

# Washington

## 2021 Medicare Advantage Plans

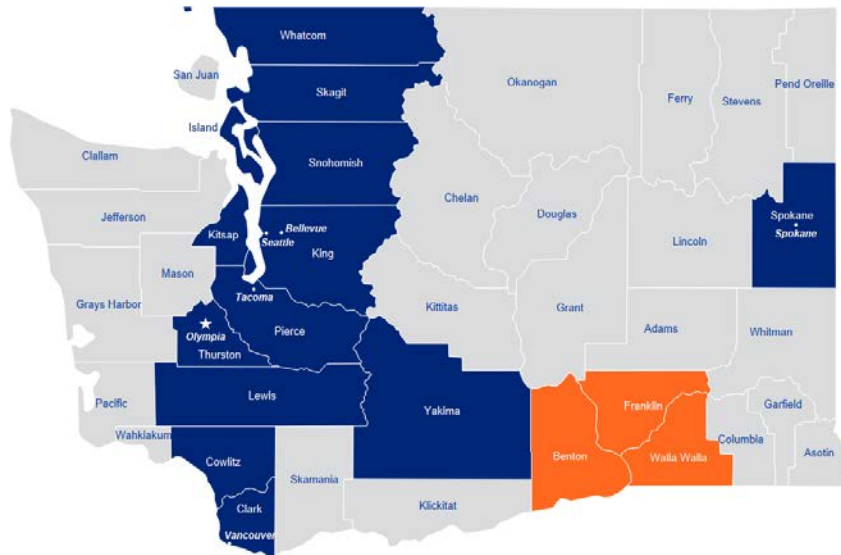
Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing and dual-focused plans represent Full Dual and QMB cost sharing. Benefits and features vary by plan. Limitations and exclusions apply.

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

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● Current Footprint 
 ● Dual Only Footprint 
 ● No Footprint

2021 Medicare Advantage Service Area



State Landscape<sup>1</sup>

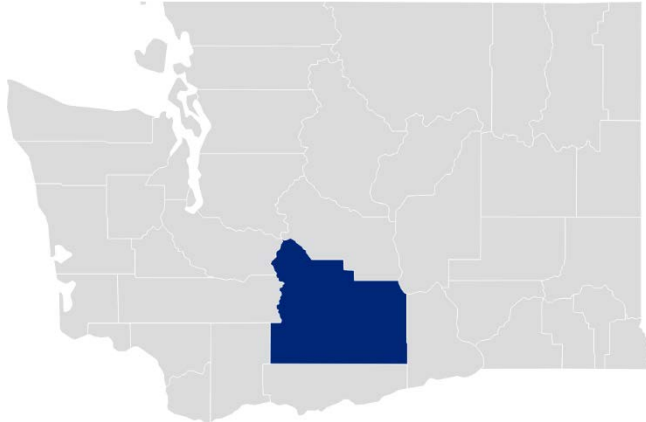
Eligibles (as of May 2020)	1,298,129
Estimated Dual Eligibles <sup>2</sup>	171,776
YOY Eligible Growth	5.4%
MA Penetration	37.0%
YOY MA Enrollment Growth	9.7%
UHC Market Share	37.3%

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

<sup>2</sup> UHC Dual SNP service area only; Estimated Dual Eligibles are projected based on September 2019 CMS.gov data (includes approx. 24,838 partial duals who may or may not be eligible).

● Current Footprint   ● Footprint Expansion

2021 Medicare Advantage Service Area



Plan ID	Plan Name
H1821-003-000	AARP® Medicare Advantage Choice (PPO)
<i>Washington:</i> Kitsap, Lewis, Pierce, Skagit, Whatcom, Yakima	
H3805-037-000	AARP® Medicare Advantage Plan 1 (HMO)
H3805-015-000	AARP® Medicare Advantage Plan 3 (HMO)
<i>Washington:</i> Clark, Cowlitz, Island, King, Kitsap, Lewis, Pierce, Skagit, Snohomish, Thurston, Whatcom, Yakima	
H3805-029-000	AARP® Medicare Advantage (HMO)
<i>Washington:</i> Yakima	

Market Landscape<sup>1</sup>

Eligibles (as of May 2020)	46,048
YOY Eligible Growth	3.6%
MA Non-SNP Penetration	16.3%
YOY MA Non-SNP Enrollment Growth	23.4%
UHC Non-SNP Market Share	14.2%

