

Missouri

2021 Medicare Advantage Plans

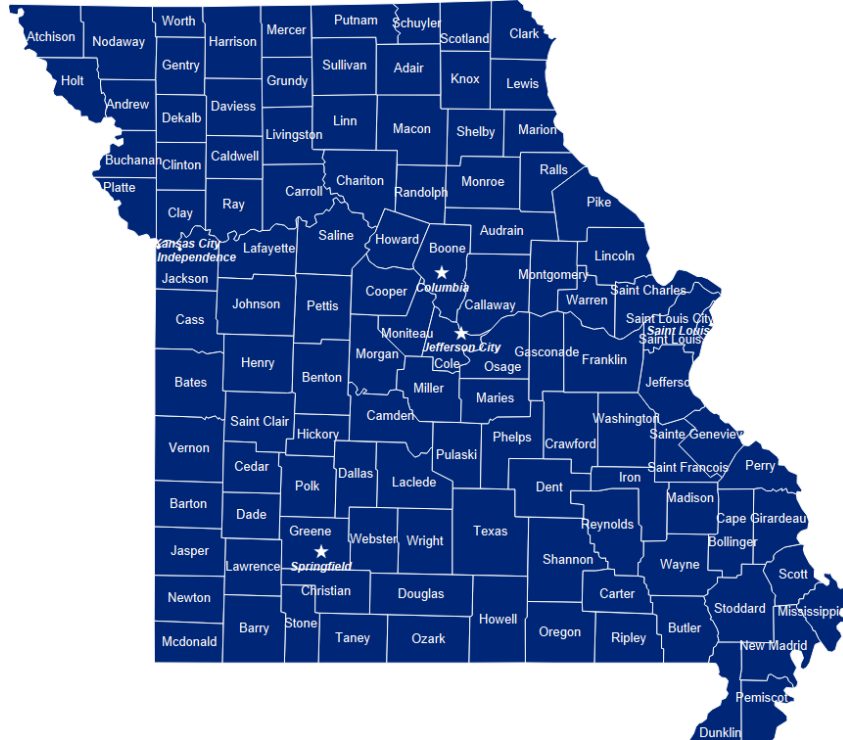
Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing and dual-focused plans represent Full Dual and QMB cost sharing. Benefits and features vary by plan. Limitations and exclusions apply.

For final 2021 plan details, refer to the 2021 Summary of Benefits.

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● Current Footprint

2021 Medicare Advantage Service Area



State Landscape¹

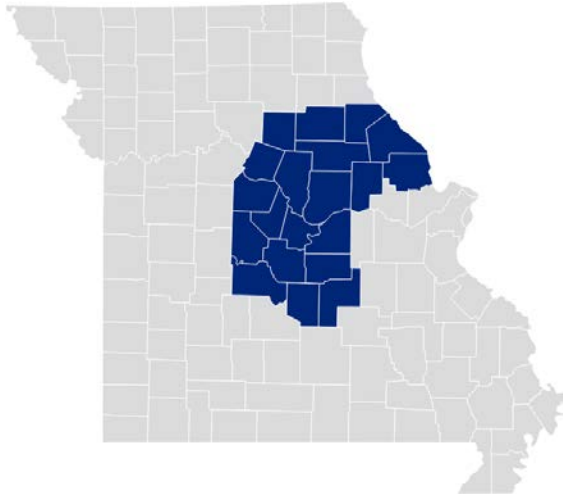
Eligibles (as of May 2020)	1,382,723
Estimated Dual Eligibles ²	183,217
YOY Eligible Growth	5.3%
MA Penetration	35.9%
YOY MA Enrollment Growth	9.6%
UHC Market Share	35.6%

¹ May 2020 CMS.gov MA Ind State/County Enrollment within UHC 2021 MA Ind Footprint.

² UHC Dual SNP service area only; Estimated Dual Eligibles are projected based on September 2019 CMS.gov data (includes approx. 26,235 partial duals who may or may not be eligible).

● Current Footprint ● Footprint Expansion

2021 Medicare Advantage Service Area



Plan ID Plan Name

H8768-026-000 AARP® Medicare Advantage Choice (PPO)

Missouri: Audrain, Boone, Callaway, Camden, Cole, Cooper, Howard, Lincoln, Maries, Miller, Moniteau, Monroe, Montgomery, Morgan, Osage, Pike, Ralls, Randolph

H2802-029-000 AARP® Medicare Advantage Plan 1 (HMO-POS)

H2802-048-000 AARP® Medicare Advantage Plan 2 (HMO)

Missouri: Audrain, Boone, Callaway, Camden, Cole, Cooper, Howard, Lincoln, Maries, Miller, Moniteau, Monroe, Montgomery, Morgan, Osage, Pike, Ralls, Randolph

Market Landscape¹

Eligibles (as of May 2020)	155,135
YOY Eligible Growth	5.7%
MA Non-SNP Penetration	15.6%
YOY MA Non-SNP Enrollment Growth	21.0%
UHC Non-SNP Market Share	43.8%

¹ May 2020 CMS.gov MA Ind State/County Enrollment within UHC 2021 MA Ind Footprint.



