



2023 Product Launch

Michigan Market

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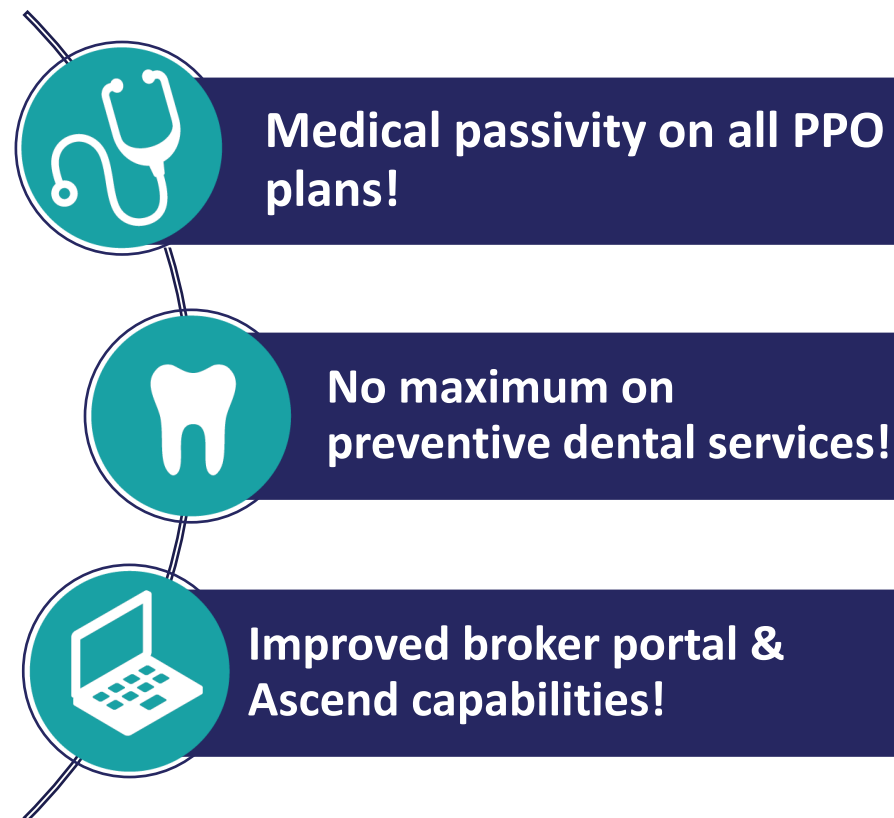
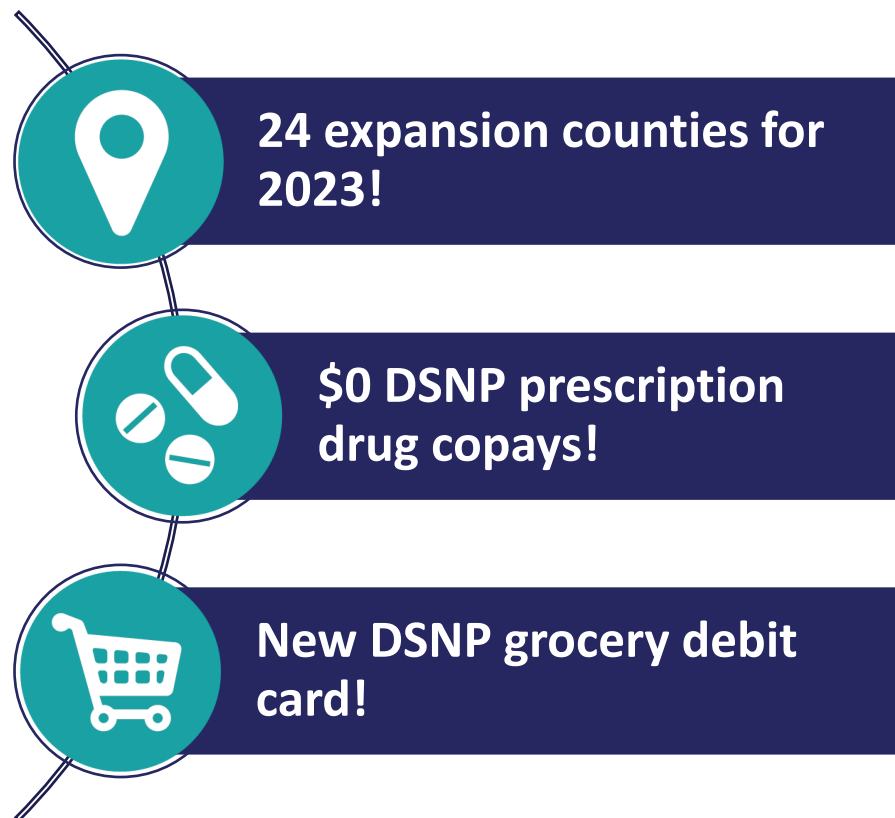


