

2020 BENEFITS PREVIEW

Medicare Advantage Plans



Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.



2020 Medicare Advantage Plans

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply.

For final 2020 plan details, refer to the 2020 Summary of Benefits.

Confidential property of UnitedHealth Group. 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.

A TRUSTED HEALTH CARE LEADER.

Serving Medicare beneficiaries for over 40 years

MEDICARE
ADVANTAGE

#1

The number one
Medicare
Advantage insurer
by enrollment

MEDICARE
BENEFICIARIES

12.5M

Proud to serve
more Medicare
beneficiaries than
any other insurer

FORTUNE
WORLD'S MOST
ADMIRED
COMPANIES

Recognized by
Fortune as one
of the world's most
admired companies
nine years in a row

FORTUNE
No. 6

Ranked number six
on Fortune's 2019
list of top 500
companies

AARP®

The only company
to offer Medicare
plans with the
AARP® name

A DISTINCTIVE EXPERIENCE.

Delivering unmatched value



More Choice More Control

When it comes to Medicare, one size does not fit all. That's why we offer a full portfolio of Medicare products including a broad choice of MA plans designed to fit different needs with both in and out-of-network options.



Enterprise Capabilities

No other company offers the depth and breadth of UnitedHealth Group, with partners such as Optum and Rally, to deliver innovative technology and digital tools for an unrivaled member experience.



More Value

We've listened to our agents and members to invest where it matters and offer extra benefits they want — from \$0 PCP visits and \$0 Tier 1 Rx copays, to enhanced dental, eyewear and fitness benefits.



Compassionate Care

Our member advocates are empowered to deliver best in class customer service with one-call resolution and deliver beyond the basics by scheduling appointments and connecting members to programs designed to make it easier to manage their health.



Robust Prescription Drug Coverage

Our Medicare Advantage prescription drug coverage is more comprehensive than many stand-alone Part D plans with a broad formulary that includes many market-leading brands and covers the most commonly used generics on Tier 1.



Member-only Health & Wellness Experience

Renew[®] by UnitedHealthcare¹ offers members access to inspiring tips, learning activities, videos, recipes, interactive health tools and more. And with Renew Rewards, members can earn gift card rewards by completing certain health care and wellness activities such as an annual physical or wellness visit, preventive screenings, a flu shot or achieving daily step goals.²

¹Renew by UnitedHealthcare is not available on all plans.

²Reward offerings will vary by member and Renew Rewards is not available on all plans with Renew by UnitedHealthcare

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

PARTNERS IN CARE.

Resources and tools to simplify and enhance the agent experience



Agent Support & Training

We have a team of Agent Managers and Business Development Managers ready to support you. We also offer ongoing training on a diverse number of topics to help grow your knowledge and business.



LEAN

LEAN is your go-to enrollment tool for all UnitedHealthcare Medicare plans. Benefits include: Faster enrollment, easier processing and overall a better experience for you. Plus, it goes wherever you go, online or offline*.

*AARP Medicare Supplement applications can only be taken while online.



Jarvis

An intuitive platform to help you find what you need to know and what you need to do – quickly & easily.

- Mobile responsive
- Application Status tracking
- All your tools in one place (UnitedHealthcare Toolkit, LEAN, training, prescription drug list, provider look-up and more!)
- Full portfolio information
- Commissions details
- **New!** Improved navigation for Provider Search
- **New!** Easy access to Health Risk Assessment
- **New!** Podcast landing page – Easy access for listening on the go!



UnitedHealthcare Toolkit

The UnitedHealthcare Toolkit is faster, easier to navigate and more reliable than ever. Find and order the materials you need to grow your business in a snap.

- **Improved site performance.** Faster load times, quicker ordering and enhanced site reliability
- **Marketing materials at your fingertips.** Three ways to find materials, so you can find what you're looking for quickly and easily
- **Simplified ordering process.** Fewer steps, allowing you to quickly download or request printed materials

GO AHEAD, TAKE ADVANTAGE.

Benefits and features that members want

DISTINCTIVE BENEFITS



Dental

Simplified benefit design, expanded coverage, added more out-of-network access, and continue to have the largest dental network



Vision

Improved benefits with \$0 eye exams, increased eyewear allowances (with standard lenses included) and exclusive access to Warby Parker™



Over-the-Counter (OTC) Catalog

Enhanced catalog benefit with broader selection of products, faster delivery, and lower prices to help credits go further



Renew Active™ (Fitness)

UnitedHealthcare exclusive fitness program for body and mind – includes a free gym membership with access to an extensive network of participating gyms, a personalized fitness plan, and an online brain health program



Fitbit® Activity Tracker

Members can stay active by tracking their activity, sleep, and more with a free Fitbit Charge 3 or Inspire HR for no cost



Personal Emergency Response System

In-home monitoring device that provides members with confidence of knowing they have access to help 24/7



Mammograms & Colonoscopies

Now offered at \$0 copay for both preventive and diagnostic to eliminate confusion and reduce member hassle



Hearing Aids

Newly launched UnitedHealthcare Hearing combines the best of hi HealthInnovations® and EPIC Hearing Healthcare to provide even more choice in affordable devices, access to an expansive nationwide network or home delivery, and improved service



Virtual Visits

Expanded access to virtual medical and mental health visits to offer convenient access to care



Transportation

Non-emergency medical rides to a doctor's office or pharmacy at no additional cost to the member

DISTINCTIVE FEATURES



Medicare National Network

Whether at home or traveling, pay in-network costs when you see any doctor in the UnitedHealthcare Medicare National Network¹



Renew Rewards

Members may earn gift card rewards for completing certain health care activities such as an annual physical or wellness visit, preventive screenings, flu shot, or achieving daily activity goals



Preferred Pharmacy

In partnership with Walgreens, UnitedHealthcare will launch a Preferred Retail Pharmacy Network for select plans to offer even lower retail copays



HouseCallsSM

Free yearly in-home visit with a trusted member of our licensed medical staff for members to stay up-to date on their health between doctor's visits

Benefits and features not available on all plans.

¹Exclusions may apply.

TABLE OF CONTENTS

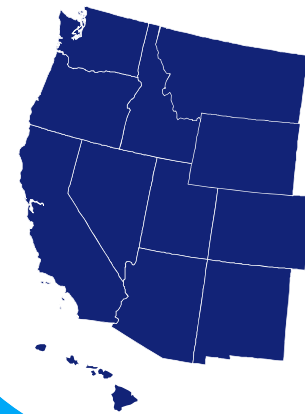


West Region

<u>Arizona</u>	9
<u>Northern California</u>	19
<u>Southern California</u>	41
<u>Colorado</u>	54
<u>Hawaii</u>	63
<u>Idaho</u>	68
<u>Nevada</u>	75
<u>New Mexico</u>	80
<u>Oregon</u>	85
<u>Utah</u>	91
<u>Washington</u>	97

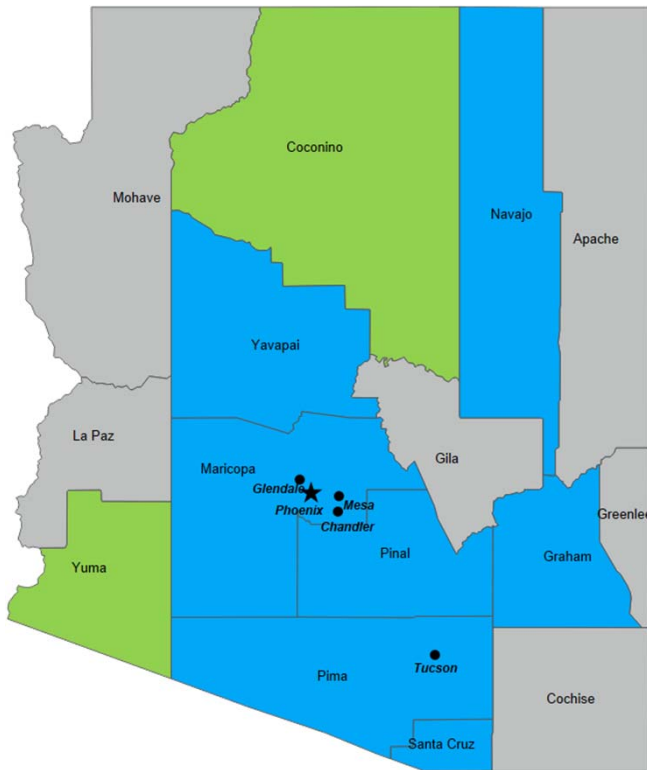
2020 Medicare Advantage Plans

West Region



Arizona

Medicare Advantage 2020 Service Area



- Current Footprint
- Footprint Expansion
- Dual Only Footprint

State Landscape

Eligibles (as of 2019-05-01)	1,386,335
<i>Estimated DSNP Eligibles²</i>	234,614
YOY Eligible Growth ¹	7.0%
MA Penetration ¹	32.8%
YOY MA Enrollment Growth ¹	4.3%
UHC Market Share ¹	40.3%

¹ May 2019 CMS.gov MA Ind State/County Enrollment within UHC 2020 MA Ind Footprint.
² UHC Dual SNP service area only; Estimated DSNP Eligibles are projected based on June 2018 CMS.gov data (includes approx. 48K partial duals who may or may not be eligible).

ARIZONA

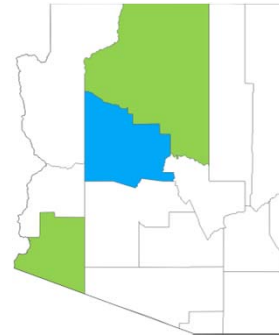
MARKET LANDSCAPE

Phoenix: Maricopa, Pinal



Market Landscape	
Eligibles (as of 2019-05-01)	814,292
YOY Eligible Growth	6.8%
MA Non-SNP Penetration	28.1%
YOY MA Non-SNP Enrollment Growth	4.2%
UHC Non-SNP Market Share	34.9%

Prescott: Coconino, Yavapai, Yuma



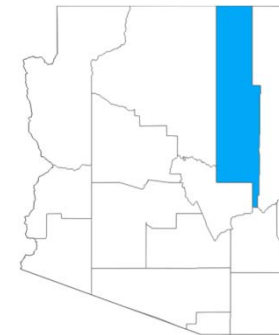
Market Landscape	
Eligibles (as of 2019-05-01)	148,640
YOY Eligible Growth	8.6%
MA Non-SNP Penetration	14.1%
YOY MA Non-SNP Enrollment Growth	25.8%
UHC Non-SNP Market Share	47.4%

Tucson: Graham, Pima, Santa Cruz



Market Landscape	
Eligibles (as of 2019-05-01)	251,495
YOY Eligible Growth	6.4%
MA Non-SNP Penetration	30.0%
YOY MA Non-SNP Enrollment Growth	7.3%
UHC Non-SNP Market Share	61.0%

Arizona PFFS: Navajo



Market Landscape	
Eligibles (as of 2019-05-01)	25,820
YOY Eligible Growth	8.5%
MA Non-SNP Penetration	10.3%
YOY MA Non-SNP Enrollment Growth	4.4%
UHC Non-SNP Market Share	79.8%

10 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealthcare Group. 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 UnitedHealthcare Group.

- Current Footprint
- Footprint Expansion



2020

ARIZONA

MARKET LANDSCAPE

Arizona Dual: Apache, Cochise, Coconino, Gila, Graham, Greenlee, La Paz, Maricopa, Mohave, Navajo, Pima, Pinal, Santa Cruz, Yavapai, Yuma





Market Landscape	
Est. DSNP Eligibles	234,614
DSNP Enrollees	89,941
DSNP Penetration (All Plans)	38.3%
Total UHC DSNP Enrollees	44,367
UHC DSNP Market Share	49.3%

2020

PHOENIX

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Plan 1 (HMO)	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Walgreens Plan 1 (PPO)
Plan ID	H0609-026-000	H0609-027-000	H2228-074-000  
Plan Highlights	\$0 premium plan with rich ancillary benefits	Plan designed around OptumCare for coordinated care and low out-of-pocket costs	New! LPPO offers \$0 premium, \$0 PCP with popular ancillaries. \$0 Tier 1 Rx copays at Walgreens. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	Arizona: Maricopa, Pinal	Arizona: Maricopa	Arizona: Maricopa
Premium	\$0	\$0	\$0
Max Out-of-Pocket	\$3,900	\$3,000	\$5,000
PCP/Specialist Copay	\$5 / \$35; Referral Required	\$0 / \$25; Referral Required	\$0 / \$40; No Referral Required
Inpatient Hospital	\$230 days 1-7	\$175 days 1-7	\$300 days 1-6
ASC/Outpatient Hosp	\$0 - \$125 / \$0 - \$175	\$0 - \$100 / \$0 - \$150	\$0 - \$275 / \$0 - \$275
Lab Copay	\$10	\$10	\$10
Rx Ded.; Rx Copays	\$150 Tiers 3-5; \$3/\$10/\$45/\$95/30%	\$0; \$2/\$8/\$45/\$95/33%	\$195 Tiers 3-5; \$0/\$5/\$47/\$100/29% (Preferred)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access, Virtual Visits, Virtual Mental Health Visits, NurseLine

12



Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

PHOENIX

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Walgreens Plan 2 (PPO)
Plan ID	H2228-077-000  
Plan Highlights	New! LPPO offers Part B premium rebate. \$0 Tier 1 Rx copays at Walgreens. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	Arizona: Maricopa
Premium	\$0; Part B Rebate: \$40
Max Out-of-Pocket	\$6,700
PCP/Specialist Copay	\$25 / \$50; No Referral Required
Inpatient Hospital	\$490 days 1-4
ASC/Outpatient Hosp	\$0 - \$490 / \$0 - \$490
Lab Copay	\$10
Rx Ded.; Rx Copays	\$435 Tiers 3-5; \$0/\$5/\$47/\$100/25% (Preferred)
Extra Benefits	Routine Eye Exam, Fitness Membership, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

13 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.


 New Plan



2020

PRESCOTT

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage (HMO)	UnitedHealthcare® Medicare Advantage Assure (PPO)	AARP® Medicare Advantage Walgreens (PPO)
Plan ID	H5253-036-000	H0271-008-000	H2228-076-000  
Plan Highlights	Mid premium plan for those shopping on value and low out-of-pocket costs	Plan designed for those with both Medicare and Medicaid - best for Full Duals	New! Open access plan with low out-of-pocket costs and additional ancillaries. \$0 Tier 1 Rx copays at Walgreens. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	Arizona: Yavapai	Arizona: Graham, Santa Cruz, Yavapai	Arizona: Coconino, Yavapai, Yuma
Premium	\$49	\$0 for Full Duals	\$40
Max Out-of-Pocket	\$5,500	\$6,700	\$6,000
PCP/Specialist Copay	\$10 / \$40; Referral Required	\$0 for Full Duals / \$0 for Full Duals; No Referral Required	\$0 / \$40; No Referral Required
Inpatient Hospital	\$295 days 1-5	\$0 for Full Duals	\$300 days 1-6
ASC/Outpatient Hosp	\$0 - \$290 / \$0 - \$290	\$0 for Full Duals	\$0 - \$275 / \$0 - \$275
Lab Copay	\$10	\$0 for Full Duals	\$10
Rx Ded.; Rx Copays	\$245 Tiers 3-5; \$4/\$12/\$45/\$95/28%	Varies by LIS Level	\$295 Tiers 3-5; \$0/\$5/\$47/\$100/27% (Preferred)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access, OTC Catalog, Chiropractic, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation	Routine Eye Exam, Eyewear Credit, Fitness Membership, Preventive Dental w/ Out-of-Network Access, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

2020

TUCSON

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage (HMO)	AARP® Medicare Advantage Plus (HMO-POS)	UnitedHealthcare® Medicare Advantage Assure (PPO)
Plan ID	H0609-025-000	H5253-035-000	H0271-008-000
Plan Highlights	\$0 premium plan with rich ancillary benefits	Low premium plan with broader network access	Plan designed for those with both Medicare and Medicaid - best for Full Duals
Service Area	Arizona: Pima	Arizona: Graham, Pima, Santa Cruz	Arizona: Graham, Santa Cruz, Yavapai
Premium	\$0	\$12	\$0 for Full Duals
Max Out-of-Pocket	\$2,600	\$4,800	\$6,700
PCP/Specialist Copay	\$0 / \$30; Referral Required	\$10 / \$45; No Referral Required	\$0 for Full Duals / \$0 for Full Duals; No Referral Required
Inpatient Hospital	\$225 days 1-7	\$250 days 1-7	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 - \$225 / \$0 - \$225	\$0 - \$225 / \$0 - \$225	\$0 for Full Duals
Lab Copay	\$10	\$10	\$0 for Full Duals
Rx Ded.; Rx Copays	\$0; \$2/\$12/\$45/\$95/33%	\$225 Tiers 3-5; \$2/\$8/\$45/\$95/29%	Varies by LIS Level
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access, OTC Catalog, Chiropractic, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation



15 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.



