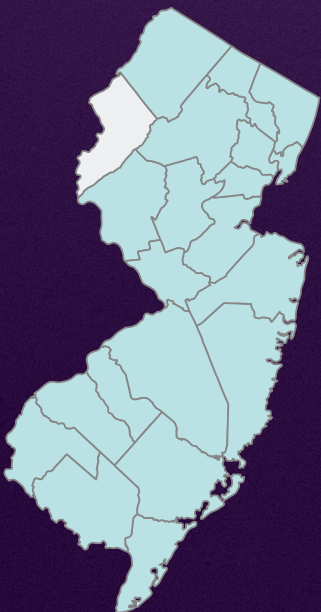


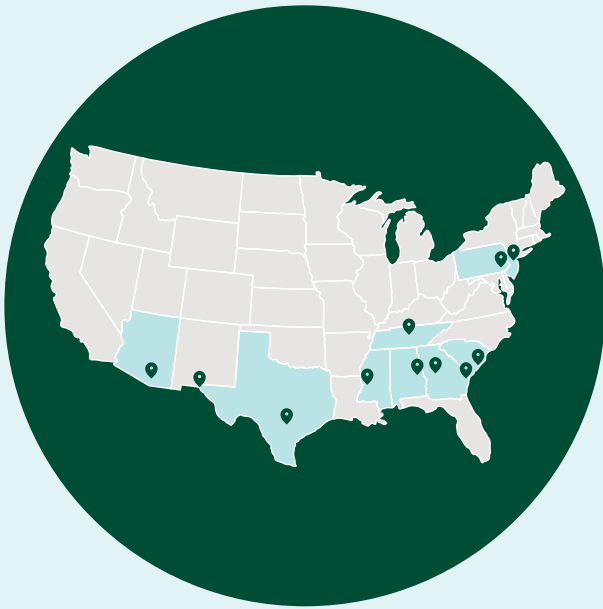
Clover Health

Agent Preview

2022 Medicare
Advantage Plans

New Jersey





9 States



66,000+ Medicare Advantage Lives

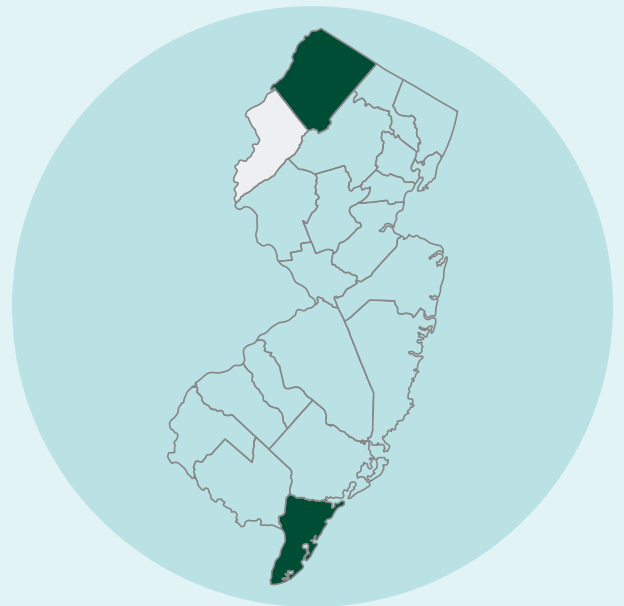
6,391 Primary Care Providers



22,041 Specialists



20 Counties
(New counties in green)

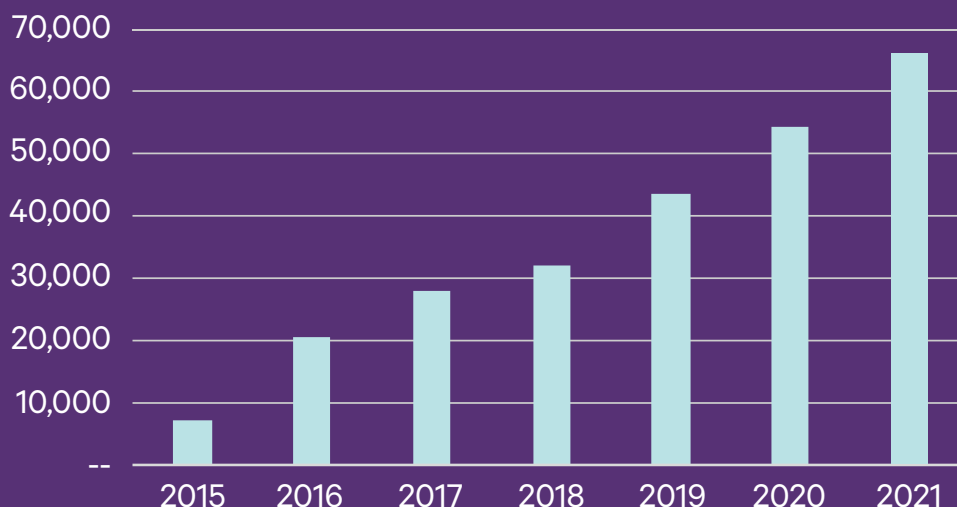


We're Growing—2 New Counties

