

The AARP Medicare Advantage from UHC IL-5 (PPO) plan offers a \$0 monthly premium and a \$0 annual medical deductible, with an out-of-pocket maximum of \$6,700 for in-network services and \$10,100 for combined in and out-of-network services. The plan features a \$0 copay for primary care provider visits and preventive services, while specialist visits incur a \$45 copay in-network and \$65 out-of-network. Virtual visits are available at a \$0 copay. Mental health services have varying copays, with group sessions costing \$15 in-network and \$30 out-of-network. Prescription drug coverage includes a \$0 copay for Tier 1 drugs, with increasing copays for higher tiers, and a \$0 annual deductible for Tiers 1-2, while Tiers 3-5 have a \$495 deductible. Dental benefits provide a \$0 copay for preventive services, with optional riders for additional coverage at an extra monthly cost. Urgent care visits have a \$55 copay, and emergency care costs \$125. Inpatient hospital care has a \$395 copay for the first five days, with no copay thereafter. Other services, such as outpatient hospital services and therapy, have specific copays or cost-sharing percentages. The plan allows access to a national network of providers, ensuring coverage across the country.

The policy includes comprehensive coverage for diabetes monitoring supplies with a \$0 copay for covered brands, while other brands incur a 50% cost. Additional benefits feature a \$0 copay for routine eye exams (one per year) and a \$65 copay for combined in-network and out-of-network visits, along with coverage of up to \$300 every two years for routine eyewear, including full coverage for standard lenses. Routine hearing exams also have a \$0 copay (one per year), with hearing aids available at copays ranging from \$99 to \$1,249, allowing for up to two hearing aids annually. Members receive a \$40 quarterly credit for over-the-counter (OTC) products and can earn up to \$155 in rewards for wellness activities. The fitness program offers a \$0 copay for Renew Active®, which includes gym memberships and online classes. Routine foot care is covered with a \$45 copay for up to six visits per year, and there is a meal benefit providing 28 home-delivered meals at no cost following hospitalization or skilled nursing facility stays.

The policy outlines that savings apply during the Initial Coverage period, which begins after any

required deductible and ends when total drug costs reach \$5,030. Members are not required to use Optum Home Delivery Pharmacy for regular medications but must approve the first prescription order from their doctor. New prescriptions typically arrive within ten business days, while refills take about seven days. It is noted that \$0 copays may be limited to preferred home delivery prescriptions during the initial coverage phase.

Enrollment in the plan is contingent upon the contract renewal with Medicare, and while AARP is associated with the plan, membership is not required for enrollment. The policy also mentions that if members receive Extra Help from Medicare, their copays may be reduced or eliminated. Various benefits, including those for chronic conditions, may have specific eligibility criteria and limitations. Out-of-network providers are not obligated to treat members except in emergencies, and costs for out-of-network services may vary. The policy includes disclaimers regarding Medicaid and D-SNP, indicating that costs may differ based on Medicaid eligibility. Lastly, the information is available in multiple languages upon request.