

The UHC Preferred Complete Care FL-0003 (HMO C-SNP) plan is tailored for individuals with diabetes, chronic heart failure, and cardiovascular disorders, offering a \$0 monthly premium and a \$0 annual medical deductible, alongside an out-of-pocket maximum of \$2,900. Members benefit from a \$51 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 provider visits, specialist consultations, virtual visits, and preventive services, including annual routine physicals and mental health outpatient services, all incur a \$0 copay. Prescription drug coverage includes a \$0 annual deductible, with no copay for Tier 1 and Tier 2 drugs at network pharmacies; Tier 3 drugs have a \$3 copay, Tier 4 drugs a \$45 copay, and specialty drugs are charged at 33% of the cost. Dental benefits cover preventive services and comprehensive care at a \$0 copay, while emergency care has an \$80 copay, and urgent care visits are free. Inpatient hospital stays are covered at \$0 per stay, with outpatient services having varying copays, such as \$75 for outpatient hospital services and \$25 for ambulatory surgical centers. Additional benefits include \$0 copay for routine eye exams and eyewear, hearing exams, a fitness program with free gym memberships, and routine transportation with \$0 copay for 60 one-way trips to approved locations. The plan also provides 28 home-delivered meals post-hospitalization at no cost, emphasizing comprehensive care with minimal out-of-pocket expenses for eligible members.

The policy outlines a total cost cap of \$5,030 for prescription drugs in 2024, encompassing payments from UnitedHealthcare, the insured, and others. While members are not required to use Optum Home Delivery Pharmacy for regular medications, initial prescriptions must be approved by the member before being filled, with new prescriptions typically arriving within ten business days and refills within seven days. Copays may be \$0 for preferred home delivery prescriptions during the initial coverage phase, but this may not apply during the coverage or catastrophic stages, with benefits varying by plan and area. Enrollment is contingent upon contract renewal with Medicare, and it is noted that AARP is not an insurer and membership is not required for enrollment. Members receiving Extra Help from Medicare may have reduced or no copays. The policy specifies a

maximum copay of \$25 for a one-month supply of 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, subject to limitations and exclusions. Out-of-network providers are not obligated to treat members except in emergencies, and costs for out-of-network services may vary. The document also mentions the Medicare Prescription Payment Plan, allowing members to spread out-of-pocket prescription drug costs exceeding \$2,000 annually, and emphasizes that information is available in multiple languages, providing customer service contact details for further assistance.