Atlantic, Bergen, Burlington, Camden, **Cape May**, Cumberland, Gloucester, Essex, Hudson, Hunterdon, Mercer, Middlesex, Monmouth, Morris, Ocean, Passaic, Salem, Somerset, **Sussex**, Union

Bold = new counties

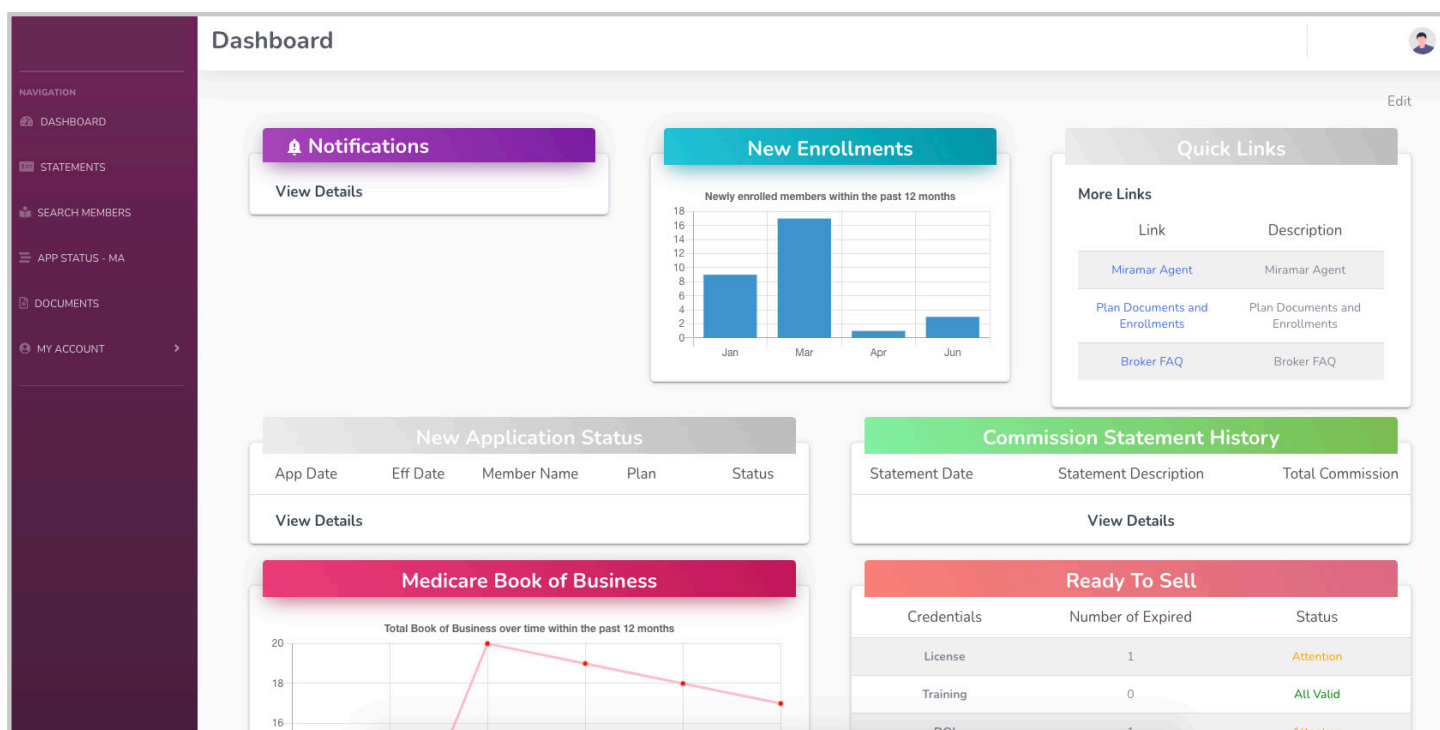
Consistent YOY Growth



2022 Broker Support—New Broker Portal

Our performance management software allows you to:

- Track your book of business—new and existing
- Track application status from submission to accretion
- Request Clover member ID cards
- Get disenrollment reports
- And more!