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

# 2021 PRODUCT BENEFIT GRID

## CENTRAL WASHINGTON




### NEW PLAN

Plan Name	AARP® Medicare Advantage (HMO)	AARP® Medicare Advantage Plan 1 (HMO)
Plan ID	H3805-029-000	H3805-037-000
Plan Highlights	Low premium plan for those shopping on value and lower out-of-pocket costs	<b>New!</b> Higher premium plan with low out-of-pocket costs and rich ancillaries
Premium	\$29	\$88
Medical Ded.	\$0	\$0
Max OOP	\$6,700	\$4,200
PCP/Specialist	\$0 / \$45; Referral Required	\$5 / \$35; Referral Required
Inpatient Hospital	\$440 Days 1-4	\$250 Days 1-7
ASC/Outpatient	\$0 or \$435 / \$0 or \$435	\$0 or \$245 / \$0 or \$245
Telehealth	\$0 Virtual Medical & <a href="#">Mental Health Visits</a>	\$0 Virtual Medical & Mental Health Visits
Lab Copay	\$0	\$0
Rx Ded./Copays	\$195 Tiers 3-5; \$3/\$12/\$47/\$100/29%	\$185 Tiers 3-5; \$3/\$12/\$45/\$95/29%
Dental	Not Covered; Platinum Dental Rider Available	Dental Level 1 (no cost sharing); Platinum Dental Rider Available
Eyewear	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	Renew Active Fitness Program
OTC	\$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
Other Benefits	Nurseline	Nurseline, Acupuncture: \$10; 12 visits/year, Chiropractic: \$10; 12 visits/year, Naturopathy: \$10; unlimited visits/year

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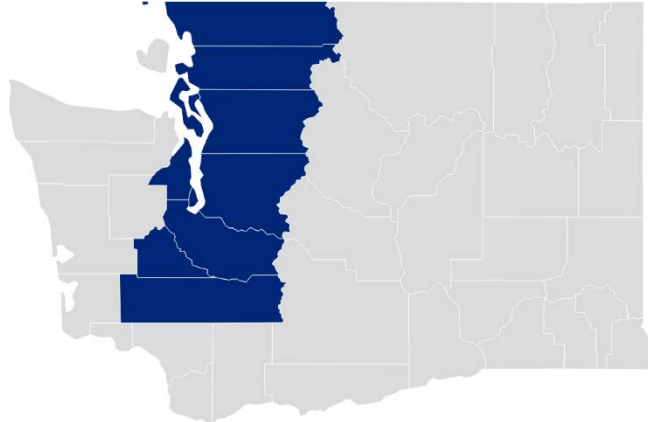
NEW PLAN

Plan Name	AARP® Medicare Advantage Choice (PPO)	AARP® Medicare Advantage Plan 3 (HMO)
Plan ID	H1821-003-000 	H3805-015-000
Plan Highlights	<b>New!</b> Low premium plan for those who are cost-conscious, but want provider choice	Mid premium plan for those shopping on value and lower out-of-pocket costs. Plan offers coverage outside of the network for certain services
Premium	\$19	\$45
Medical Ded.	\$0	\$0
Max OOP	\$6,500	\$5,900
PCP/Specialist	\$0 / \$45; No Referral Required	\$0 / \$45; Referral Required
Inpatient Hospital	\$390 Days 1-5	\$375 Days 1-4
ASC/Outpatient	\$0 or \$350 / \$0 or \$350	\$0 or \$370 / \$0 or \$370
Telehealth	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & <a href="#">Mental Health Visits</a>
Lab Copay	\$0	<a href="#">\$0</a>
Rx Ded./Copays	\$225 Tiers 3-5; \$0/\$12/\$45/\$95/29%	\$225 Tiers 3-5; \$3/\$12/\$45/\$95/29%
Dental	\$500 Dental Level 2 (no cost sharing); Platinum Dental Rider Available	Dental Level 1 (no cost sharing); Platinum Dental Rider Available
Eyewear	Up to \$100 every 2 years, standard lenses at no cost	Not Covered
Fitness	Renew Active Fitness Program	Renew Active Fitness Program
OTC	\$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
Other Benefits	Nurseline, Meal Benefit: 42 meals over 14 days	Nurseline, Acupuncture: \$10; 12 visits/year, Chiropractic: \$10; 12 visits/year, Naturopathy: \$10; unlimited visits/year

