



# 2026 Plan Highlights

**UHC Complete Care CA-20P (HMO-POS C-SNP)**

H0543-219-000

**Service area:** California - Riverside, San Bernardino counties

United  
Healthcare®

# 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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# Enjoy access to a focused network of quality providers

This plan includes a focused network of quality doctors, hospitals and other care providers, designed to help you get the care you need. And you have access to a large dental provider network. You can also get care from out-of-network dental providers but your costs may be higher, even for services with a \$0 copay.



## Here's how this HMO-POS C-SNP plan works



**Get care from providers in the network** or visit out-of-network providers for covered dental 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 when received in-network.**



**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.

Go to [UHC.com/Medicare](https://www.uhc.com/Medicare) 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 Complete Care CA-20P (HMO-POS C-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
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<b>Annual medical deductible</b> (applies to certain medical benefits)	\$0
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<b>Annual out-of-pocket maximum</b> (the most you may pay in a year for covered medical care)	\$800
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### Plan benefits

#### Doctor's office visit

Primary care provider (PCP)	\$0 copay
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Specialist	\$0 copay (referral needed)
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Virtual visits	\$0 copay to talk with a network telehealth provider online through live audio and video
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<b>Preventive services</b>	\$0 copay
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<b>Inpatient hospital care</b>	\$0 copay per stay for unlimited days
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<b>Skilled nursing facility (SNF)</b>	\$0 copay per day: days 1-20 \$100 copay per day: days 21-100
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<b>Outpatient hospital, including surgery</b> (cost sharing for additional plan services will apply)	\$0 copay
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#### Outpatient mental health

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

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

DME (e.g., wheelchairs, oxygen)	\$0 copay
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Prosthetics (e.g., braces, artificial limbs)	\$0 copay
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<b>Diabetes monitoring supplies</b>	\$0 copay
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<b>Diagnostic radiology services</b> (such as MRIs, CT scans)	\$0 copay
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<b>Diagnostic tests and procedures</b> (non-radiological)	\$0 copay
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<b>Lab services</b>	\$0 copay
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<b>Outpatient x-rays</b>	\$0 copay
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<b>Ambulance</b>	\$200 copay for ground or air
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<b>Emergency care</b>	\$150 copay (\$0 copay for emergency care outside the United States) per visit
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<b>Urgently needed services</b>	\$20 copay (\$0 copay for urgently needed services outside the United States) per visit
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## Additional plan benefits



<b>Routine physical</b>	\$0 copay, 1 per year
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## 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	\$2,000 allowance for all covered dental services*
		<p>\$0 copay for covered preventive services like oral exams, X-rays, routine cleanings and fluoride</p> <p>50% coinsurance for covered comprehensive services like fillings, crowns, bridges and dentures</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> No annual deductible</li> <li><input type="checkbox"/> Access to one of the largest national dental networks</li> <li><input type="checkbox"/> Freedom to see any dentist</li> </ul>
 <b>Vision services</b>	Routine eye exam	\$0 copay for a routine eye exam each year to help protect your eyesight and health
	Routine eyewear	<p>\$200 allowance every 2 years for 1 pair of frames or contacts</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Free standard prescription lenses including single vision, bifocals, trifocals and Tier I (standard) progressives</li> <li><input type="checkbox"/> Other covered lenses available with copays from \$40 - \$153</li> <li><input type="checkbox"/> Access to one of Medicare Advantage's largest national networks of vision providers and retail providers</li> <li><input type="checkbox"/> Eyewear available from many online providers, including Warby Parker and GlassesUSA</li> </ul>

Covered in and out-of-network.

