems and groups, growing thoughtfully over time.



Design plans with intent

Offer sustainable, consistent, and easy-to-understand benefits that drive meaningful member savings.



Stay relentlessly member-first

Maintain our high bar for both the member and broker experience, guided by continuous feedback.

Our 2027 supplemental benefits



Food & Home Card*

Overview

This is a **monthly card-based allowance** that can be used toward healthy foods, housing costs, mortgage, and utility costs. Members who remain qualified YoY can keep their current card.

How it works

- **Healthy foods:** Members can shop for healthy foods at thousands of participating stores nationwide like Walmart, Kroger, Publix, Meijer, and more!** Healthy foods exclude salty snacks, candy, soda, and energy drinks.
- **Housing costs, mortgage, and utilities:** Members pay merchants directly with the card for housing, mortgage, and utility costs like water, electric, Wi-Fi, mortgage payments, and more!

Qualifications

To qualify for the Food & Home Card, members **must meet all 3 of the following CMS Special Supplemental Benefits for the Chronically Ill (SSBCI) criteria:**

1. Have one or more qualifying chronic conditions that are life threatening or significantly limit overall health or function;
2. Have a high risk of hospitalization or other adverse health outcomes; and
3. Require intensive care coordination.

From the moment of enrollment, we look at available data sources (such as medical records, prescription claims, HRA responses, and data from CMS) to get members qualified as quickly as possible.

Completing an HRA with the member is the best way to determine whether a member qualifies — especially for criteria 2 and 3.

*The Food & Home Card is a special supplemental benefit offered on certain plans, and available only to chronically ill members with conditions like diabetes, chronic heart failure, cardiac arrhythmias, coronary artery disease, or peripheral vascular disease; qualifying conditions vary by plan. All applicable plan coverage criteria must be met and other conditions are eligible. Not all members qualify.

**Participating stores are subject to change.

Our 2027 supplemental benefits



Over-the-counter (OTC) benefits

How it works

- We partner with CVS Flex Benefits to offer this benefit.
- Members can make purchases using their Devoted member ID card or by providing their member ID, date of birth, and ZIP code at checkout.
- Eligible items are listed in a catalog that's available both in print and online.
- The OTC benefit is a quarterly allowance. **Unused funds do not carry over to the next quarter.**

Shopping for OTC items

- **Home delivery:** Members can order by phone or online and get items shipped directly to their home.
- **In-store:** Members can purchase eligible items at any standalone CVS or Longs Drugs location.

This is a **quarterly allowance** to spend at CVS on eligible OTC items, like toothpaste, vitamins, pain relievers, and more.



Vision & eyewear benefits

Key highlights

- An annual **eyewear allowance** is offered through a participating vision vendor — **Premier Vision** or **EyeMed**.
- **Prescription glasses and/or contact lenses** are covered.
- Members simply **present their Devoted member ID card** at participating provider locations.
- **Routine eye exams** are also included.
- Members can find in-network providers by calling us or visiting devoted.com/search-providers/.



Hearing benefits

Key highlights

- Annual **hearing aid** benefits through our hearing vendor — **TruHearing®**
- Two TruHearing®-branded hearing aids every year (one per ear per year)
- Available on all Devoted PBPs
- First year of follow-up provider visits included
- 60-day trial period
- 3-year extended warranty
- 80 batteries per aid for non-rechargeable models

Our 2027 supplemental benefits



Dental benefits

Overview

Depending on the plan, dental benefits can be reimbursed directly to members or offered through an allowance that can be used with in-network dental providers. All preventive and comprehensive services count toward the annual dollar limit, except on plans with unlimited preventive dental, where only comprehensive services count.

Direct member reimbursement

- Members can **see any dentist, pay out of pocket, and submit for reimbursement**. Cost sharing applies to comprehensive services on most plans.
- There is **no network**. Members can see any dentist in the U.S.