NEW PLAN

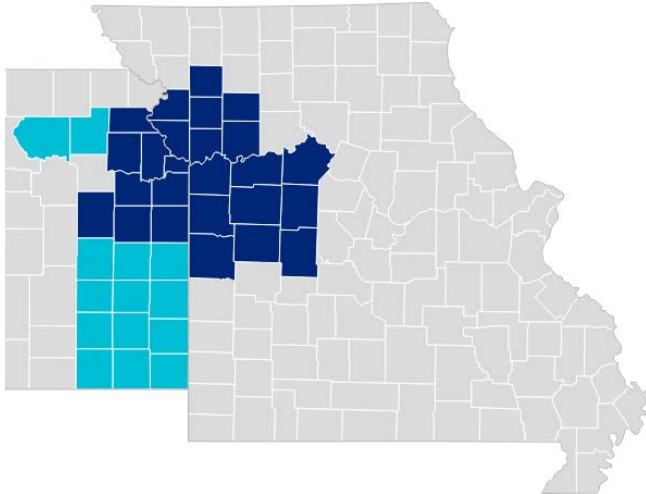
Plan Name	AARP® Medicare Advantage Choice (PPO)	AARP® Medicare Advantage Plan 1 (HMO-POS)	AARP® Medicare Advantage Plan 2 (HMO)
Plan ID	H8768-026-000	H2802-029-000	H2802-048-000
Plan Highlights	New! \$0 premium plan for those who are cost-conscious, but want provider choice	Low premium plan for those shopping on value and low out-of-pocket costs. POS for dental only	\$0 premium plan for those who are cost-conscious and want affordable coverage beyond Original Medicare. Plan offers coverage outside of the network for certain services
Premium	\$0	\$23	\$0
Medical Ded.	\$0	\$0	\$0
Max OOP	\$3,900	\$3,400	\$5,900
PCP/Specialist	\$0 / \$35; No Referral Required	\$0 / \$45; No Referral Required	\$10 / \$50; No Referral Required
Inpatient Hospital	\$295 Days 1-5	\$325 Days 1-7	\$350 Days 1-5
ASC/Outpatient	\$0 or \$295 / \$0 or \$295	\$0 or \$325 / \$0 or \$325	\$0 or \$350 / \$0 or \$350
Telehealth	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits
Lab Copay	\$0	\$0	\$0
Rx Ded./Copays	\$0; \$0/\$10/\$47/\$100/33%	\$150 Tiers 4-5; \$3/\$14/\$47/\$100/30%	\$250 Tiers 4-5; \$4/\$14/\$47/\$100/28%
Dental	\$1,000 Dental Level 4 (no cost sharing)	Dental Level 1 (no cost sharing); Platinum Dental Rider Available	Not Covered; Platinum Dental Rider Available
Eyewear	Up to \$200 every 2 years, standard lenses at no cost	Up to \$100 every 2 years, standard lenses at no cost	Up to \$100 every 2 years, standard lenses at no cost
Fitness	Renew Active Fitness Program & Fitbit	Renew Active Fitness Program	Renew Active Fitness Program
OTC	\$50/quarter catalog	\$40/quarter catalog	\$40/quarter catalog
Hearing Aid	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years
Other Benefits	Nurseline	Nurseline	Nurseline

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2021 Medicare Advantage Service Area



Plan ID Plan Name

H2802-033-000 AARP® Medicare Advantage Plan 1 (HMO-POS)
 H2802-032-000 AARP® Medicare Advantage Plan 2 (HMO-POS)

Kansas: Allen, Anderson, Atchison, Bourbon, Cherokee, Coffey, Crawford, Douglas, Franklin, Jackson, Jefferson, Johnson, Labette, Leavenworth, Linn, Miami, Montgomery, Neosho, Osage, Pottawatomie, Wilson, Woodson, Wyandotte; **Missouri:** Bates, Benton, Buchanan, Caldwell, Cass, Clay, Clinton, DeKalb, Henry, Jackson, Johnson, Lafayette, Pettis, Platte, Ray, Saline

H2228-071-000 AARP® Medicare Advantage Choice Plan 1 (PPO)

Kansas: Johnson; **Missouri:** Jackson

Market Landscape¹

Eligibles (as of May 2020)	566,160
YOY Eligible Growth	5.3%
MA Non-SNP Penetration	23.4%
YOY MA Non-SNP Enrollment Growth	10.9%
UHC Non-SNP Market Share	17.0%

¹ May 2020 CMS.gov MA Ind State/County Enrollment within UHC 2021 MA Ind Footprint.

