



# 2026 Plan Highlights

**UHC Preferred Dual Complete FL-V2 (HMO D-SNP)**

H1045-064-000

**Service area:** Florida - Palm Beach county



# Whatever comes next, UnitedHealthcare provides Medicare coverage you can count on for your whole life ahead

You've got plans. So do we. Medicare plans from UnitedHealthcare offer reliable coverage designed to support your health wherever life takes you. Our large national provider network includes doctors and specialists across the country, and 9 out of 10 Medicare members are able to keep seeing the doctors they know and trust. It's one more way we're here to support your health — every step of the way.

After all, you may not always know what's next, but you can count on UnitedHealthcare to be there from the moment you choose your plan to the moments that matter most.

## See why 4 out of 5 members would choose UnitedHealthcare again for their Medicare coverage

“I really appreciated all of the help that I got from UnitedHealthcare. UnitedHealthcare is the company that is best suited to my needs.”

— **Karen K, UnitedHealthcare Medicare Advantage Member**

“You need a strong insurance company behind you to back you up and cover the things that need to be covered and UnitedHealthcare does that.”

— **Mary M, UnitedHealthcare Complete Care Member**

Medicare member responses based on Human8 survey, May 2025.

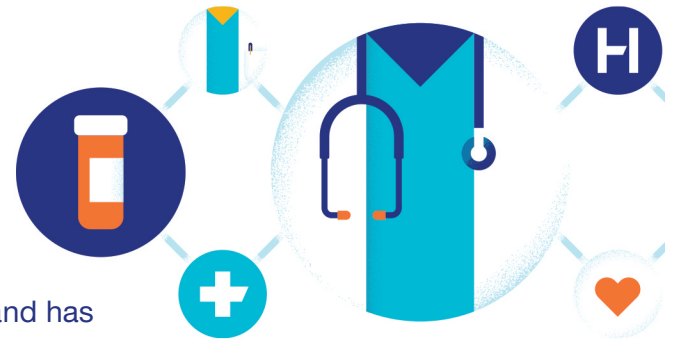
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# Take advantage of a specially designed plan

This plan is for people with Medicare and Medicaid coverage and has many extra benefits that can help you live a healthier life. It has a network of quality doctors, hospitals, pharmacies and other providers, designed to help you get the care you need.



## Here's how this HMO D-SNP plan works



**Always use network providers.** The plan does not cover medical care received from providers outside the network. (Except for emergency care, urgent care and renal dialysis services.)



**Select a primary care provider to oversee and help manage your care.** It's required by the plan, but it's also very beneficial for your long term health and well-being.



**\$0 copays for preventive services.**



**Some services require a referral from your doctor.** Check your Summary of Benefits for details.



**This plan has a maximum annual out-of-pocket amount.**



**Emergency and urgently needed services are covered anywhere in the world.**



**This plan includes prescription drug coverage.** Always use network pharmacies. You may pay more or the full cost for drugs received from pharmacies not in the network.



**This plan includes Special Supplemental Benefits for the Chronically Ill (SSBCI),** allowing eligible members—whose condition is verified by their provider—to use plan credits for healthy food and utilities, along with OTC and other wellness support products.

Go to [myPreferredCare.com](https://myPreferredCare.com) to search for a network provider or pharmacy using the online directories. You can also view the plan Drug List (Formulary) to see what drugs are covered and if there are any restrictions. See your Evidence of Coverage for a list of all covered services.

Scan this code to view the drug list



# Benefit Highlights

## UHC Preferred Dual Complete FL-V2 (HMO D-SNP)

This is a short description of your 2026 plan benefits. For complete information, please refer to your Summary of Benefits or Evidence of Coverage. Limitations, exclusions, and restrictions may apply.