2023 Product Launch

Agenda

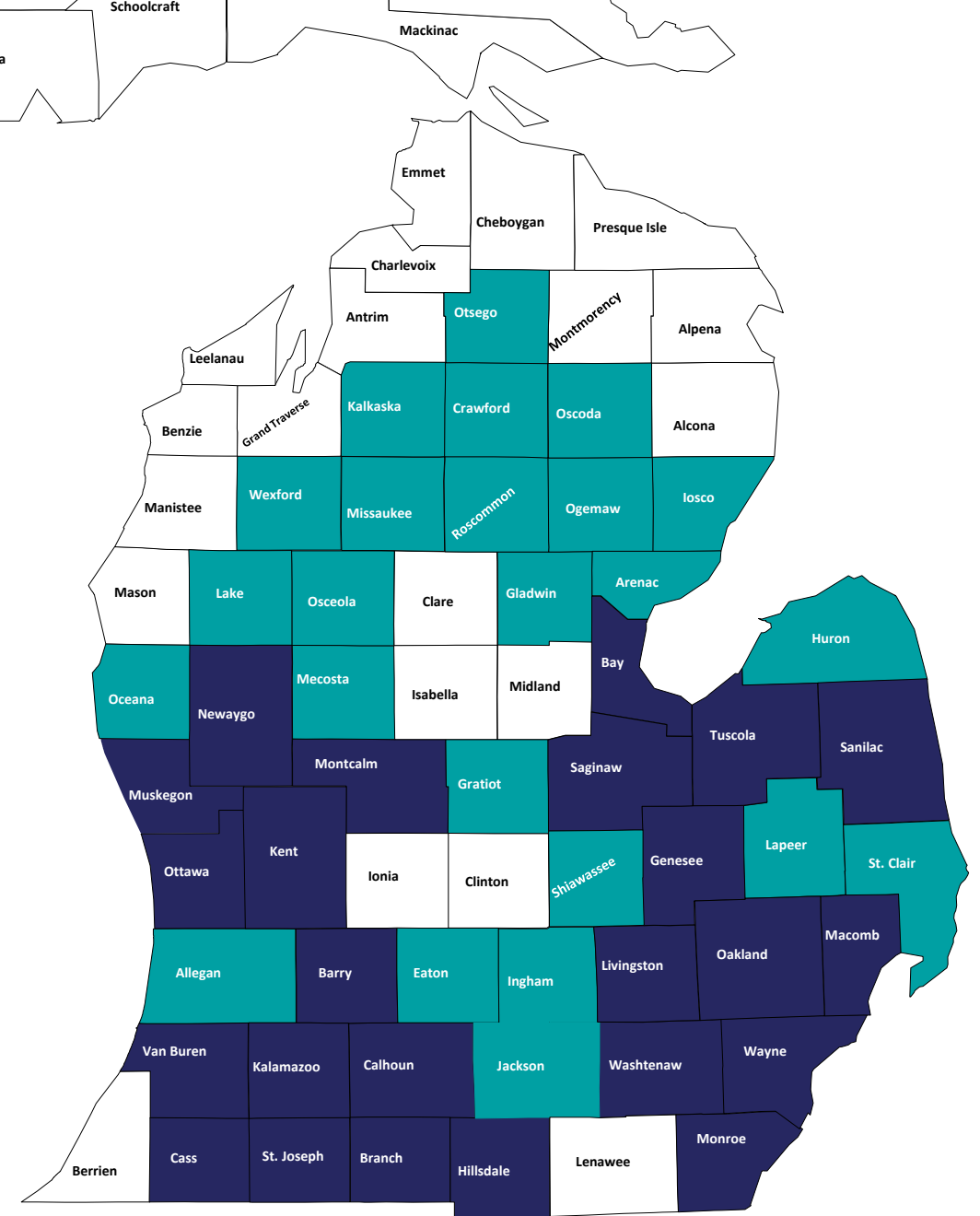
- 2023 Michigan Market Updates
- 2023 MAPD Service Area
- 2023 MAPD Product Portfolio
- 2023 MAPD Plan Highlights
- 2023 PDP Plan Highlights
- Broker Experience Enhancements
- Resources for YOU!
- Questions?