2021 PRODUCT BENEFIT GRID

KANSAS CITY

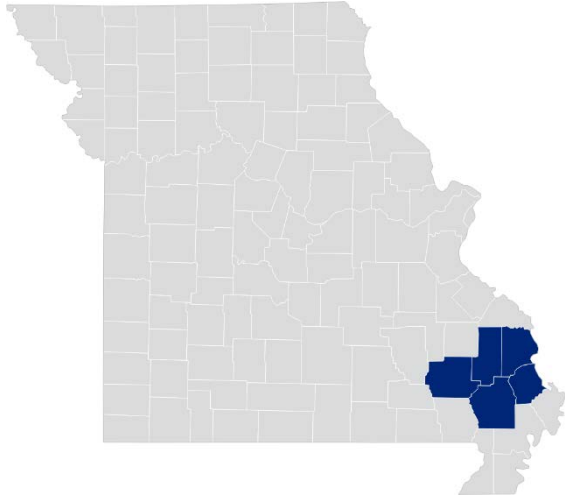


Plan Name	AARP® Medicare Advantage Choice Plan 1 (PPO)	AARP® Medicare Advantage Plan 2 (HMO-POS)	AARP® Medicare Advantage Plan 1 (HMO-POS)
Plan ID	H2228-071-000 	H2802-032-000 	H2802-033-000 
Plan Highlights	\$0 premium plan with popular ancillaries	\$0 premium plan for those who are cost-conscious and want affordable coverage beyond Original Medicare. POS for dental only	Mid premium plan for those shopping on value and lower out-of-pocket costs. POS for dental only
Premium	\$0	\$0	\$36
Medical Ded.	\$0	\$0	\$0
Max OOP	\$6,400	\$5,900	\$4,400
PCP/Specialist	\$0 / \$50; No Referral Required	\$5 / \$45; No Referral Required	\$0 / \$40; No Referral Required
Inpatient Hospital	\$295 Days 1-5	\$300 Days 1-5	\$275 Days 1-7
ASC/Outpatient	\$0 or \$295 / \$0 or \$295	\$0 or \$300 / \$0 or \$300	\$0 or \$275 / \$0 or \$275
Telehealth	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits
Lab Copay	\$0	\$0	\$0
Rx Ded./Copays	\$0; \$3/\$10/\$45/\$95/33%	\$0; \$4/\$15/\$47/\$100/33%	\$0; \$4/\$14/\$47/\$100/33%
Dental	\$1,000 Dental Level 3 (\$0 - 50% cost sharing)	Dental Level 1 (no cost sharing); Platinum Dental Rider Available	\$500 Dental Level 2 (no cost sharing); Platinum Dental Rider Available
Eyewear	Up to \$150 every 2 years, standard lenses at no cost	Up to \$100 every 2 years, standard lenses at no cost	Up to \$200 every 2 years, standard lenses at no cost
Fitness	Renew Active Fitness Program	Renew Active Fitness Program	Renew Active Fitness Program & Fitbit
OTC	Not Covered	\$40/quarter catalog	\$50/quarter catalog
Hearing Aid	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years
Other Benefits	Nurseline, PERS	Nurseline, PERS	Nurseline, PERS

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2021 Medicare Advantage Service Area



Plan ID	Plan Name
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H2802-049-000	AARP® Medicare Advantage (HMO-POS)
H2228-082-000	AARP® Medicare Advantage Choice (PPO)
<i>Missouri:</i> Bollinger, Cape Girardeau, Scott, Stoddard, Wayne	

Market Landscape¹

Eligibles (as of May 2020)	43,934
YOY Eligible Growth	4.0%
MA Non-SNP Penetration	9.5%
YOY MA Non-SNP Enrollment Growth	24.7%
UHC Non-SNP Market Share	42.5%

¹ May 2020 CMS.gov MA Ind State/County Enrollment within UHC 2021 MA Ind Footprint.

2021 PRODUCT BENEFIT GRID

SOUTHEAST MISSOURI

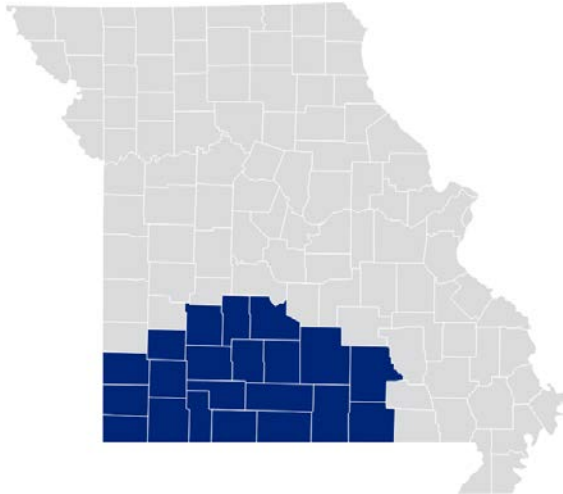


Plan Name	AARP® Medicare Advantage Choice (PPO)	AARP® Medicare Advantage (HMO-POS)
Plan ID	H2228-082-000 	H2802-049-000 
Plan Highlights	\$0 premium plan with popular ancillaries. Members can see network and out-of-network providers for the same costs (non-differentiated plan)	\$0 premium plan for those who are cost-conscious and want affordable coverage beyond Original Medicare. POS for dental only
Premium	\$0	\$0
Medical Ded.	\$0	\$0
Max OOP	\$4,900	\$3,500
PCP/Specialist	\$5 / \$45; No Referral Required	\$0 / \$35; No Referral Required
Inpatient Hospital	\$290 Days 1-5	\$275 Days 1-6
ASC/Outpatient	\$0 or \$240 / \$0 or \$290	\$0 or \$225 / \$0 or \$275
Telehealth	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits
Lab Copay	\$0	\$0
Rx Ded./Copays	\$0; \$0/\$10/\$47/\$100/33%	\$0; \$2/\$12/\$47/\$100/33%
Dental	\$1,000 Dental Level 4 (no cost sharing)	\$1,000 Dental Level 4 (\$0 - 50% cost sharing)
Eyewear	Up to \$200 every 2 years, standard lenses at no cost	Up to \$100 every 2 years, standard lenses at no cost
Fitness	Renew Active Fitness Program	Renew Active Fitness Program
OTC	\$40/quarter catalog	\$60/quarter catalog
Hearing Aid	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years
Other Benefits	Nurseline	Nurseline

