



2026 H3113-014-000

Plan Name	UHC Dual Complete PA-V001 (HMO-POS D-SNP)
Plan ID	H3113-014-000
Plan Highlights	Designed for a partial dual, offering balanced medical and valued extra benefits.
Premium	\$0 - \$30.40; Part B Rebate: \$0.50**
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
Rewards	Up to \$165* in healthy rewards
Special Eligibility (SNPs)	Enrolling PA: FBDE, QI, QMB, QMB PLUS, SLMB, SLMB PLUS. Outside of AEP and OEP, consumers are limited to special circumstance SEPs to enroll.
PCP / Specialist	\$0 / \$35; Referral Required
Inpatient Hospital	\$350 copay: days 1-6 \$0 per day after that for unlimited days
ASC / Outpatient Hospital	\$300 copay / \$350 copay; \$0 for colonoscopies
Ambulance	\$290 copay for ground or air

*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.

**If a member's Medicare Part B premium is paid by Medicaid, or others on their behalf, they will not see the reduction.

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Plan Name	UHC Dual Complete PA-V001 (HMO-POS D-SNP)
ER / Urgent Care	\$130 copay / \$50 copay
Diagnostic Radiology / X-Rays	\$200 copay; \$0 for mammograms / \$25 copay
Lab Services	\$0 copay
Rx Deductible	\$0 Tier 1 • \$615 Tiers 2-5; \$0 with LIS
Rx Retail (30-day)	\$0 Tier 1 • costs vary by LIS level
Rx Mail (Tiers 1-3, 100-day)	\$0 Tier 1 • costs for Tiers 2 and 3 vary by LIS level
Dental	Preventive dental services covered for \$0 copay
Vision	\$0 for a routine eye exam and standard lenses; \$200 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	\$61/month OTC and wellness support; healthy food and utilities for qualified members

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Plan Name	UHC Dual Complete PA-V001 (HMO-POS D-SNP)
Other Benefits	• Transportation: \$0 INN; 24 one-way trips to or from approved locations including medically related appointments and filed supplemental benefits • Post-Discharge Meals: 28 meals over 14 days, unlimited times per year

Key Metrics ¹

Current Plan Enrollment: 640

Current Partial Dual Eligibles ²: 82,620

UHC Plan Partial Dual Market Share: 0.8%

1. Jul 2025 CMS.gov MA Ind State/County Enrollment Within UHC 2026 MA Ind Footprint
2. UHC Dual SNP Service Area Only; D-SNP eligibles are based on Jun 2024 CMS.gov data (includes approx. 82,620 partial duals who may or may not be eligible).

Service Area

Pennsylvania

All counties in state

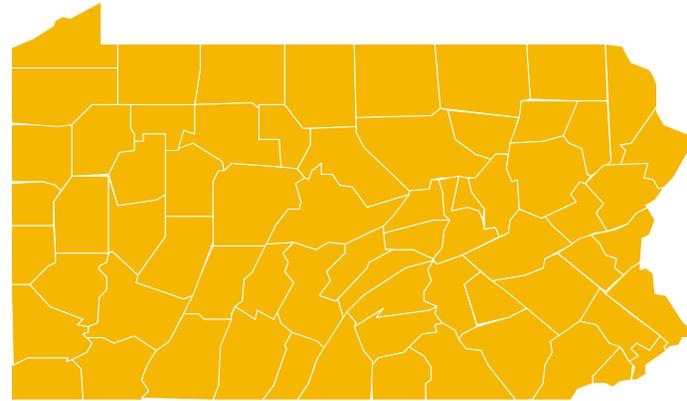
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Footprint Key: ● Dual Footprint ● Dual Expansion ● No Footprint

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