2020

TUCSON

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Walgreens (PPO)
Plan ID	H2228-075-000  
Plan Highlights	New! LPPO offers \$0 premium, \$0 PCP with popular ancillaries. \$0 Tier 1 Rx copays at Walgreens. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	Arizona: Pima
Premium	\$0
Max Out-of-Pocket	\$5,000
PCP/Specialist Copay	\$0 / \$40; No Referral Required
Inpatient Hospital	\$300 days 1-6
ASC/Outpatient Hosp	\$0 - \$275 / \$0 - \$275
Lab Copay	\$10
Rx Ded.; Rx Copays	\$275 Tiers 3-5; \$0/\$5/\$47/\$100/28% (Preferred)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access, Virtual Visits, Virtual Mental Health Visits, NurseLine

16

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

ARIZONA PFFS

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare® MedicareDirect Essential (PFFS)	UnitedHealthcare® MedicareDirect Rx (PFFS)
Plan ID	H5435-001-000	H5435-024-000
Plan Highlights	Non-network PFFS plan allows you to see any doctor who accepts Medicare. Designed for those who want affordable coverage beyond Original Medicare, but don't need prescription drug coverage - works well with VA benefits	Non-network PFFS plan allows you to see any doctor who accepts Medicare with built in Part D coverage
Service Area	<p>AZ: Navajo; GA: Calhoun, Decatur, Grady, Lanier, Thomas; KS: Chase, Cheyenne, Clay, Decatur, Ellis, Geary, Graham, Lane, Logan, Marshall, Nemaha, Neosho, Phillips, Rawlins, Republic, Riley, Rooks, Saline, Scott, Sheridan, Thomas, Washington, Wilson; KY: Calloway, Christian, Marshall; MO: Adair, Cape Girardeau, Clark, Daviess, Grundy, Iron, Madison, Mercer, New Madrid, Putnam, Schuyler, Scotland, Scott, Shannon, Stoddard, Sullivan; MT: Carter, Daniels, Dawson, Fallon, Garfield, Petroleum, Phillips, Powder River, Prairie, Roosevelt, Sheridan; NE: Arthur, Banner, Blaine, Boone, Buffalo, Cedar, Cheyenne, Dakota, Dawes, Dawson, Gosper, Hall, Hooker, Keith, Keya Paha, Knox, Logan, Loup, McPherson, Madison, Merrick, Morrill, Nance, Perkins, Platte, Scotts Bluff, Sheridan, Sherman, Stanton, Thomas, Wheeler; OK: Latimer; TX: Brewster, Brown, Calhoun, Crane, Culberson, De Witt, Duval, Goliad, Gonzales, Jack, Jackson, Karnes, La Salle, Live Oak, Loving, Mc Mullen, Pecos, Presidio, Reeves, Refugio, Terrell, Ward, Winkler; VT: Caledonia, Essex, Franklin, Grand Isle; VA: Augusta, Carroll, Greensville, Harrisonburg City, Patrick, Rockingham, Staunton City, Waynesboro City; WY: Albany, Crook, Fremont, Natrona, Sheridan, Teton, Weston; H5435-001 only: KS: Anderson, Cloud; MT: Valley; NE: Box Butte, Dixon, Hamilton, Kearney; VA: Emporia</p>	
Premium	\$40	\$64
Max Out-of-Pocket	\$6,700	\$6,700
PCP/Specialist Copay	\$25 / \$50; No Referral Required	\$25 / \$50; No Referral Required
Inpatient Hospital	\$395 days 1-4	\$395 days 1-4
ASC/Outpatient Hosp	\$0 - \$395 / \$0 - \$395	\$0 - \$395 / \$0 - \$395
Lab Copay	\$10	\$10
Rx Ded.; Rx Copays	Not Covered	\$295 Tiers 3-5; \$4/\$14/\$47/\$100/27%
Extra Benefits	Routine Eye Exam, Routine Hearing Exam, Nurse Line	Routine Eye Exam, Routine Hearing Exam, Nurse Line

2020

ARIZONA DUAL

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare Dual Complete® LP (HMO SNP)	UnitedHealthcare Dual Complete® LP1 (HMO SNP)	UnitedHealthcare Dual Complete® ONE (HMO SNP)
Plan ID	H0321-002-000	H5008-012-000	H0321-004-000
Plan Highlights	\$275 per quarter for OTC products with debit card or mail order, \$3,500 dental allowance for covered services, \$2,500 allowance for hearing aids every two years, \$0 copay virtual doctor visits	\$3,500 dental allowance for covered services, \$2,000 allowance for hearing aids every two years, and \$0 copay virtual visits	\$275 per quarter for OTC products with debit card or mail order, \$3,500 dental allowance for covered services, \$2,500 allowance for hearing aids every two years, receive up to 4 hrs/wk of In-Home Support Services
Service Area	Arizona: Apache, Cochise, Coconino, Gila , Graham, Greenlee, La Paz, Maricopa, Mohave, Navajo, Pima, Pinal, Santa Cruz, Yavapai, Yuma	Arizona: Gila	Arizona: Apache, Coconino, Gila , Maricopa, Mohave, Navajo, Pinal, Yavapai
Premium	\$0 for Full Duals	\$0 for Full Duals	\$0 for Full Duals
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Debit Card & Catalog , Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits , NurseLine, Transportation, Meal Benefit, Caregiver Support	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids , Fitness Membership, Preventive & Comprehensive Dental, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits , NurseLine, Transportation, Meal Benefit, Caregiver Support	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental , OTC Debit Card & Catalog , Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits , NurseLine, Transportation, Meal Benefit, Caregiver Support, Adult Day Care

NORTHERN CALIFORNIA

STATE LANDSCAPE

Northern California

Medicare Advantage 2020 Service Area



● Current Footprint ● Footprint Expansion

State Landscape

Eligibles (as of 2019-05-01)	2,462,564
<i>Estimated DSNP Eligibles²</i>	115,739
YOY Eligible Growth ¹	5.5%
MA Penetration ¹	25.8%
YOY MA Enrollment Growth ¹	5.9%
UHC Market Share ¹	11.7%

¹ May 2019 CMS.gov MA Ind State/County Enrollment within UHC 2020 MA Ind Footprint.

² UHC Dual SNP service area only; Estimated DSNP Eligibles are projected based on June 2018 CMS.gov data (includes approx. 2K partial duals who may or may not be eligible).

NORTHERN CALIFORNIA

MARKET LANDSCAPE

Central South: Fresno, Kings, Madera



Market Landscape	
Eligibles (as of 2019-05-01)	192,450
YOY Eligible Growth	5.1%
MA Non-SNP Penetration	21.5%
YOY MA Non-SNP Enrollment Growth	5.4%
UHC Non-SNP Market Share	5.4%

Central Valley: San Joaquin, Stanislaus



Market Landscape	
Eligibles (as of 2019-05-01)	210,510
YOY Eligible Growth	5.6%
MA Non-SNP Penetration	30.3%
YOY MA Non-SNP Enrollment Growth	8.6%
UHC Non-SNP Market Share	15.0%

East Bay Area: Alameda, Contra Costa



Market Landscape	
Eligibles (as of 2019-05-01)	468,917
YOY Eligible Growth	5.5%
MA Non-SNP Penetration	24.7%
YOY MA Non-SNP Enrollment Growth	4.1%
UHC Non-SNP Market Share	12.4%

North Bay Area: Marin, Napa, Solano, Sonoma



Market Landscape	
Eligibles (as of 2019-05-01)	291,428
YOY Eligible Growth	5.7%
MA Non-SNP Penetration	24.5%
YOY MA Non-SNP Enrollment Growth	5.5%
UHC Non-SNP Market Share	5.1%

20 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

- Current Footprint
- Footprint Expansion



NORTHERN CALIFORNIA

MARKET LANDSCAPE

North Rural: Amador, El Dorado, Mendocino, Merced, **Shasta**, Tulare



Market Landscape	
Eligibles (as of 2019-05-01)	241,399
YOY Eligible Growth	5.9%
MA Non-SNP Penetration	9.8%
YOY MA Non-SNP Enrollment Growth	8.3%
UHC Non-SNP Market Share	33.9%

Sacramento North Valley: Nevada, Placer, Sacramento, Yolo



Market Landscape	
Eligibles (as of 2019-05-01)	429,835
YOY Eligible Growth	6.3%
MA Non-SNP Penetration	22.4%
YOY MA Non-SNP Enrollment Growth	6.3%
UHC Non-SNP Market Share	25.2%

San Francisco: San Francisco



Market Landscape	
Eligibles (as of 2019-05-01)	154,888
YOY Eligible Growth	3.6%
MA Non-SNP Penetration	19.8%
YOY MA Non-SNP Enrollment Growth	3.2%
UHC Non-SNP Market Share	0.9%

South Bay Area: San Mateo, Santa Clara, Santa Cruz



Market Landscape	
Eligibles (as of 2019-05-01)	473,137
YOY Eligible Growth	5.0%
MA Non-SNP Penetration	22.5%
YOY MA Non-SNP Enrollment Growth	6.5%
UHC Non-SNP Market Share	11.3%

21 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

● Current Footprint
● Footprint Expansion



NORTHERN CALIFORNIA

MARKET LANDSCAPE

Central South Dual: Fresno, Kings, Madera




Market Landscape	
Est. DSNP Eligibles	54,022
DSNP Enrollees	5,785
DSNP Penetration (All Plans)	10.7%
Total UHC DSNP Enrollees	
UHC DSNP Market Share	0.0%

East Bay Area Dual: Alameda



Market Landscape	
Est. DSNP Eligibles	61,717
DSNP Enrollees	7,333
DSNP Penetration (All Plans)	11.9%
Total UHC DSNP Enrollees	
UHC DSNP Market Share	0.0%

22 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 Footprint Expansion



2020

CENTRAL SOUTH

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-035-000	H0543-181-000
Plan Highlights	Premium plan now serving Kings plus Fresno and Madera counties	Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: Fresno, Kings, Madera	California: Fresno, Kings, Madera
Premium	\$77	\$0 for Full Duals
Max Out-of-Pocket	\$6,700	\$6,700
PCP/Specialist Copay	\$0 / \$10; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$445 days 1-4	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 - \$365 / \$0 - \$365	\$0 for Full Duals
Lab Copay	\$0	\$0 for Full Duals
Rx Ded.; Rx Copays	\$315 Tiers 3-5; \$3/\$12/\$47/\$100/27%	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation

23 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.



2020

CENTRAL VALLEY

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Focus (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 2 (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 1 (HMO)
Plan ID	H0543-196-000	H0543-147-000	H0543-036-000
Plan Highlights	New! Low premium plan designed around Allcare for coordinated care and low out-of-pocket costs	Low premium plan for those who are cost conscious and want affordable coverage	Premium plan with low out-of-pocket costs
Service Area	California: Stanislaus	California: Stanislaus	California: Stanislaus
Premium	\$19	\$9	\$99
Max Out-of-Pocket	\$3,400	\$4,900	\$3,400
PCP/Specialist Copay	\$0 / \$0; Referral Required	\$0 / \$15; Referral Required	\$0 / \$5; Referral Required
Inpatient Hospital	\$175 days 1-5	\$220 days 1-8	\$200 per admit
ASC/Outpatient Hosp	\$0 - \$75 / \$0 - \$125	\$0 - \$195 / \$0 - \$195	\$0 / \$0
Lab Copay	\$0	\$0	\$0
Rx Ded.; Rx Copays	\$100 Tiers 3-5; \$3/\$12/\$47/\$100/31%	\$225 Tiers 3-5; \$3/\$12/\$47/\$100/ 29%	\$220 Tiers 3-5; \$3/\$12/\$47/\$100/ 29%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, OTC Catalog, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, OTC Catalog, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available

2020

CENTRAL VALLEY

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-177-000	H0543-187-000	H0543-182-000
Plan Highlights	Mid premium plan for those shopping on value and low out-of-pocket costs	Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal	Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: San Joaquin	California: San Joaquin	California: Stanislaus
Premium	\$58	\$0 for Full Duals	\$0 for Full Duals
Max Out-of-Pocket	\$4,400	\$6,700	\$6,700
PCP/Specialist Copay	\$0 / \$0; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$275 days 1-5	\$0 for Full Duals	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 - \$250 / \$0 - \$250	\$0 for Full Duals	\$0 for Full Duals
Lab Copay	\$0	\$0 for Full Duals	\$0 for Full Duals
Rx Ded.; Rx Copays	\$225 Tiers 3-5; \$3/\$12/\$47/\$100/29%	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation

25 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.



2020

EAST BAY AREA

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Plan 1 (HMO)	UnitedHealthcare® Canopy Health Medicare Advantage (HMO)
Plan ID	H0543-070-000	H0543-188-000
Plan Highlights	Full provider network premium plan serving Alameda and Contra Costa counties	New! Premium plan with rich ancillaries designed around Canopy for coordinated care and low out-of-pocket costs
Service Area	California: Alameda, Contra Costa	California: Alameda
Premium	\$107	\$69
Max Out-of-Pocket	\$6,700	\$4,900
PCP/Specialist Copay	\$10 / \$15; Referral Required	\$0 / \$15; Referral Required
Inpatient Hospital	\$390 days 1-5	\$250 days 1-7
ASC/Outpatient Hosp	\$0 - \$370 / \$0 - \$370	\$0 - \$150 / \$0 - \$210
Lab Copay	\$0	\$0
Rx Ded.; Rx Copays	\$350 Tiers 3-5; \$3/\$12/\$47/\$100/26%	\$150 Tiers 3-5; \$2/\$12/\$47/\$100/30%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, NurseLine, Transportation, Platinum Dental Rider Available

26

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

EAST BAY AREA

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Focus (HMO)	UnitedHealthcare® Canopy Health Medicare Advantage (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-163-000	H0543-189-000	H0543-183-000
Plan Highlights	Plan designed around John Muir Health for coordinated care and low out-of-pocket costs	New! Premium plan with low out-of-pocket costs and rich ancillaries	Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: Contra Costa	California: Contra Costa	California: Alameda, Contra Costa
Premium	\$64	\$69	\$0 for Full Duals
Max Out-of-Pocket	\$3,200	\$3,200	\$6,700
PCP/Specialist Copay	\$10 / \$15; Referral Required	\$0 / \$15; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$290 days 1-5	\$290 days 1-5	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 - \$200 / \$0 - \$200	\$0 - \$150 / \$0 - \$210	\$0 for Full Duals
Lab Copay	\$0	\$0	\$0 for Full Duals
Rx Ded.; Rx Copays	\$250 Tiers 3-5; \$3/\$12/\$47/\$100/28%	\$250 Tiers 3-5; \$3/\$12/\$47/\$100/28%	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, NurseLine, Transportation, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, OTC Catalog, Virtual Visits, NurseLine, Transportation

27

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

NORTH BAY AREA

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® (HMO)	AARP® Medicare Advantage SecureHorizons® (HMO)	AARP® Medicare Advantage SecureHorizons® (HMO)
Plan ID	H0543-176-000	H0543-148-000	H0543-194-000
Plan Highlights	Premium plan with low out-of-pocket costs and rich ancillaries	Plan designed around Sutter Health for coordinated care and low out-of-pocket costs	New! Low premium plan for those shopping on value and low out-of-pocket costs
Service Area	California: Marin	California: Sonoma	California: Napa
Premium	\$79	\$55	\$55
Max Out-of-Pocket	\$4,900	\$4,900	\$4,900
PCP/Specialist Copay	\$10 / \$25; Referral Required	\$0 / \$15; Referral Required	\$0 / \$15; Referral Required
Inpatient Hospital	\$345 days 1-5	\$290 days 1-5	\$290 days 1-5
ASC/Outpatient Hosp	\$0 - \$195 / \$0 - \$195	\$0 - \$195 / \$0 - \$195	\$0 - \$195 / \$0 - \$195
Lab Copay	\$0	\$0	\$0
Rx Ded.; Rx Copays	\$250 Tiers 3-5; \$3/\$12/\$47/\$100/28%	\$325 Tiers 3-5; \$3/\$12/\$47/\$100/27%	\$325 Tiers 3-5; \$3/\$12/\$47/\$100/27%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, NurseLine, Platinum Dental Rider Available

28

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

NORTH BAY AREA

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® (HMO)
Plan ID	H0543-179-000
Plan Highlights	Premium plan with low out-of-pocket costs
Service Area	California: Solano
Premium	\$79
Max Out-of-Pocket	\$6,700
PCP/Specialist Copay	\$10 / \$20; Referral Required
Inpatient Hospital	\$395 days 1-4
ASC/Outpatient Hosp	\$0 - \$370 / \$0 - \$370
Lab Copay	\$0
Rx Ded.; Rx Copays	\$350 Tiers 3-5; \$3/\$12/\$47/\$100/26%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available