Network-based

- Members have **access to in-network dentists with a set dollar amount of coverage**. Cost sharing applies to comprehensive services on most non-SNPs (and some SNPs).¹
- **Devoted Dental (Alabama) or Liberty Dental (all other service areas)**. PPO members can see out-of-network providers, but dollars will go further **in-network**.



Fitness benefits

Wellness Bucks

Members may be reimbursed for:

- Fitness classes, including **yoga** or **Zumba®** — online or in person
- Weight-management programs (e.g., **WeightWatchers®**)
- Mindfulness and meditation apps, such as **Lumosity®**, **Calm®**, and **Headspace®**
- **Home fitness equipment**, including walking pads, stationary bikes, free weights, yoga mats, and more

SilverSneakers®

Included at **no cost** to members:

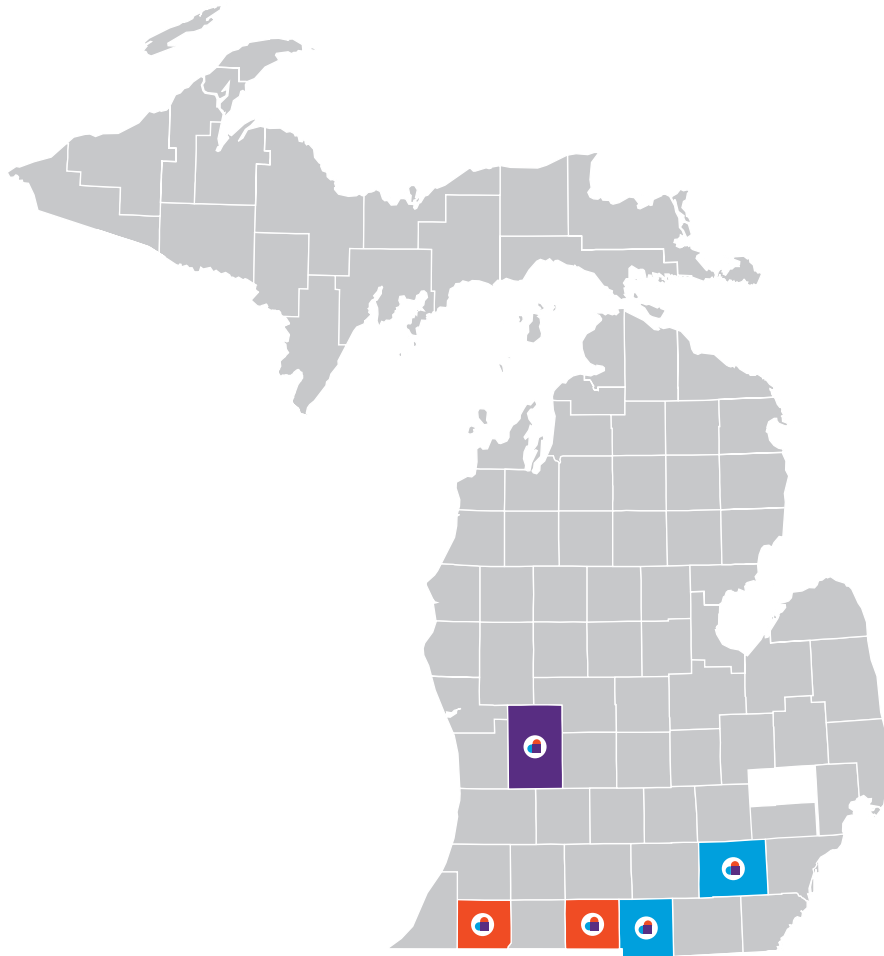
- Access to local gyms and community centers
- Live, instructor-led online classes and workshops
- On-demand workout videos
- SilverSneakers GO fitness app

¹Cost sharing may apply on select services. Implants, cosmetic dental services, and maxillofacial prosthetics are not covered. Benefits, premiums, and cost sharing may vary by plan. Dental limitations may apply. Dental coverage may be in the form of an allowance or reimbursement-based benefit. SilverSneakers is a registered trademark of Tivity Health, Inc. © 2026 Tivity Health, Inc. All rights reserved.

