October 23, 2025

Dear Patients and Providers,

Baptist Health is committed to avoiding disruption in continuity of care and access to Baptist Health and its affiliated providers. We strive to maintain in-network agreements with insurance plans through proactive, open and timely negotiations. Baptist Health is successful in renewing contracts with most plans, but not all plans are aligned with our network's requirements and commitment to patient-centered care. Medicare participants have multiple options when it comes to their health insurance. While options can be good, not all Medicare Advantage plans are contracted with Baptist Health, which could limit a patient's access to Baptist Health.

Medicare's annual open enrollment began on October 15 and ends December 7th, 2025. In an effort to keep you informed, we are providing a **list of Medicare Advantage plans** that are in network for 2026 with Baptist Health as of the date of this correspondence, along with answers to some frequently asked questions.

Patients who have Original Medicare or a Medicare Advantage plan that is already in network for 2026 can continue to access Baptist Health and affiliated health care providers. However, **patients who choose a Medicare Advantage plan that does not contract with Baptist Health could have their ability to access Baptist Health and affiliated providers disrupted starting January 1, 2026.**

To review your options and select a plan that keeps your care in-network, you can contact your agent or by calling our partnered licensed advisor, Chapter, at 855-219-2855 or visit askchapter.org/baptisthealth.

Potential network changes should not affect the ability of State retirees participating in UnitedHealthcare's Group Medicare Advantage plan to receive services at Baptist Health.

Please turn to the back of this page to review plan options to determine if an in-network plan is right for you.

If you have any questions call 1-888-BAPTIST.

Sincerely,

Baptist Health

Baptist Health – Medicare Advantage Plans for 2026

(Information current as of October 23, 2025)

- updates will be posted at https://www.baptist-health.com/

The following plans **HAVE NOT RENEWED** with Baptist Health as of the date of this letter:	
All Aetna Plans, including, but not limited to the plans below	
Aetna Medicare (PPO)	Aetna Medicare Dual (HMO D-SNP)
Aetna Medicare (HMO)	Aetna Medicare Dual (PPO D-SNP)
All UnitedHealthcare Plans, including, but not limited to the plans below	
UnitedHealthcare Medicare Advantage (Reg PPO)	AARP Medicare Advantage (HMO-POS)
UnitedHealthcare Dual (PPO D-SNP)	AARP Medicare Advantage (PPO)
UnitedHealthcare Complete Care (PPO C-SNP)	UnitedHealthcare Complete Care (Reg PPO C-SNP)
The following plans are **OUT OF NETWORK** with Baptist Health:	
HealthSpring Total Care (HMO D-SNP)	Devoted (PPO)
HealthSpring (HMO)	Devoted (PPO C-SNP)
HealthSpring (PPO)	Devoted Dual (PPO D-SNP)
Primewell Medicare Advantage	

The following plans are **IN NETWORK** for 2026:	
All Essence Plans, including, but not limited to the plans below	
Essence Advantage (HMO)	Essence Advantage Choice (PPO)
All Blue Cross Plans, including, but not limited to the plans below	
BlueMedicare (HMO)	BlueMedicare (PFFS)
All Arkansas Health & Wellness / Wellcare Plans, including, but not limited to the plans below	
Wellcare (HMO-POS)	WellCare Dual (HMO-POS D-SNP)
Wellcare (PPO)	
All Humana Plans, including, but not limited to the plans below	
Humana Gold (PFFS)	Humana USAA Honor (Regional PPO)
Humana Gold Plus (HMO)	Humana USAA Honor (PPO)
Humana Gold (HMO-POS)	HumanaChoice (Regional PPO)
Humana Gold Plus (HMO-POS D-SNP)	HumanaChoice (PPO)
Humana Dual (PPO D-SNP)	HumanaChoice (PPO D-SNP)
	HumanaChoice (PPO C-SNP)
All Tribute Plans, including, but not limited to the plans below	
Arkansas Integrated Providers Dual (HMO D-SNP)	Tribute Select (HMO-POS I-SNP)

FAQ's: Baptist Health – Medicare Advantage Plans In-Network for 2026

(Information current as of October 23, 2025)

Why is Baptist Health sending this notification?