29 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

2020

NORTH BAY AREA

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare® Medicare Advantage Assure (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-198-000	H0543-200-000	H0543-199-000
Plan Highlights	New! Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal	New! Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal	New! Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: Marin	California: Napa	California: Solano
Premium	\$0 for Full Duals	\$0 for Full Duals	\$0 for Full Duals
Max Out-of-Pocket	\$6,700	\$6,700	\$6,700
PCP/Specialist Copay	\$0 for Full Duals / \$0 for Full Duals; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$0 for Full Duals	\$0 for Full Duals	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 for Full Duals	\$0 for Full Duals	\$0 for Full Duals
Lab Copay	\$0 for Full Duals	\$0 for Full Duals	\$0 for Full Duals
Rx Ded.; Rx Copays	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, NurseLine, Transportation	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, NurseLine, Transportation	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, NurseLine, Transportation

30

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

NORTH BAY AREA

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-197-000
Plan Highlights	New! Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: Sonoma
Premium	\$0 for Full Duals
Max Out-of-Pocket	\$6,700
PCP/Specialist Copay	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 for Full Duals
Lab Copay	\$0 for Full Duals
Rx Ded.; Rx Copays	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, NurseLine, Transportation

31

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

NORTH RURAL

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® (HMO)	AARP® Medicare Advantage SecureHorizons® (HMO)
Plan ID	H0543-140-000	H0543-195-000
Plan Highlights	Premium plan with low out-of-pocket costs. Includes dental rider	New! Premium plan with low out-of-pocket costs and rich ancillaries
Service Area	California: Amador, El Dorado, Mendocino, Merced, Tulare	California: Shasta
Premium	\$61	\$61
Max Out-of-Pocket	\$6,700	\$6,700
PCP/Specialist Copay	\$15 / \$45; Referral Required	\$15 / \$45; Referral Required
Inpatient Hospital	\$390 days 1-5	\$390 days 1-5
ASC/Outpatient Hosp	\$0 - \$370 / \$0 - \$370	\$0 - \$370 / \$0 - \$370
Lab Copay	\$0	\$0
Rx Ded.; Rx Copays	\$255 Tiers 3-5; \$3/\$12/\$47/\$100/28%	\$255 Tiers 3-5; \$3/\$12/\$47/\$100/28%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available

32

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

NORTH RURAL

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare® Medicare Advantage Assure (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-202-000	H0543-201-000
Plan Highlights	New! Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal	New! Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: Amador, El Dorado, Mendocino, Merced, Tulare	California: Shasta
Premium	\$0 for Full Duals	\$0 for Full Duals
Max Out-of-Pocket	\$6,700	\$6,700
PCP/Specialist Copay	\$0 for Full Duals / \$0 for Full Duals; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$0 for Full Duals	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 for Full Duals	\$0 for Full Duals
Lab Copay	\$0 for Full Duals	\$0 for Full Duals
Rx Ded.; Rx Copays	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, OTC Catalog, Virtual Visits, NurseLine, Transportation	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, OTC Catalog, Virtual Visits, NurseLine, Transportation

33

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan



2020

SACRAMENTO NORTH VALLEY

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Focus (HMO)	AARP® Medicare Advantage SecureHorizons® (HMO)	AARP® Medicare Advantage SecureHorizons® (HMO)
Plan ID	H0543-146-000	H0543-089-000	H0543-086-000
Plan Highlights	Plan designed around Sutter Health for coordinated care and low out-of-pocket costs	Premium plan with low out-of-pocket costs	Premium plan serving Nevada county
Service Area	California: Placer, Sacramento, Yolo	California: Placer, Sacramento, Yolo	California: Nevada
Premium	\$32	\$92	\$101
Max Out-of-Pocket	\$4,900	\$4,900	\$6,700
PCP/Specialist Copay	\$0 / \$25; Referral Required	\$0 / \$15; Referral Required	\$10 / \$30; Referral Required
Inpatient Hospital	\$220 days 1-8	\$150 days 1-3	\$390 days 1-5
ASC/Outpatient Hosp	\$0 - \$195 / \$0 - \$195	\$0 - \$75 / \$0 - \$75	\$0 - \$370 / \$0 - \$370
Lab Copay	\$0	\$0	\$0
Rx Ded.; Rx Copays	\$195 Tiers 3-5; \$3/\$12/\$47/\$100/29%	\$225 Tiers 3-5; \$3/\$10/\$45/\$100/29%	\$350 Tiers 3-5; \$3/\$12/\$47/\$100/26%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available

2020

SACRAMENTO NORTH VALLEY

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare® Medicare Advantage Assure (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-185-000	H0543-184-000
Plan Highlights	Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal	Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: Placer, Sacramento, Yolo	California: Nevada
Premium	\$0 for Full Duals	\$0 for Full Duals
Max Out-of-Pocket	\$6,700	\$6,700
PCP/Specialist Copay	\$0 for Full Duals / \$0 for Full Duals; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$0 for Full Duals	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 for Full Duals	\$0 for Full Duals
Lab Copay	\$0 for Full Duals	\$0 for Full Duals
Rx Ded.; Rx Copays	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit , Routine Hearing Exam, Hearing Aids , Fitness Membership, OTC Catalog, Personal Emergency Response System, Virtual Visits , NurseLine, Transportation	Routine Eye Exam, Eyewear Credit , Routine Hearing Exam, Hearing Aids , OTC Catalog, Virtual Visits , NurseLine, Transportation

35 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.



2020

SAN FRANCISCO

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® (HMO)	UnitedHealthcare® Canopy Health Medicare Advantage (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-175-000	H0543-191-000	H0543-186-000
Plan Highlights	Mid premium plan for those shopping on value and low out-of-pocket costs	New! Low premium plan for those shopping on value and low out-of-pocket costs	Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: San Francisco	California: San Francisco	California: San Francisco
Premium	\$54	\$39	\$0 for Full Duals
Max Out-of-Pocket	\$4,000	\$3,500	\$6,700
PCP/Specialist Copay	\$5 / \$10; Referral Required	\$0 / \$10; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$345 days 1-5	\$250 days 1-5	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 - \$195 / \$0 - \$195	\$0 - \$195 / \$0 - \$195	\$0 for Full Duals
Lab Copay	\$0	\$0	\$0 for Full Duals
Rx Ded.; Rx Copays	\$250 Tiers 3-5; \$3/\$12/\$47/\$100/28%	\$100 Tiers 3-5; \$3/\$12/\$47/\$100/31%	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, NurseLine, Transportation, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation

36

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

SOUTH BAY AREA

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Focus (HMO)	AARP® Medicare Advantage SecureHorizons® (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-193-000	H0543-029-000	H0543-180-000
Plan Highlights	New! Low premium plan designed around Allcare for coordinated care and low out-of-pocket costs	Premium plan serving Santa Clara County	Full provider network plan designed for duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: Santa Clara	California: Santa Clara	California: Santa Clara
Premium	\$19	\$101	\$0 for Full Duals
Max Out-of-Pocket	\$4,000	\$5,900	\$6,700
PCP/Specialist Copay	\$0 / \$0; Referral Required	\$0 / \$15; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$175 days 1-5	\$390 days 1-5	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 - \$75 / \$0 - \$125	\$0 - \$325 / \$0 - \$325	\$0 for Full Duals
Lab Copay	\$0	\$0	\$0 for Full Duals
Rx Ded.; Rx Copays	\$150 Tiers 3-5; \$3/\$12/\$47/\$100/30%	\$355 Tiers 3-5; \$3/\$12/\$47/\$100/26%	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Transportation, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, OTC Catalog, Virtual Visits, NurseLine, Transportation

2020

SOUTH BAY AREA

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Focus (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 1 (HMO)	AARP® Medicare Advantage SecureHorizons® (HMO)
Plan ID	H0543-158-000	H0543-028-000	H0543-178-000
Plan Highlights	Plan designed around Sutter Health for coordinated care and low out-of-pocket costs	Full provider network plan with low out-of-pocket costs	Premium plan with low out-of-pocket costs
Service Area	California: San Mateo	California: San Mateo	California: Santa Cruz
Premium	\$59	\$107	\$79
Max Out-of-Pocket	\$4,900	\$4,900	\$6,700
PCP/Specialist Copay	\$0 / \$15; Referral Required	\$0 / \$10; Referral Required	\$10 / \$20; Referral Required
Inpatient Hospital	\$250 days 1-5	\$200 per admit	\$395 days 1-4
ASC/Outpatient Hosp	\$0 - \$250 / \$0 - \$250	\$0 / \$0	\$0 - \$370 / \$0 - \$370
Lab Copay	\$0	\$0	\$0
Rx Ded.; Rx Copays	\$360 Tiers 3-5; \$3/\$12/\$47/\$100/26%	\$360 Tiers 3-5; \$3/\$12/\$47/\$100/26%	\$350 Tiers 3-5; \$3/\$12/\$47/\$100/26%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Platinum Dental Rider Available

2020

CENTRAL SOUTH DUAL

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare Dual Complete® (HMO SNP)
Plan ID	H1375-002-000
Plan Highlights	New! \$200 per quarter for OTC products through mail order, \$2,500 allowance for hearing aids every two years, \$0 copay virtual doctor visits, \$500 dental allowance for covered services. New plan counties have an estimated 46,000 eligibles
Service Area	California: Fresno, Kings, Madera
Premium	\$0 for Full Duals
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation, Meal Benefit, Caregiver Support

2020

EAST BAY AREA DUAL

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare Dual Complete® (HMO SNP)
Plan ID	H1375-001-000
Plan Highlights	New! \$50 per quarter for OTC products through mail order and \$500 dental allowance for covered services. Alameda county has an estimated 51,000 eligibles
Service Area	California: Alameda
Premium	\$0 for Full Duals
Extra Benefits	Preventive & Comprehensive Dental, OTC Catalog

SOUTHERN CALIFORNIA

STATE LANDSCAPE

Southern California

Medicare Advantage 2020 Service Area



● Current Footprint

State Landscape

Eligibles (as of 2019-05-01)	3,782,807
YOY Eligible Growth ¹	4.9%
MA Penetration ¹	38.8%
YOY MA Enrollment Growth ¹	4.4%
UHC Market Share ¹	18.1%

¹ May 2019 CMS.gov MA Ind State/County Enrollment within UHC 2020 MA Ind Footprint.

41 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

SOUTHERN CALIFORNIA

MARKET LANDSCAPE

Kern County: Kern



Market Landscape	
Eligibles (as of 2019-05-01)	124,500
YOY Eligible Growth	5.7%
MA Non-SNP Penetration	24.9%
YOY MA Non-SNP Enrollment Growth	5.7%
UHC Non-SNP Market Share	12.0%

Los Angeles: Los Angeles



Market Landscape	
Eligibles (as of 2019-05-01)	1,546,870
YOY Eligible Growth	3.5%
MA Non-SNP Penetration	32.6%
YOY MA Non-SNP Enrollment Growth	5.4%
UHC Non-SNP Market Share	13.9%

Orange County: Orange



Market Landscape	
Eligibles (as of 2019-05-01)	529,413
YOY Eligible Growth	5.4%
MA Non-SNP Penetration	36.6%
YOY MA Non-SNP Enrollment Growth	5.2%
UHC Non-SNP Market Share	24.5%

Pacific Central Coast: San Luis Obispo, Santa Barbara, Ventura



Market Landscape	
Eligibles (as of 2019-05-01)	304,191
YOY Eligible Growth	5.5%
MA Non-SNP Penetration	16.8%
YOY MA Non-SNP Enrollment Growth	5.4%
UHC Non-SNP Market Share	25.2%

 Current Footprint

SOUTHERN CALIFORNIA

MARKET LANDSCAPE

Riverside/San Bernardino: Riverside, San Bernardino



Market Landscape	
Eligibles (as of 2019-05-01)	722,313
YOY Eligible Growth	7.0%
MA Non-SNP Penetration	39.2%
YOY MA Non-SNP Enrollment Growth	5.8%
UHC Non-SNP Market Share	25.2%

San Diego: San Diego



Market Landscape	
Eligibles (as of 2019-05-01)	555,520
YOY Eligible Growth	5.4%
MA Non-SNP Penetration	34.4%
YOY MA Non-SNP Enrollment Growth	5.2%
UHC Non-SNP Market Share	31.2%

43 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealthcare Group. 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 UnitedHealthcare Group.

 Current Footprint



2020

KERN COUNTY

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-019-000	H0543-173-000
Plan Highlights	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	Full provider network plan designed for Full Duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: Kern	California: Kern
Premium	\$0	\$0 for Full Duals
Max Out-of-Pocket	\$2,900	\$6,700
PCP/Specialist Copay	\$0 / \$0; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$0 per admit	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 / \$0	\$0 for Full Duals
Lab Copay	\$0	\$0 for Full Duals
Rx Ded.; Rx Copays	\$0; \$15/\$20/\$47/\$100/33%	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation

44 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.



2020

LOS ANGELES

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Focus (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 1 (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 2 (HMO)
Plan ID	H0543-168-000	H0543-001-000	H0543-151-000
Plan Highlights	Plan designed around specific provider groups for coordinated care and low out-of-pocket costs	\$0 premium plan with full provider network	Plan designed around HealthCare Partners for coordinated care and low out-of-pocket costs
Service Area	California: Los Angeles	California: Los Angeles	California: Los Angeles
Premium	\$0	\$0	\$0
Max Out-of-Pocket	\$1,000	\$3,400	\$1,000
PCP/Specialist Copay	\$0 / \$0; Referral Required	\$0 / \$0; Referral Required	\$0 / \$0; Referral Required
Inpatient Hospital	\$0 per admit	\$0 per admit	\$0 per admit
ASC/Outpatient Hosp	\$0 / \$0	\$0 / \$0	\$0 / \$0
Lab Copay	\$0	\$0	\$0
Rx Ded.; Rx Copays	\$0; \$2/\$12/\$47/\$100/33%	\$0; \$4/\$15/\$47/\$100/33%	\$0; \$2/\$12/\$47/\$100/33%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Acupuncture, Virtual Visits, NurseLine, Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation, Dental Rider Available

45 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.



2020

LOS ANGELES

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Premier (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-164-000	H0543-153-000
Plan Highlights	Full provider network plan with low out-of-pocket costs and rich ancillary benefits; also suitable for Low Income Subsidy (LIS) members	Full provider network plan designed for Full duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: Los Angeles	California: Los Angeles, Orange, Riverside, San Bernardino
Premium	\$26.80 (Varies By LIS Level)	\$0 for Full Duals
Max Out-of-Pocket	\$1,000	\$6,700
PCP/Specialist Copay	\$0 / \$0; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$0 per admit	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 / \$0	\$0 for Full Duals
Lab Copay	\$0	\$0 for Full Duals
Rx Ded.; Rx Copays	\$0; \$0/\$9/\$47/\$100/33% (Varies By LIS Level)	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit , Routine Hearing Exam, Hearing Aids , Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits , NurseLine, Transportation, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids , Fitness Membership, OTC Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits , NurseLine, Transportation

46 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.