2023 Michigan Market Updates



Expansion Counties Bolded

- **Allegan**
- **Arenac**
- Barry
- Bay
- Branch
- Calhoun
- Cass
- **Crawford**
- **Eaton**
- Genesee
- **Gladwin**
- **Gratiot**
- Hillsdale
- **Huron**
- **Ingham**
- **Iosco**
- **Jackson**
- Kalamazoo
- **Kalkaska**
- Kent
- **Lake**
- **Lapeer**
- Livingston
- Macomb
- **Mecosta**
- **Missaukee**
- Monroe
- Montcalm
- Muskegon
- Newaygo
- Oakland
- **Oceana**
- **Ogemaw**
- **Osceola**
- **Oscoda**
- **Otsego**
- Ottawa
- **Roscommon**
- Saginaw
- Sanilac
- **Shiawassee**
- **St. Clair**
- St. Joseph
- Tuscola
- Van Buren
- Washtenaw
- Wayne
- **Wexford**



2023 MAPD Product Portfolio

2023 Plan Name	Plan Type
Wellcare Assist (HMO)	LIS Non-SNP
Wellcare Giveback (HMO)	Giveback
Wellcare No Premium (HMO-POS)	\$0 Premium
Wellcare Low Premium (HMO-POS)	Low Premium
Wellcare Dual Access (HMO-POS DSNP)	DSNP
Wellcare Dual Access Open (PPO DSNP)	DSNP
Wellcare No Premium Open (PPO)	\$0 Premium
Wellcare Patriot Giveback Open (PPO)	Giveback
Wellcare Community Assist (PPO)	LIS Non-SNP

*Push plans bolded

2023 Plan Crosswalks	
Wellcare No Premium Exclusive (HMO)	→ Wellcare No Premium (HMO-POS)
Wellcare No Premium Essential (HMO-POS)	→ Wellcare No Premium (HMO-POS)

2023 Plan Terms	
Wellcare Specialty No Premium (HMO-POS CSNP)	Termed for 2023



2023 MAPD Plan Highlights

HMO, PPO and D-SNP Plan Options



HMO Plan Options



Wellcare Assist (HMO)

H5475-038-000 | In-Network



\$0 Premium with 100% LIS



\$4,000 Comprehensive Dental Allowance + Dentures



\$750 Flex Card for extended D/V/H Coverage



\$150 OTC Allowance per Quarter

Premium Part B Giveback	\$0.00
Total Premium (Part C Part D)	\$13.90
In-Network Plan Deductible	No
Maximum Out of Pocket (MOOP)	\$5,000
Inpatient Hospital - Acute	\$300 copay per day for days 1-7; \$0 copay per day for days 8-90
PCP Office Visits	\$0
Specialist Office Visits	\$30
Over-the-Counter Items	\$150 every quarter
Medically Necessary Transportation	24 one-way trips every year
Fitness Benefits	\$0
Dental Benefits	No annual preventive max + \$4,000 comp dental services incl. dentures (\$0 copay)
Vision Benefits	\$300 eyewear allowance
Hearing Benefits	\$1,500 per ear
Flex Card D/V/H Services (per year) ¹	\$750
In-Home Support Services	N/A
Rx Deductible	\$505
Deductible Tiers	Tiers 2-5
Tier 1 Drugs*	\$0
Tier 2 Drugs*	\$20
Tier 6 Drugs*	\$0
Laboratory Services	\$0
X-Ray Services	\$0
Meals	Post-Acute and Chronic

D-SNP Plan Options



Wellcare Dual Access (HMO-POS D-SNP)

H5475-001-000 | In-Network



No Maximum on Comprehensive Dental Services + Dentures & Implants



\$1,500 Flex Card for Extended D/V/H Coverage



\$25 Healthy Food Debit Card per Month



\$350 OTC Allowance per Quarter

Premium Part B Giveback	\$0.00
Total Premium (Part C Part D)	\$0.00
In-Network Plan Deductible	\$0
Maximum Out of Pocket (MOOP)	\$8,300
Inpatient Hospital - Acute	\$0 per stay
PCP Office Visits	\$0
Specialist Office Visits	\$0
Over-the-Counter Items	\$350 every quarter
Medically Necessary Transportation	24 one-way trips every year
Fitness Benefits	\$0
Dental Benefits	Dental services with no annual max, incl. dentures and implants (\$0 copay)
Vision Benefits	\$300 eyewear allowance
Hearing Benefits	Hearing \$1,500 / per ear
Flex Card D/V/H Services (per year) ¹	\$1,500
In-Home Support Services	Chores
Rx Deductible	\$0
Deductible Tiers	N/A
Prescription Drugs ²	\$0
Laboratory Services	\$0
X-Ray Services	\$0
Meals	Post-Acute and Chronic
Healthy Food Card ²	\$25 every month

