



2026 H1045-005-000

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| Plan Name | UHC Preferred Medicare Advantage FL-0002 (HMO) |
| Plan ID | H1045-005-000 |
| Plan Highlights | Medicare Advantage plan offering the coverage of Original Medicare with added benefits. |
| Premium | \$0; Part B Rebate: \$12.00 |
| Medical Deductible | \$0 in-network; N/A out-of-network |
| Maximum Out-of-Pocket | \$2,900 |
| Provider Network | Access to a local network of providers |
| Rewards | Not Covered |
| PCP / Specialist | \$0 / \$15; Referral Required |
| Inpatient Hospital | \$0 per stay for unlimited days |
| ASC / Outpatient Hospital | \$75 copay / \$150 copay; \$0 for colonoscopies |
| Ambulance | \$150 copay for ground or air |
| ER / Urgent Care | \$150 copay / \$65 copay |
| Diagnostic Radiology / X-Rays | \$150 copay; \$0 for mammograms / \$0 copay |



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| Plan Name | UHC Preferred Medicare Advantage FL-0002 (HMO) |
| Lab Services | \$0 copay |
| Rx Deductible | \$0 Tiers 1 and 2 • \$270 Tiers 3-5 |
| Rx Retail (30-day) | \$0/\$0/16%/42%/30% • Insulin: \$35 |
| Rx Mail (Tiers 1-3, 100-day) | \$0/\$0/16% • Insulin: \$105 |
| Dental | Preventive & Comprehensive Dental (\$0 copay) |
| Vision | \$0 for a routine eye exam and standard lenses; \$300 per year 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 | \$45/quarter OTC credit |
| Other Benefits | • Transportation: \$0 INN; 36 one-way trips to or from plan approved locations • Post-Discharge Meals: 28 meals over 14 days, unlimited times per year |



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Key Metrics ¹

Current Plan Enrollment: 18,080

Current Eligibles: 370,417

YOY Eligible Growth: 2.4%

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

Service Area

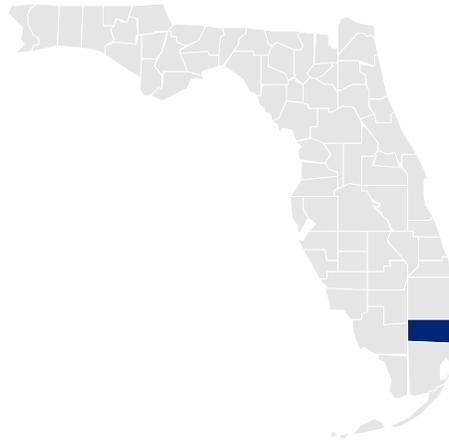
Florida

Broward

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

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