2020

ORANGE COUNTY

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Focus (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 2 (HMO)
Plan ID	H0543-169-000	H0543-138-000
Plan Highlights	Plan designed around specific provider groups for coordinated care and lower out-of-pocket costs	\$0 premium plan with full provider network
Service Area	California: Orange	California: Orange
Premium	\$0	\$0
Max Out-of-Pocket	\$1,000	\$2,200
PCP/Specialist Copay	\$0 / \$0; Referral Required	\$0 / \$0; Referral Required
Inpatient Hospital	\$0 per admit	\$0 per admit
ASC/Outpatient Hosp	\$0 / \$0	\$0 / \$0
Lab Copay	\$0	\$0
Rx Ded.; Rx Copays	\$0; \$0/\$9/\$47/\$100/33%	\$0; \$0/\$14/\$47/\$100/33%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, NurseLine, Transportation, Dental Rider Available

47 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

2020

ORANGE COUNTY

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare® Medicare Advantage Assure (HMO)	AARP® Medicare Advantage SecureHorizons® Premier (HMO)
Plan ID	H0543-153-000	H0543-165-000
Plan Highlights	Full provider network plan designed for Full duals - this is what members pay if they have Medicare and full MediCal	Full provider network premium plan with low out-of-pocket costs and rich ancillary benefits, also suitable for Low Income Subsidy (LIS) members
Service Area	California: Los Angeles, Orange, Riverside, San Bernardino	California: Orange
Premium	\$0 for Full Duals	\$30.50 (Varies By LIS Level)
Max Out-of-Pocket	\$6,700	\$1,000
PCP/Specialist Copay	\$0 for Full Duals / \$0 for Full Duals; Referral Required	\$0 / \$0; Referral Required
Inpatient Hospital	\$0 for Full Duals	\$0 per admit
ASC/Outpatient Hosp	\$0 for Full Duals	\$0 / \$0
Lab Copay	\$0 for Full Duals	\$0
Rx Ded.; Rx Copays	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility	\$0; \$0/\$9/\$47/\$100/33% (Varies By LIS Level)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids , Fitness Membership, OTC Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits , NurseLine, Transportation	Routine Eye Exam, Eyewear Credit , Routine Hearing Exam, Hearing Aids , Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits , NurseLine, Transportation, Platinum Dental Rider Available

48 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

2020

PACIFIC CENTRAL COAST

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 1 (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 2 (HMO)
Plan ID	H0543-022-000	H0543-032-000	H0543-167-000
Plan Highlights	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	Premium Plan serving San Luis Obispo and Santa Barbara counties	Low premium plan for those shopping on value and low out-of-pocket costs
Service Area	California: Ventura	California: San Luis Obispo, Santa Barbara	California: San Luis Obispo
Premium	\$0	\$89	\$28
Max Out-of-Pocket	\$4,900	\$6,700	\$3,400
PCP/Specialist Copay	\$0 / \$10; Referral Required	\$10 / \$20; Referral Required	\$10 / \$15; Referral Required
Inpatient Hospital	\$335 days 1-5	\$375 days 1-5	\$295 days 1-6
ASC/Outpatient Hosp	\$0 - \$330 / \$0 - \$330	\$0 - \$295 / \$0 - \$335	\$0 - \$195 / \$0 - \$195
Lab Copay	\$0	\$5	\$0
Rx Ded.; Rx Copays	\$295 Tiers 3-5; \$3/\$12/\$47/\$100/27%	\$375 Tiers 3-5; \$4/\$12/\$47/\$100/26%	\$375 Tiers 3-5; \$3/\$12/\$47/\$100/26%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, NurseLine, Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, NurseLine, Platinum Dental Rider Available

2020

RIVERSIDE/SAN BERNARDINO

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Focus (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 2 (HMO)
Plan ID	H0543-170-000	H0543-144-000
Plan Highlights	Plan designed around specific provider groups for coordinated care and lower out-of-pocket costs	\$0 premium plan with full provider network
Service Area	California: Riverside, San Bernardino	California: Riverside, San Bernardino
Premium	\$0	\$0
Max Out-of-Pocket	\$1,000	\$2,900
PCP/Specialist Copay	\$0 / \$0; Referral Required	\$0 / \$0; Referral Required
Inpatient Hospital	\$0 per admit	\$0 per admit
ASC/Outpatient Hosp	\$0 / \$0	\$0 / \$0
Lab Copay	\$0	\$0
Rx Ded.; Rx Copays	\$0; \$0/\$9/\$47/\$100/33%	\$0; \$0/\$14/\$47/\$100/33%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, NurseLine, Dental Rider Available

50 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

2020

RIVERSIDE/SAN BERNARDINO

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare® Medicare Advantage Assure (HMO)	AARP® Medicare Advantage SecureHorizons® Premier (HMO)
Plan ID	H0543-153-000	H0543-166-000
Plan Highlights	Full provider network plan designed for Full duals - this is what members pay if they have Medicare and full MediCal	Full provider network premium plan with low out-of-pocket costs and rich ancillary benefits, also suitable for Low Income Subsidy (LIS) members
Service Area	California: Los Angeles, Orange, Riverside, San Bernardino	California: Riverside, San Bernardino
Premium	\$0 for Full Duals	\$34.20 (Varies By LIS Level)
Max Out-of-Pocket	\$6,700	\$1,000
PCP/Specialist Copay	\$0 for Full Duals / \$0 for Full Duals; Referral Required	\$0 / \$0; Referral Required
Inpatient Hospital	\$0 for Full Duals	\$0 per admit
ASC/Outpatient Hosp	\$0 for Full Duals	\$0 / \$0
Lab Copay	\$0 for Full Duals	\$0
Rx Ded.; Rx Copays	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility	\$0; \$0/\$9/\$47/\$100/33% (Varies By LIS Level)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids , Fitness Membership, OTC Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits , NurseLine, Transportation	Routine Eye Exam, Eyewear Credit , Routine Hearing Exam, Hearing Aids , Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits , NurseLine, Transportation, Platinum Dental Rider Available


51 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.



2020

SAN DIEGO

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Walgreens (HMO)	Sharp® SecureHorizons® Plan by UnitedHealthcare® (HMO)	UnitedHealthcare® Medicare Advantage Assure (HMO)
Plan ID	H0543-204-000 	H0543-145-000	H0543-172-000
Plan Highlights	New! HMO offers Part B premium rebate, \$5 PCP with popular ancillary benefits. Plan designed around Sharp HealthCare for coordinated care and low out-of-pocket costs. \$0 Tier 1 Rx copays at Walgreens retail and mail order	Plan designed around Sharp HealthCare for coordinated care and low out-of-pocket costs	Plan designed around Sharp HealthCare for Full Duals - this is what members pay if they have Medicare and full MediCal
Service Area	California: San Diego	California: San Diego	California: San Diego
Premium	\$0; Part B Rebate: \$25	\$0	\$0 for Full Duals
Max Out-of-Pocket	\$6,700	\$3,400	\$6,700
PCP/Specialist Copay	\$5 / \$50; Referral Required	\$5 / \$35; Referral Required	\$0 for Full Duals / \$0 for Full Duals; Referral Required
Inpatient Hospital	\$390 days 1-5	\$260 days 1-7	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 - \$375 / \$0 - \$375	\$0 - \$250 / \$0 - \$250	\$0 for Full Duals
Lab Copay	\$5	\$5	\$0 for Full Duals
Rx Ded.; Rx Copays	\$250 Tiers 3-5; \$0/\$5/\$47/\$100/28% (Preferred)	\$0; \$4/\$10/\$47/\$100/33%	\$0 for Full Duals; \$1.30 for Generics and \$3.90 for Brands *Copay amounts vary by LIS/Medi-Cal eligibility
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Personal Emergency Response System, Virtual Visits, NurseLine, Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation

52

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

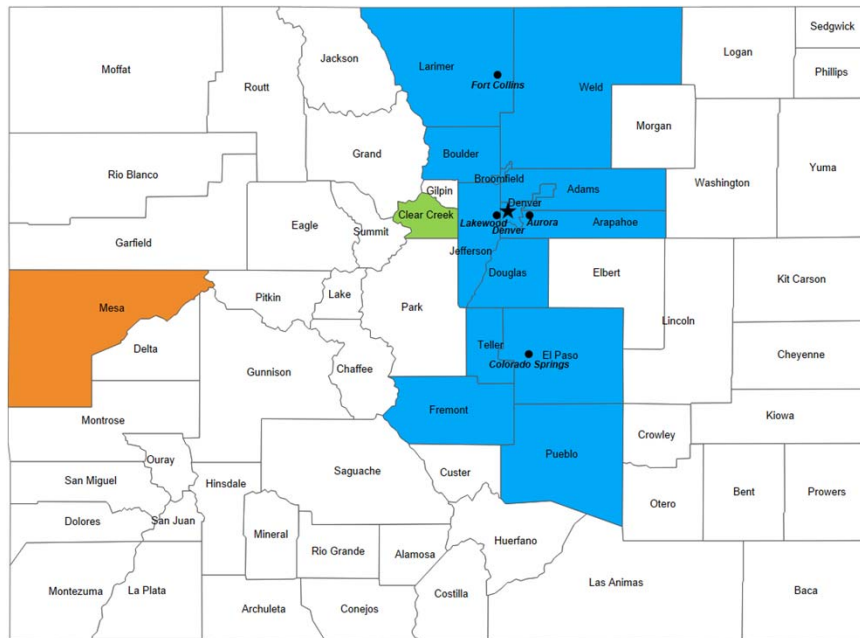
SAN DIEGO

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Plan 4 (HMO)	AARP® Medicare Advantage SecureHorizons® Value (HMO)	AARP® Medicare Advantage SecureHorizons® Premier (HMO)
Plan ID	H0543-152-000	H0543-013-000	H0543-060-000
Plan Highlights	\$0 premium plan with full provider network	Full provider network plan for those shopping on value and low out-of-pocket costs	Full provider network plan with low out-of-pocket costs and rich ancillaries
Service Area	California: San Diego	California: San Diego	California: San Diego
Premium	\$0	\$25	\$69
Max Out-of-Pocket	\$3,400	\$5,300	\$4,300
PCP/Specialist Copay	\$20 / \$40; Referral Required	\$20 / \$40; Referral Required	\$15 / \$35; Referral Required
Inpatient Hospital	\$295 days 1-6	\$225 days 1-8	\$175 days 1-8
ASC/Outpatient Hosp	\$0 - \$295 / \$0 - \$295	\$0 - \$225 / \$0 - \$225	\$0 - \$175 / \$0 - \$175
Lab Copay	\$5	\$10	\$5
Rx Ded.; Rx Copays	\$50 Tiers 3-5; \$5/\$11/\$47/\$100/32%	\$0; \$4/\$10/\$47/\$100/33%	\$0; \$4/\$10/\$47/\$100/33%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, OTC Catalog, Virtual Visits, NurseLine, Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Virtual Visits, NurseLine, Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, Acupuncture/Chiropractic, Virtual Visits, NurseLine, Platinum Dental Rider Available

Colorado

Medicare Advantage 2020 Service Area



- Current Footprint
- Footprint Expansion
- Dual Only Expansion

State Landscape

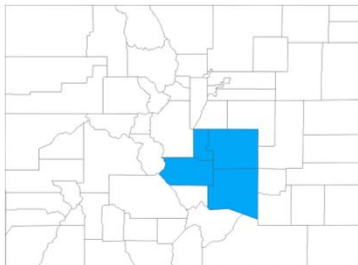
Eligibles (as of 2019-05-01)	840,820
<i>Estimated DSNP Eligibles²</i>	102,509
YOY Eligible Growth ¹	7.7%
MA Penetration ¹	33.1%
YOY MA Enrollment Growth ¹	5.5%
UHC Market Share ¹	49.6%

¹ May 2019 CMS.gov MA Ind State/County Enrollment within UHC 2020 MA Ind Footprint.
² UHC Dual SNP service area only; Estimated DSNP Eligibles are projected based on June 2018 CMS.gov data (includes approx. 13K partial duals who may or may not be eligible).

COLORADO

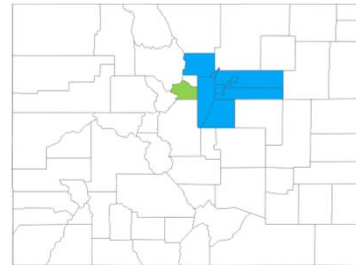
MARKET LANDSCAPE

Colorado Springs: El Paso, Fremont, Pueblo, Teller



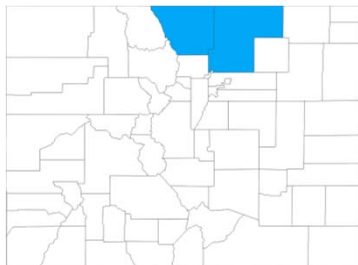
Market Landscape	
Eligibles (as of 2019-05-01)	177,589
YOY Eligible Growth	7.2%
MA Non-SNP Penetration	26.7%
YOY MA Non-SNP Enrollment Growth	7.0%
UHC Non-SNP Market Share	49.5%

Denver Metro: Adams, Arapahoe, Boulder, Clear Creek, Denver, Douglas, Jefferson, Broomfield



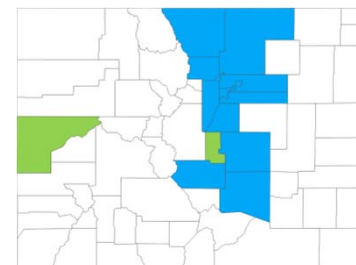
Market Landscape	
Eligibles (as of 2019-05-01)	513,460
YOY Eligible Growth	7.7%
MA Non-SNP Penetration	33.8%
YOY MA Non-SNP Enrollment Growth	4.4%
UHC Non-SNP Market Share	47.1%

Northern Colorado: Larimer, Weld



Market Landscape	
Eligibles (as of 2019-05-01)	113,766
YOY Eligible Growth	8.4%
MA Non-SNP Penetration	26.8%
YOY MA Non-SNP Enrollment Growth	6.8%
UHC Non-SNP Market Share	45.6%

Colorado Dual: Adams, Arapahoe, Boulder, Denver, Douglas, El Paso, Fremont, Jefferson, Larimer, Mesa, Pueblo, Teller, Weld, Broomfield



Market Landscape	
Est. DSNP Eligibles	102,509
DSNP Enrollees	14,689
DSNP Penetration (All Plans)	14.3%
Total UHC DSNP Enrollees	9,752
UHC DSNP Market Share	66.4%

55 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

- Current Footprint
- Footprint Expansion



2020

COLORADO SPRINGS





PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Plan 2 (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 1 (HMO)	AARP® Medicare Advantage SecureHorizons® Essential (HMO)
Plan ID	H0609-036-002	H0609-034-002	H0609-035-002
Plan Highlights	\$0 premium plan with rich ancillary benefits	Premium plan with low out-of-pocket costs and rich ancillaries	Plan designed for those who want affordable coverage beyond Original Medicare, but don't need prescription drug coverage - works well with VA coverage
Service Area	Colorado: El Paso, Fremont, Pueblo, Teller	Colorado: El Paso, Fremont, Pueblo, Teller	Colorado: El Paso, Fremont, Pueblo, Teller
Premium	\$0	\$39	\$0; Part B Rebate: \$30
Max Out-of-Pocket	\$4,500	\$3,200	\$4,700
PCP/Specialist Copay	\$0 / \$40; Referral Required	\$0 / \$30; Referral Required	\$0 / \$40; Referral Required
Inpatient Hospital	\$275 days 1-6	\$225 days 1-6	\$275 days 1-6
ASC/Outpatient Hosp	\$0 - \$240 / \$0 - \$240	\$0 - \$175 / \$0 - \$175	\$0 - \$240 / \$0 - \$240
Lab Copay	\$0	\$0	\$0
Rx Ded.; Rx Copays	\$75 Tiers 4-5; \$2/\$10/\$47/\$95/31%	\$75 Tiers 4-5; \$2/\$10/\$47/\$95/31%	Not Covered
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

2020

COLORADO SPRINGS

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Walgreens Plan 1 (PPO)	AARP® Medicare Advantage Walgreens Plan 2 (PPO)
Plan ID	H2577-001-002  	H2577-003-002  
Plan Highlights	New! LPPO offers \$0 premium, \$0 PCP with popular ancillaries. \$0 Tier 1 Rx copays at Walgreens. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network	New! LPPO offers Part B premium rebate, \$0 PCP with popular ancillaries. \$0 Tier 1 Rx copays at Walgreens. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	Colorado: El Paso, Fremont, Pueblo, Teller	Colorado: El Paso, Fremont, Pueblo, Teller
Premium	\$0	\$0; Part B Rebate: \$40
Max Out-of-Pocket	\$5,500	\$6,700
PCP/Specialist Copay	\$0 / \$45; No Referral Required	\$25 / \$50; No Referral Required
Inpatient Hospital	\$295 days 1-6	\$490 days 1-4
ASC/Outpatient Hosp	\$0 - \$275 / \$0 - \$275	\$0 - \$470 / \$0 - \$470
Lab Copay	\$10	\$10
Rx Ded.; Rx Copays	\$195 Tiers 3-5; \$0/\$5/\$47/\$100/29% (Preferred)	\$435 Tiers 3-5; \$0/\$5/\$47/\$100/25% (Preferred)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Fitness Membership, Preventive Dental w/ Out-of-Network Access, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Fitness Membership, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

57

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

DENVER METRO



PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Plan 2 (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 1 (HMO)	AARP® Medicare Advantage SecureHorizons® Essential (HMO)
Plan ID	H0609-012-000	H0609-007-000	H0609-018-000
Plan Highlights	\$0 premium plan with rich ancillary benefits	Premium plan with low out-of-pocket costs and rich ancillaries	Plan designed for those who want affordable coverage beyond Original Medicare, but don't need prescription drug coverage - works well with VA coverage
Service Area	Colorado: Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, Jefferson	Colorado: Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, Jefferson	Colorado: Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, Jefferson
Premium	\$0	\$49	\$0; Part B Rebate: \$50
Max Out-of-Pocket	\$3,900	\$3,000	\$3,900
PCP/Specialist Copay	\$0 / \$35; Referral Required	\$0 / \$25; Referral Required	\$0 / \$35; Referral Required
Inpatient Hospital	\$225 days 1-6	\$185 days 1-5	\$225 days 1-6
ASC/Outpatient Hosp	\$0 - \$225 / \$0 - \$225	\$0 - \$175 / \$0 - \$175	\$0 - \$225 / \$0 - \$225
Lab Copay	\$0	\$0	\$0
Rx Ded.; Rx Copays	\$75 Tiers 4-5; \$2/\$10/\$47/\$95/31%	\$75 Tiers 4-5; \$2/\$10/\$47/\$95/31%	Not Covered
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, Virtual Visits, Virtual Mental Health Visits, NurseLine	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