Explore our **2027**
service areas and our
product offerings.



Michigan county map



SOUTHEAST MICHIGAN

Hillsdale, Washtenaw

SOUTHWEST MICHIGAN

Branch, Cass

WEST MICHIGAN

Kent



NEW

Bold county = NEW

Michigan network

Total provider count: 7,514

Ann Arbor/Detroit • Coldwater • Grand Rapids • Three Rivers

Ann Arbor/Detroit

- Detroit Medical Center
- Tenet

Coldwater

- Insight

Grand Rapids

- Trinity Health

Three Rivers

- Ascension
- Quality Care Alliance

Virtual-only provider groups

- Devoted Medical™



Additional providers available in network

Find all providers at devoted.com/search-providers

Devoted Health and Devoted Medical are under common control or ownership and part of the Devoted Health, Inc. family of companies. Devoted Medical is the medical group practice of Devoted Health. Devoted Health accepts other providers.

Our 2027 \$0 Premium product

	ELIGIBILITY CRITERIA	PLAN DESCRIPTION	MAY BE A GOOD FIT FOR
Core/ Choice	No special eligibility criteria. Beneficiaries in the service area with a valid election period may enroll.	• Well-rounded \$0 premium plan • Balanced medical and prescription drug costs • Competitive supplemental benefits	Members who prioritize robust, well-rounded coverage over a premium reduction

Our 2027 Giveback products

	ELIGIBILITY CRITERIA	PLAN DESCRIPTION	MAY BE A GOOD FIT FOR
Giveback	No special eligibility criteria. Beneficiaries in the service area with a valid election period may enroll.	• Substantial Part B premium reduction to lower monthly costs • Higher medical and prescription drug costs • Leaner supplemental benefits	Members who prioritize a significant premium reduction in exchange for leaner benefits
NEW! Giveback Extras	No special eligibility criteria. Beneficiaries in the service area with a valid election period may enroll.	• Moderate Part B premium reduction • Balanced medical and prescription drug costs • Solid supplemental benefits	Mid-buydown shoppers who want strong supplemental benefits without giving up a real premium reduction

Some Medicare Advantage plans pay all or part of the member's Part B premium (the "Part B Giveback"). Amounts vary by plan and may take a few months to appear in the member's Social Security check.

Our 2027 C-SNP products

	ELIGIBILITY CRITERIA	PLAN DESCRIPTION	MAY BE A GOOD FIT FOR
C-SNP Plus	Diabetes, chronic heart failure (CHF), or select cardiovascular disorders	• Robust C-SNP with coinsurance-based cost sharing • Loaded with rich supplementals, including: ◦ Generous Food & Home Card (for eligible members*) ◦ OTC allowance ◦ Comprehensive dental, eyewear, and vision care	Members who want the richest supplementals in the portfolio and can accept coinsurance-based cost sharing
C-SNP Enhanced	Diabetes, chronic heart failure (CHF), or select cardiovascular disorders	• Balanced C-SNP with copay-based cost sharing • Loaded with rich supplementals, including: ◦ Food & Home Card (for eligible members*) ◦ OTC allowance ◦ Comprehensive dental, eyewear, and vision care	Members who prioritize rich supplemental coverage alongside predictable, defined copays
NEW! C-SNP Giveback Extras	Diabetes, chronic heart failure (CHF), or select cardiovascular disorders	• Moderate Part B premium reduction • Balanced medical and prescription drug costs • Solid supplemental benefits	Members with a chronic condition who want strong supplemental benefits without giving up a real premium reduction

*The Food & Home Card is a special supplemental benefit offered on certain plans, and available only to chronically ill members with conditions like diabetes, chronic heart failure, cardiac arrhythmias, coronary artery disease, or peripheral vascular disease; qualifying conditions vary by plan. All applicable plan coverage criteria must be met and other conditions are eligible. Not all members qualify.