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2021 Medicare Advantage Service Area



Plan ID Plan Name

H8768-027-000 AARP® Medicare Advantage Choice (PPO)

Missouri: Barry, Christian, Dade, Dallas, Douglas, Greene, Howell, Jasper, Laclede, Lawrence, McDonald, Newton, Oregon, Ozark, Phelps, Polk, Pulaski, Shannon, Stone, Taney, Texas, Webster, Wright

H2802-030-000 AARP® Medicare Advantage Plan 2 (HMO-POS)

H2802-031-000 AARP® Medicare Advantage Plan 1 (HMO-POS)

Missouri: Barry, Christian, Dade, Dallas, Douglas, Greene, Howell, Jasper, Laclede, Lawrence, McDonald, Newton, Oregon, Ozark, Phelps, Polk, Pulaski, Shannon, Stone, Taney, Texas, Webster, Wright

Market Landscape¹

Eligibles (as of May 2020)	253,454
YOY Eligible Growth	7.1%
MA Non-SNP Penetration	32.2%
YOY MA Non-SNP Enrollment Growth	7.7%
UHC Non-SNP Market Share	16.8%

¹ May 2020 CMS.gov MA Ind State/County Enrollment within UHC 2021 MA Ind Footprint.

2021 PRODUCT BENEFIT GRID

SPRINGFIELD



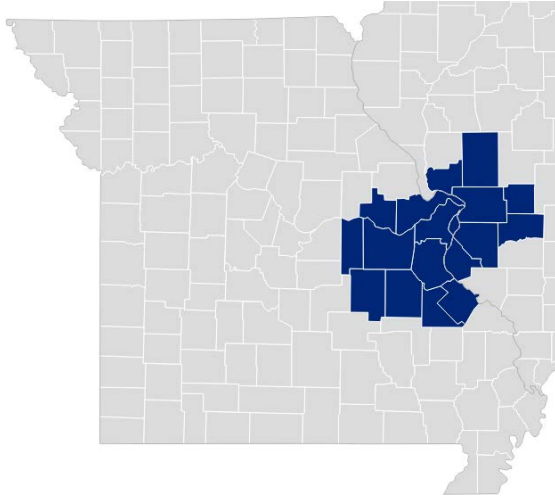
NEW PLAN

Plan Name	AARP® Medicare Advantage Plan 2 (HMO-POS)	AARP® Medicare Advantage Plan 1 (HMO-POS)	AARP® Medicare Advantage Choice (PPO)
Plan ID	H2802-030-000	H2802-031-000	H8768-027-000
Plan Highlights	\$0 premium plan for those who are cost-conscious and want affordable coverage beyond Original Medicare. POS for dental only	Low premium plan for those shopping on value and low out-of-pocket costs. POS for dental only	New! \$0 premium plan for those who are cost-conscious, but want provider choice
Premium	\$0	\$24	\$0
Medical Ded.	\$0	\$0	\$0
Max OOP	\$3,700	\$3,400	\$3,900
PCP/Specialist	\$0 / \$45; No Referral Required	\$0 / \$40; No Referral Required	\$0 / \$35; No Referral Required
Inpatient Hospital	\$325 Days 1-5	\$295 Days 1-5	\$295 Days 1-5
ASC/Outpatient	\$0 or \$250 / \$0 or \$325	\$0 or \$245 / \$0 or \$295	\$0 or \$245 / \$0 or \$295
Telehealth	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits
Lab Copay	\$0	\$0	\$0
Rx Ded./Copays	\$100 Tiers 4-5; \$4/\$14/\$47/\$100/31%	\$0; \$4/\$14/\$47/\$100/33%	\$0; \$0/\$10/\$47/\$100/33%
Dental	\$1,000 Dental Level 3 (no cost sharing)	\$1,000 Dental Level 3 (\$0 - 50% cost sharing)	\$1,000 Dental Level 4 (no cost sharing)
Eyewear	Up to \$100 every 2 years, standard lenses at no cost	Up to \$200 every 2 years, standard lenses at no cost	Up to \$100 every 2 years, standard lenses at no cost
Fitness	Renew Active Fitness Program & Fitbit	Renew Active Fitness Program & Fitbit	Renew Active Fitness Program & Fitbit
OTC	\$40/quarter catalog	\$60/quarter catalog	\$40/quarter catalog
Hearing Aid	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years
Other Benefits	Nurseline	Nurseline	Nurseline

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2021 Medicare Advantage Service Area



