



Selected Year: 2025

Selected LIS Level: None

<b>Plan Name</b>	<b>UHC Complete Care Support OR-1A (PPO C-SNP)</b>
<b>Plan ID</b>	<b>H2001-045-000</b>
<b>Plan Highlights</b>	If you're living with diabetes, chronic heart failure, and/or cardiovascular disorders, this plan includes rides to the doctor or pharmacy, a monthly credit for OTC products – and healthy food for qualifying members. With full Medicaid benefits, most of your out-of-pocket medical costs are \$0. You will pay out of pocket costs for medical services and plan premiums if you don't have full Medicaid. Earn up to \$165* in healthy rewards. (2024 Plan ID: H0271-036-000)
<b>Premium</b>	\$0 - \$41.70
<b>Medical Deductible</b>	FFS: \$257 combined INN and OON
<b>Maximum Out-of-Pocket</b>	\$0 - \$9,350
<b>Provider Network</b>	Access to a local network of providers
<b>PCP / Specialist</b>	0% - 20% / Coming Soon
<b>Inpatient Hospital</b>	Coming Soon
<b>ASC / Outpatient Hospital</b>	Coming Soon
<b>Skilled Nursing Facility</b>	Coming Soon
<b>Telehealth</b>	\$0 Virtual Medical & Mental Health visits from Network Providers
<b>Lab Services</b>	\$0
<b>Rx Deductible</b>	• \$590 All Tiers
<b>Rx Retail (30-day)</b>	• 25% All Tiers • Insulin: \$35
<b>Rx Mail Order (100-day)</b>	• 25% All Tiers • Insulin: \$105
<b>Dental</b>	Covered
<b>Eyewear</b>	Covered
<b>Hearing Aids</b>	Covered
<b>Fitness</b>	Covered
<b>OTC</b>	Covered - OTC/Food

\*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**

• Transportation: Covered • Chiropractic: Covered

**Key Metrics <sup>1</sup>**

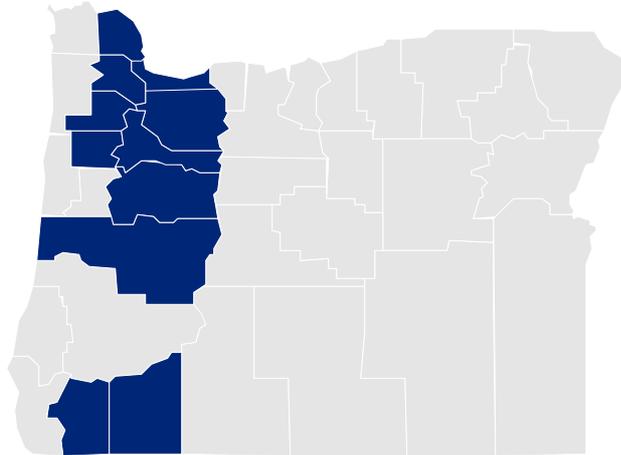
**Current Plan Enrollment:** 8,060

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

**Service Area**

**Oregon**

Clackamas, Columbia, Jackson, Josephine, Lane, Linn, Marion, Multnomah, Polk, Washington, Yamhill



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