2027 C-SNP product comparison

	Plus	Enhanced	Giveback Extras
PART B PREMIUM REDUCTION	\$0	\$0	Moderate
MEDICAL COST SHARING	Mostly coinsurances	Mostly copays	Mostly copays
FOOD & HOME	Highest	Strong	None
OTC	Standard	Standard	Highest
DENTAL VALUE	Strong	Standard	Strong
DENTAL DELIVERY METHOD	Network-based	Network-based	Direct Member Reimbursement

The Food & Home Card is a special supplemental benefit offered on certain plans, and available only to chronically ill members with conditions like diabetes, chronic heart failure, cardiac arrhythmias, coronary artery disease, or peripheral vascular disease; qualifying conditions vary by plan. All applicable plan coverage criteria must be met and other conditions are eligible. Not all members qualify.

Benefits, premiums, and cost sharing may vary by plan. Dental limitations may apply. Dental coverage may be in the form of an allowance or reimbursement-based benefit. Some Medicare Advantage plans pay all or part of the member's Part B premium (the "Part B Giveback"). Amounts vary by plan and may take a few months to appear in the member's Social Security check.

What to know about **cost share protection**

Cost share protection means a member has **secondary coverage that helps pay some or all of the Medicare out-of-pocket costs**, such as deductibles and copays/coinsurance.



Without cost share protection, members are generally responsible for these Medicare cost-sharing amounts.

Medicaid

- Not all Medicaid programs provide Medicare cost share protection.
- Members receive protection only if they qualify for **QMB, QMB+, SLMB+, or FBDE** Medicaid categories.
- **Always verify** both Medicaid eligibility and level before discussing costs or recommending a plan.

TRICARE

- TRICARE generally acts as **secondary coverage after Medicare** for eligible beneficiaries.
- After Medicare pays its share, TRICARE generally pays **all or part** of the remaining covered out-of-pocket costs.
- Many times, individuals **must submit bills** directly to TRICARE.

PPO plans: What to know about out-of-network care

Members can see out-of-network providers **only if they accept Original Medicare** and the provider(s) agree to see Devoted members.



Not all providers will accept or bill Devoted — **members may need to pay up front and request reimbursement.**

- **Before making an appointment**, members should confirm that their doctor accepts Devoted PPO plans.
- Reimbursement is calculated based on the Medicare allowable amount.



Including the PCP on the application is highly encouraged.



For members with Medicaid, **out-of-network providers must accept Medicaid** (or the member's managed Medicaid), or members may owe the full cost share.



Higher cost share may apply to out-of-network care — this must be explained to members.



Extra benefits follow different rules.

Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

Devoted Choice 001 MI (PPO)

H5177-001-000

Featured⁺

MEDICAL BENEFITS

Monthly Premium	\$0.00
Medical Deductible	\$250
Max Out-of-Pocket	\$6,450 INN / \$10,750 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / \$5 copay OON
Specialist	\$45 copay INN / \$45 copay OON
Referrals	No
Inpatient Hospital	\$450 per day for days 1-6, \$0 days 7+ INN / \$450 per day for days 1-6, \$0 days 7+ OON
Outpatient Surgery	\$370-\$470 copay INN / \$370-\$470 copay OON
Emergency	\$130 copay INN / \$130 copay OON
Lab Services (Office)	\$0 copay INN / \$0 copay OON

PRESCRIPTION BENEFITS

Part D Deductible	\$650 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$2 / 25% / 25% / 26%

SUPPLEMENTAL BENEFITS

Dental Limit	\$2,750 per year (Direct member reimbursement)
Vision	\$400 per year
Hearing Aids	\$399-\$699 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	\$90 per quarter

Service Area (■ = sales market): **Southeast Michigan** (Hillsdale, Washtenaw)

Devoted Choice 005 MI (PPO)