Wellcare Dual Access Open (PPO D-SNP)




H2117-002-000




\$4,000 Comprehensive Dental Allowance + Dentures



\$1,000 Flex Card for extended D/V/H Coverage



\$25 Healthy Food Card per month



\$370 OTC Allowance per quarter

Network / Tiers	In-Network	Out-of-Network
Premium Part B Giveback	\$0.00	\$0.00
Total Premium (Part C Part D)	\$0.00	\$0.00
In-Network Plan Deductible	\$0	\$0
Maximum Out of Pocket (MOOP)	\$8,300	N/A
Inpatient Hospital - Acute	\$0 per stay	\$0 per stay
PCP Office Visits	\$0	\$0
Specialist Office Visits	\$0	\$0
Over-the-Counter Items	\$370 every quarter	\$370 every quarter
Medically Necessary Transportation	24 one-way trips every year	24 one-way trips every year
Fitness Benefits	\$0	\$0
Dental Benefits	No annual preventive max + \$4,000 comp dental services incl. dentures (\$0 copay)	No annual preventive max + \$4,000 comp dental services incl. dentures (50% cost-share)
Vision Benefits	\$400 eyewear allowance	\$400 eyewear allowance
Hearing Benefits	PPO Hearing \$1,000 / per ear INN	PPO Hearing \$1,000 / per ear OON
Flex Card D/V/H Services (per year) ¹	\$1,000	\$1,000
In-Home Support Services	Chores and Personal Care Services	Chores and Personal Care Services
Rx Deductible	\$0	\$0
Deductible Tiers	N/A	N/A
Prescription Drugs ²	\$0	\$0
Laboratory Services	\$0	\$0
X-Ray Services	\$0	\$0
Meals	Post-Acute and Chronic	Post-Acute and Chronic
Healthy Food Card ²	\$25 every month	\$25 every month

PPO Plan Options



Wellcare No Premium Open (PPO)

wellcare

H2117-001-000



Fully Passive In-Network and Out-of-Network Medical Benefits



\$2,000 Comprehensive Dental Allowance + Dentures



\$750 Flex Card for Extended D/V/H Coverage



\$60 OTC Allowance per Quarter

Network / Tiers	In-Network	Out-of-Network
Premium Part B Giveback	\$0.00	\$0.00
Total Premium (Part C Part D)	\$0.00	\$0.00
In-Network Plan Deductible	No	No
Maximum Out of Pocket (MOOP)	\$5,000	N/A
Inpatient Hospital - Acute	\$325 copay per day for days 1-6; \$0 copay per day for days 7-90	\$325 copay per day for days 1-6; \$0 copay per day for days 7-90
PCP Office Visits	\$0	\$0
Specialist Office Visits	\$35	\$35
Over-the-Counter Items	\$60 every quarter	\$60 every quarter
Medically Necessary Transportation	N/A	N/A
Fitness Benefits	\$0	\$0
Dental Benefits	No annual preventive max + \$2,000 comp dental services incl. dentures (\$0 copay)	No annual preventive max + \$2,000 comp dental services incl. dentures (50% cost-share)
Vision Benefits	\$200 eyewear allowance	\$200 eyewear allowance
Hearing Benefits	\$500 per ear	\$500 per ear
Flex Card D/V/H Services (per year) ¹	\$750	\$750
In-Home Support Services	N/A	N/A
Rx Deductible	\$0	\$0
Deductible Tiers	N/A	N/A
Tier 1 Drugs*	\$0	\$0
Tier 2 Drugs*	\$5	\$5
Tier 6 Drugs*	\$0	\$0
Laboratory Services	\$0	\$0
X-Ray Services	\$0	\$0
Meals	Post-Acute and Chronic	Post-Acute and Chronic

Wellcare Patriot Giveback Open (PPO)



