

The UHC Nursing Home Plan FL-F001 (PPO I-SNP) is tailored for individuals needing nursing home-level care, featuring a monthly premium of \$20.30 and an out-of-pocket maximum of \$4,000 for in-network services. The plan includes a \$0 copay for primary care visits and a \$0 annual medical deductible, while specialist visits have copays ranging from \$0 to 20% in-network, with a 30% cost for out-of-network services. Preventive services, such as routine physicals and screenings, are covered at no cost, and mental health services incur a 20% copay for therapy, with opioid treatment services provided at no cost. Prescription drug coverage entails a \$590 annual deductible and a 25% coinsurance for retail and mail-order pharmacy services, with reduced copays for those qualifying for Extra Help. Dental benefits offer a \$4,500 allowance for covered services, with \$0 copay for preventive and comprehensive services through network dentists. Additional benefits include a \$385 quarterly credit for over-the-counter products, routine eye exams at no cost, and an annual eyewear allowance of up to \$300. Emergency care has an \$85 copay, while inpatient hospital stays require a \$2,000 copay per stay, and skilled nursing facility care is covered at \$0 copay for the first 100 days. Home health care and various therapy services are also included at no cost.

The policy provides a \$200 allowance for a selection of over-the-counter and brand-name prescription hearing aids, allowing for up to two hearing aids each year, alongside the quarterly \$385 credit for OTC products. Routine transportation is covered with a \$0 copay for 36 one-way trips to approved locations, and routine foot care includes six visits per year at a \$0 copay, with a 30% cost share for combined in-network and out-of-network visits. During the Initial Coverage period, members benefit from savings after any required deductible is met, with total drug costs capped at \$5,030. Members are not required to use Optum Home Delivery Pharmacy for regular medications, although it is affiliated with UnitedHealthcare, and new prescriptions are expected within ten business days, with refills within seven business days. It is noted that \$0 copays may be limited to preferred home delivery prescriptions during the initial coverage phase and may not apply during the coverage or catastrophic stages.

Enrollment in the plans is contingent upon contract renewal with Medicare, and the plans are insured through UnitedHealthcare Insurance Company or its affiliates. Members receiving Extra Help from Medicare may have lower or no copays, and benefits, features, and devices may vary by plan and area, with limitations and exclusions applicable. For chronic special needs plans, there is a maximum copay of \$25 for each one-month supply of covered insulin drugs, while other plans have a maximum of \$35, with \$0 copay during the catastrophic stage. The policy also includes healthy food and utility benefits available only to members with Extra Help from Medicare under specific qualifying conditions. A fitness benefit includes a standard membership, and routine transportation is not intended for emergencies. 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 those spending over \$2,000 on covered Part D prescription drugs annually, allowing for the spreading of out-of-pocket costs. Lastly, the policy offers information in multiple languages and encourages members to contact customer service for further assistance.