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● Current Footprint   ● Footprint Expansion

2021 Medicare Advantage Service Area



Market Landscape <sup>1</sup>	
Eligibles (as of May 2020)	940,577
YOY Eligible Growth	5.4%
MA Non-SNP Penetration	27.5%
YOY MA Non-SNP Enrollment Growth	8.7%
UHC Non-SNP Market Share	31.4%



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

Plan ID	Plan Name
H1821-002-000	<b>AARP® Medicare Advantage Choice (PPO)</b> <i>Washington:</i> Clark, Cowlitz, Island, King, Snohomish, Thurston
H3805-032-000	<b>AARP® Medicare Advantage Walgreens (HMO-POS)</b> <i>Washington:</i> King, Pierce, Snohomish, Thurston
H1821-003-000	<b>AARP® Medicare Advantage Choice (PPO)</b> <i>Washington:</i> Kitsap, Lewis, Pierce, Skagit, Whatcom, Yakima
H3805-015-000	<b>AARP® Medicare Advantage Plan 3 (HMO)</b>
H3805-037-000	<b>AARP® Medicare Advantage Plan 1 (HMO)</b> <i>Washington:</i> Clark, Cowlitz, Island, King, Kitsap, Lewis, Pierce, Skagit, Snohomish, Thurston, Whatcom, Yakima
H3805-020-000	<b>AARP® Medicare Advantage Plan 2 (HMO)</b> <i>Washington:</i> Island, Snohomish
H3805-017-000	<b>AARP® Medicare Advantage Plan 2 (HMO)</b> <i>Washington:</i> King
H3805-019-000	<b>AARP® Medicare Advantage Plan 2 (HMO)</b> <i>Washington:</i> Kitsap, Pierce
H3805-025-001	<b>AARP® Medicare Advantage Plan 2 (HMO)</b> <i>Washington:</i> Lewis
H3805-021-000	<b>AARP® Medicare Advantage (HMO)</b> <i>Washington:</i> Skagit, Whatcom
H3805-025-002	<b>AARP® Medicare Advantage Plan 2 (HMO)</b> <i>Washington:</i> Thurston

# 2021 PRODUCT BENEFIT GRID

## SEATTLE



	NEW PLAN		NEW PLAN
Plan Name	AARP® Medicare Advantage Choice (PPO)	AARP® Medicare Advantage Choice (PPO)	AARP® Medicare Advantage Plan 3 (HMO)
Plan ID	H1821-002-000 	H1821-003-000 	H3805-015-000
Plan Highlights	<b>New!</b> \$0 premium plan for those who are cost-conscious, but want provider choice	<b>New!</b> Low premium plan for those who are cost-conscious, but want provider choice	Mid premium plan for those shopping on value and lower out-of-pocket costs. Plan offers coverage outside of the network for certain services
Premium	\$0	\$19	\$45
Medical Ded.	\$0	\$0	\$0
Max OOP	\$6,500	\$6,500	\$5,900
PCP/Specialist	\$0 / \$45; No Referral Required	\$0 / \$45; No Referral Required	\$0 / \$45; Referral Required
Inpatient Hospital	\$390 Days 1-5	\$390 Days 1-5	\$375 Days 1-4
ASC/Outpatient	\$0 or \$350 / \$0 or \$350	\$0 or \$350 / \$0 or \$350	\$0 or \$370 / \$0 or \$370
Telehealth	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & <b>Mental Health Visits</b>
Lab Copay	\$0	\$0	<b>\$0</b>
Rx Ded./Copays	\$225 Tiers 3-5; \$0/\$12/\$45/\$95/29%	\$225 Tiers 3-5; \$0/\$12/\$45/\$95/29%	\$225 Tiers 3-5; \$3/\$12/\$45/\$95/29%
Dental	\$500 Dental Level 2 (no cost sharing); Platinum Dental Rider Available	\$500 Dental Level 2 (no cost sharing); Platinum Dental Rider Available	Dental Level 1 (no cost sharing); Platinum Dental Rider Available
Eyewear	Up to \$100 every 2 years, standard lenses at no cost	Up to \$100 every 2 years, standard lenses at no cost	Not Covered
Fitness	Renew Active Fitness Program	Renew Active Fitness Program	Renew Active Fitness Program
OTC	\$40/quarter catalog	\$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, Meal Benefit: 42 meals over 14 days	Nurseline, Meal Benefit: 42 meals over 14 days	Nurseline, Acupuncture: \$10; 12 visits/year, Chiropractic: \$10; 12 visits/year, Naturopathy: \$10; unlimited visits/year

