

Extra Benefits Guide 2026

Additional benefits that may
be included in your plan



Extra Benefits 2026



Using extra benefits is easy.

Your HealthSpring Medicare Advantage plan comes with extra benefits to help you get added care, save money and live your healthiest life. Check your Evidence of Coverage (EOC) to learn which benefits are included in your plan. Be sure to keep this guide handy so that you can easily find the right information when you need it.

Use this guide to learn who to call if you have questions. Depending on your plan, you may not have all the benefits listed.

Help is here.

Call **HealthSpring Customer Service** at **1-800-668-3813 (TTY 711)**, October 1 – March 31, 8 a.m. – 8 p.m. local time, seven days a week, and April 1 – September 30, Monday – Friday, 8 a.m. – 8 p.m. local time.

Visit **HealthSpring.com/Resources** to view plan documents, such as your EOC, drug list (formulary), provider and pharmacy directories, and more.



EXTRA BENEFITS 2026

Advance Care Planning	Use Advance Care Planning to communicate your medical care preferences and values—in case you can't speak for yourself. Using this benefit is voluntary. And it's covered by your plan at no cost to you. For more information, call Koda Health at 1-888-840-5632 (TTY 711) , Monday – Friday, 8 a.m. – 5 p.m. ET (voicemail available nights and weekends), or visit app.kodahealthcare.com/healthspring .
Caregiver Support	This benefit helps support caregivers with virtual coaching and customized resources. Call our caregiver support vendor Homethrive at 1-888-651-0856 (TTY 711), Monday – Friday, 8 a.m. – 5 p.m. local time, or visit info.homethrive.com/HealthSpring. Benefit includes caregiver support services, such as one-on-one coaching. Additional products and services recommended by the HealthSpring caregiver support vendor may include fees not covered by your plan benefit. You will be notified if additional charges will apply. You have the right to decline any additional services not covered by your plan.
Dental Allowance	A yearly allowance to help pay for many preventive and comprehensive dental services that Original Medicare doesn't cover. Your plan determines your total allowance amount and if you can see out-of-network providers or if you must stay in-network. No matter your plan, this benefit is managed by Cigna Dental. They're our dental allowance vendor. To learn more, call Dental Customer Service at 1-866-213-7295 (TTY 711), October 1 – March 31, 8 a.m. – 8 p.m. local time, seven days a week, and April 1 – September 30, Monday – Friday, 8 a.m. – 8 p.m. local time. The preventive and comprehensive dental services are administered through Cigna Health and Life Insurance Company and, in New York, Cigna Health and Life Adjuster Services. Not all dental services are covered. Please see the Dental Allowance Guide for more information. Plan H7849-114 is excluded from this benefit.