Plan ID	Plan Name
H0271-019-000	UnitedHealthcare® Medicare Advantage Assure (PPO)
<i>Illinois:</i> Bond, Clinton, Jersey, Macoupin, Madison, Monroe, St. Clair	
H2228-083-000	AARP® Medicare Advantage Walgreens (PPO)
H2228-030-000	AARP® Medicare Advantage Choice Plan 1 (PPO)
H2802-028-000	AARP® Medicare Advantage (HMO-POS)
<i>Illinois:</i> Bond, Clinton, Jersey, Macoupin, Madison, Monroe, St. Clair; <i>Missouri:</i> Crawford, Franklin, Gasconade, Jefferson, St. Charles, St. Francois, St. Louis, St. Louis City, Ste. Genevieve, Warren, Washington	

Market Landscape ¹	
Eligibles (as of May 2020)	626,013
YOY Eligible Growth	4.3%
MA Non-SNP Penetration	32.2%
YOY MA Non-SNP Enrollment Growth	9.4%
UHC Non-SNP Market Share	39.7%

¹ May 2020 CMS.gov MA Ind State/County Enrollment within UHC 2021 MA Ind Footprint.

2021 PRODUCT BENEFIT GRID

ST. LOUIS



Plan Name	AARP® Medicare Advantage (HMO-POS)	AARP® Medicare Advantage Walgreens (PPO)	AARP® Medicare Advantage Choice Plan 1 (PPO)
Plan ID	H2802-028-000	H2228-083-000	H2228-030-000
Plan Highlights	\$0 premium plan for those who are cost-conscious and want affordable coverage beyond Original Medicare. POS for dental only	\$0 premium plan for those who are cost-conscious, but want provider choice. \$0 Tier 1 Rx copays at Walgreens preferred retail pharmacy	Open access plan with low out-of-pocket costs and additional ancillaries
Premium	\$0	\$0	\$29
Medical Ded.	\$0	\$500	\$0
Max OOP	\$2,900	\$3,900	\$4,400
PCP/Specialist	\$0 / \$35; Referral Required	\$0 / \$40; No Referral Required	\$5 / \$45; No Referral Required
Inpatient Hospital	\$265 Days 1-8	\$300 Days 1-5	\$295 Days 1-6
ASC/Outpatient	\$0 or \$175 / \$0 or \$250	\$0 or \$175 / \$0 or \$250	\$0 or \$200 / \$0 or \$275
Telehealth	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits
Lab Copay	\$0	\$0	\$0
Rx Ded./Copays	\$0; \$3/\$12/\$47/\$100/33%	\$0; \$0/\$5/\$47/\$100/33% (Preferred)	\$150 Tiers 4-5; \$2/\$8/\$45/\$95/30%
Dental	\$1,000 Dental Level 3 (no cost sharing)	\$1,000 Dental Level 3 (no cost sharing)	\$1,000 Dental Level 3 (no cost sharing)
Eyewear	Up to \$200 every 2 years, standard lenses at no cost	Up to \$200 every 2 years, standard lenses at no cost	Up to \$100 every 2 years, standard lenses at no cost
Fitness	Renew Active Fitness Program & Fitbit	Renew Active Fitness Program & Fitbit	Renew Active Fitness Program & Fitbit
OTC	\$50/quarter catalog	Not Covered	\$50/quarter catalog
Hearing Aid	\$175 - \$1,875 copay for each device; limited to 2 devices every 2 years	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years
Other Benefits	Nurseline, Transportation: 18 one-way trips to or from approved locations, PERS	Nurseline	Nurseline

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NEW PLAN

Plan Name	UnitedHealthcare® Medicare Advantage Assure (PPO)
Plan ID	H0271-019-000
Plan Highlights	New! Plan designed for those with both Medicare and Medicaid - best for Full Duals
Premium	\$0 for Full Duals
Medical Ded.	\$0
Max OOP	\$0 for Full Duals
PCP/Specialist	\$0 for Full Duals / \$0 for Full Duals; No Referral Required
Inpatient Hospital	\$0 for Full Duals
ASC/Outpatient	\$0 for Full Duals
Telehealth	\$0 Virtual Medical & Mental Health Visits
Lab Copay	\$0 for Full Duals
Rx Ded./Copays	Varies by LIS Level
Dental	\$2,500 Dental Level 4 (no cost sharing)
Eyewear	Up to \$250 every 2 years, standard lenses at no cost
Fitness	Renew Active Fitness Program
OTC	\$195/quarter debit card
Hearing Aid	\$2,000 allowance for hearing aids every 2 years
Other Benefits	Nurseline, Transportation: 36 one-way trips to or from approved locations

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2021 Medicare Advantage Service Area



Plan ID Plan Name

R3444-008-000	UnitedHealthcare® Medicare Silver (Regional PPO C-SNP)
R3444-009-000	UnitedHealthcare® Medicare Gold (Regional PPO C-SNP)
R3444-012-000	UnitedHealthcare® Medicare Advantage Choice Plan 2 (Regional PPO)
R3444-023-000	UnitedHealthcare® Medicare Advantage Choice Plan 3 (Regional PPO)



All counties in state

Market Landscape¹

Eligibles (as of May 2020)	1,382,723
YOY Eligible Growth	5.3%
MA Non-SNP Penetration	26.6%
YOY MA Non-SNP Enrollment Growth	9.6%
UHC Non-SNP Market Share	30.9%

¹ May 2020 CMS.gov MA Ind State/County Enrollment within UHC 2021 MA Ind Footprint.



