



Selected Year: 2025

Selected LIS Level: None

|                                  |                                                                                                                                                                                                                                               |
|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Plan Name</b>                 | <b>AARP Medicare Advantage Essentials from UHC KC-4 (PPO)</b>                                                                                                                                                                                 |
| <b>Plan ID</b>                   | <b>H8768-023-000</b>                                                                                                                                                                                                                          |
| <b>Plan Highlights</b>           | When you want reliable, low-cost medical coverage, this plan has the essentials, including affordable doctor visits and prescription drug coverage. Earn up to \$155* in healthy rewards. (Formerly AARP Medicare Advantage from UHC KC-0004) |
| <b>Premium</b>                   | \$0                                                                                                                                                                                                                                           |
| <b>Medical Deductible</b>        | \$0 combined INN and OON                                                                                                                                                                                                                      |
| <b>Maximum Out-of-Pocket</b>     | \$3,700                                                                                                                                                                                                                                       |
| <b>Provider Network</b>          | Includes Medicare National Network for network care away from home                                                                                                                                                                            |
| <b>PCP / Specialist</b>          | \$0 / Coming Soon                                                                                                                                                                                                                             |
| <b>Inpatient Hospital</b>        | Coming Soon                                                                                                                                                                                                                                   |
| <b>ASC / Outpatient Hospital</b> | Coming Soon                                                                                                                                                                                                                                   |
| <b>Skilled Nursing Facility</b>  | \$0 Days 1-20; \$203 Days 21-100                                                                                                                                                                                                              |
| <b>Telehealth</b>                | \$0 Virtual Medical & Mental Health visits from Network Providers                                                                                                                                                                             |
| <b>Lab Services</b>              | \$0                                                                                                                                                                                                                                           |
| <b>Rx Deductible</b>             | • \$0 Tiers 1 & 2 • \$340 Tiers 3-5                                                                                                                                                                                                           |
| <b>Rx Retail (30-day)</b>        | • \$0/\$8/\$47/\$100/29% • Insulin: \$35                                                                                                                                                                                                      |
| <b>Rx Mail Order (100-day)</b>   | • \$0/\$0/\$131 • Insulin: \$95                                                                                                                                                                                                               |
| <b>Dental</b>                    | Covered                                                                                                                                                                                                                                       |
| <b>Eyewear</b>                   | Covered every 2 years                                                                                                                                                                                                                         |
| <b>Hearing Aids</b>              | Covered                                                                                                                                                                                                                                       |
| <b>Fitness</b>                   | Covered                                                                                                                                                                                                                                       |
| <b>OTC</b>                       | Covered - OTC                                                                                                                                                                                                                                 |

\*Members must participate Jan. - Dec. to earn all rewards. Reward offerings may vary by plan and are not available in all plans. Reward program Terms of Service apply. Some rewards purchase restrictions apply.

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|                |                                 |
|----------------|---------------------------------|
| Other Benefits | • Post-Discharge Meals: Covered |
|----------------|---------------------------------|

|                                 |                            |
|---------------------------------|----------------------------|
| Key Metrics <sup>1</sup>        |                            |
| Current Plan Enrollment: 49,383 | Current Eligibles: 666,792 |
| YOY Eligible Growth: 2.1%       |                            |

1. Jun 2024 CMS.gov MA Ind State/County Enrollment Within UHC 2024 MA Ind Footprint

Service Area

**Kansas**  
Allen, Anderson, Atchison, Bourbon, Brown, Chautauqua, Cherokee, Clay, Cloud, Crawford, Dickinson, Doniphan, Douglas, Franklin, Geary, Jackson, Jefferson, Johnson, Labette, Leavenworth, Linn, Marshall, Miami, Montgomery, Morris, Nemaha, Neosho, Osage, Ottawa, Republic, Saline, Shawnee, Wabaunsee, Washington, Wilson, Woodson, Wyandotte

**Missouri**  
Andrew, Atchison, Bates, Benton, Buchanan, Caldwell, Carroll, Cass, Chariton, Clay, Clinton, Daviess, DeKalb, Gentry, Grundy, Harrison, Henry, Holt, Jackson, Johnson, Lafayette, Linn, Livingston, Mercer, Nodaway, Pettis, Platte, Putnam, Ray, Saline, Sullivan, Worth

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