H2117-003-000

\$60 per Month Part B Giveback

Fully Passive In-Network and Out-of-Network Medical Benefits

\$2,000 Comprehensive Dental Allowance

\$75 OTC Allowance per Quarter

Network / Tiers	In-Network	Out-of-Network
Premium Part B Giveback	\$60.00	\$60.00
Total Premium (Part C Part D)	\$0.00	\$0.00
In-Network Plan Deductible	No	No
Maximum Out of Pocket (MOOP)	\$5,000	N/A
Inpatient Hospital - Acute	\$325 copay per day for days 1-6; \$0 copay per day for days 7-90	\$325 copay per day for days 1-6; \$0 copay per day for days 7-90
PCP Office Visits	\$0	\$0
Specialist Office Visits	\$30	\$30
Over-the-Counter Items	\$75 every quarter	\$75 every quarter
Medically Necessary Transportation	24 one-way trips every year	24 one-way trips every year
Fitness Benefits	\$0	\$0
Dental Benefits	No annual preventive max + \$2,000 comp dental services (\$0 copay)	No annual preventive max + \$2,000 comp dental services (50% cost-share)
Vision Benefits	\$300 eyewear allowance	\$300 eyewear allowance
Hearing Benefits	\$1,000 per ear	\$1,000 per ear
Flex Card D/V/H Services (per year) ¹	N/A	N/A
In-Home Support Services	N/A	N/A
Rx Deductible	N/A	N/A
Deductible Tiers	N/A	N/A
Tier 1 Drugs*	N/A	N/A
Tier 2 Drugs*	N/A	N/A
Tier 6 Drugs*	N/A	N/A
Laboratory Services	\$0	\$0
X-Ray Services	\$0	\$0
Meals	Post-Acute	Post-Acute

2023 PDP Plan Highlights





2023 PDP Plan Highlights

- Three (3) Wellcare branded Prescription Drug Plans (PDP) offered in 2023 – 102 plans nationwide.
- Over 60,000 in-network pharmacies!
- Predictable costs – low deductibles, co-pays, and premiums!

Classic Plan	Value Script Plan	Value Plus Plan
<ul style="list-style-type: none">➤ Designed for Duals (LIS)➤ Low/No Premium for Duals➤ \$0 Tier 1* (after deductible)	<ul style="list-style-type: none">➤ Low Premium Plan➤ \$0 Deductible (Tiers 1 & 2)➤ \$0 Tier 1*➤ Low-Cost Insulins and new Select Diabetic Drug tier	<ul style="list-style-type: none">➤ Richest Coverage➤ \$0 Deductible➤ \$0 Tier 1*➤ Low-cost Insulins and new Select Diabetic Drug tier

*\$0 Tier 1 applies at preferred pharmacies

Wellcare's Proposed 2023 PDP Offerings



	Duals		Low Premium		High Premium	
Plan Name	Classic		Value Script		Rx Value Plus	
Membership	1.4M		2.2M		500K	
Premium	TBD		TBD		TBD	
Deductible	\$505 (Applies to all tiers)		\$505 (Applies to tiers 3,4,5)		\$0	
Retail Type	Pref Retail	Std Retail	Pref Retail	Std Retail	Pref Retail	Std Retail
Initial Coverage Stage	T1: \$0	T1: \$2-\$7	T1: \$0	T1: \$8	T1: \$0	T1: \$10
	T2: \$3-\$9	T2: \$7-\$18	T2: \$5	T2: \$15	T2: \$4	T2: \$20
	T3: \$30-\$42	T3: \$37-\$47	T3: \$44	T3: \$47	T3: \$47	T3: \$47
	T4: 33%-44%	T4: 34%-46%	T4: 47%	T4: 50%	T4: 50%	T4: 50%
	T5: 25%	T5: 25%	T5: 25%	T5: 25%	T5: 33%	T5: 33%
			T6: \$11	T6: \$11	T6: \$11	T6: \$11
Initial Coverage Limit	Up to \$4,660 in Rx costs		Up to \$4,660 in Rx costs		Up to \$4,660 in Rx costs	
Senior Savings Model (Insulin Savings)	N/A		\$35 insulins ⁺		\$35 insulins ⁺	
Network (Preferred Pharmacies)	CVS, Walgreens, and most grocers		CVS, Walgreens, and most grocers		CVS, Walgreens, and most grocers	

Confidential and Proprietary Information



Broker Experience Enhancements





CENTENE Workbench

- **NEW** Wellcare broker portal (replaced Agent Connect in April 2022).
- **Integrated & Enhanced Platform**
 - Producer management and compensation are integrated in one platform, no sync issues
 - NIPR real time automation
- **Robust Ticketing**
 - Improved user experience, including ability to upload documents and track ticket status
 - Real time updates through the notification feature



Value Based Enrollments


Payment Increased!

