



Selected Year: 2025

Selected LIS Level: None

<b>Plan Name</b>	<b>UHC Dual Complete TX-S001 (Regional PPO D-SNP)</b>
<b>Plan ID</b>	<b>R6801-011-000</b>
<b>Plan Highlights</b>	If you have full Medicaid benefits or are a Qualified Medicare Beneficiary, this plan includes a monthly credit for OTC, healthy food, and utilities, \$0 prescription drugs and other valued extras. Earn up to \$165* in healthy rewards. Enrolling QMB+, SLMB+, QMB.
<b>Premium</b>	\$0
<b>Medical Deductible</b>	\$0 combined INN and OON
<b>Maximum Out-of-Pocket</b>	\$0
<b>Provider Network</b>	Access to a local network of providers
<b>PCP / Specialist</b>	\$0 / \$0; No Referral Required
<b>Inpatient Hospital</b>	\$0 per admit
<b>ASC / Outpatient Hospital</b>	\$0 / \$0
<b>Skilled Nursing Facility</b>	\$0 Days 1-100
<b>Telehealth</b>	\$0 Virtual Medical & Mental Health visits from Network Providers
<b>Lab Services</b>	\$0
<b>Rx Deductible</b>	• \$0 All Tiers
<b>Rx Retail (30-day)</b>	• \$0
<b>Rx Mail Order (100-day)</b>	• \$0
<b>Dental</b>	Not Covered
<b>Eyewear</b>	Covered
<b>Hearing Aids</b>	Covered
<b>Fitness</b>	Covered
<b>OTC</b>	Covered - OTC/Food/Utilities

\*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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<b>Other Benefits</b>	Not Covered
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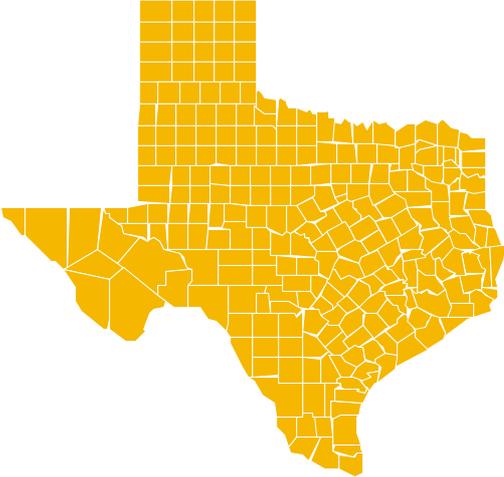
**Key Metrics <sup>1</sup>**

<b>Service Area Dual Eligibles <sup>2</sup>:</b> 805,877	<b>Current UHC Dual Enrolled:</b> 224,871
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- 1. Jun 2024 CMS.gov MA Ind State/County Enrollment Within UHC 2024 MA Ind Footprint
- 2. UHC Dual SNP Service Area Only; D-SNP eligibles are based on Jun 2023 CMS.gov data (includes approx. 0 partial duals who may or may not be eligible).

**Service Area**

**Texas**  
All counties in state



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