Plan costs	
<b>Monthly plan premium</b>	\$0 with “Extra Help” <span style="float: right;">\$4.80 without “Extra Help”</span>
Annual Medical Deductible	\$0
<b>Annual out-of-pocket maximum</b> (the most you may pay in a year for covered medical care)	\$3,400
Plan benefits	
<b>Doctor’s office visit</b>	
Primary care provider (PCP)	\$0 copay
Specialist	\$15 copay (referral needed)
Virtual visits	\$0 copay to talk with a network telehealth provider online through live audio and video
<b>Preventive services</b>	\$0 copay
<b>Inpatient hospital care</b>	\$195 copay per day: days 1-5 \$0 copay per day: days 6 and beyond
<b>Skilled nursing facility (SNF)</b>	\$0 copay per day: days 1-100
<b>Outpatient hospital, including surgery</b> (cost sharing for additional plan services will apply)	\$195 copay

## Plan benefits

### Outpatient mental health

Group therapy	\$15 copay
Individual therapy	\$25 copay
Virtual visits	\$0 copay to talk with a network telehealth provider online through live audio and video

### Durable medical equipment (DME) and related supplies

DME (e.g., wheelchairs, oxygen)	20% coinsurance
Prosthetics (e.g., braces, artificial limbs)	\$0 copay - 20% coinsurance

**Diabetes monitoring supplies** \$0 copay for covered brands

**Diagnostic radiology services** (such as MRIs, CT scans) \$230 copay

**Diagnostic tests and procedures** (non-radiological) \$50 copay

**Lab services** \$0 copay

**Outpatient x-rays** \$25 copay

**Ambulance** \$275 copay for ground or air





**Emergency care** \$150 copay (\$0 copay for emergency care outside the United States) per visit

**Urgently needed services** \$0 copay (worldwide)

## Additional plan benefits

**Routine physical** \$0 copay, 1 per year

## Additional plan benefits

 <b>Hearing services</b>	Routine hearing exam	\$0 copay for a routine hearing exam to help support hearing health
	Hearing aids	<p>\$199 - \$829 copay for each OTC hearing aid. \$199 - \$1,249 copay for each prescription hearing aid. You can purchase up to 2 hearing aids every year.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> A broad selection of over-the-counter (OTC), high-value and brand-name prescription hearing aids</li> <li><input type="checkbox"/> Access to one of the largest national networks of hearing professionals with more than 6,500 locations</li> <li><input type="checkbox"/> 3-year manufacturer warranty on all prescription hearing aids covers a trial period and damage or repair during warranty period</li> <li><input type="checkbox"/> Hearing aids purchased outside of UnitedHealthcare Hearing are not covered</li> </ul>
 <b>Routine dental benefits</b>	Preventive and comprehensive services	\$0 copay for exams, cleanings, X-rays, and fluoride Comprehensive dental is covered; for a complete list of services and copays, please contact the plan \$0 copay for comprehensive dental services
 <b>Vision services</b>	Routine eye exam	\$0 copay, 1 per year
	Routine eyewear	<p>\$0 copay Plan pays up to \$200 every year for lenses/frames and contacts. Home delivered eyewear available through select network providers (select products only).</p>
 <b>Fitness program</b>		<p>\$0 copay Your fitness program helps you stay active and connected at the gym, from home or in your community. It's available to you at no cost and includes:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Free gym membership at core and premium locations</li> <li><input type="checkbox"/> Access to a large national network of gyms and fitness locations</li> <li><input type="checkbox"/> On-demand workout videos and live streaming fitness classes</li> <li><input type="checkbox"/> Online memory fitness activities</li> </ul>

## Additional plan benefits

**Routine transportation** \$0 copay for 60 one-way trips to or from approved medically related appointments and pharmacies

**Foot care - routine** \$15 copay, 6 visits per year



### OTC, healthy food, utilities + wellness support

\$53 credit every month for over-the-counter (OTC) products and wellness support, plus healthy food and utilities for qualifying members