Plan Name	UnitedHealthcare® Medicare Advantage Choice Plan 3 (Regional PPO)	UnitedHealthcare® Medicare Advantage Choice Plan 2 (Regional PPO)
Plan ID	R3444-023-000 	R3444-012-000 
Plan Highlights	Open access plan for those seeking statewide provider choice	Open access plan for those seeking statewide provider choice
Premium	\$19	\$55
Medical Ded.	\$1000	\$0
Max OOP	\$6,700	\$6,700
PCP/Specialist	\$0 / \$40; No Referral Required	\$10 / \$50; No Referral Required
Inpatient Hospital	\$325 Days 1-5	\$370 Days 1-5
ASC/Outpatient	\$0 or \$325 / \$0 or \$325	\$0 or \$370 / \$0 or \$370
Telehealth	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits
Lab Copay	\$0	\$0
Rx Ded./Copays	\$245 Tiers 3-5; \$4/\$15/\$47/\$100/28%	\$295 Tiers 3-5; \$4/\$15/\$47/\$100/27%
Dental	Dental Level 1 (no cost sharing); Platinum Dental Rider Available	Dental Level 1 (no cost sharing); Platinum Dental Rider Available
Eyewear	Up to \$150 every 2 years, standard lenses at no cost	Up to \$100 every 2 years, standard lenses at no cost
Fitness	Not Covered	Not Covered
OTC	Not Covered	Not Covered
Hearing Aid	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years
Other Benefits	Nurseline	Nurseline

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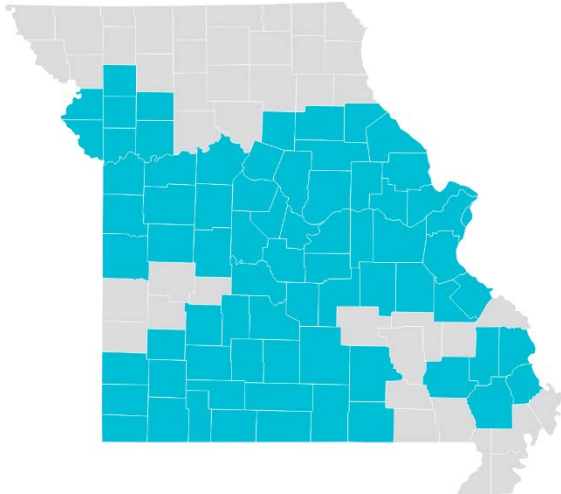


Plan Name	UnitedHealthcare® Medicare Gold (Regional PPO C-SNP)	UnitedHealthcare® Medicare Silver (Regional PPO C-SNP)
Plan ID	R3444-009-000 	R3444-008-000
Plan Highlights	Plan designed for those with Cardiovascular Disorders, Chronic Heart Failure, or Diabetes. Open access plan for those seeking statewide provider choice	Plan designed for those with Medicaid and Cardiovascular Disorders, Chronic Heart Failure, or Diabetes. Open access plan for those seeking statewide provider choice
Premium	\$23	\$0 for Full Duals
Medical Ded.	\$0	\$0
Max OOP	\$6,700	\$0 for Full Duals
PCP/Specialist	\$10 / \$45; No Referral Required	\$0 for Full Duals / \$0 for Full Duals; No Referral Required
Inpatient Hospital	\$335 Days 1-5	\$0 for Full Duals
ASC/Outpatient	\$0 or \$335 / \$0 or \$335	\$0 for Full Duals
Telehealth	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits
Lab Copay	\$0	\$0 for Full Duals
Rx Ded./Copays	\$295 Tiers 4-5; \$4/\$15/\$47/\$100/27%	Varies by LIS Level
Dental	\$500 Dental Level 2 (no cost sharing); Platinum Dental Rider Available	\$2,500 Dental Level 4 (no cost sharing)
Eyewear	Up to \$200 every 2 years, standard lenses at no cost	Up to \$250 every 2 years, standard lenses at no cost
Fitness	Not Covered	Not Covered
OTC	Not Covered	\$150/quarter catalog
Hearing Aid	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years	\$2,000 allowance for hearing aids every 2 years
Other Benefits	Nurseline, Transportation: 24 one-way trips to or from approved locations, PERS	Nurseline, Transportation: 24 one-way trips to or from approved locations, PERS

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2021 Medicare Advantage Service Area



Plan ID	Plan Name
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H2802-050-000	AARP® Medicare Advantage Patriot (HMO-POS)
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Illinois: Bond, Clinton, Jersey, Macoupin, Madison, Monroe, St. Clair; **Missouri:** Audrain, Barry, Bollinger, Boone, Callaway, Camden, Cape Girardeau, Christian, Cole, Cooper, Crawford, Dade, Dallas, Douglas, Franklin, Gasconade, Greene, Howard, Howell, Jasper, Jefferson, Laclede, Lawrence, Lincoln, Maries, McDonald, Miller, Moniteau, Monroe, Montgomery, Morgan, Newton, Oregon, Osage, Ozark, Phelps, Pike, Polk, Pulaski, Ralls, Randolph, Scott, Shannon, St. Charles, St. Francois, St. Louis, St. Louis City, Ste. Genevieve, Stoddard, Stone, Taney, Texas, Warren, Washington, Wayne, Webster, Wright

Market Landscape¹

Eligibles (as of May 2020)	1,242,549
YOY Eligible Growth	5.3%
MA Non-SNP Penetration	28.6%
YOY MA Non-SNP Enrollment Growth	9.4%
UHC Non-SNP Market Share	30.6%

¹ May 2020 CMS.gov MA Ind State/County Enrollment within UHC 2021 MA Ind Footprint.