## Additional plan benefits

	<ul style="list-style-type: none"> <li><input type="checkbox"/> You are responsible for all eyewear costs from providers outside of the UnitedHealthcare Vision network</li> </ul>
 <b>Fitness program</b>	<p>\$0 copay</p> <p>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 additional 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>
<b>Routine transportation</b>	\$0 copay for 48 one-way trips to or from approved medically related appointments and pharmacies
<b>Foot care - routine</b>	\$0 copay, 2 visits per year
<b>Routine chiropractic services</b>	\$0 copay, 20 visits per year
<b>Routine acupuncture services</b>	\$0 copay, 20 visits per year
 <b>OTC and food credit</b>	<p>\$39 credit every month for over-the-counter (OTC) products, plus healthy food for qualifying members</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Choose from thousands of OTC products, like first aid supplies, pain relievers and more</li> <li><input type="checkbox"/> Buy healthy foods like fruits, vegetables, meat, seafood, dairy products and water</li> <li><input type="checkbox"/> Shop at thousands of participating stores, including Walmart, Walgreens and Dollar General, or at neighborhood stores near you</li> </ul>
<b>Rewards</b>	Earn up to \$165 in rewards when you get started in January <sup>Q</sup>

\*Benefits are combined in and out-of-network

## What is coinsurance?

Coinsurance is a portion or part of the total cost, typically as a percentage. With this plan, you pay part of the cost of Tier 3, Tier 4 and Tier 5 drugs. For example, if your coinsurance is 25% and the total cost of your prescription is \$100, you would pay \$25. The plan pays the rest. You pay the full cost of your drugs until you meet the deductible, then you'll start paying the coinsurance amount.

Prescription drug payment stages		
<b>Deductible</b>	\$0 for Tier 1 and 2 Part D prescription drugs \$355 for Tier 3, 4 and 5 drugs	
<b>Initial Coverage</b>	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.	
<b>Tier drug coverage</b>	<b>Standard Retail (30-day supply)</b>	<b>Mail Order (100-day supply)</b>
<b>Tier 1: Preferred Generic</b>	\$0 copay	\$0 copay
<b>Tier 2: Generic<sup>1</sup></b>	\$0 copay	\$0 copay
<b>Tier 3: Preferred Brand Covered Insulin<sup>2</sup></b>	22% coinsurance \$0 copay	22% coinsurance \$0 copay
<b>Tier 4: Non-Preferred Drug<sup>3</sup></b>	45% coinsurance	N/A
<b>Tier 5: Specialty Tier<sup>3</sup></b>	29% coinsurance	N/A
<b>Catastrophic Coverage</b>	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> Tier includes enhanced drug coverage

<sup>2</sup> You pay a maximum of \$0 for each 1-month supply of Part D covered insulin drugs, even if you haven't paid your deductible.

<sup>3</sup> Limited to a 30-day supply

Scan this code to view  
your Summary of  
Benefits





The healthy food benefit is a special supplemental benefit only available to chronically ill enrollees with a qualifying condition, such as diabetes, chronic heart failure and/or cardiovascular disorders, and who also meet all applicable plan coverage criteria.

<sup>Q</sup>Medicare Advantage reward offerings may vary by plan and are not available in all plans. By participating in the program or accessing rewards funds, you agree to the Rewards Program Terms of Service located on the right side of the page at [myuhcmedicare.com/rewards](https://myuhcmedicare.com/rewards). Members must participate January through December to earn all available rewards. Rewards must be earned and reported within time frames specified by the plan. Time frames are available at [myuhcmedicare.com/rewards](https://myuhcmedicare.com/rewards). Rewards can only be used by members of UnitedHealthcare Medicare Advantage plans for eligible items at participating merchants and in accordance with applicable Medicare laws. Rewards funds are not redeemable for cash except as required by law. No ATM access. Rewards cannot be used to purchase Medicare-covered items or services, including medical or prescription drug out-of-pocket costs, or alcohol, tobacco or firearms. Rewards expire 1 month after Medicare Advantage plan terminates. This doesn't impact you while you're enrolled in your current plan or if you switch to another UnitedHealthcare Medicare Advantage plan.