What's New for 2022

Clover Health Medicare Advantage plans provide extra benefits you don't get with original Medicare, including:

Over-the-Counter (OTC)/Grocery Benefit

- Most Clover plans will have a combined quarterly OTC/grocery allowance.
- Members must qualify for grocery portion.
 - To qualify, members must have certain health condition(s) such as diabetes, chronic arthritis, or hypertension and be validated by Clover Health. (A complete list of qualifying conditions is available through Clover Health.)
- Members who qualify can choose to spend their quarterly allowance on grocery products only, OTC items only, or a combination of both.
- Members will receive one card.
- Members who do not qualify for the grocery benefit may use their full allowance on OTC only.
- Items that do not qualify are non-food and pet items, alcohol, baby formula, candy, chips, coffee shop items, desserts, fresh baked goods, soda, and tobacco.
- Allowances are on a quarterly basis and do not roll over.



OTC-Only Benefit

- A few plans will only offer the OTC allowance.
- Members can use their allowance on OTC items only.
- Members can get their OTC items 3 ways:
 1. At convenient retail locations
 2. Via catalog
 3. By phone
- Allowances are on a quarterly basis and do not roll over.



What's New for 2022

Plans 001, 004

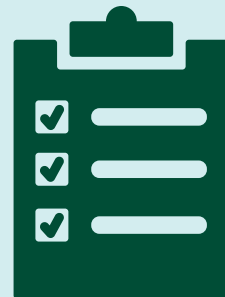
- Specialist copay lowered to \$10 for INN/OON
- Tier 1 30-day preferred lowered to \$0

Plans 001, 004, 007

- New \$1,000 comprehensive dental
- Eyewear increased to \$200

New Part B Buyback Plan 054, 055

- Counties: Atlantic, Bergen, Essex, Hudson, Mercer, Monmouth, Morris, Passaic, Somerset, Sussex, Union



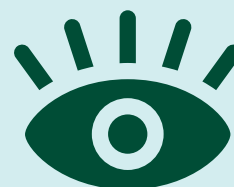
Insulin Savings Program

- Clover will be participating in the Part D Senior Savings Model.
- CMS maximum copay of \$35 for one-month supply
 - Clover Preferred insulin copay: \$25/month
 - Clover Non-preferred insulin copay: \$35/month
- Instant savings for insulin during the Deductible stage, Initial Coverage stage, and Coverage Gap
- Covered prescriptions are not subject to a deductible or any coverage gap cost increases throughout the plan year.
- Clover Value plans serving the LIS beneficiary will not be participating.



Dental/Vision

- DentaQuest network expansion
- Three ways to use DentaQuest:
 1. In-network with DentaQuest
 2. Out-of-network dentist willing to bill DentaQuest
 3. Submit a claim for reimbursement (reach out to local Sales Manager for details)
- Clients should ask dentists or eye doctors “Do you accept DentaQuest or EyeQuest?”
 - Agents should not ask “Do you accept Clover Health?” as our provider for dental is DentaQuest.
- Please refer to each plan for specific coverage.



What's Staying the Same in 2022

Clover is keeping the LiveHealthy PPO benefits that matter most to members!



\$0 plan premium



\$0 copay – unlimited primary care visits



\$0 copay – many generic drugs



\$0 copay – preventive services



\$0 Part D deductible (Plan 032)