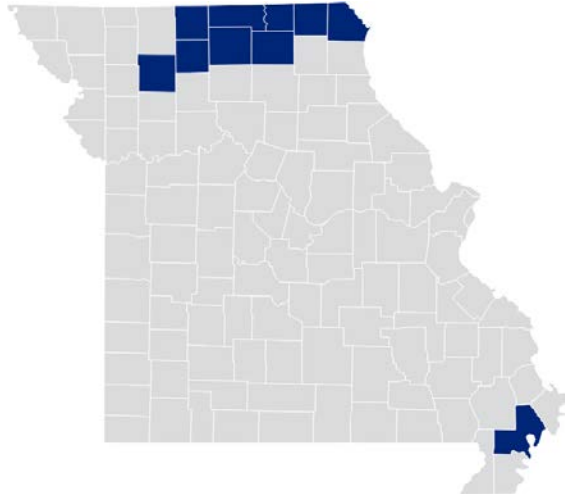
NEW PLAN

Plan Name	AARP® Medicare Advantage Patriot (HMO-POS)
Plan ID	H2802-050-000 
Plan Highlights	New! Plan designed for those who want affordable coverage beyond Original Medicare, but don't need Prescription Drug coverage - works well with VA coverage. POS for dental only
Premium	\$0; Part B Rebate: \$50
Medical Ded.	\$0
Max OOP	\$3,700
PCP/Specialist	\$0 / \$35; No Referral Required
Inpatient Hospital	\$295 Days 1-5
ASC/Outpatient	\$0 or \$295 / \$0 or \$295
Telehealth	\$0 Virtual Medical & Mental Health Visits
Lab Copay	\$0
Rx Ded./Copays	Not Covered
Dental	\$1,000 Dental Level 4 (no cost sharing)
Eyewear	Up to \$200 every 2 years, standard lenses at no cost
Fitness	Renew Active Fitness Program & Fitbit
OTC	\$50/quarter catalog
Hearing Aid	\$175 - \$1,875 copay for each device; limited to 2 devices every 2 years
Other Benefits	Nurseline

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 and Dual eligible benefits represent Full Duals and QMBs. Benefits and features vary by plan. Limitations and exclusions apply. © 2020 United HealthCare Services, Inc. All rights reserved. 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

2021 Medicare Advantage Service Area



Plan ID Plan Name

H5435-024-000 UnitedHealthcare® MedicareDirect Rx (PFFS)

Kansas: Chase, Cheyenne, Clay, **Cloud**, Decatur, Ellis, Geary, Graham, Lane, Logan, Marshall, Nemaha, Phillips, Rawlins, Republic, Riley, Rooks, Saline, Scott, Sheridan, Thomas, Washington;
Kentucky: Christian; **Missouri:** Adair, Clark, Daviess, Grundy, Mercer, New Madrid, Putnam, Schuyler, Scotland, Sullivan; **Montana:** Carter, Daniels, Dawson, Fallon, Garfield, Petroleum, Phillips, Powder River, Prairie, Roosevelt, Sheridan, **Valley**; **Nebraska:** Arthur, Banner, Blaine, **Box Butte**, Buffalo, Cheyenne, Dawson, Gosper, Hall, **Hamilton**, Hooker, **Kearney**, Keith, Keya Paha, Logan, Loup, McPherson, Merrick, Morrill, Nance, Perkins, Scotts Bluff, Sheridan, Sherman, Stanton, Thomas, Wheeler; **Oklahoma:** Latimer; **Wyoming:** Albany, Crook, Fremont, Natrona, Sheridan, Teton, Weston

H5435-001-000 UnitedHealthcare® MedicareDirect Patriot (PFFS)

Kansas: Chase, Cheyenne, Clay, Cloud, Decatur, Ellis, Geary, Graham, Lane, Logan, Marshall, Nemaha, Phillips, Rawlins, Republic, Riley, Rooks, Saline, Scott, Sheridan, Thomas, Washington;
Kentucky: Christian; **Missouri:** Adair, Clark, Daviess, Grundy, Mercer, New Madrid, Putnam, Schuyler, Scotland, Sullivan; **Montana:** Carter, Daniels, Dawson, Fallon, Garfield, Petroleum, Phillips, Powder River, Prairie, Roosevelt, Sheridan, Valley; **Nebraska:** Arthur, Banner, Blaine, Box Butte, Buffalo, Cheyenne, Dawson, Gosper, Hall, Hamilton, Hooker, Kearney, Keith, Keya Paha, Logan, Loup, McPherson, Merrick, Morrill, Nance, Perkins, Scotts Bluff, Sheridan, Sherman, Stanton, Thomas, Wheeler; **Oklahoma:** Latimer; **Wyoming:** Albany, Crook, Fremont, Natrona, Sheridan, Teton, Weston

Market Landscape¹

Eligibles (as of May 2020)	22,876
YOY Eligible Growth	6.3%
MA Non-SNP Penetration	6.1%
YOY MA Non-SNP Enrollment Growth	33.5%
UHC Non-SNP Market Share	72.2%

¹ May 2020 CMS.gov MA Ind State/County Enrollment within UHC 2021 MA Ind Footprint.