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

## You're enrolled in a Chronic Special Needs Plan (C-SNP)

This plan has benefits designed to help manage diabetes, cardiovascular disease, and/or chronic heart failure.

To stay enrolled in this plan, Medicare requires that we verify your chronic condition within 60 days after your coverage starts. We'll contact your provider to verify your chronic condition. You don't need to do anything for now. If we're not able to verify your chronic condition within 30 days, we'll send you a letter with next steps.

## 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 [myUHCmedicare.com](https://myUHCmedicare.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
  - Buying OTC products and healthy food
    - Use the credit loaded on your UCard as payment in-store or online. Covered food items include generic and name-brand fresh, canned and frozen food, including:
      - Fruits
      - Dairy products
      - Breads, cereals, pasta, etc.
      - Vegetables
      - Meat and seafood
      - Nutritional shakes and bars
      - Frozen meals
      - Beans and legumes
      - Water and vitamin enhanced water
      - Fresh salad kits
      - Flour, sugar, spices, etc.
      - Soups
  - OTC products include pain relievers, cold remedies, vitamins and more
- Spending your earned rewards
- Checking in at the gym

## Once your coverage begins

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

## Thank you for choosing UnitedHealthcare

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

## Required Information

UHC Complete Care CA-20P (HMO-POS C-SNP) is insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. 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](https://www.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 1-844-808-4553 for additional information (TTY users should call 711). Hours are 7 a.m.-10 p.m. CT: 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 1-844-808-4553, para obtener información adicional (los usuarios de TTY deben comunicarse al 711). Los horarios de atención son de 7 a.m. a 10 p.m. hora del Centro: 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.

### Routine dental benefits

If your plan offers out-of-network dental coverage and you see an out-of-network dentist, you might be billed more. Provider network may vary in local market. Dental network size based on Zelis Network360, May 2023.

### Routine eyewear

Additional charges may apply for out-of-network items and services. Provider and retail network may vary in local market. Vision network size based on Zelis Network360, March 2023. Annual routine eye exam and \$100-450 allowance for contacts or designer frames, with standard (single, bi-focal, tri-focal or standard progressive) lenses covered in full either annually or every two years. Savings based on comparison to retail. Other vision providers are available in our network.

### 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 and food credit

OTC and food benefits have expiration timeframes. Review your Evidence of Coverage (EOC) for more information. The healthy food benefit is a special supplemental benefit only available to chronically ill enrollees with a qualifying condition, such as diabetes, chronic heart failure and/or cardiovascular disorders, and who also meet all applicable plan coverage criteria.

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.

**Rewards Program**

Reward offerings may vary by plan and are not available in all plans. Reward program terms of service apply.







## Notes and doodles

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# Ready to use your extra benefits?

## UHC Complete Care CA-20P (HMO-POS C-SNP)

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



Call **1-844-808-4553**, TTY **711**, 7 a.m.-10 p.m. CT: 7 Days Oct-Mar; M-F Apr-Sept or visit **myUHCMedicare.com** for:

- Fitness program: Renew Active®



### Hearing aids

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



### Routine vision services

Plan network providers in your service area

1-844-808-4553

MyUHCMedicare.com

If you belong to a medical group or IPA, refer to the Provider Directory.

### Routine acupuncture and chiropractic services

ACN Group of California, Inc. dba  
OptumHealth Physical Health of  
California (Optum)

1-866-785-1654

MyUHCMedicare.com



### Routine dental benefits

UnitedHealthcare Dental  
1-844-808-4553  
MyUHCMedicare.com



### Prescription drug home delivery

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



### Routine transportation

SafeRide

1-866-244-3123

myUHCMedicare.com



### OTC and food credit

Solutran

1-833-845-8798

MyUHCMedicare.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.



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**UHC.com/Medicare**



Call toll-free **1-866-367-7527**, TTY **711**  
8 a.m.-8 p.m. local time, 7 days a week

Important plan information

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app



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