\$0 copay – SilverSneakers®



\$1,000 yearly dental allowance



Same in-network and out-of-network copays

Clover Health

2022 Benefits Preview

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Counties: 001 – Hudson; 004, 007 – Atlantic, Bergen, Essex, Hudson (007 only), Mercer, Monmouth, Morris, Passaic, Somerset, Sussex, Union		Plans 001, 004 Choice PPO	Plan 007 Choice Value PPO
PLAN	Monthly premium, includes Part D	\$0	\$38.10
	Plan deductible	\$0	\$0
	Max yearly out-of-pocket	\$7,550 INN/OON	\$7,550 INN/OON
DOCTOR VISITS	Primary care visits (unlimited)	\$0 INN/OON	\$0 INN/OON
	Specialist visits (unlimited)	\$10 INN/OON	\$5 INN/OON
	Physical/speech therapy	\$20 INN/\$50 OON	\$5 INN/\$50 OON
INPATIENT/ OUTPATIENT HOSPITAL	Inpatient hospital stay	\$390/day, days 1–4 INN/OON	\$340/day, days 1–4 INN/OON
	Outpatient surgery: hospital	\$325 INN/OON	\$200 INN/OON
	Outpatient lab services	\$10 INN/\$40 OON	\$0 INN/\$40 OON
RX	Part D deductible	\$150 Tiers 3–5	\$480 Tiers 3–5
	Prescription costs (30-day supply, preferred pharmacy)	Tier 1: \$0, Tier 2: \$10, Tier 3: \$37, Tier 4: \$90, Tier 5: 30%	Tier 1: \$2, Tiers 2–3: 22%, Tiers 4–5: 25%
	Prescription costs (90-day supply, mail order)	Tiers 1–2: \$0, Tier 3: \$110, Tier 4: \$270, Tier 5: 30%	Tiers 1–2: \$0, Tier 3: 22%, Tiers 4–5: 25%
EXTRA BENEFITS YOU DON'T GET WITH ORIGINAL MEDICARE	Comprehensive dental allowance	\$1,000 per year	\$1,000 per year
	Eyeglasses or contacts allowance	\$200 per year	\$200 per year
	TruHearing hearing aids* (one per ear per year)	\$699–\$999 INN \$999 OON	\$699–\$999 INN \$999 OON
	Grocery/OTC items	\$75 every quarter	\$125 every quarter
	Diabetes monitoring supplies	\$0 INN/OON	\$0 INN/OON
	Senior Savings Model – insulin	\$25 copay preferred, \$35 copay non-preferred	N/C
	Telehealth	\$0–\$20 INN	\$0–\$5 INN
	Fitness membership	SilverSneakers**	SilverSneakers**

INN = In-network; OON = Out-of-network

Clover Health

2022 Benefits Preview

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Counties: Burlington, Camden, Cape May (032 only), Cumberland, Gloucester, Hunterdon, Middlesex (032 only), Ocean, Salem		Plan 032 Choice PPO	Plan 042 Choice Value PPO
PLAN	Monthly premium, includes Part D	\$0	\$38.10
	Plan deductible	\$0	\$0
	Max yearly out-of-pocket	\$7,550 INN/OON	\$7,550 INN/OON
DOCTOR VISITS	Primary care visits (unlimited)	\$0 INN/OON	\$0 INN/OON
	Specialist visits (unlimited)	\$20 INN/OON	\$10 INN/OON
	Physical/speech therapy	\$20 INN/\$50 OON	\$10 INN/\$50 OON
INPATIENT/ OUTPATIENT HOSPITAL	Inpatient hospital stay	\$390/day, days 1–4 INN/OON	\$340/day, days 1–4 INN/OON
	Outpatient surgery: hospital	\$390 INN/OON	\$340 INN/OON
	Outpatient lab services	\$10 INN/\$40 OON	\$5 INN/\$40 OON
RX	Part D deductible	\$0	\$480 Tiers 2–5
	Prescription costs (30-day supply, preferred pharmacy)	Tier 1: \$0, Tier 2: \$10, Tier 3: \$47, Tier 4: \$90, Tier 5: 33%	Tier 1: \$2, Tiers 2–3: 22%, Tiers 4–5: 25%
	Prescription costs (90-day supply, mail order)	Tiers 1–2: \$0, Tier 3: \$110, Tier 4: \$270, Tier 5: 33%	Tiers 1–2: \$0, Tier 3: 22%, Tiers 4–5: 25%
EXTRA BENEFITS YOU DON'T GET WITH ORIGINAL MEDICARE	Comprehensive dental allowance	\$1,000 per year	\$1,000 per year
	Eyeglasses or contacts allowance	\$100 per year	\$100 per year
	TruHearing hearing aids* (one per ear per year)	\$699–\$999 INN \$999 OON	\$699–\$999 INN \$999 OON
	Grocery/OTC items	\$75 every quarter (OTC only)	\$75 every quarter (OTC only)
	Diabetes monitoring supplies	\$0 INN/OON	\$0 INN/OON
	Senior Savings Model – insulin	\$25 copay preferred, \$35 copay non-preferred	N/C
	Telehealth	\$0–\$20 INN	\$0–\$10 INN
	Fitness membership	SilverSneakers**	SilverSneakers**