H5177-005-000

Featured⁺

MEDICAL BENEFITS

Monthly Premium	\$0.00
Medical Deductible	\$0
Max Out-of-Pocket	\$6,450 INN / \$10,750 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / \$5 copay OON
Specialist	\$45 copay INN / \$45 copay OON
Referrals	No
Inpatient Hospital	\$455 per day for days 1-6, \$0 days 7+ INN / \$455 per day for days 1-6, \$0 days 7+ OON
Outpatient Surgery	\$375-\$475 copay INN / \$375-\$475 copay OON
Emergency	\$130 copay INN / \$130 copay OON
Lab Services (Office)	\$0 copay INN / \$0 copay OON

PRESCRIPTION BENEFITS

Part D Deductible	\$650 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$2 / 25% / 25% / 26%

SUPPLEMENTAL BENEFITS

Dental Limit	\$2,750 per year (Direct member reimbursement)
Vision	\$400 per year
Hearing Aids	\$399-\$699 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	\$83 per quarter

Service Area (■ = sales market): Southwest Michigan (Branch, Cass); **West Michigan** (Kent)

Devoted Choice Giveback Extras 015 MI (PPO) H5177-015-000

Featured⁺

MEDICAL BENEFITS

Part B Giveback*	\$75.00 per month
Monthly Premium	\$0.00
Medical Deductible	\$80
Max Out-of-Pocket	\$8,050 INN / \$12,700 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / \$5 copay OON
Specialist	\$50 copay INN / \$50 copay OON
Referrals	No
Inpatient Hospital	\$490 per day for days 1-5, \$0 days 6+ INN / \$490 per day for days 1-5, \$0 days 6+ OON
Outpatient Surgery	\$425-\$525 copay INN / \$425-\$525 copay OON
Emergency	\$115 copay INN / \$115 copay OON
Lab Services (Office)	\$0 copay INN / \$0 copay OON

PRESCRIPTION BENEFITS

Part D Deductible	\$700 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$2 / 25% / 25% / 25%

SUPPLEMENTAL BENEFITS

Dental Limit	\$3,000 per year (Direct member reimbursement)
Vision	\$400 per year
Hearing Aids	\$599-\$899 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	\$171 per quarter

Service Area (■ = sales market): Southeast Michigan (Hillsdale, Washtenaw)

Devoted Choice Giveback Extras 017 MI (PPO) H5177-017-000

Featured⁺

MEDICAL BENEFITS

Part B Giveback*	\$75.00 per month
Monthly Premium	\$0.00
Medical Deductible	\$200
Max Out-of-Pocket	\$8,050 INN / \$12,700 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / \$5 copay OON
Specialist	\$50 copay INN / \$50 copay OON
Referrals	No
Inpatient Hospital	\$490 per day for days 1-5, \$0 days 6+ INN / \$490 per day for days 1-5, \$0 days 6+ OON
Outpatient Surgery	\$400-\$500 copay INN / \$450-\$550 copay OON
Emergency	\$115 copay INN / \$115 copay OON
Lab Services (Office)	\$0 copay INN / \$0 copay OON

PRESCRIPTION BENEFITS

Part D Deductible	\$700 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$2 / 25% / 25% / 25%

SUPPLEMENTAL BENEFITS

Dental Limit	\$3,000 per year (Direct member reimbursement)
Vision	\$400 per year
Hearing Aids	\$599-\$899 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	\$175 per quarter

Service Area (■ = sales market): **Southwest Michigan** (Branch, Cass); **West Michigan** (Kent)

Devoted Choice Giveback 002 MI (PPO)

H5177-002-000

Featured⁺

MEDICAL BENEFITS

Part B Giveback*	\$152.00 per month
Monthly Premium	\$0.00
Medical Deductible	\$50
Max Out-of-Pocket	\$9,850 INN / \$14,800 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / \$5 copay OON
Specialist	\$55 copay INN / \$55 copay OON
Referrals	No
Inpatient Hospital	\$450 per day for days 1-5, \$0 days 6+ INN / \$450 per day for days 1-5, \$0 days 6+ OON
Outpatient Surgery	\$150-\$250 copay INN / \$200-\$300 copay OON
Emergency	\$115 copay INN / \$115 copay OON
Lab Services (Office)	\$0 copay INN / \$0 copay OON

