United Healthcare

2026 H0543-238-000

Plan Name	**AARP® Medicare Advantage Giveback from UHC CA-21 (HMO-POS)**
Plan ID	**H0543-238-000**
Plan Highlights	Part B rebate plus reliable medical and Rx coverage.
Premium	$0; Part B Rebate: $35.00
Medical Deductible	$0 in-network; N/A out-of-network
Maximum Out-of-Pocket	$800
Provider Network	Access to a local network of providers
Rewards	Up to $155* in healthy rewards
PCP / Specialist	$0 / $0; Referral Required
Inpatient Hospital	$0 per stay for unlimited days
ASC / Outpatient Hospital	$0 copay / $0 copay
Ambulance	$195 copay for ground or air
ER / Urgent Care	$150 copay / $20 copay
Diagnostic Radiology / X-Rays	$50 copay; $0 for mammograms / $0 copay

*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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2026 H0543-238-000

Plan Name	**AARP® Medicare Advantage Giveback from UHC CA-21 (HMO-POS)**
Lab Services	$0 copay
Rx Deductible	$0 Tiers 1 and 2 • $520 Tiers 3-5
Rx Retail (30-day)	$0/$14/18%/27%/27% • Insulin: $35
Rx Mail (Tiers 1-3, 100-day)	$0/$0/18% • Insulin: $105
Dental	Preventive dental services covered for $0 copay; Platinum Dental Rider Available
Vision	$0 for a routine eye exam and standard lenses; $150 every 2 years for eyewear
Hearing Aids	$199 - $1,249 copay per device; 2 devices every year through UHC Hearing
Fitness	Free gym membership with premium and core network
OTC	Not Covered
Other Benefits	• Chiropractic: $0 INN; 20 visits/year • Acupuncture: $0 INN; 20 visits/year

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Key Metrics [1]

Current Plan Enrollment: 4,982

Current Eligibles: 783,338

YOY Eligible Growth: 3.1%

1. Jul 2025 CMS.gov MA Ind State/County Enrollment Within UHC 2026 MA Ind Footprint

Service Area

California

Riverside, San Bernardino

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Footprint Key: Non-Dual Footprint | Non-Dual Expansion | No Footprint

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