



2026 H5253-125-002

Plan Name	AARP® Medicare Advantage Essentials from UHC OH-7 (HMO-POS)
Plan ID	H5253-125-002
Plan Highlights	Lower out-of-pocket medical and Rx costs in exchange for fewer extra benefits.
Premium	\$0
Medical Deductible	\$0 in-network; N/A out-of-network
Maximum Out-of-Pocket	\$3,900
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	\$295 copay; days 1-6 \$0 per day after that for unlimited days
ASC / Outpatient Hospital	\$195 copay / \$295 copay; \$0 for colonoscopies
Ambulance	\$275 copay for ground or air
ER / Urgent Care	\$150 copay / \$65 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.



2026 H5253-125-002

Plan Name	AARP® Medicare Advantage Essentials from UHC OH-7 (HMO-POS)
Diagnostic Radiology / X-Rays	\$200 copay; \$0 for mammograms / \$25 copay
Lab Services	\$0 copay
Rx Deductible	\$0 Tiers 1 and 2 • \$520 Tiers 3-5
Rx Retail (30-day)	\$0/\$12/15%/43%/27% • Insulin: \$35
Rx Mail (Tiers 1-3, 100-day)	\$0/\$0/15% • Insulin: \$105
Dental	\$1,500 towards covered services; \$0 copay for preventive services; 50% for comprehensive services
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	• Post-Discharge Meals: 28 meals over 14 days, unlimited times per 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.



2026 H5253-125-002

Key Metrics ¹

Current Plan Enrollment: 7,221

Current Eligibles: 253,147

YOY Eligible Growth: 1.5%

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

Service Area

Ohio

Champaign, Clark, Darke, Greene, Miami, Montgomery, Preble, Shelby

*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.



2026 H5253-125-002



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.

i 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.