PRESCRIPTION BENEFITS

Part D Deductible	\$650 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$5 / 25% / 25% / 26%

SUPPLEMENTAL BENEFITS

Dental Limit	\$250 per year (Direct member reimbursement)
Vision	\$200 per year
Hearing Aids	\$599-\$899 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	Not covered

Service Area (■ = sales market): **Southeast Michigan** (Hillsdale, Washtenaw)

Devoted Choice Giveback 006 MI (PPO)

H5177-006-000

Featured⁺

MEDICAL BENEFITS

Part B Giveback*	\$152.00 per month
Monthly Premium	\$0.00
Medical Deductible	\$50
Max Out-of-Pocket	\$9,850 INN / \$14,800 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / \$5 copay OON
Specialist	\$55 copay INN / \$55 copay OON
Referrals	No
Inpatient Hospital	\$490 per day for days 1-5, \$0 days 6+ INN / \$490 per day for days 1-5, \$0 days 6+ OON
Outpatient Surgery	\$300-\$400 copay INN / \$300-\$400 copay OON
Emergency	\$115 copay INN / \$115 copay OON
Lab Services (Office)	\$0 copay INN / \$0 copay OON

PRESCRIPTION BENEFITS

Part D Deductible	\$650 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$5 / 25% / 25% / 26%

SUPPLEMENTAL BENEFITS

Dental Limit	\$250 per year (Direct member reimbursement)
Vision	\$200 per year
Hearing Aids	\$599-\$899 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	Not covered

Service Area (■ = sales market): **Southwest Michigan** (Branch, Cass); **West Michigan** (Kent)

Devoted C-SNP Choice Plus 013 MI (PPO C-SNP) H5177-013-000

Featured⁺

MEDICAL BENEFITS

Monthly Premium	\$0.00
Medical Deductible	\$550
Max Out-of-Pocket	\$9,850 INN / \$14,800 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / 30% coinsurance OON
Specialist	30% coinsurance INN / 40% coinsurance OON
Referrals	No
Inpatient Hospital	\$2,241 per stay INN / 40% coinsurance per stay OON
Outpatient Surgery	50% coinsurance INN / 50% coinsurance OON
Emergency	\$115 copay INN / \$115 copay OON
Lab Services (Office)	50% coinsurance INN / 50% coinsurance OON

PRESCRIPTION BENEFITS

Part D Deductible	\$650 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$5 / 25% / 25% / 26%

SUPPLEMENTAL BENEFITS

Dental Limit	\$2,500 per year (Network-based)
Vision	\$250 per year
Hearing Aids	\$399-\$699 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	\$47 per quarter
Food & Home Card	\$270 per month

Service Area (■ = sales market): **Southeast Michigan** (Hillsdale, Washtenaw); **West Michigan** (Kent)

The Food & Home Card is a special supplemental benefit offered on certain plans, and available only to chronically ill members with conditions like diabetes, chronic heart failure, cardiac arrhythmias, coronary artery disease, or peripheral vascular disease; qualifying conditions vary by plan. All applicable plan coverage criteria must be met and other conditions are eligible. Not all members qualify. Confidential. For agent use only.