- **\$125** administrative payment for each D-SNP VBE assessment!
- The Standalone VBE site is available for any paper D-SNP enrollments and/or other D-SNP enrollments not completed via Ascend.


Thank you for completing your Medicare application. We will review your submission and be in touch with you soon!

You have completed your enrollment for Wellcare Dual Access (HMO-POS D-SNP)

Please keep this Confirmation Number for your records: **4012379**




Email Confirmation
Click here to have your confirmation number emailed to you



Print Application
Click here to print this page with your Confirmation Number

NOTE: We will not keep the email address entered on file. It will be used for the sole purpose of sending an enrollment confirmation receipt.


If you have any questions about your pending application, please call the number listed below and have your confirmation number ready.




Value-Based Enrollment

Start Transitioning to Your New Plan Now!
Wellness Advocates are standing by to help you transition to your new plan. They will schedule your Annual Wellness Visit and gather important information related to your healthcare needs.


Select your preferred language for the call:
☐ English ☐ Spanish



Decline
Decline to speak with a wellness Advocate.



Agent Completed
Have your agent complete it online with you now.



Resources for YOU!



Wellcare Enrollment Options





Wellcare Recertifications

2023 AHIP & Annual Certification Training (ACT)

- **AHIP & ACT** can be accessed via the Centene Learning Center
 - <https://centene.cmssystem.com/page/login>
- **2023 AHIP** – Launched June 20th
 - Wellcare offers AHIP at a discounted rate (\$125 vs \$175) if accessed through our training site!
- **2023 First Looks** – Launched July 7th
- **2023 Wellcare Annual Certification Training (ACT)** – Launched July 12th

Broker Roadshow Schedule

RSVP Today!



In Person Broker Roadshows		Virtual First Looks	
<p>August 16 10 a.m. - Noon 2023 Broker Rollout Lansing</p> <p>RSVP</p>		<p>July 18 9 a.m. 2023 First Looks</p> <p>RSVP</p>	<p>July 25 9 a.m. 2023 First Looks</p> <p>RSVP</p>
<p>August 16 2 p.m. - 4 p.m. 2023 Broker Rollout Lansing</p> <p>RSVP</p>		<p>August 1 9 a.m. 2023 First Looks</p> <p>RSVP</p>	<p>August 15 9 a.m. 2023 First Looks</p> <p>RSVP</p>
<p>August 23 9:30 a.m. - 2 p.m. 2023 Product Launch/Vendor Expo Greater Detroit Plymouth</p> <p>RSVP</p>		<p>August 29 9 a.m. 2023 First Looks</p> <p>RSVP</p>	<p>Sept. 12 9 a.m. 2023 First Looks</p> <p>RSVP</p>
<p>August 24 9:30 a.m. - 2 p.m. 2023 Product Launch/Vendor Expo Grand Rapids</p> <p>RSVP</p>		<p>Sept. 26 9 a.m. 2023 First Looks</p> <p>RSVP</p>	<p>Oct. 10 9 a.m. 2023 First Looks</p> <p>RSVP</p>



Broker Support Resources

Support	Purpose	Contact Information
Broker Support	Assistance with contracting, certification, commissions, onboarding, etc	866-822-1339 Mon – Fri: 8AM – 9PM EST
Request for Information (RFI) - Legacy Plans*	Assistance with enrollment verification and Request for Information (RFI) on Legacy Plans*	844-202-6811 Mon – Fri: 12PM – 8PM EST
Request for Information (RFI) - Wellcare	Resolve applications in Pending status	866-822-1339 Mon – Fri: 8AM – 8PM EST
Special Populations (SPOP) Medicaid Eligibility	Eligibility support for Medicare and Medicaid	866-211-0544 Mon – Fri: 8AM – 8PM EST Sat – Sun: 8AM – 5PM EST
Telephonic Scope of Appointment (SOA)	Document SOA via phone	877-780-3920 (MAPD) 877-297-3625 (PDP)
Paper Application Submission	Submit paper enrollment applications via FAX	866-473-9124 (Wellcare MAPD) 866-388-1521 (PDP) 844-222-3180 (Legacy Plans*)

*Legacy Plans include: Allwell, Ascension Complete, Health Net

Questions?

Thank you for your business!