2020

DENVER METRO

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Walgreens (PPO)
Plan ID	H2577-002-000  
Plan Highlights	New! LPPO offers \$0 premium, \$0 PCP with popular ancillaries. \$0 Tier 1 Rx copays at Walgreens. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	Colorado: Adams, Arapahoe, Boulder, Broomfield, Clear Creek, Denver, Douglas, Jefferson
Premium	\$0
Max Out-of-Pocket	\$6,700
PCP/Specialist Copay	\$0 / \$50; No Referral Required
Inpatient Hospital	\$325 days 1-5
ASC/Outpatient Hosp	\$0 - \$325 / \$0 - \$325
Lab Copay	\$10
Rx Ded.; Rx Copays	\$195 Tiers 3-5; \$0/\$5/\$47/\$100/29% (Preferred)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Fitness Membership, Preventive Dental w/ Out-of-Network Access, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

59

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

NORTHERN COLORADO





PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage SecureHorizons® Plan 2 (HMO)	AARP® Medicare Advantage SecureHorizons® Plan 1 (HMO)	AARP® Medicare Advantage SecureHorizons® Essential (HMO)
Plan ID	H0609-036-001	H0609-034-001	H0609-035-001
Plan Highlights	\$0 premium plan with rich ancillary benefits	Premium plan with low out-of-pocket costs and rich ancillaries	Plan designed for those who want affordable coverage beyond Original Medicare, but don't need prescription drug coverage - works well with VA coverage
Service Area	Colorado: Larimer, Weld	Colorado: Larimer, Weld	Colorado: Larimer, Weld
Premium	\$0	\$39	\$0; Part B Rebate: \$30
Max Out-of-Pocket	\$4,700	\$3,700	\$4,700
PCP/Specialist Copay	\$0 / \$40; Referral Required	\$0 / \$30; Referral Required	\$0 / \$40; Referral Required
Inpatient Hospital	\$275 days 1-6	\$225 days 1-6	\$275 days 1-6
ASC/Outpatient Hosp	\$0 - \$240 / \$0 - \$240	\$0 - \$175 / \$0 - \$175	\$0 - \$240 / \$0 - \$240
Lab Copay	\$0	\$0	\$0
Rx Ded.; Rx Copays	\$75 Tiers 4-5; \$2/\$10/\$47/\$95/31%	\$75 Tiers 4-5; \$2/\$10/\$47/\$95/31%	Not Covered
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

2020

NORTHERN COLORADO

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Walgreens Plan 1 (PPO)	AARP® Medicare Advantage Walgreens Plan 2 (PPO)
Plan ID	H2577-001-001  	H2577-003-001  
Plan Highlights	New! Open access plan with low out-of-pocket costs and additional ancillaries. \$0 Tier 1 Rx copays at Walgreens. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network	New! LPPO offers Part B premium rebate, \$0 PCP with popular ancillaries. \$0 Tier 1 Rx copays at Walgreens. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	Colorado: Larimer, Weld	Colorado: Larimer, Weld
Premium	\$0	\$0; Part B Rebate: \$40
Max Out-of-Pocket	\$6,700	\$6,700
PCP/Specialist Copay	\$0 / \$50; No Referral Required	\$25 / \$50; No Referral Required
Inpatient Hospital	\$325 days 1-5	\$490 days 1-4
ASC/Outpatient Hosp	\$0 - \$325 / \$0 - \$325	\$0 - \$470 / \$0 - \$470
Lab Copay	\$10	\$10
Rx Ded.; Rx Copays	\$195 Tiers 3-5; \$0/\$5/\$47/\$100/29% (Preferred)	\$435 Tiers 3-5; \$0/\$5/\$47/\$100/25% (Preferred)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Fitness Membership, Preventive Dental w/ Out-of-Network Access, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Fitness Membership, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

61

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

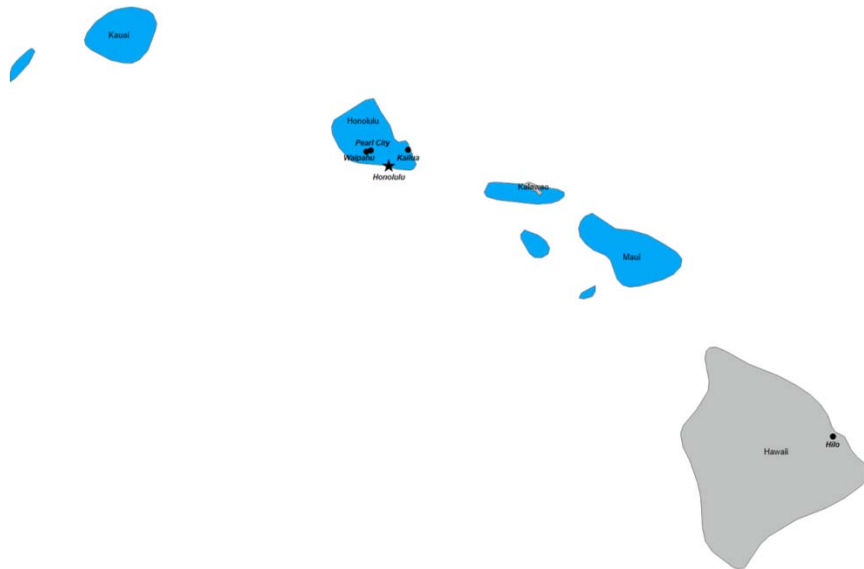
COLORADO DSNP

PRODUCT BENEFIT GRID

Plan Name	Rocky Mountain Health Plans DualCare Plus (HMO SNP)	UnitedHealthcare Dual Complete® (HMO SNP)
Plan ID	H2582-002-000	H0624-001-000
Plan Highlights	New! \$30 per quarter for OTC products through mail order, \$500 dental allowance for covered services, \$2,000 allowance for hearing aids every two years, 24/7 personal emergency response system	\$170 per quarter for OTC products with debit card or mail order, \$2,000 dental allowance for covered services, Up to 20 visits per year for Chiropractic services
Service Area	Colorado: Mesa	Colorado: Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Fremont, Jefferson, Larimer, Pueblo, Teller, Weld
Premium	\$0 for Full Duals	\$0 for Full Duals
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Personal Emergency Response System	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Debit Card & Catalog, Chiropractic, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation, Caregiver Support

Hawaii

Medicare Advantage 2020 Service Area



- Current Footprint
- Dual Only Footprint

State Landscape	
Eligibles (as of 2019-05-01)	283,946
<i>Estimated DSNP Eligibles²</i>	41,597
YOY Eligible Growth ¹	4.7%
MA Penetration ¹	33.9%
YOY MA Enrollment Growth ¹	4.5%
UHC Market Share ¹	31.7%

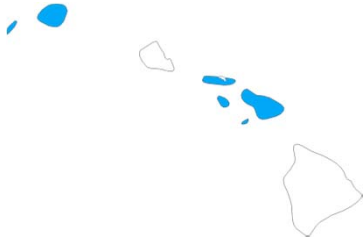
¹ May 2019 CMS.gov MA Ind State/County Enrollment within UHC 2020 MA Ind Footprint.

² UHC Dual SNP service area only; Estimated DSNP Eligibles are projected based on June 2018 CMS.gov data (includes approx. 5K partial duals who may or may not be eligible).

HAWAII

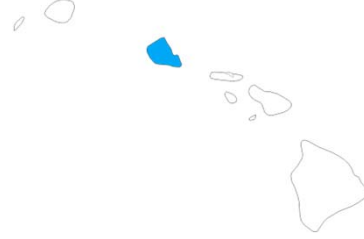
MARKET LANDSCAPE

Hawaii: Kauai, Maui



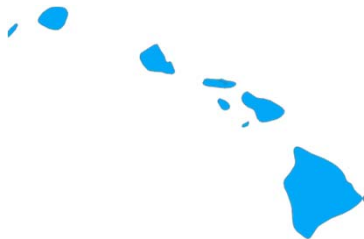
Market Landscape	
Eligibles (as of 2019-05-01)	48,234
YOY Eligible Growth	6.3%
MA Non-SNP Penetration	29.7%
YOY MA Non-SNP Enrollment Growth	6.8%
UHC Non-SNP Market Share	2.1%

Honolulu: Honolulu




Market Landscape	
Eligibles (as of 2019-05-01)	188,604
YOY Eligible Growth	3.8%
MA Non-SNP Penetration	26.9%
YOY MA Non-SNP Enrollment Growth	4.7%
UHC Non-SNP Market Share	28.2%

Hawaii Dual: Hawaii, Honolulu, Kalawao, Kauai, Maui



Market Landscape	
Est. DSNP Eligibles	41,597
DSNP Enrollees	22,902
DSNP Penetration (All Plans)	55.1%
Total UHC DSNP Enrollees	15,932
UHC DSNP Market Share	69.6%

 Current Footprint

2020

HAWAII

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Choice (PPO)
Plan ID	H2228-068-000
Plan Highlights	Low premium plan for those shopping on value and low out-of-pocket costs
Service Area	Hawaii: Kauai, Maui
Premium	\$28
Max Out-of-Pocket	\$5,700
PCP/Specialist Copay	\$0 / \$40; No Referral Required
Inpatient Hospital	\$340 days 1-4
ASC/Outpatient Hosp	\$0 - \$335 / \$0 - \$335
Lab Copay	\$25
Rx Ded.; Rx Copays	\$250 Tiers 3-5; \$3/\$12/\$45/\$95/28%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental w/ Out-of-Network Access, Acupuncture/Chiropractic, Virtual Visits, NurseLine, Platinum Dental Rider Available

65 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

2020

HONOLULU

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Choice Plan 1 (PPO)	AARP® Medicare Advantage Choice Essential (PPO)	AARP® Medicare Advantage Choice Plan 2 (PPO)
Plan ID	H2228-024-000	H2228-025-000	H2228-067-000
Plan Highlights	\$0 premium plan with rich ancillary benefits	Plan designed for those who want affordable coverage beyond Original Medicare, but don't need prescription drug coverage - works well with VA benefits	Low premium plan for those shopping on value and low out-of-pocket costs
Service Area	Hawaii: Honolulu	Hawaii: Honolulu	Hawaii: Honolulu
Premium	\$0	\$0	\$55
Max Out-of-Pocket	\$6,700	\$6,700	\$5,100
PCP/Specialist Copay	\$10 / \$50; No Referral Required	\$10 / \$50; No Referral Required	\$0 / \$30; No Referral Required
Inpatient Hospital	\$450 days 1-4	\$450 days 1-4	\$300 days 1-5
ASC/Outpatient Hosp	\$0 - \$425 / \$0 - \$425	\$0 - \$425 / \$0 - \$425	\$0 - \$300 / \$0 - \$300
Lab Copay	\$25	\$25	\$25
Rx Ded.; Rx Copays	\$300 Tiers 3-5; \$3/\$12/\$45/\$95/27%	Not Covered	\$150 Tiers 3-5; \$3/\$12/\$45/\$95/30%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Acupuncture/Chiropractic, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Acupuncture/Chiropractic, Virtual Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental w/ Out-of-Network Access, Acupuncture/Chiropractic, Virtual Visits, NurseLine, Platinum Dental Rider Available

2020

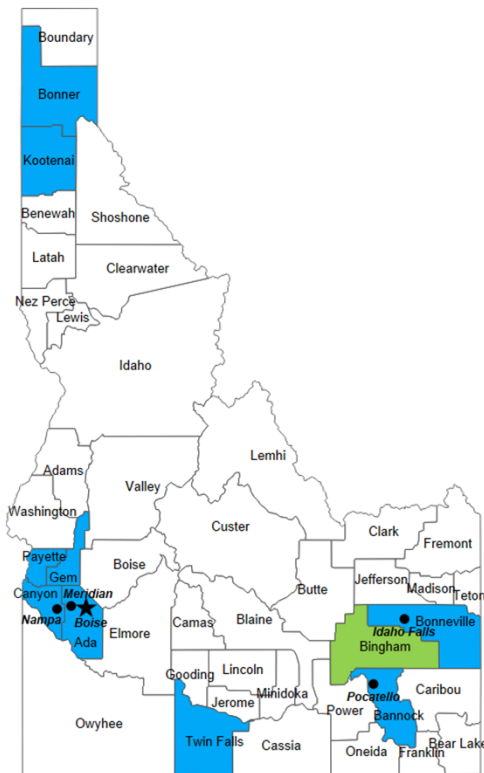
HAWAII DUAL

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare Dual Complete® RP (Regional PPO SNP)	UnitedHealthcare Dual Complete® (PPO SNP)
Plan ID	R3175-003-000	H2228-043-000
Plan Highlights	\$50 per quarter for OTC through mail order, \$2,000 dental allowance for covered services	\$275 per quarter for OTC products through mail order, \$2,500 dental allowance for covered services, \$0 copay virtual doctor visits
Service Area	Statewide	Hawaii: Honolulu
Premium	\$0 for Full Duals	\$0 for Full Duals
Extra Benefits	Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access, OTC Catalog , Acupuncture/Chiropractic, Virtual Visits , NurseLine	Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits , Transportation

Idaho

Medicare Advantage 2020 Service Area



● Current Footprint ● Footprint Expansion

State Landscape	
Eligibles (as of 2019-05-01)	250,761
YOY Eligible Growth ¹	8.1%
MA Penetration ¹	36.3%
YOY MA Enrollment Growth ¹	9.7%
UHC Market Share ¹	29.8%

¹ May 2019 CMS.gov MA Ind State/County Enrollment within UHC 2020 MA Ind Footprint.

IDAHO

MARKET LANDSCAPE

Southern Idaho: Ada, Canyon, Gem, Payette



Market Landscape	
Eligibles (as of 2019-05-01)	135,519
YOY Eligible Growth	8.5%
MA Non-SNP Penetration	42.8%
YOY MA Non-SNP Enrollment Growth	7.2%
UHC Non-SNP Market Share	42.6%

Northern Idaho: Bonner, Kootenai



Market Landscape	
Eligibles (as of 2019-05-01)	53,933
YOY Eligible Growth	8.3%
MA Non-SNP Penetration	25.9%
YOY MA Non-SNP Enrollment Growth	7.8%
UHC Non-SNP Market Share	4.6%

Eastern Idaho: Bannock, Bingham, Bonneville, Twin Falls






Market Landscape	
Eligibles (as of 2019-05-01)	61,309
YOY Eligible Growth	6.9%
MA Non-SNP Penetration	22.8%
YOY MA Non-SNP Enrollment Growth	10.1%
UHC Non-SNP Market Share	12.2%

2020

SOUTHERN IDAHO

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Choice Plan 1 (PPO)	AARP® Medicare Advantage Focus (HMO)	AARP® Medicare Advantage Walgreens (PPO)
Plan ID	H2228-031-000 	H4604-015-000	H2228-079-000  
Plan Highlights	Low premium plan with broader network access, includes preventive and comprehensive dental. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network	New! Plan designed around St. Luke's Health Partners for coordinated care and low out-of-pocket costs	New! LPPO offers \$0 premium, \$0 PCP, \$0 Tier 1 Rx copays at Walgreens. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	Idaho: Ada, Canyon	Idaho: Ada, Canyon, Gem	Idaho: Ada, Canyon
Premium	\$19	\$0	\$0
Max Out-of-Pocket	\$4,700	\$4,900	\$6,700
PCP/Specialist Copay	\$0 / \$40; No Referral Required	\$0 / \$35; Referral Required	\$0 / \$50; No Referral Required
Inpatient Hospital	\$325 days 1-4	\$325 days 1-4	\$325 days 1-6
ASC/Outpatient Hosp	\$0 - \$325 / \$0 - \$325	\$0 - \$200 / \$0 - \$250	\$0 - \$325 / \$0 - \$325
Lab Copay	\$0	\$0	\$0
Rx Ded.; Rx Copays	\$190 Tiers 3-5; \$3/\$10/\$45/\$95/29%	\$100 Tiers 3-5; \$2/\$7/\$45/\$95/31%	\$200 Tiers 3-5; \$0/\$5/\$47/\$100/29% (Preferred)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Transportation	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Transportation	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Fitness Membership, Preventive Dental w/ Out-of-Network Access, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