Devoted C-SNP Choice Plus 014 MI (PPO C-SNP) H5177-014-000

Featured⁺

MEDICAL BENEFITS

Monthly Premium	\$0.00
Medical Deductible	\$850
Max Out-of-Pocket	\$9,850 INN / \$14,800 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / 30% coinsurance OON
Specialist	30% coinsurance INN / 40% coinsurance OON
Referrals	No
Inpatient Hospital	\$2,241 per stay INN / 40% coinsurance per stay OON
Outpatient Surgery	50% coinsurance INN / 50% coinsurance OON
Emergency	\$115 copay INN / \$115 copay OON
Lab Services (Office)	50% coinsurance INN / 50% coinsurance OON

PRESCRIPTION BENEFITS

Part D Deductible	\$650 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$5 / 25% / 25% / 26%

SUPPLEMENTAL BENEFITS

Dental Limit	\$2,500 per year (Network-based)
Vision	\$250 per year
Hearing Aids	\$399-\$699 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	\$46 per quarter
Food & Home Card	\$261 per month

Service Area (■ = sales market): Southwest Michigan (Branch, Cass)

The Food & Home Card is a special supplemental benefit offered on certain plans, and available only to chronically ill members with conditions like diabetes, chronic heart failure, cardiac arrhythmias, coronary artery disease, or peripheral vascular disease; qualifying conditions vary by plan. All applicable plan coverage criteria must be met and other conditions are eligible. Not all members qualify. Confidential. For agent use only.

Devoted C-SNP Choice Enhanced 010 MI (PPO C-SNP) H5177-010-000

Featured⁺

MEDICAL BENEFITS

Monthly Premium	\$0.00
Medical Deductible	\$0
Max Out-of-Pocket	\$6,950 INN / \$10,750 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / \$5 copay OON
Specialist	\$50 copay INN / \$50 copay OON
Referrals	No
Inpatient Hospital	\$400 per day for days 1-6, \$0 days 7+ INN / \$400 per day for days 1-6, \$0 days 7+ OON
Outpatient Surgery	\$395-\$495 copay INN / \$395-\$495 copay OON
Emergency	\$130 copay INN / \$130 copay OON
Lab Services (Office)	\$0 copay INN / \$0 copay OON

PRESCRIPTION BENEFITS

Part D Deductible	\$650 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$5 / 25% / 25% / 26%

SUPPLEMENTAL BENEFITS

Dental Limit	\$2,000 per year (Network-based)
Vision	\$200 per year
Hearing Aids	\$399-\$699 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	\$50 per quarter
Food & Home Card	\$142 per month

Service Area (■ = sales market): **Southeast Michigan** (Hillsdale, Washtenaw)

The Food & Home Card is a special supplemental benefit offered on certain plans, and available only to chronically ill members with conditions like diabetes, chronic heart failure, cardiac arrhythmias, coronary artery disease, or peripheral vascular disease; qualifying conditions vary by plan. All applicable plan coverage criteria must be met and other conditions are eligible. Not all members qualify. Confidential. For agent use only.

Devoted C-SNP Choice Enhanced 012 MI (PPO C-SNP) H5177-012-000

Featured⁺

MEDICAL BENEFITS

Monthly Premium	\$0.00
Medical Deductible	\$0
Max Out-of-Pocket	\$6,950 INN / \$10,750 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / \$5 copay OON
Specialist	\$50 copay INN / \$50 copay OON
Referrals	No
Inpatient Hospital	\$405 per day for days 1-6, \$0 days 7+ INN / \$405 per day for days 1-6, \$0 days 7+ OON
Outpatient Surgery	\$400-\$500 copay INN / \$400-\$500 copay OON
Emergency	\$130 copay INN / \$130 copay OON
Lab Services (Office)	\$0 copay INN / \$0 copay OON

PRESCRIPTION BENEFITS

Part D Deductible	\$650 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$5 / 25% / 25% / 26%

SUPPLEMENTAL BENEFITS

Dental Limit	\$2,000 per year (Network-based)
Vision	\$200 per year
Hearing Aids	\$399-\$699 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	\$50 per quarter
Food & Home Card	\$142 per month

Service Area (■ = sales market): **Southwest Michigan** (Branch, Cass); **West Michigan** (Kent)

The Food & Home Card is a special supplemental benefit offered on certain plans, and available only to chronically ill members with conditions like diabetes, chronic heart failure, cardiac arrhythmias, coronary artery disease, or peripheral vascular disease; qualifying conditions vary by plan. All applicable plan coverage criteria must be met and other conditions are eligible. Not all members qualify. Confidential. For agent use only.