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Fitness Program	The Silver&Fit® Healthy Aging and Exercise program offers a fitness center membership and a Home Fitness Kit, which may include a wearable fitness tracker option. To learn more, call Silver&Fit at 1-888-886-1992 (TTY 711), 8 a.m. – 9 p.m. ET, Monday – Friday, or visit SilverandFit.com. The Silver&Fit program is provided by American Specialty Health Fitness, Inc. (ASH Fitness), a subsidiary of American Specialty Health Incorporated (ASH). All programs and services are not available in all areas. Silver&Fit is a trademark of ASH and used with permission herein. Kits are based on availability and subject to change. Fitness center participation may vary by location and is subject to change. Nonstandard services that call for an added fee are not part of the fitness program and will not be reimbursed.
Hearing Services	Your plan includes a routine hearing exam and coverage for hearing aids with or without a prescription. Plus, your plan covers an exam to make sure your prescription hearing aids fit. To learn more, call TruHearing at 1-866-872-1001 (TTY 711), 7 a.m. – 7 p.m. CT, Monday – Friday.
Home-Delivered Meals	It can be hard to cook right after a stay in a hospital or skilled nursing facility. That's why you'll get healthy meals delivered to your home. To learn more, call Customer Service at the phone number on the back of your member ID card. Releases from an emergency department, observation stay or outpatient visit are not eligible.
Over-the-Counter (OTC) Allowance	You may get an OTC allowance each quarter. It helps cover the cost of OTC drugs and other health-related products. You can use it at our participating stores. Or shop at healthspringflex.com or walgreens.com. You can also order items by calling the HealthSpring Flex Service Center or by mail through our catalog. To learn more, call the HealthSpring Flex Service Center at 1-866-851-1579 (TTY 711), 8 a.m. – 11 p.m. ET, Monday – Friday, or visit healthspringflex.com.
Part B Premium Giveback program	This benefit lowers your monthly Medicare Part B premium. Plus, you don't have to do anything to get this benefit. Just look for savings on your monthly Social Security check or Part B statement. The amount taken off your premium depends on your plan. To learn more, call Customer Service at the phone number on the back of your member ID card.
Routine (Non-emergency) Transportation	Your plan may cover routine, nonemergency transportation to and from approved locations that are health related. Visit mymodivcare.com/book-now for information on how to book your ride. You can also download the Modivcare App to book and manage trips from your smartphone 24/7. Just visit mymodivcare.com/modivcare-app to get started. Or call Modivcare at 1-866-214-5126 (TTY 711), 8 a.m. – 8 p.m. local time, Monday – Friday, or visit Member.Modivcare.com. Non-emergent transportation for up to 70-mile one-way trips to and from approved locations. For trips exceeding 70 miles, Modivcare will contact the plan for prior authorization. The maximum number of trips varies by plan. You must request transportation at least 48 hours before your appointment.
Telehealth Services	Get 24/7 nonemergency urgent care when your health care provider isn't available. You can talk to a provider by phone or video. Plus, MDLIVE® offers mental health therapy (by appointment) and dermatology care. Call MDLIVE at 1-866-918-7836 (TTY 1-800-770-5531), 24 hours a day, seven days a week, or visit mdlive.com/healthspring.



Vision Services	Your plan covers vision services that Original Medicare doesn't, such as an annual routine eye exam. Plus, some plans include an allowance for your choice of eyewear. Your plan also covers vision services that Original Medicare covers. To learn more about the services that Original Medicare covers, call Customer Service at the phone number on the back of your member ID card. To learn more about the services that Original Medicare doesn't cover, call EyeMed at 1-888-886-1995 (TTY 711), October 1 - March 31, 8 a.m. – 2 a.m. ET, 7 days a week; April 1 - September 30, 8 a.m. - 2 a.m. ET, Monday - Friday; 8 a.m. – 11 p.m. ET Saturday; 11 a.m. – 8 p.m. ET Sunday. For HMO plan members, routine eye exams and eyewear must be obtained from a provider in the EyeMed network. For PPO plan members, we encourage you to obtain routine eye exams and eyewear from a provider in the EyeMed network, but it's not required. Still, out-of-pocket costs may be higher for out-of-network services.
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The HealthSpring Flex card makes it easy to use allowance benefits and incentive rewards.

Each quarter, certain allowance amounts are loaded on your HealthSpring Flex card if they're part of your plan. Plus, incentive reward amounts are loaded on your card when you complete certain health activities in the HealthSpring Incentives program. You can buy eligible items online, by phone or at participating retail stores. To improve your experience, when your plan starts, you can create or access your online account at **HealthSpringFlex.com**. There you can: check your card balance, find participating retailers and eligible items or learn more. For questions and more details about incentive rewards, call Customer Service at the phone number on the back of your member ID card.



Access your account at **HealthSpringFlex.com**

Total incentive reward amounts depend on the member's plan and activities completed. Rewards cannot be used toward the purchase of tobacco, firearms, explosives or other excluded products. Recipient must be enrolled in a HealthSpring Medicare Advantage plan at the time of the activity. Reward amounts are loaded to your HealthSpring Flex card once an activity is verified by the plan (up to 90 days). Unused rewards do not carry over to the following plan year. Your rewards will expire upon disenrollment from the plan. This information is not a complete description of benefits. Contact your health plan for more information. 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. Limitations, copayments and restrictions may apply. Individuals must live in the plan service area. Benefits vary by plan. Prior authorization and/or referrals are required for certain services. HealthSpring products and services are provided exclusively by or through operating subsidiaries of Health Care Service Corporation, a Mutual Legal Reserve Company. © 2025 Health Care Service Corporation. All Rights Reserved.