70


Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

SOUTHERN IDAHO

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage (HMO)	AARP® Medicare Advantage Choice Plan 2 (PPO)
Plan ID	H4604-012-000	H2228-032-000 
Plan Highlights	Low premium plan for those shopping on value and low out-of-pocket costs	Premium plan with low out-of-pocket costs and rich ancillaries. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	Idaho: Ada, Canyon, Gem, Payette	Idaho: Ada, Canyon
Premium	\$16	\$76
Max Out-of-Pocket	\$4,900	\$3,900
PCP/Specialist Copay	\$0 / \$40; No Referral Required	\$0 / \$35; No Referral Required
Inpatient Hospital	\$350 days 1-4	\$295 days 1-4
ASC/Outpatient Hosp	\$0 - \$250 / \$0 - \$250	\$0 - \$295 / \$0 - \$295
Lab Copay	\$0	\$0
Rx Ded.; Rx Copays	\$200 Tiers 3-5; \$3/\$10/\$45/\$95/29%	\$175 Tiers 3-5; \$3/\$10/\$45/\$95/29%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Transportation	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Transportation

71 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

2020

SOUTHERN IDAHO

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare® Medicare Advantage Assure (PPO)
Plan ID	H0271-002-000
Plan Highlights	Full provider network plan designed for full duals - this is what members pay if they have Medicare and full Medicaid
Service Area	Idaho: Ada, Canyon, Gem, Payette
Premium	\$0 for Full Duals
Max Out-of-Pocket	\$6,700
PCP/Specialist Copay	\$0 for Full Duals / \$0 for Full Duals; No Referral Required
Inpatient Hospital	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 for Full Duals
Lab Copay	\$0 for Full Duals
Rx Ded.; Rx Copays	Varies by LIS Level
Extra Benefits	Routine Eye Exam, Eyewear Credit , Routine Hearing Exam, Hearing Aids , Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access , OTC Catalog, Virtual Visits , NurseLine, Transportation

72 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

2020

NORTHERN IDAHO

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage (HMO)
Plan ID	H4604-013-000
Plan Highlights	Premium plan with low out-of-pocket costs and rich ancillaries
Service Area	Idaho: Bonner, Kootenai
Premium	\$66
Max Out-of-Pocket	\$5,500
PCP/Specialist Copay	\$0 / \$40; No Referral Required
Inpatient Hospital	\$295 days 1-6
ASC/Outpatient Hosp	\$0 - \$275 / \$0 - \$275
Lab Copay	\$0
Rx Ded.; Rx Copays	\$200 Tiers 3-5; \$3/\$10/\$45/\$95/29%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Transportation, Platinum Dental Rider Available

2020

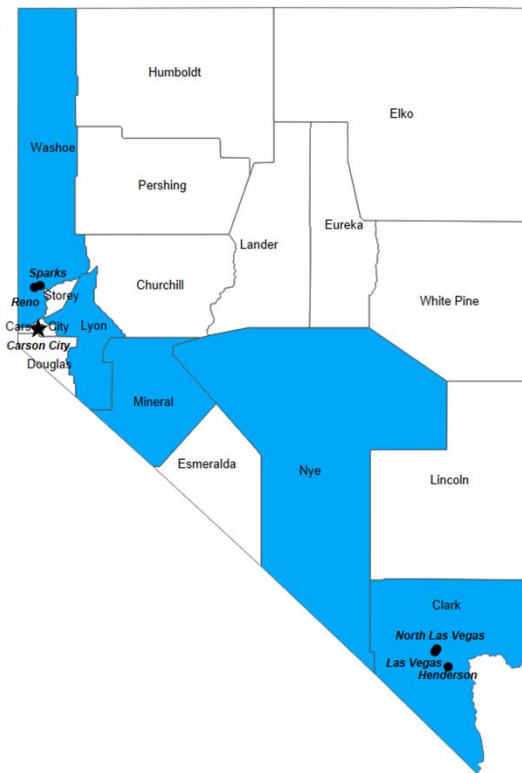
EASTERN IDAHO

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage (HMO)
Plan ID	H4604-014-000
Plan Highlights	Premium plan with low out-of-pocket costs and rich ancillaries
Service Area	Idaho: Bannock, Bingham, Bonneville, Twin Falls
Premium	\$76
Max Out-of-Pocket	\$5,500
PCP/Specialist Copay	\$0 / \$40; No Referral Required
Inpatient Hospital	\$295 days 1-6
ASC/Outpatient Hosp	\$0 - \$275 / \$0 - \$275
Lab Copay	\$0
Rx Ded.; Rx Copays	\$200 Tiers 3-5; \$3/\$10/\$45/\$95/29%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Transportation, Platinum Dental Rider Available

Nevada

Medicare Advantage 2020 Service Area



● Current Footprint

State Landscape	
Eligibles (as of 2019-05-01)	509,604
YOY Eligible Growth ¹	7.5%
MA Penetration ¹	35.0%
YOY MA Enrollment Growth ¹	7.4%
UHC Market Share ¹	41.1%

¹ May 2019 CMS.gov MA Ind State/County Enrollment within UHC 2020 MA Ind Footprint.

75 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

2020

NEVADA

MARKET LANDSCAPE

Las Vegas: Clark, Nye



Market Landscape	
Eligibles (as of 2019-05-01)	398,338
YOY Eligible Growth	7.6%
MA Non-SNP Penetration	34.6%
YOY MA Non-SNP Enrollment Growth	8.4%
UHC Non-SNP Market Share	51.3%

Reno: Lyon, Mineral, Washoe





Market Landscape	
Eligibles (as of 2019-05-01)	111,266
YOY Eligible Growth	7.3%
MA Non-SNP Penetration	25.7%
YOY MA Non-SNP Enrollment Growth	5.6%
UHC Non-SNP Market Share	9.5%

2020

LAS VEGAS

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Walgreens Plan 1 (HMO)	AARP® Medicare Advantage Premier (HMO)	AARP® Medicare Advantage Walgreens Plan 2 (HMO)
Plan ID	H0609-038-000 	H0609-031-000	H0609-039-000 
Plan Highlights	New! \$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare. \$1,000 Max. Out-of-Pocket, \$1,000 comprehensive dental with no cost sharing and \$0 Tier 1 Rx copays at Walgreens	\$0 premium plan for Full Low Income Subsidy (LIS) members with rich ancillary benefits with low out-of-pocket costs	New! HMO offers Part B premium rebate, \$0 PCP. \$0 Tier 1 Rx copays at Walgreens
Service Area	Nevada: Clark, Nye	Nevada: Clark, Nye	Nevada: Clark, Nye
Premium	\$0	\$24.90 (Varies By LIS Level)	\$0; Part B Rebate: \$50
Max Out-of-Pocket	\$1,000	\$1,000	\$6,700
PCP/Specialist Copay	\$0 / \$0; Referral Required	\$0 / \$0; Referral Required	\$0 / \$45; Referral Required
Inpatient Hospital	\$0 per admit	\$0 per admit	\$350 days 1-5
ASC/Outpatient Hosp	\$0 / \$0	\$0 / \$0	\$0 - \$300 / \$0 - \$300
Lab Copay	\$0	\$0	\$0
Rx Ded.; Rx Copays	\$0; \$0/\$3/\$47/\$100/33% (Preferred)	\$0; \$2/\$8/\$47/\$100/33% (Varies By LIS Level)	\$195 Tiers 3-5; \$0/\$5/\$47/\$100/29% (Preferred)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Personal Emergency Response System, Virtual Visits, Nursing Hotline, Transportation	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership & Fitbit, Preventive & Comprehensive Dental, OTC Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits, Nursing Hotline, Transportation	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, Virtual Visits, Nursing Hotline, Platinum Dental Rider Available

2020

LAS VEGAS

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage (HMO)	UnitedHealthcare® Medicare Advantage Focus (HMO)	UnitedHealthcare® Medicare Advantage Assist (HMO SNP)
Plan ID	H0609-028-000	H0609-032-000	H0609-037-000
Plan Highlights	\$0 premium plan with rich ancillary benefits	Plan designed around OptumCare for coordinated care and low out-of-pocket costs. \$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	New! Plan designed for those with Cardiovascular Disorders, Chronic Heart Failure, or Diabetes
Service Area	Nevada: Clark, Nye	Nevada: Clark, Nye	Nevada: Clark, Nye
Premium	\$0	\$0	\$0
Max Out-of-Pocket	\$2,500	\$2,500	\$1,000
PCP/Specialist Copay	\$0 / \$0; Referral Required	\$0 / \$0; Referral Required	\$0 / \$0; Referral Required
Inpatient Hospital	\$0 per admit	\$0 per admit	\$0 per admit
ASC/Outpatient Hosp	\$0 / \$0	\$0 / \$0	\$0 / \$0
Lab Copay	\$0	\$0	\$0
Rx Ded.; Rx Copays	\$0; \$2/\$8/\$47/\$100/33%	\$0; \$2/\$8/\$47/\$100/33%	\$0; \$2/\$8/\$47/\$100/33%
Extra Benefits	Routine Eye Exam, Eyewear Credit , Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Virtual Visits, Nursing Hotline, Transportation, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit , Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Virtual Visits, Nursing Hotline, Transportation, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit , Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Personal Emergency Response System, Virtual Visits, Nursing Hotline, Transportation, Platinum Dental Rider Available

2020

RENO

PRODUCT BENEFIT GRID

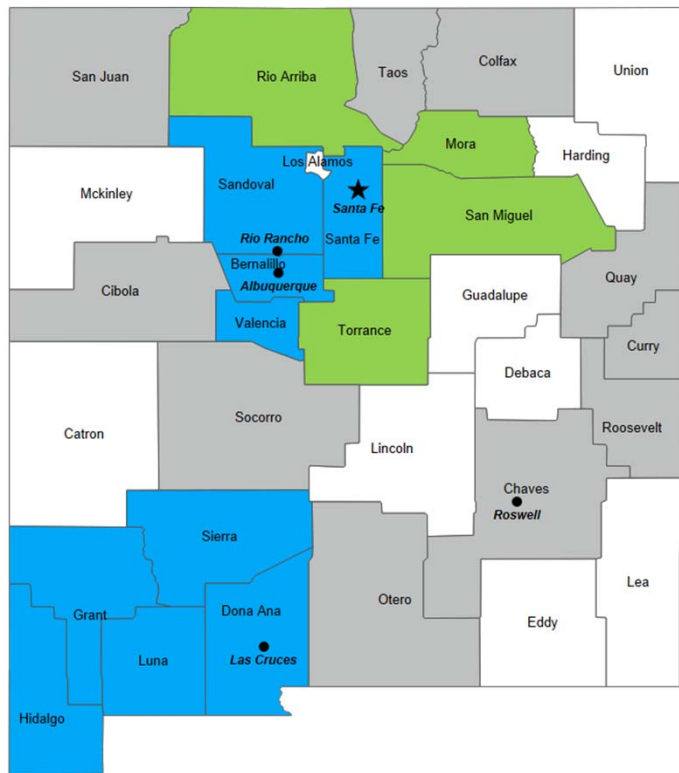
Plan Name	AARP® Medicare Advantage (HMO)
Plan ID	H0609-033-000
Plan Highlights	Low premium plan for those shopping on value and low out-of-pocket costs
Service Area	Nevada: Lyon, Mineral, Washoe
Premium	\$29
Max Out-of-Pocket	\$4,900
PCP/Specialist Copay	\$0 / \$45; Referral Required
Inpatient Hospital	\$335 days 1-5
ASC/Outpatient Hosp	\$0 - \$335 / \$0 - \$335
Lab Copay	\$0
Rx Ded.; Rx Copays	\$290 Tiers 3-5; \$4/\$10/\$47/\$100/27%
Extra Benefits	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, Nursing Hotline, Transportation, Platinum Dental Rider Available

NEW MEXICO

STATE LANDSCAPE

New Mexico

Medicare Advantage 2020 Service Area



- Current Footprint
- Footprint Expansion
- Dual Only Footprint

State Landscape

Eligibles (as of 2019-05-01)	400,747
<i>Estimated DSNP Eligibles²</i>	91,149
YOY Eligible Growth ¹	6.2%
MA Penetration ¹	30.4%
YOY MA Enrollment Growth ¹	8.1%
UHC Market Share ¹	33.5%

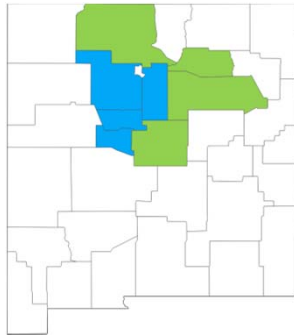
¹ May 2019 CMS.gov MA Ind State/County Enrollment within UHC 2020 MA Ind Footprint.
² UHC Dual SNP service area only; Estimated DSNP Eligibles are projected based on June 2018 CMS.gov data (includes approx. 10K partial duals who may or may not be eligible).



NEW MEXICO

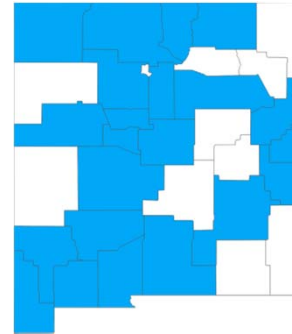
MARKET LANDSCAPE

New Mexico: Bernalillo, Mora, Rio Arriba, Sandoval, San Miguel, Santa Fe, Torrance, Valencia



Market Landscape	
Eligibles (as of 2019-05-01)	249,427
YOY Eligible Growth	6.4%
MA Non-SNP Penetration	29.4%
YOY MA Non-SNP Enrollment Growth	4.8%
UHC Non-SNP Market Share	10.5%

New Mexico Dual: Bernalillo, Chaves, Cibola, Colfax, Curry, Dona Ana, Grant, Hidalgo, Luna, Otero, Quay, Rio Arriba, Roosevelt, Sandoval, San Juan, San Miguel, Santa Fe, Sierra, Socorro, Taos, Torrance, Valencia




Market Landscape	
Est. DSNP Eligibles	91,149
DSNP Enrollees	25,812
DSNP Penetration (All Plans)	28.3%
Total UHC DSNP Enrollees	21,996
UHC DSNP Market Share	85.2%

2020

NEW MEXICO


PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage (HMO)	AARP® Medicare Advantage (HMO)	AARP® Medicare Advantage Choice (PPO)
Plan ID	H6526-001-000	H6526-002-000	H2228-047-000 
Plan Highlights	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	\$13 premium plan for those who are cost conscious, but want provider choice. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	New Mexico: Bernalillo, Sandoval, Valencia	New Mexico: Santa Fe	New Mexico: Bernalillo, Sandoval, Torrance , Valencia
Premium	\$0	\$0	\$13
Max Out-of-Pocket	\$4,000	\$4,000	\$3,500
PCP/Specialist Copay	\$0 / \$30; No Referral Required	\$5 / \$50; No Referral Required	\$0 / \$30; No Referral Required
Inpatient Hospital	\$250 days 1-6	\$295 days 1-6	\$250 days 1-6
ASC/Outpatient Hosp	\$0 - \$225 / \$0 - \$225	\$0 - \$250 / \$0 - \$250	\$0 - \$225 / \$0 - \$225
Lab Copay	\$15	\$15	\$10
Rx Ded.; Rx Copays	\$150 Tiers 4-5; \$2/\$12/\$47/\$100/30%	\$150 Tiers 4-5; \$2/\$12/\$47/\$100/30%	\$150 Tiers 4-5; \$2/\$12/\$47/\$100/30%
Extra Benefits	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Meal Benefit	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Meal Benefit, Platinum Dental Rider Available	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, Virtual Mental Health Visits, NurseLine, Meal Benefit, Platinum Dental Rider Available

2020

NEW MEXICO

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Choice (PPO)
Plan ID	H2228-049-000 
Plan Highlights	\$13 premium plan for those who are cost conscious, but want provider choice. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	New Mexico: Mora, Rio Arriba, San Miguel, Santa Fe
Premium	\$13
Max Out-of-Pocket	\$3,500
PCP/Specialist Copay	\$10 / \$40; No Referral Required
Inpatient Hospital	\$295 days 1-6
ASC/Outpatient Hosp	\$0 - \$295 / \$0 - \$295
Lab Copay	\$10
Rx Ded.; Rx Copays	\$150 Tiers 4-5; \$2/\$12/\$47/\$100/30%
Extra Benefits	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, Virtual Mental Health Visits, NurseLine, Meal Benefit, Platinum Dental Rider Available