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Clover Health

2022 Benefits Preview

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Counties: Atlantic, Bergen, Essex, Hudson, Mercer, Monmouth, Morris, Passaic, Somerset, Sussex, Union		Plan 054 Premier PPO	Plan 055 Premier Value PPO
PLAN	Part B buyback	\$70 per month	\$20 per month
	Monthly premium, includes Part D	\$0	\$37.30
	Plan deductible	\$0	\$0
	Max yearly out-of-pocket	\$7,550 INN/\$11,300 OON	\$7,550 INN
DOCTOR VISITS	Primary care visits (unlimited)	\$0 INN/40% OON	\$0 INN/OON
	Specialist visits (unlimited)	\$40 INN/40% OON	\$5 INN/OON
	Physical/speech therapy	\$40 INN/40% OON	\$5 INN/\$50 OON
INPATIENT/ OUTPATIENT HOSPITAL	Inpatient hospital stay	\$390/day, days 1–4 INN/OON	\$340/day, days 1–4 INN/OON
	Outpatient surgery: hospital	\$350 INN/40% OON	\$200 INN/OON
	Outpatient lab services	\$0 INN/40% OON	\$0 INN/\$40 OON
RX	Part D deductible	\$200 Tiers 2–5	\$480 Tiers 2–5
	Prescription costs (30-day supply, preferred pharmacy)	Tier 1: \$0, Tiers 2–3: 22%, Tiers 4–5: 25%	Tier 1: \$0, Tiers 2–3: 22%, Tiers 4–5: 25%
	Prescription costs (90-day supply, mail order)	Tiers 1–2: \$0, Tier 3: 22%, Tiers 4–5: 25%	Tiers 1–2: \$0, Tier 3: 22%, Tiers 4–5: 25%
EXTRA BENEFITS YOU DON'T GET WITH ORIGINAL MEDICARE	Comprehensive dental allowance	N/C	N/C
	Eyeglasses or contacts allowance	\$100 per year	\$200 per year
	TruHearing hearing aids* (one per ear per year)	\$699–\$999 INN \$999 OON	\$699–\$999 INN \$999 OON
	Grocery/OTC items	\$50 every quarter	N/C
	Diabetes monitoring supplies	\$0 INN/20% OON	\$0 INN/OON
	Senior Savings Model – insulin	\$25 copay preferred, \$35 copay non-preferred	N/C
	Telehealth	\$0 INN	\$0–\$5 INN
	Fitness membership	SilverSneakers**	SilverSneakers**

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Clover Health

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Counties: Atlantic, Bergen, Essex, Hudson, Middlesex (003 only), Passaic, Union		Plan 002 Classic HMO	Plan 003 Value HMO
PLAN	Monthly premium, includes Part D	\$0	\$38.10
	Plan deductible	\$0	\$0
	Max yearly out-of-pocket	\$7,550 INN/OON	\$7,550 INN/OON
DOCTOR VISITS	Primary care visits (unlimited)	\$0 INN	\$0 INN
	Specialist visits (unlimited)	\$20 INN	\$5 INN
	Physical/speech therapy	\$20 INN	\$5 INN
INPATIENT/ OUTPATIENT HOSPITAL	Inpatient hospital stay	\$390/day, days 1–4 INN	\$340/day, days 1–4 INN
	Outpatient surgery: hospital	\$325 INN	\$200 INN
	Outpatient lab services	\$0 INN	\$0 INN
RX	Part D deductible	\$0	\$480 Tiers 2–5
	Prescription costs (30-day supply, preferred pharmacy)	Tier 1: \$0, Tier 2: \$10, Tier 3: \$37, Tier 4: \$90, Tier 5: 33%	Tier 1: \$2, Tiers 2–3: 22%, Tiers 4–5: 25%
	Prescription costs (90-day supply, mail order)	Tiers 1–2: \$0, Tier 3: \$110, Tier 4: \$270, Tier 5: 33%	Tiers 1–2: \$0, Tier 3: 22%, Tiers 4–5: 25%
EXTRA BENEFITS YOU DON'T GET WITH ORIGINAL MEDICARE	Comprehensive dental allowance	\$1,000 per year INN	\$1,000 per year INN
	Eyeglasses or contacts allowance	\$200 per year INN	\$200 per year INN
	TruHearing hearing aids* (one per ear per year)	\$699–\$999 INN	\$699–\$999 INN
	Grocery/OTC items	\$75 every quarter	\$125 every quarter
	Diabetes monitoring supplies	\$0 INN	\$0 INN
	Senior Savings Model – insulin	\$25 copay preferred, \$35 copay non-preferred	N/C
	Telehealth	\$0–\$20 INN	\$0–\$5 INN
	Fitness membership	SilverSneakers**	SilverSneakers**

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Clover Health

* 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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