MISSOURI PFFS



Plan Name	UnitedHealthcare® MedicareDirect Patriot (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 coverage	Non-network PFFS plan allows you to see any doctor who accepts Medicare with built in Part D coverage
Premium	\$40	\$64
Medical Ded.	\$0	\$0
Max OOP	\$6,700	\$6,700
PCP/Specialist	\$25 / \$50; No Referral Required	\$25 / \$50; No Referral Required
Inpatient Hospital	\$395 Days 1-4	\$395 Days 1-4
ASC/Outpatient	\$0 or \$395 / \$0 or \$395	\$0 or \$395 / \$0 or \$395
Telehealth	\$0 Virtual Medical Visits	\$0 Virtual Medical Visits
Lab Copay	\$0	\$0
Rx Ded./Copays	Not Covered	\$295 Tiers 3-5; \$4/\$14/\$47/\$100/27%
Dental	Not Covered	Not Covered
Eyewear	Not Covered	Not Covered
Fitness	Not Covered	Not Covered
OTC	Not Covered	Not Covered
Hearing Aid	Not Covered	Not Covered
Other Benefits	Nurseline	Nurseline

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● Current Footprint ● Footprint Expansion

2021 Medicare Advantage Service Area



Plan ID	Plan Name
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R3444-011-000	UnitedHealthcare Dual Complete® Choice (Regional PPO D-SNP)
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All counties in state

H0169-002-000	UnitedHealthcare Dual Complete® (HMO D-SNP)
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Missouri: Adair, Andrew, Atchison, Audrain, Barry, Barton, Bates, Benton, Bollinger, Boone, Buchanan, Caldwell, Callaway, Camden, Cape Girardeau, Carroll, Carter, Cass, Cedar, Chariton, Christian, Clark, Clay, Clinton, Cole, Cooper, Crawford, Dade, Dallas, Daviess, DeKalb, Dent, Douglas, Franklin, Gasconade, Gentry, Greene, Grundy, Harrison, Henry, Hickory, Holt, Howard, Howell, Iron, Jackson, Jasper, Jefferson, Johnson, Knox, Laclede, Lafayette, Lawrence, Lewis, Lincoln, Linn, Livingston, Macon, Madison, Maries, McDonald, Mercer, Miller, Mississippi, Moniteau, Monroe, Montgomery, Morgan, New Madrid, Newton, Nodaway, Oregon, Osage, Ozark, Pemiscot, Perry, Pettis, Phelps, Pike, Platte, Polk, Pulaski, Putnam, Ralls, Randolph, Ray, Reynolds, Ripley, Saline, Schuyler, Scott, Shannon, Shelby, St. Charles, St. Clair, St. Francois, St. Louis, St. Louis City, Ste. Genevieve, Stoddard, Stone, Sullivan, Taney, Texas, Vernon, Warren, Washington, Wayne, Webster, Worth, Wright


Market Landscape¹

Est. Dual Eligibles	183,217
D-SNP Enrollees	39,263
D-SNP Penetration (All Plans)	21.4%
Total UHC D-SNP Enrollees	24,245
UHC D-SNP Market Share	21.4%

¹ UHC Dual SNP service area only; Estimated Dual Eligibles are projected based on September 2019 CMS.gov data (includes approx. 26,235 partial duals who may or may not be eligible).

MISSOURI DUAL



Plan Name	UnitedHealthcare Dual Complete® (HMO D-SNP)	UnitedHealthcare Dual Complete® Choice (Regional PPO D-SNP)
Plan ID	H0169-002-000 	R3444-011-000
Medicaid Eligibility	Full: FBDE, QMB, QMB+, SLMB+	Full: FBDE, QMB, QMB+, SLMB+
Premium	\$0	\$0
Acupuncture	Not Covered	Not Covered
Chiro	Not Covered	Not Covered
Dental	\$3,500 Dental Level 4 (no cost sharing)	\$1,500 Dental Level 4 (no cost sharing)
Eyewear	Up to \$400 per year	Up to \$300 every 2 years, standard lenses at no cost
Fitness	Renew Active Fitness Program & Fitbit	Not Covered
Foot Care	\$0, 6 visits per year	\$0, 6 visits per year
Hearing Aid	\$2,000 allowance for hearing aids every 2 years	\$3,600 allowance for hearing aids every 2 years
Meal Program	\$0, Up to 42 meals for 21 days, two times per year	Not Covered
Healthy Foods	\$50 per month food allowance, amount expires monthly	Not Covered
OTC	\$310/quarter debit card	\$150/quarter catalog
PERS	\$0	Not Covered
Telehealth	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits
Transportation	60 one-way trips to or from approved locations, including trips to the gym	12 one-way trips to or from approved locations
Other Benefits	Nurseline	Nurseline

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