

The UHC MedicareMax Complete Care FL-30 (HMO C-SNP) plan, provided by UnitedHealthcare Insurance Company, is tailored for individuals diagnosed with diabetes, chronic heart failure, and cardiovascular disorders, featuring a \$0 monthly premium and a \$0 annual medical deductible, alongside an out-of-pocket maximum of \$3,400. Members benefit from a \$60 monthly credit for over-the-counter products and healthy food, as well as low-cost insulin at \$25 or less for a one-month supply. Primary care and specialist visits, including virtual consultations, require no copay, and preventive services such as annual physicals and mental health outpatient services are also covered at no cost. Prescription drug coverage includes a \$0 annual deductible, with no copay for Tier 1 and Tier 2 drugs at network pharmacies, while Tier 3 drugs and insulin also have a \$0 copay. However, Tier 4 drugs incur a \$65 copay, and Tier 5 specialty drugs cost 33% of the price. Dental benefits cover preventive and comprehensive services with no copay for routine care, while emergency care incurs a \$130 copay, and inpatient hospital stays are covered at \$0 per stay. Additional services, including outpatient hospital services, physical therapy, and lab services, generally have minimal or no copays.

The plan also offers routine eye exams and eyewear with a \$0 copay, hearing aids with varying copays, and a fitness program that includes free gym memberships. Transportation for 60 one-way trips to approved locations and meal delivery after hospital stays are provided at no cost, emphasizing comprehensive care with minimal out-of-pocket expenses for eligible members. Members can utilize various pharmacies within the network, not limited to Optum Home Delivery Pharmacy, and must approve first-time prescriptions sent directly from a doctor before filling. New prescriptions typically arrive within ten business days, while refills take about seven business days. Copays for preferred home delivery prescriptions may be \$0 during the initial coverage phase but may vary during other stages. Enrollment in the plan is contingent upon contract renewal with Medicare, and while AARP is associated with UnitedHealthcare, membership is not a prerequisite for enrollment. Members receiving Extra Help from Medicare may have reduced or no copays, with specific benefits such as a maximum copay of \$25 for covered insulin drugs for Chronic Special

Needs Plans and \$35 for other plans, with \$0 copay during the catastrophic stage. Additional benefits include healthy food and utility assistance for eligible members, fitness memberships, and routine transportation services, though limitations and exclusions may apply. Out-of-network providers are not obligated to treat members except in emergencies, and costs for out-of-network services may vary. The Medicare Prescription Payment Plan is available for members exceeding \$2,000 in covered Part D prescription drug costs annually, allowing them to spread out-of-pocket expenses over the calendar year. For those enrolled in D-SNP and C-SNP, Medicaid cost-sharing may apply, with further details available in the Summary of Benefits or Evidence of Coverage, and information is accessible in multiple languages upon request.