2020

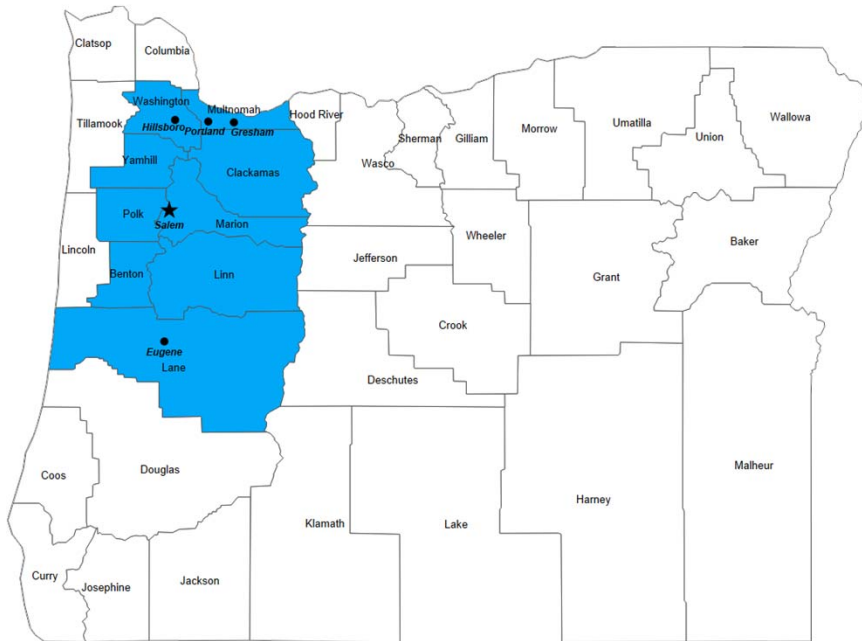
NEW MEXICO DUAL

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare Dual Complete® (PPO SNP)	UnitedHealthcare Dual Complete® LP (HMO-POS SNP)	UnitedHealthcare Dual Complete® (PPO SNP)
Plan ID	H2228-046-000	H5008-009-000	H2228-042-000
Plan Highlights	\$230 per quarter for OTC products through mail order, \$2,000 dental allowance for covered services, \$2,000 allowance for hearing aids every two years, \$0 copay virtual doctor visits	\$200 per quarter for OTC products with debit card or mail order, \$2,000 dental allowance for covered services, \$2,000 allowance for hearing aids every two years, and \$0 copay virtual doctor visits	\$225 per quarter for OTC products through mail order, \$2,000 dental allowance for covered services, \$0 copay virtual doctor visits, \$2,000 allowance for hearing aids every two years
Service Area	New Mexico: Bernalillo, Sandoval, Santa Fe, Valencia	New Mexico: Chaves, Cibola, Colfax, Curry, Otero, Quay, Rio Arriba, Roosevelt, San Juan, San Miguel, Socorro, Taos, Torrance	New Mexico: Dona Ana, Grant, Hidalgo, Luna, Sierra
Premium	\$0 for Full Duals	\$0 for Full Duals	\$0 for Full Duals
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access, OTC Catalog, Personal Emergency Response System, Virtual Visits , NurseLine, Transportation, Meal Benefit, Caregiver Support	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog , Personal Emergency Response System, Virtual Visits , NurseLine, Transportation, Meal Benefit, Caregiver Support	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access, OTC Catalog, Personal Emergency Response System, Virtual Visits , NurseLine, Transportation, Meal Benefit, Caregiver Support

Oregon

Medicare Advantage 2020 Service Area



● Current Footprint

State Landscape

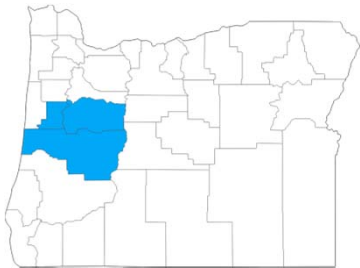
Eligibles (as of 2019-05-01)	577,547
YOY Eligible Growth ¹	6.8%
MA Penetration ¹	45.0%
YOY MA Enrollment Growth ¹	4.6%
UHC Market Share ¹	24.0%

¹ May 2019 CMS.gov MA Ind State/County Enrollment within UHC 2020 MA Ind Footprint.

OREGON

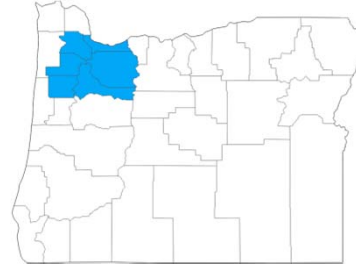
MARKET LANDSCAPE

Eugene: Benton, Lane, Linn



Market Landscape	
Eligibles (as of 2019-05-01)	141,437
YOY Eligible Growth	6.4%
MA Non-SNP Penetration	40.0%
YOY MA Non-SNP Enrollment Growth	6.8%
UHC Non-SNP Market Share	36.6%

Portland: Clackamas, Marion, Multnomah, Polk, Washington, Yamhill




Market Landscape	
Eligibles (as of 2019-05-01)	436,110
YOY Eligible Growth	6.9%
MA Non-SNP Penetration	42.2%
YOY MA Non-SNP Enrollment Growth	4.8%
UHC Non-SNP Market Share	22.1%

2020

EUGENE

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Choice (PPO)	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Plan 1 (HMO)
Plan ID	H2228-029-000 	H3805-023-001	H3805-007-000
Plan Highlights	Open access plan with low out-of-pocket costs and additional ancillaries. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	Premium plan with low out-of-pocket costs and rich ancillaries
Service Area	Oregon: Clackamas, Lane, Marion, Multnomah, Washington, Yamhill	Oregon: Benton, Lane	Oregon: Benton, Lane, Linn
Premium	\$32	\$0	\$55
Max Out-of-Pocket	\$4,500	\$4,100	\$2,900
PCP/Specialist Copay	\$0 / \$30; No Referral Required	\$0 / \$40; Referral Required	\$0 / \$30; Referral Required
Inpatient Hospital	\$300 days 1-5	\$400 days 1-4	\$195 days 1-7
ASC/Outpatient Hosp	\$0 - \$300 / \$0 - \$300	\$0 - \$325 / \$0 - \$325	\$0 - \$175 / \$0 - \$175
Lab Copay	\$5	\$5	\$5
Rx Ded.; Rx Copays	\$100 Tiers 3-5; \$3/\$10/\$45/\$95/31%	\$195 Tiers 3-5; \$3/\$12/\$47/\$100/29%	\$195 Tiers 3-5; \$3/\$12/\$47/\$100/29%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental w/ Out-of-Network Access, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits, Virtual Mental Health Visits, NurseLine, Naturopathy, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits, Virtual Mental Health Visits, NurseLine, Naturopathy, Platinum Dental Rider Available

2020

EUGENE




PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Plan 2 (HMO)
Plan ID	H3805-023-002
Plan Highlights	\$19 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare
Service Area	Oregon: Linn
Premium	\$19
Max Out-of-Pocket	\$4,100
PCP/Specialist Copay	\$5 / \$40; Referral Required
Inpatient Hospital	\$425 days 1-4
ASC/Outpatient Hosp	\$0 - \$350 / \$0 - \$350
Lab Copay	\$5
Rx Ded.; Rx Copays	\$195 Tiers 3-5; \$3/\$12/\$47/\$100/29%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

2020

PORTLAND

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Walgreens (PPO)	AARP® Medicare Advantage Choice (PPO)	AARP® Medicare Advantage Plan 2 (HMO)
Plan ID	H2228-084-000  	H2228-029-000 	H3805-022-001
Plan Highlights	New! LPPO offers \$0 premium, \$0 PCP with popular ancillaries. \$0 Tier 1 Rx copays at Walgreens. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network	Open access plan with low out-of-pocket costs and additional ancillaries. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare
Service Area	Oregon: Clackamas, Lane, Multnomah, Washington	Oregon: Clackamas, Lane, Marion, Multnomah, Washington, Yamhill	Oregon: Clackamas, Multnomah, Washington, Yamhill
Premium	\$0	\$32	\$0
Max Out-of-Pocket	\$5,600	\$4,500	\$5,600
PCP/Specialist Copay	\$0 / \$45; No Referral Required	\$0 / \$30; No Referral Required	\$0 / \$40; Referral Required
Inpatient Hospital	\$400 days 1-4	\$300 days 1-5	\$400 days 1-4
ASC/Outpatient Hosp	\$0 - \$350 / \$0 - \$350	\$0 - \$300 / \$0 - \$300	\$0 - \$400 / \$0 - \$400
Lab Copay	\$5	\$5	\$5
Rx Ded.; Rx Copays	\$250 Tiers 3-5; \$0/\$5/\$47/\$100/28% (Preferred)	\$100 Tiers 3-5; \$3/\$10/\$45/\$95/31%	\$150 Tiers 3-5; \$4/\$12/\$47/\$100/30%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental w/ Out-of-Network Access, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental w/ Out-of-Network Access, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits, Virtual Mental Health Visits, NurseLine, Naturopathy, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

89

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealthcare Group. 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 UnitedHealthcare Group.

 New Plan


2020

PORTLAND

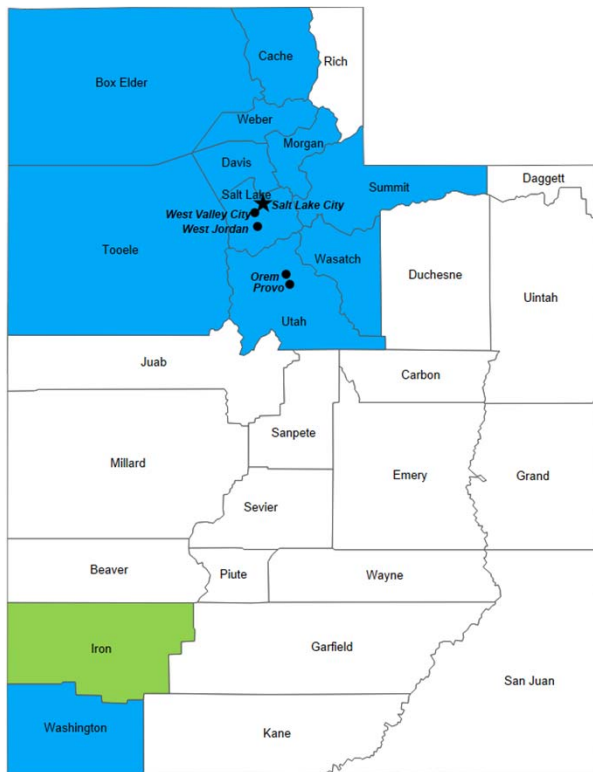
PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Plan 1 (HMO)	AARP® Medicare Advantage Plan 2 (HMO)
Plan ID	H3805-001-000	H3805-022-002
Plan Highlights	Premium plan with low out-of-pocket costs and rich ancillaries	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare
Service Area	Oregon: Clackamas, Marion, Multnomah, Polk, Washington, Yamhill	Oregon: Marion, Polk
Premium	\$72	\$0
Max Out-of-Pocket	\$3,500	\$5,900
PCP/Specialist Copay	\$0 / \$25; Referral Required	\$5 / \$45; Referral Required
Inpatient Hospital	\$285 days 1-7	\$430 days 1-4
ASC/Outpatient Hosp	\$0 - \$285 / \$0 - \$285	\$0 - \$430 / \$0 - \$430
Lab Copay	\$5	\$5
Rx Ded.; Rx Copays	\$150 Tiers 3-5; \$4/\$12/\$47/\$100/30%	\$150 Tiers 3-5; \$4/\$12/\$47/\$100/30%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits, Virtual Mental Health Visits, NurseLine, Naturopathy, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

90 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

Utah

Medicare Advantage 2020 Service Area



● Current Footprint ● Footprint Expansion

State Landscape	
Eligibles (as of 2019-05-01)	381,064
YOY Eligible Growth ¹	6.7%
MA Penetration ¹	36.3%
YOY MA Enrollment Growth ¹	6.8%
UHC Market Share ¹	56.4%

¹ May 2019 CMS.gov MA Ind State/County Enrollment within UHC 2020 MA Ind Footprint.

UTAH

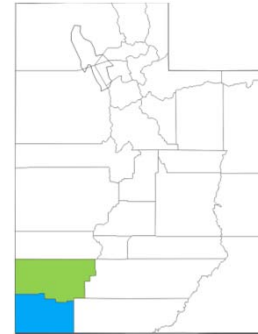
MARKET LANDSCAPE

Northern Utah: Box Elder, Cache, Davis, Morgan, Salt Lake, Summit, Tooele, Utah, Wasatch, Weber



Market Landscape	
Eligibles (as of 2019-05-01)	332,048
YOY Eligible Growth	6.4%
MA Non-SNP Penetration	36.2%
YOY MA Non-SNP Enrollment Growth	7.4%
UHC Non-SNP Market Share	60.4%

Southern Utah: Iron, Washington



Market Landscape	
Eligibles (as of 2019-05-01)	49,016
YOY Eligible Growth	8.8%
MA Non-SNP Penetration	22.1%
YOY MA Non-SNP Enrollment Growth	14.5%
UHC Non-SNP Market Share	49.0%

2020

NORTHERN UTAH

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Plan 1 (HMO)	AARP® Medicare Advantage Walgreens (HMO)
Plan ID	H4604-011-000	H4604-003-000	H4604-018-000 
Plan Highlights	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	Premium plan for those shopping on value and low out-of-pocket costs	New! \$0 premium plan with rich ancillary benefits, like Comp Dental. \$0 Tier 1 Rx copays at Walgreens
Service Area	Utah: Box Elder, Cache, Davis, Morgan, Salt Lake, Summit, Tooele, Utah, Wasatch, Weber	Utah: Box Elder, Cache, Davis, Morgan, Salt Lake, Summit, Tooele, Utah, Wasatch, Weber	Utah: Box Elder, Cache, Davis, Morgan, Salt Lake, Summit, Tooele, Utah, Wasatch, Weber
Premium	\$0	\$39	\$0
Max Out-of-Pocket	\$5,000	\$4,500	\$6,700
PCP/Specialist Copay	\$0 / \$40; Referral Required	\$0 / \$30; No Referral Required	\$0 / \$50; Referral Required
Inpatient Hospital	\$345 days 1-5	\$290 days 1-5	\$360 days 1-5
ASC/Outpatient Hosp	\$0 - \$250 / \$0 - \$325	\$0 - \$225 / \$0 - \$275	\$0 - \$250 / \$0 - \$340
Lab Copay	\$6	\$0	\$6
Rx Ded.; Rx Copays	\$200 Tiers 3-5; \$3/\$10/\$45/\$95/29%	\$200 Tiers 3-5; \$3/\$10/\$45/\$95/29%	\$225 Tiers 3-5; \$0/\$5/\$47/\$100/29% (Preferred)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Transportation, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Fitness Membership, Preventive & Comprehensive Dental, Virtual Visits, Virtual Mental Health Visits, NurseLine

93

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


2020

NORTHERN UTAH

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Essential (HMO)	UnitedHealthcare® Medicare Advantage Assist (HMO SNP)
Plan ID	H4604-005-000	H4604-017-000
Plan Highlights	Plan designed for those who want affordable coverage beyond Original Medicare, but don't need prescription drug coverage - works well with VA coverage	New! Plan designed for those with Cardiovascular Disorders, Chronic Heart Failure, or Diabetes
Service Area	Utah: Box Elder, Cache, Davis, Morgan, Salt Lake, Summit, Tooele, Utah, Wasatch, Weber	Utah: Box Elder, Cache, Davis, Morgan, Salt Lake, Summit, Tooele, Utah, Wasatch, Weber
Premium	\$0	\$39
Max Out-of-Pocket	\$5,000	\$4,900
PCP/Specialist Copay	\$0 / \$40; No Referral Required	\$0 / \$40; Referral Required
Inpatient Hospital	\$345 days 1-5	\$290 days 1-5
ASC/Outpatient Hosp	\$0 - \$250 / \$0 - \$325	\$0 - \$225 / \$0 - \$275
Lab Copay	\$10	\$0
Rx Ded.; Rx Copays	Not Covered	\$200 Tiers 4-5; \$3/\$10/\$45/\$95/29%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Personal Emergency Response System, Virtual Visits, Virtual Mental Health Visits, NurseLine, Transportation, Platinum Dental Rider Available

2020

NORTHERN UTAH

PRODUCT BENEFIT GRID


Plan Name	UnitedHealthcare® Medicare Advantage Assure (PPO)
Plan ID	H0271-003-000
Plan Highlights	Full provider network plan designed for full duals - this is what members pay if they have Medicare and full Medicaid
Service Area	Utah: Box Elder, Cache, Davis, Morgan, Salt Lake, Summit, Tooele, Utah, Wasatch, Weber
Premium	\$0 for Full Duals
Max Out-of-Pocket	\$6,700
PCP/Specialist Copay	\$0 for Full Duals / \$0 for Full Duals; No Referral Required
Inpatient Hospital	\$0 for Full Duals
ASC/Outpatient Hosp	\$0 for Full Duals
Lab Copay	\$0 for Full Duals
Rx Ded.; Rx Copays	Varies by LIS Level
Extra Benefits	Routine Eye Exam, Eyewear Credit , Routine Hearing Exam, Hearing Aids , Fitness Membership, Preventive & Comprehensive Dental w/ Out-of-Network Access, OTC Catalog, Virtual Visits , NurseLine, Transportation

