



2026 H2406-131-000

\*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>Plan Name</b>	<b>AARP® Medicare Advantage from UHC HI-5 (PPO)</b>
<b>Plan ID</b>	<b>H2406-131-000</b>
<b>Plan Highlights</b>	With LIS, premium is \$0 with balanced coverage across medical and extra benefits. Plus, access to care outside the network.
<b>Premium</b>	\$45.60
<b>Medical Deductible</b>	\$0 combined in and out-of-network
<b>Maximum Out-of-Pocket</b>	\$6,700
<b>Provider Network</b>	Includes UnitedHealthcare Medicare National Network for network care nationwide
<b>Rewards</b>	Up to \$155* in healthy rewards
<b>PCP / Specialist</b>	\$0 / \$50; No Referral Required
<b>Inpatient Hospital</b>	\$450 copay: days 1-5 \$0 per day after that for unlimited days
<b>ASC / Outpatient Hospital</b>	\$400 copay / \$450 copay; \$0 for colonoscopies
<b>Ambulance</b>	\$315 copay for ground or air
<b>ER / Urgent Care</b>	\$130 copay / \$50 copay

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Plan Name	AARP® Medicare Advantage from UHC HI-5 (PPO)
<b>Diagnostic Radiology / X-Rays</b>	\$310 copay; \$0 for mammograms / \$30 copay
<b>Lab Services</b>	\$0 copay
<b>Rx Deductible</b>	\$615 for all Medicare covered part D drugs; \$0 with LIS
<b>Rx Retail (30-day)</b>	25% for all Medicare covered part D drugs • Insulin: \$35 • costs vary by LIS level
<b>Rx Mail (Tiers 1-3, 100-day)</b>	25% for all Medicare covered part D drugs • Insulin: \$105 • costs vary by LIS level
<b>Dental</b>	\$4,000 towards covered services; \$0 copay for preventive services; 50% for comprehensive services
<b>Vision</b>	\$0 for a routine eye exam and standard lenses; \$150 every 2 years for eyewear
<b>Hearing Aids</b>	\$199 - \$1,249 copay per device; 2 devices every year through UHC Hearing
<b>Fitness</b>	Free gym membership with premium and core network
<b>OTC</b>	\$35/quarter OTC credit
<b>Other Benefits</b>	• Transportation: \$0 INN; 75% OON; 12 one-way trips to or from approved medically related appointments; combined INN and OON • Post-Discharge Meals: 28 meals over 14 days, unlimited times per year • Chiropractic: \$10 INN; \$90 OON; 12 visits/year; combined INN and OON • Acupuncture: \$10 INN; \$90 OON; 12 visits/year; combined INN and OON

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### Key Metrics <sup>1</sup>

**Current Plan Enrollment:** 3,617

**Current Eligibles:** 311,434

**YOY Eligible Growth:** 2.1%

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

### Service Area

#### Hawaii

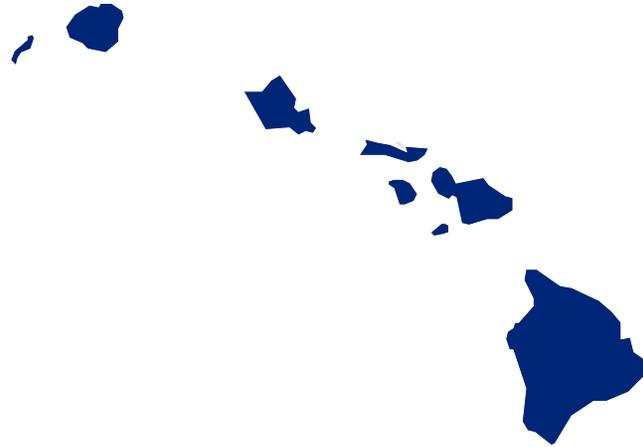
Hawaii, Honolulu, Kauai, Maui

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

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