



2026 H0294-032-000

Plan Name	AARP® Medicare Advantage from UHC CA-0024 (PPO)
Plan ID	H0294-032-000
Plan Highlights	Access to care outside of the network. A higher premium in exchange for lower out-of-pocket costs and rich extra benefits.
Premium	\$120
Medical Deductible	\$0 combined in and out-of-network
Maximum Out-of-Pocket	\$6,700
Provider Network	Includes UnitedHealthcare Medicare National Network for network care nationwide
Rewards	Up to \$155* in healthy rewards
PCP / Specialist	\$0 / \$45; No Referral Required
Inpatient Hospital	\$550 copay: days 1-5 \$0 per day after that for unlimited days
ASC / Outpatient Hospital	\$500 copay / \$550 copay; \$0 for colonoscopies
Ambulance	\$290 copay for ground or air
ER / Urgent Care	\$130 copay / \$50 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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Plan Name	AARP® Medicare Advantage from UHC CA-0024 (PPO)
Diagnostic Radiology / X-Rays	\$260 copay; \$0 for mammograms / \$30 copay
Lab Services	\$0 copay
Rx Deductible	\$0 Tiers 1 and 2 • \$600 Tiers 3-5
Rx Retail (30-day)	\$0/\$12/16%/32%/26% • Insulin: \$35
Rx Mail (Tiers 1-3, 100-day)	\$0/\$0/16% • Insulin: \$105
Dental	Not Covered
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	Not Covered

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Key Metrics ¹

Current Plan Enrollment: 5,027

Current Eligibles: 85,218

YOY Eligible Growth: 2.1%

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

Service Area

California

Santa Barbara

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

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