United Healthcare

2026 H1961-023-000

Plan Name	**Peoples Health Complete Care LA-6 (HMO-POS C-SNP)**
Plan ID	**H1961-023-000**
Plan Highlights	For qualifying members this plan offers low-cost specialist visits and insulin, plus $0 copay on CGMs and access to a monthly OTC / healthy food credit.
Premium	$0
Medical Deductible	$0 in-network; N/A out-of-network
Maximum Out-of-Pocket	$6,700
Provider Network	Access to a local network of providers. Includes UnitedHealth Passport Benefit for network care away from home
Rewards	Not Covered
Special Eligibility (SNPs)	Must be diagnosed with diabetes, chronic heart failure, and/or a cardiovascular disorder
PCP / Specialist	$0 / $35; Referral Required
Inpatient Hospital	$275 copay: days 1-10 $0 per day after that for unlimited days
ASC / Outpatient Hospital	$275 copay / $275 copay; $0 for colonoscopies
Ambulance	$275 copay for ground or air
ER / Urgent Care	$130 copay / $50 copay

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 H1961-023-000

Plan Name	Peoples Health Complete Care LA-6 (HMO-POS C-SNP)
Diagnostic Radiology / X-Rays	$260 copay; $0 for mammograms / $25 copay
Lab Services	$0 copay
Rx Deductible	$0 Tiers 1 and 2 • $355 Tiers 3-5
Rx Retail (30-day)	$0/$10/21%/46%/29% • Insulin: $25
Rx Mail (Tiers 1-3, 100-day)	$0/$0/21% • Insulin: $75
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	$45/month OTC; healthy food for qualified members
Other Benefits	• Post-Discharge Meals: 28 meals over 14 days, unlimited times per year

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 H1961-023-000

Key Metrics [1]

Current Plan Enrollment: 5,210

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

Service Area

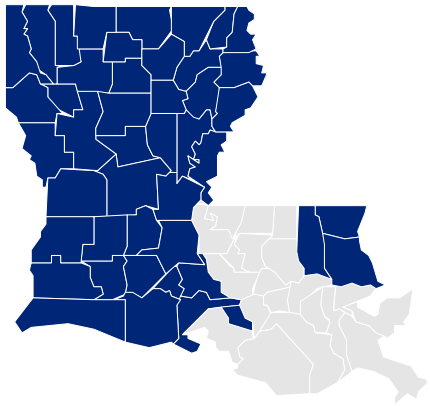
Louisiana

Acadia, Allen, Avoyelles, Beauregard, Bienville, Bossier, Caddo, Calcasieu, Caldwell, Cameron, Catahoula, Claiborne, Concordia, De Soto, East Carroll, Evangeline, Franklin, Grant, Iberia, Jackson, Jefferson Davis, Lafayette, LaSalle, Lincoln, Madison, Morehouse, Natchitoches, Ouachita, Rapides, Red River, Richland, Sabine, St. Landry, St. Martin, St. Tammany, Tangipahoa, Tensas, Union, Vermilion, Vernon, Washington, Webster, West Carroll, Winn

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 H1961-023-000



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

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.