95 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

2020

SOUTHERN UTAH

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage (HMO)	UnitedHealthcare® Medicare Advantage Choice (PPO)
Plan ID	H4604-016-000	H2001-017-000 
Plan Highlights	New! Low premium plan for those shopping on value and low out-of-pocket costs	Open access plan with low out-of-pocket costs and additional ancillaries, like preventive and comprehensive dental. See UnitedHealthcare doctors nationwide and pay in-network costs using our Medicare National Network
Service Area	Utah: Iron, Washington	Utah: Washington
Premium	\$25	\$38
Max Out-of-Pocket	\$5,000	\$5,500
PCP/Specialist Copay	\$0 / \$40; Referral Required	\$5 / \$40; No Referral Required
Inpatient Hospital	\$395 days 1-4	\$395 days 1-4
ASC/Outpatient Hosp	\$0 - \$325 / \$0 - \$375	\$0 - \$325 / \$0 - \$375
Lab Copay	\$10	\$10
Rx Ded.; Rx Copays	\$200 Tiers 3-5; \$3/\$10/\$45/\$100/29%	\$175 Tiers 3-5; \$3/\$10/\$45/\$100/29%
Extra Benefits	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Transportation, Platinum Dental Rider Available	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership & Fitbit, Preventive & Comprehensive Dental w/ Out-of-Network Access, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Transportation

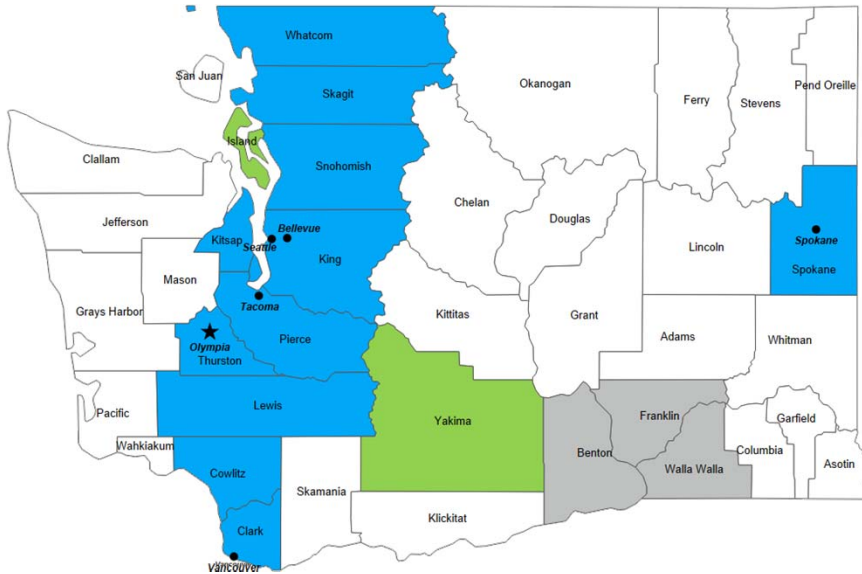
96

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan


Washington

Medicare Advantage 2020 Service Area



- Current Footprint
- Footprint Expansion
- Dual Only Footprint

State Landscape

Eligibles (as of 2019-05-01)	1,231,823
<i>Estimated DSNP Eligibles²</i>	176,417
YOY Eligible Growth ¹	6.4%
MA Penetration ¹	31.1%
YOY MA Enrollment Growth ¹	8.9%
UHC Market Share ¹	37.6%

¹ May 2019 CMS.gov MA Ind State/County Enrollment within UHC 2020 MA Ind Footprint.
² UHC Dual SNP service area only; Estimated DSNP Eligibles are projected based on June 2018 CMS.gov data (includes approx. 24K partial duals who may or may not be eligible).



WASHINGTON

MARKET LANDSCAPE

Central Washington: Yakima



Market Landscape	
Eligibles (as of 2019-05-01)	44,457
YOY Eligible Growth	4.5%
MA Non-SNP Penetration	13.7%
YOY MA Non-SNP Enrollment Growth	7.9%
UHC Non-SNP Market Share	0.0%

Seattle: Island, King, Kitsap, Lewis, Pierce, Skagit, Snohomish, Thurston, Whatcom



Market Landscape	
Eligibles (as of 2019-05-01)	892,415
YOY Eligible Growth	6.4%
MA Non-SNP Penetration	26.6%
YOY MA Non-SNP Enrollment Growth	6.5%
UHC Non-SNP Market Share	32.7%

Southwest Washington: Clark, Cowlitz



Market Landscape	
Eligibles (as of 2019-05-01)	121,999
YOY Eligible Growth	6.9%
MA Non-SNP Penetration	43.8%
YOY MA Non-SNP Enrollment Growth	6.1%
UHC Non-SNP Market Share	21.1%

Spokane: Spokane



Market Landscape	
Eligibles (as of 2019-05-01)	109,914
YOY Eligible Growth	5.9%
MA Non-SNP Penetration	30.0%
YOY MA Non-SNP Enrollment Growth	9.9%
UHC Non-SNP Market Share	59.6%

2020

WASHINGTON

MARKET LANDSCAPE

Washington Dual: Benton, Clark, Cowlitz, Franklin, King, Kitsap, Lewis, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Yakima



Market Landscape	
Est. DSNP Eligibles	176,417
DSNP Enrollees	49,594
DSNP Penetration (All Plans)	28.1%
Total UHC DSNP Enrollees	33,745
UHC DSNP Market Share	68.0%

2020

CENTRAL WASHINGTON

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage (HMO)
Plan ID	H3805-029-000
Plan Highlights	New! Low premium plan for those shopping on value and low out-of-pocket costs
Service Area	Washington: Yakima
Premium	\$29
Max Out-of-Pocket	\$6,700
PCP/Specialist Copay	\$0 / \$45; Referral Required
Inpatient Hospital	\$440 days 1-4
ASC/Outpatient Hosp	\$0 - \$435 / \$0 - \$435
Lab Copay	\$10
Rx Ded.; Rx Copays	\$195 Tiers 3-5; \$3/\$12/\$47/\$100/29%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

100 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan



2020

SEATTLE

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Plan 3 (HMO)	AARP® Medicare Advantage Plan 1 (HMO)
Plan ID	H3805-017-000	H3805-015-000	H3805-024-001
Plan Highlights	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	Low premium plan for those shopping on value and low out-of-pocket costs	Premium plan with low out-of-pocket costs and rich ancillaries
Service Area	Washington: King	Washington: Clark, Cowlitz, King, Lewis, Pierce, Snohomish, Thurston	Washington: King
Premium	\$0	\$45	\$88
Max Out-of-Pocket	\$6,700	\$5,900	\$4,200
PCP/Specialist Copay	\$0 / \$50; Referral Required	\$0 / \$45; Referral Required	\$5 / \$35; Referral Required
Inpatient Hospital	\$390 days 1-5	\$375 days 1-4	\$250 days 1-7
ASC/Outpatient Hosp	\$0 - \$385 / \$0 - \$385	\$0 - \$370 / \$0 - \$370	\$0 - \$245 / \$0 - \$245
Lab Copay	\$5	\$10	\$0
Rx Ded.; Rx Copays	\$275 Tiers 3-5; \$3/\$12/\$47/\$100/28%	\$225 Tiers 3-5; \$3/\$12/\$45/\$95/29%	\$185 Tiers 3-5; \$3/\$12/\$45/\$95/29%
Extra Benefits	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits, Virtual Mental Health Visits, NurseLine, Naturopathy, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits, Virtual Mental Health Visits, NurseLine, Naturopathy, Platinum Dental Rider Available

2020

SEATTLE


PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Plan 1 (HMO)	AARP® Medicare Advantage Plan 2 (HMO)
Plan ID	H3805-019-000	H3805-024-003	H3805-025-002
Plan Highlights	Low premium plan for those shopping on value and low out-of-pocket costs	Premium plan with low out-of-pocket costs and rich ancillaries	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare
Service Area	Washington: Kitsap, Pierce	Washington: Clark, Snohomish, Thurston	Washington: Thurston
Premium	\$24	\$88	\$0
Max Out-of-Pocket	\$6,700	\$4,200	\$6,700
PCP/Specialist Copay	\$15 / \$50; Referral Required	\$5 / \$35; Referral Required	\$0 / \$50; Referral Required
Inpatient Hospital	\$440 days 1-4	\$250 days 1-7	\$390 days 1-5
ASC/Outpatient Hosp	\$0 - \$435 / \$0 - \$435	\$0 - \$245 / \$0 - \$245	\$0 - \$390 / \$0 - \$390
Lab Copay	\$10	\$0	\$0
Rx Ded.; Rx Copays	\$200 Tiers 3-5; \$3/\$12/\$47/\$100/29%	\$185 Tiers 3-5; \$3/\$12/\$45/\$95/29%	\$195 Tiers 3-5; \$3/\$12/\$47/\$100/29%
Extra Benefits	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits, Virtual Mental Health Visits, NurseLine, Naturopathy, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

2020

SEATTLE

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Walgreens (HMO)	AARP® Medicare Advantage (HMO)
Plan ID	H3805-020-000	H3805-032-000 	H3805-021-000
Plan Highlights	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	New! HMO offers \$0 premium, \$0 PCP with popular ancillaries. \$0 Tier 1 Rx copays at Walgreens	Low premium plan for those shopping on value and low out-of-pocket costs
Service Area	Washington: Island , Snohomish	Washington: Snohomish	Washington: Skagit, Whatcom
Premium	\$0	\$0	\$16
Max Out-of-Pocket	\$6,700	\$6,500	\$6,700
PCP/Specialist Copay	\$10 / \$50; Referral Required	\$0 / \$50; Referral Required	\$15 / \$50; Referral Required
Inpatient Hospital	\$390 days 1-5	\$400 days 1-4	\$440 days 1-4
ASC/Outpatient Hosp	\$0 - \$385 / \$0 - \$385	\$0 - \$350 / \$0 - \$350	\$0 - \$435 / \$0 - \$435
Lab Copay	\$5	\$5	\$10
Rx Ded.; Rx Copays	\$275 Tiers 3-5; \$3/\$12/\$47/\$100/28%	\$200 Tiers 3-5; \$0/\$5/\$47/\$100/29% (Preferred)	\$275 Tiers 3-5; \$3/\$12/\$47/\$100/28%
Extra Benefits	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Fitness Membership, Preventive Dental, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

2020

SEATTLE

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Plan 1 (HMO)
Plan ID	H3805-025-001	H3805-024-002
Plan Highlights	\$19 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	Premium plan with low out-of-pocket costs and rich ancillaries
Service Area	Washington: Lewis	Washington: Cowlitz, Lewis, Pierce
Premium	\$19	\$92
Max Out-of-Pocket	\$6,700	\$4,600
PCP/Specialist Copay	\$15 / \$50; Referral Required	\$5 / \$35; Referral Required
Inpatient Hospital	\$440 days 1-4	\$250 days 1-7
ASC/Outpatient Hosp	\$0 - \$435 / \$0 - \$435	\$0 - \$245 / \$0 - \$245
Lab Copay	\$0	\$0
Rx Ded.; Rx Copays	\$195 Tiers 3-5; \$3/\$12/\$47/\$100/29%	\$185 Tiers 3-5; \$3/\$12/\$45/\$95/29%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits, Virtual Mental Health Visits, NurseLine, Naturopathy, Platinum Dental Rider Available

2020

SOUTHWEST WASHINGTON


PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Plan 3 (HMO)	AARP® Medicare Advantage Plan 1 (HMO)
Plan ID	H3805-016-000	H3805-015-000	H3805-024-002
Plan Highlights	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	Low premium plan for those shopping on value and low out-of-pocket costs	Premium plan with low out-of-pocket costs and rich ancillaries
Service Area	Washington: Clark, Cowlitz	Washington: Clark, Cowlitz, King, Lewis, Pierce, Snohomish, Thurston	Washington: Cowlitz, Lewis, Pierce
Premium	\$0	\$45	\$92
Max Out-of-Pocket	\$6,700	\$5,900	\$4,600
PCP/Specialist Copay	\$15 / \$50; Referral Required	\$0 / \$45; Referral Required	\$5 / \$35; Referral Required
Inpatient Hospital	\$440 days 1-4	\$375 days 1-4	\$250 days 1-7
ASC/Outpatient Hosp	\$0 - \$435 / \$0 - \$435	\$0 - \$370 / \$0 - \$370	\$0 - \$245 / \$0 - \$245
Lab Copay	\$0	\$10	\$0
Rx Ded.; Rx Copays	\$225 Tiers 3-5; \$3/\$12/\$47/\$100/29%	\$225 Tiers 3-5; \$3/\$12/\$45/\$95/29%	\$185 Tiers 3-5; \$3/\$12/\$45/\$95/29%
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits, Virtual Mental Health Visits, NurseLine, Naturopathy, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits, Virtual Mental Health Visits, NurseLine, Naturopathy, Platinum Dental Rider Available

2020

SOUTHWEST WASHINGTON

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Plan 1 (HMO)	AARP® Medicare Advantage Walgreens (HMO)
Plan ID	H3805-024-003	H3805-030-000 
Plan Highlights	Premium plan with low out-of-pocket costs and rich ancillaries	New! HMO offers \$0 premium, \$0 PCP with popular ancillaries. \$0 Tier 1 Rx copays at Walgreens
Service Area	Washington: Clark, Snohomish, Thurston	Washington: Clark
Premium	\$88	\$0
Max Out-of-Pocket	\$4,200	\$5,900
PCP/Specialist Copay	\$5 / \$35; Referral Required	\$0 / \$50; Referral Required
Inpatient Hospital	\$250 days 1-7	\$400 days 1-4
ASC/Outpatient Hosp	\$0 - \$245 / \$0 - \$245	\$0 - \$300 / \$0 - \$300
Lab Copay	\$0	\$0
Rx Ded.; Rx Copays	\$185 Tiers 3-5; \$3/\$12/\$45/\$95/29%	\$125 Tiers 3-5; \$0/\$5/\$47/\$100/30% (Preferred)
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Acupuncture/Chiropractic, Virtual Visits, Virtual Mental Health Visits, NurseLine, Naturopathy, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Fitness Membership, Preventive Dental, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available

106 Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. 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.

 New Plan



2020

SPOKANE

PRODUCT BENEFIT GRID

Plan Name	AARP® Medicare Advantage Plan 1 (HMO)	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Essential (HMO)
Plan ID	H1286-002-000	H1286-009-000	H1286-003-000
Plan Highlights	\$0 premium plan for those who are cost conscious and want affordable coverage beyond Original Medicare	Low premium plan for those shopping on value and low out-of-pocket costs	Plan designed for those who want affordable coverage beyond Original Medicare, but don't need prescription drug coverage - works well with VA coverage. Plan offers monthly Part B premium rebate
Service Area	Washington: Spokane	Washington: Spokane	Washington: Spokane
Premium	\$0	\$54	\$0; Part B Rebate: \$60
Max Out-of-Pocket	\$5,500	\$4,200	\$5,500
PCP/Specialist Copay	\$0 / \$45; No Referral Required	\$0 / \$35; No Referral Required	\$0 / \$45; No Referral Required
Inpatient Hospital	\$395 days 1-4	\$320 days 1-5	\$395 days 1-4
ASC/Outpatient Hosp	\$0 - \$390 / \$0 - \$390	\$0 - \$315 / \$0 - \$315	\$0 - \$390 / \$0 - \$390
Lab Copay	\$0	\$5	\$5
Rx Ded.; Rx Copays	\$150 Tiers 3-5; \$2/\$8/\$45/\$95/30%	\$180 Tiers 3-5; \$2/\$8/\$45/\$95/29%	Not Covered
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine, Platinum Dental Rider Available	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Catalog, Virtual Visits, Virtual Mental Health Visits, NurseLine

2020

WASHINGTON DUAL

PRODUCT BENEFIT GRID

Plan Name	UnitedHealthcare Dual Complete® (HMO SNP)
Plan ID	H5008-002-000
Plan Highlights	\$275 per quarter for OTC products through mail order, \$3,000 dental allowance for covered services, \$2,000 allowance for hearing aids every two years, \$0 copay virtual doctor visits
Service Area	Washington: Benton, Clark, Cowlitz, Franklin, King, Kitsap, Lewis, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Yakima
Premium	\$0 for Full Duals
Extra Benefits	Routine Eye Exam, Eyewear Credit, Routine Hearing Exam, Hearing Aids, Fitness Membership, Preventive & Comprehensive Dental, OTC Debit Card & Catalog, Acupuncture/Chiropractic, Personal Emergency Response System, Virtual Visits, NurseLine, Transportation