- Choose from thousands of OTC products, like first aid supplies, pain relievers and more
- Buy healthy foods like fruits, vegetables, meat, seafood, dairy products and water
- Shop at thousands of participating stores, including Walmart, Walgreens and Dollar General, or at neighborhood stores near you
- Pay home utilities like electricity, heat, water and internet
- Get wellness support including in-home services, weight management coaching, respite care, select fitness items and more

**Meal benefit** \$0 copay for 28 home-delivered meals immediately after an inpatient hospitalization or skilled nursing facility (SNF) stay

## Prescription drugs

If you don't qualify for Low-Income Subsidy (LIS), you pay the Medicare Part D cost share outlined in the Evidence of Coverage. If you do qualify for Low-Income Subsidy (LIS) you pay:

**Deductible** Your deductible amount is \$0

**Initial Coverage** In this stage, you'll pay your plan copays or coinsurance. The plan pays the rest. Once you, and others on your behalf, have paid a combined total of \$2,100 you move to the Catastrophic Coverage stage.

**Drug coverage** **30-day or 100-day supply from retail network pharmacy**

**Generic (including brand drugs treated as generic)** \$0, \$1.60, or \$5.10 copay  
Drugs that are in Tier 1 are always \$0 copay.  
(Some covered drugs are limited to a 30-day supply)

## Prescription drugs

### All other drugs<sup>1</sup>

\$0, \$4.90, or \$12.65 copay  
Drugs that are in Tier 1 are always \$0 copay.  
(Some covered drugs are limited to a 30-day supply)

### Catastrophic Coverage

Once you're in this stage, you won't pay anything for your Medicare-covered Part D drugs for the rest of the plan year.

<sup>1</sup> You pay no more than 25% of the total drug cost or a \$35 copay, whichever is lower, for each 1-month supply of Part D covered insulin drugs, even if you haven't paid your deductible, until you reach the Catastrophic Coverage stage where you pay \$0.

**Scan this code to view  
your Summary of  
Benefits**



**Preferred  
Care Partners**

A UnitedHealthcare Company

The healthy food and utilities benefit is a special supplemental benefit only available to chronically ill enrollees with a qualifying condition, such as diabetes, cardiovascular disorders, chronic heart failure, chronic high blood pressure and/or chronic high cholesterol, and who also meet all applicable plan coverage criteria. There may be other qualified chronic conditions not listed.

Premiums, copays, coinsurance, and deductibles may vary based on the level of Extra Help you receive. Please contact the plan for further details. This information is not a complete description of benefits. Contact the plan for more information.

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# What to expect after you enroll

Once you're a member, you can rely on UnitedHealthcare to support you every step of the way. You can easily manage and find answers about your plan on the UnitedHealthcare app or your member site. And our UnitedHealthcare UCard® makes it easier than ever to open doors to all your Medicare Advantage plan has to offer.



**You are here**  
Enrollment  
submitted



Download the app  
or create your  
account online



UCard arrives in  
the mail – be sure  
to activate it



Coverage begins!  
Start using  
your plan

## Manage your plan online

If you haven't done so already, use your Medicare ID or member ID number and email address to create an account on the app or at [myPreferredCare.com](https://myPreferredCare.com). Online you can:

- Check the status of your enrollment
- Find network providers and pharmacies and view plan documents, like your Drug List (Formulary) and Evidence of Coverage
- Complete your health assessment

## Reach for your UCard when

- Visiting a provider or filling a prescription
- Paying for OTC products and more – including healthy food and utilities if you qualify. (We'll verify your qualifying condition with your doctor and send you a letter with next steps)
- Checking in at the gym

## Once your coverage begins

- Schedule your annual physical and wellness visit
- Review UCard balances

## Thank you for choosing us

If you have questions, call the number on your UCard.

## Required Information

UHC Preferred Dual Complete FL-V2 (HMO D-SNP) is insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a contract with the State Medicaid Program. Enrollment in the plan depends on the plan's contract renewal with Medicare.

Plans may offer supplemental benefits in addition to Part C benefits and Part D benefits.