Baptist Health is committed to helping ensure any disruption in continuity of care is limited and knows that Medicare participants have multiple options when it comes to their health insurance, but not all plans are contracted with Baptist Health. Since Medicare's Annual Open Enrollment is about to start, we are providing a list of Medicare Advantage plans that, as of the date of this notice, are already contracted with Baptist Health to be "in-network" for 2026.

How might this affect me?

If you have Original Medicare or a Medicare Advantage plan that is already in-network for 2026, then you can continue to access Baptist Health and affiliated healthcare providers. If you choose a Medicare Advantage plan that ultimately does not contract with Baptist Health, in most cases, ***starting January 1, 2026,*** Baptist Health and affiliated healthcare providers will not be able to treat you except for emergent and urgent conditions. In some cases, your Medicare Advantage plan will request your care is transferred to another facility once you are stabilized.

If I have a Medicare Advantage plan that ends up out-of-network with Baptist Health for 2026, will I still be able to see my doctor?

If your doctor is a Baptist Health or Arkansas Health Group affiliated provider, you have 3 options:

1. Choose an in-network Medicare plan during Open Enrollment (more information provided below)
2. Pay for full cost of visit (starting January 1, 2026)
3. Transition your care to a new doctor that is in-network with your Medicare Advantage plan

What plans are already contracted with Baptist Health or Arkansas Health Group to be in-network for 2026?

For 2026, Baptist Health is already contracted to be in-network with the following:

Original Medicare – (800) 663-4227
Blue Cross Blue Shield – (855) 591-9794
Wellcare – (844) 480-0680
Essence – (866) 509-5398
Humana – (888) 320-7791

What plans are in-network with Baptist Health or Arkansas Health Group for 2023, *that have not yet renewed for 2026?*

As of the date of this notice, UnitedHealthcare (which includes AARP) and Aetna, has not yet renewed with Baptist Health or Arkansas Health Group. While we are still in negotiations with both UnitedHealthcare and Aetna, it is possible they will not be in-network with Baptist Health or Arkansas Health Group for 2026. For any updates related to status from the date of receipt of these FAQ's, please see our website, which may be located at **https://www.baptist-health.com/.**

How do I switch to an in-network plan that my Doctor and Baptist participates in?
There are several ways to switch. You may switch plans online, through an agent/broker, or by phone. We suggest calling your agent to discuss the best options for your health care needs. If you do not have an agent or need additional help in selecting a plan, you may contact our partner, **Chapter**, a free and independent Medicare resource **at 815-219-2855** or visit **askchapter.org/baptisthealth**.

When is open enrollment?
The Annual Open Enrollment Period is from October 15, 2025 to December 7, 2025. After this point, the next opportunity to change is during the Medicare Advantage Open Enrollment Period which is from January 1, 2026 to March 31, 2026.

What is the difference between the Annual Open Enrollment period and the Medicare Advantage Open Enrollment period?

During the Annual Open Enrollment ***(October 15, 2025 to December 7, 2025)***, you can:

1. Switch from a Medicare Advantage Plan to Original Medicare (consider enrolling in a Medigap plan as well)
2. Switch from Original Medicare to a Medicare Advantage Plan
3. Switch from one Medicare Advantage Plan to a different Medicare Advantage Plan

During the Medicare Advantage Open Enrollment period (January 1, 2026 to March 31, 2026), you can make some changes to your plan choice, such as:

1. Switch from a Medicare Advantage Plan to Original Medicare (consider enrolling in a Medigap plan as well)
2. Switch from one Medicare Advantage Plan to a different Medicare Advantage Plan

During the Medicare Advantage Open Enrollment period (January 1, 2026 to March 31, 2026), you cannot do the following:

1. Switch from Original Medicare to a Medicare Advantage plan.
2. Join a Medicare Prescription Drug Plan if you are in Original Medicare.
3. Switch from one Medicare Prescription Drug Plan to another if you are in Original Medicare.