Devoted C-SNP Choice Giveback Extras

007 MI (PPO C-SNP) H5177-007-000

MEDICAL BENEFITS

Part B Giveback*	\$95.00 per month
Monthly Premium	\$0.00
Medical Deductible	\$390
Max Out-of-Pocket	\$8,050 INN / \$12,700 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / \$5 copay OON
Specialist	\$50 copay INN / \$50 copay OON
Referrals	No
Inpatient Hospital	\$490 per day for days 1-5, \$0 days 6+ INN / \$490 per day for days 1-5, \$0 days 6+ OON
Outpatient Surgery	\$425-\$525 copay INN / \$425-\$525 copay OON
Emergency	\$115 copay INN / \$115 copay OON
Lab Services (Office)	\$0 copay INN / \$0 copay OON

PRESCRIPTION BENEFITS

Part D Deductible	\$700 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$2 / 25% / 25% / 25%

SUPPLEMENTAL BENEFITS

Dental Limit	\$3,000 per year (Direct member reimbursement)
Vision	\$400 per year
Hearing Aids	\$599-\$899 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	\$173 per quarter

Service Area (■ = sales market): Southeast Michigan (Hillsdale, Washtenaw)

Devoted C-SNP Choice Giveback Extras

009 MI (PPO C-SNP) H5177-009-000

MEDICAL BENEFITS

Part B Giveback*	\$95.00 per month
Monthly Premium	\$0.00
Medical Deductible	\$410
Max Out-of-Pocket	\$8,050 INN / \$12,700 combined INN and OON
Primary Care Provider (PCP)	\$0 copay INN / \$5 copay OON
Specialist	\$50 copay INN / \$50 copay OON
Referrals	No
Inpatient Hospital	\$490 per day for days 1-5, \$0 days 6+ INN / \$490 per day for days 1-5, \$0 days 6+ OON
Outpatient Surgery	\$450-\$550 copay INN / \$450-\$550 copay OON
Emergency	\$115 copay INN / \$115 copay OON
Lab Services (Office)	\$0 copay INN / \$0 copay OON

PRESCRIPTION BENEFITS

Part D Deductible	\$700 tiers 3-5
Rx 30-Day Retail Supply	\$0 / \$2 / 25% / 25% / 25%

SUPPLEMENTAL BENEFITS

Dental Limit	\$3,000 per year (Direct member reimbursement)
Vision	\$400 per year
Hearing Aids	\$599-\$899 copay per aid
Wellness Bucks	\$150 per year
OTC Allowance	\$177 per quarter

Service Area (■ = sales market): **Southwest Michigan** (Branch, Cass); **West Michigan** (Kent)



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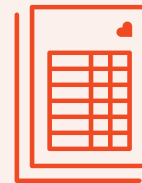
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View our 2027 plans in a spreadsheet!

To access the B-PAG (Broker Plans-at-a-Glance) spreadsheet planning tool, visit devoted.com/s/2027-BPAG-MI



*Featured is not an official CMS ranking or measure and plans are featured based on relative benefit strength. Brokers are encouraged to review all plans with beneficiaries to find the best plan fit.

*Some Medicare Advantage plans pay all or part of the member's Part B premium (the "Part B Giveback"). Amounts vary by plan and may take a few months to appear in the member's Social Security check.

Confidential. For agent use only. Not for distribution to Medicare beneficiaries. Any dissemination of Devoted Health Plans information for the upcoming plan year prior to 10/1 is strictly prohibited.

All plans are pending CMS approval. To enroll in a Devoted Health plan, you must meet certain eligibility requirements and reside in the plan's CMS-approved service area. Our plans' 2027 service areas, as applicable, include select counties in Alabama, Arizona, Arkansas, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Missouri, Nebraska, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, Tennessee, Texas, Utah, Virginia, Washington. (11826DHBV2)