United Healthcare

2026 H6706-001-000

Plan Name	**AARP® Medicare Advantage from UHC CO-0011 (HMO-POS)**
Plan ID	**H6706-001-000**
Plan Highlights	Medicare Advantage plan offering the coverage of Original Medicare with added benefits.
Premium	$0
Medical Deductible	$0 in-network; N/A out-of-network
Maximum Out-of-Pocket	$5,400
Provider Network	Includes UnitedHealthcare Medicare National Network for network care nationwide
Rewards	Up to $155* in healthy rewards
PCP / Specialist	$0 / $35; 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.

For agent use only. Not intended for use as marketing material for the general public. Do not distribute, reproduce, edit or delete any portion without the express permission of UnitedHealth Group.

United Healthcare

2026 H6706-001-000

Plan Name	AARP® Medicare Advantage from UHC CO-0011 (HMO-POS)
Diagnostic Radiology / X-Rays	$260 copay; $0 for mammograms / $30 copay
Lab Services	$0 copay
Rx Deductible	$0 Tiers 1 and 2 • $520 Tiers 3-5
Rx Retail (30-day)	$0/$10/17%/32%/27% • Insulin: $35
Rx Mail (Tiers 1-3, 100-day)	$0/$0/17% • Insulin: $105
Dental	Preventive dental services covered for $0 copay; Platinum Dental Rider Available
Vision	$0 for a routine eye exam and standard lenses; $300 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	$40/quarter OTC credit
Other Benefits	• Chiropractic: $10 INN; 12 visits/year

*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.

For agent use only. Not intended for use as marketing material for the general public. Do not distribute, reproduce, edit or delete any portion without the express permission of UnitedHealth Group.

United Healthcare

2026 H6706-001-000

Key Metrics [1]

Current Plan Enrollment: 441

Current Eligibles: 267,102

YOY Eligible Growth: 2.6%

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

Service Area

Colorado

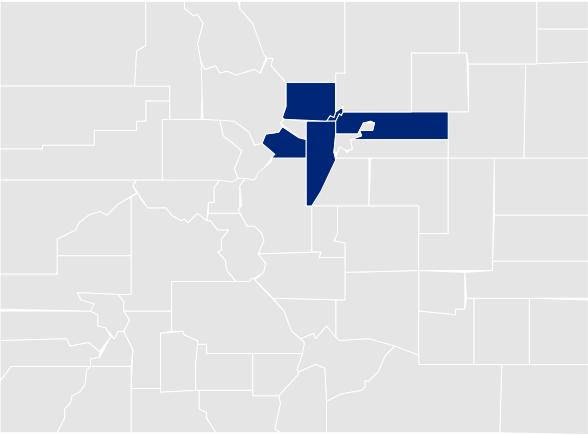
Adams, Boulder, Broomfield, Clear Creek, Jefferson

*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.

For agent use only. Not intended for use as marketing material for the general public. Do not distribute, reproduce, edit or delete any portion without the express permission of UnitedHealth Group.

United Healthcare

2026 H6706-001-000



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

*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.

For agent use only. Not intended for use as marketing material for the general public. Do not distribute, reproduce, edit or delete any portion without the express permission of UnitedHealth Group.