If you want to know more about the coverage and costs of Original Medicare, look in your current "Medicare & You" handbook. View it online at [medicare.gov](http://medicare.gov) or get a copy by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

UnitedHealthcare does not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.

UnitedHealthcare provides free services to help you communicate with us such as documents in other languages, Braille, large print, audio, or you can ask for an interpreter. Please contact our Customer Service number at 1-855-245-5196 for additional information (TTY users should call 711). Hours are 8 a.m.-8 p.m.: 7 Days Oct-Mar; M-F Apr-Sept.

UnitedHealthcare ofrece servicios gratuitos para ayudarle a que se comunique con nosotros. Por ejemplo, documentos en otros idiomas, braille, letra grande, audio o bien, usted puede pedir un intérprete. Comuníquese con nuestro número de Servicio al Cliente al 1-855-245-5196, para obtener información adicional (los usuarios de TTY deben comunicarse al 711). Los horarios de atención son de 8 a.m. a 8 p.m.: los 7 días de la semana, de octubre a marzo; de lunes a viernes, de abril a septiembre.

Benefits, features, and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply.

### Hearing aids

Other hearing exam providers are available in the UnitedHealthcare network. The plan only covers hearing aids from a UnitedHealthcare Hearing network provider. Provider network size may vary by local market. OTC hearing aid warranties, if available, will vary by device and are handled through the manufacturer. One-time professional fee may apply for prescription hearing aids.

### Fitness program

The fitness benefit and gym network varies by plan/area and participating locations may change. The fitness benefit includes a standard fitness membership at participating locations. Not all plans offer access to premium locations. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine.

### OTC, healthy food, utilities + wellness support

OTC, food and utility benefits have expiration timeframes. Review your Evidence of Coverage (EOC) for more information. The healthy food and utilities benefit is a special supplemental benefit only available to chronically ill enrollees with a qualifying condition, such as diabetes, cardiovascular disorders, chronic heart failure, chronic high blood pressure and/or chronic high cholesterol, and who also meet all applicable plan coverage criteria. There may be other qualified conditions not listed. Certain wellness support services are provided by third parties not affiliated with UnitedHealthcare and participation may be subject to your acceptance of the third parties' respective terms and policies. UnitedHealthcare is not responsible for the services provided by third parties.

The Formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

Additional authorizations may be required to access discount programs. The discounts described are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the UnitedHealthcare grievance process. Discount offerings may vary by plan and are not

available on all plans. The discount offers are made available to members through a third party. Participation in these third-party services are subject to your acceptance of their respective terms and policies. UnitedHealthcare and its respective subsidiaries are not responsible for the services or information provided by third parties.















# Ready to use your extra benefits?

## UHC Preferred Dual Complete FL-V2 (HMO D-SNP)

Take advantage of your additional plan benefits by using the providers below.



### Hearing aids

UnitedHealthcare Hearing  
1-855-523-9355  
UHChearing.com/Medicare



### Routine vision services

iCare  
1-855-373-7627  
myicarehealth.com



### Routine dental benefits

Solstice Dental  
1-855-351-8163  
solsticebenefits.com



### Prescription drug home delivery

Optum® Home Delivery Pharmacy  
1-877-889-6358  
myPreferredCare.com



### Routine transportation

SafeRide  
1-888-462-6043  
myPreferredCare.com



### OTC, healthy food, utilities + wellness support

Solutran  
1-833-845-8798  
myPreferredCare.com



### Fitness program

Renew Active®  
1-866-231-7201  
UHCRenewActive.com



UnitedHealthcare has more than 45 years of experience serving members. You can count on UnitedHealthcare to be there for you every step of the way.

## Click. Call. Connect.



Download the UnitedHealthcare app



[myPreferredCare.com](https://myPreferredCare.com)



Call toll-free **1-855-874-6282**, TTY **711**  
8 a.m.-8 p.m. local time, 7 days a week

Important plan information

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Scan this code  
to download the  
UnitedHealthcare  
app



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