

The UHC Nursing Home Plan EX-F006 (HMO-POS I-SNP) is tailored for individuals needing nursing home-level care, featuring a monthly premium of \$31.40 and an annual medical deductible of \$0. The plan includes an out-of-pocket maximum of \$1,500, with primary care visits having no copay, while specialist visits range from \$0 to 20% of the cost. Virtual visits are also available at no copay, and preventive services, including annual routine physicals, are covered without copay. Mental health outpatient services incur a 20% cost share, whereas opioid treatment services are provided at no copay. Prescription drug coverage entails an annual deductible of \$590, waived for those qualifying for Extra Help, with a 25% coinsurance for all covered drugs at retail and mail-order pharmacies. For those receiving Extra Help, copays for brand drugs can be up to \$12.15 and for generic drugs up to \$4.90. The plan offers a \$1,250 annual allowance for covered dental services, with \$0 copay for preventive services. Medical benefits include a \$40 copay for urgent care, \$110 for emergency care, and a \$1,500 copay per inpatient hospital stay, while skilled nursing facility care is covered at \$0 copay for the first 100 days. Additional benefits encompass routine eye exams, eyewear allowances, routine hearing exams, and a \$2,200 allowance for hearing aids. Members receive a \$75 quarterly credit for over-the-counter products and coverage for 18 one-way transportation trips to approved locations at no copay. Enrollment is contingent upon the plan's contract renewal with Medicare and is insured through UnitedHealthcare Insurance Company or its affiliates, with limitations and exclusions applicable. AARP and its affiliates do not act as insurers, and membership is not required for enrollment. UnitedHealthcare has a direct contract with Walgreens for this plan, while AARP is not involved in that agreement. If eligible for Extra Help from Medicare, copays may be reduced or eliminated. Benefits and features vary by plan and area, with potential limitations, exclusions, and network restrictions. Hearing aids are covered only if obtained from a UnitedHealthcare Hearing network provider, and 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, both with \$0 copay during the Catastrophic payment stage. Benefits for food, over-the-counter items, and utilities have expiration timeframes, and eligibility for the healthy food and utilities benefit is limited to members receiving Extra Help from Medicare. Special supplemental

benefits for healthy food are available for chronically ill enrollees with qualifying conditions, such as diabetes or heart failure, with additional conditions for D-SNP members in Tennessee. The fitness benefit includes a standard membership, and members are advised to consult their doctors before starting any exercise program. Out-of-network dental coverage may incur higher costs, and routine transportation is not for emergencies. Virtual visits may require specific devices and are not available for emergencies. \$0 copays may apply to preferred home delivery prescriptions during the initial coverage phase but may not apply during the Catastrophic stage. Starting January 1, 2025, members spending over \$2,000 on covered Part D prescription drugs may consider the Medicare Prescription Payment Plan to spread out-of-pocket costs. Out-of-network providers are not obligated to treat members except in emergencies, and members should refer to their Evidence of Coverage for cost-sharing details. For D-SNP and C-SNP, the values shown in-network depend on state Medicaid coverage, and limitations may apply. Information is available in other languages upon request.