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# 2021 PRODUCT BENEFIT GRID

## SEATTLE



Plan Name	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Plan 1 (HMO)	AARP® Medicare Advantage Plan 2 (HMO)
<b>Plan ID</b>	H3805-017-000	H3805-037-000	H3805-019-000
<b>Plan Highlights</b>	\$0 premium plan for those who are cost-conscious and want affordable coverage beyond Original Medicare	Higher premium plan with low out-of-pocket costs and rich ancillaries	Low premium plan for those shopping on value and lower out-of-pocket costs
<b>Premium</b>	\$0	\$88	\$24
<b>Medical Ded.</b>	\$0	\$0	\$0
<b>Max OOP</b>	\$6,700	\$4,200	\$6,700
<b>PCP/Specialist</b>	\$0 / \$50; Referral Required	\$5 / \$35; Referral Required	\$15 / \$50; Referral Required
<b>Inpatient Hospital</b>	\$390 Days 1-5	\$250 Days 1-7	\$440 Days 1-4
<b>ASC/Outpatient</b>	\$0 or \$385 / \$0 or \$385	\$0 or \$245 / \$0 or \$245	\$0 or \$435 / \$0 or \$435
<b>Telehealth</b>	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & Mental Health Visits
<b>Lab Copay</b>	\$0	\$0	\$0
<b>Rx Ded./Copays</b>	\$275 Tiers 3-5; \$3/\$12/\$47/\$100/28%	\$185 Tiers 3-5; \$3/\$12/\$45/\$95/29%	\$200 Tiers 3-5; \$3/\$12/\$47/\$100/29%
<b>Dental</b>	Not Covered; Platinum Dental Rider Available	Dental Level 1 (no cost sharing); Platinum Dental Rider Available	Not Covered; Platinum Dental Rider Available
<b>Eyewear</b>	Not Covered	Up to \$100 every 2 years, standard lenses at no cost	Not Covered
<b>Fitness</b>	Renew Active Fitness Program	Renew Active Fitness Program	Renew Active Fitness Program
<b>OTC</b>	\$40/quarter catalog	\$50/quarter catalog	\$50/quarter catalog
<b>Hearing Aid</b>	\$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
<b>Other Benefits</b>	Nurseline	Nurseline, Acupuncture: \$10; 12 visits/year, Chiropractic: \$10; 12 visits/year, Naturopathy: \$10; unlimited visits/year	Nurseline


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# 2021 PRODUCT BENEFIT GRID

## SEATTLE



Plan Name	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Walgreens (HMO-POS)
Plan ID	H3805-025-002	H3805-020-000	H3805-032-000 
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	\$0 premium plan with popular ancillaries. \$0 Tier 1 and Tier 2 Rx copays at Walgreens preferred retail pharmacy. POS for dental only
Premium	\$0	\$0	\$0
Medical Ded.	\$0	\$0	\$0
Max OOP	\$6,700	\$6,700	\$6,500
PCP/Specialist	\$0 / \$50; Referral Required	\$10 / \$50; Referral Required	\$0 / \$40; Referral Required
Inpatient Hospital	\$390 Days 1-5	\$390 Days 1-5	\$400 Days 1-4
ASC/Outpatient	\$0 or \$390 / \$0 or \$390	\$0 or \$385 / \$0 or \$385	\$0 or \$325 / \$0 or \$325
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	\$195 Tiers 3-5; \$3/\$12/\$47/\$100/29%	\$275 Tiers 3-5; \$3/\$12/\$47/\$100/28%	\$0; \$0/\$0/\$47/\$100/33% (Preferred)
Dental	Not Covered; Platinum Dental Rider Available	Not Covered; Platinum Dental Rider Available	\$500 Dental Level 2 (no cost sharing); Platinum Dental Rider Available
Eyewear	Up to \$100 every 2 years, standard lenses at no cost	Not Covered	Up to \$100 every 2 years, standard lenses at no cost
Fitness	Renew Active Fitness Program	Renew Active Fitness Program	Renew Active Fitness Program
OTC	\$40/quarter catalog	\$40/quarter catalog	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	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years
Other Benefits	Nurseline	Nurseline	Nurseline

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# 2021 PRODUCT BENEFIT GRID

## SEATTLE

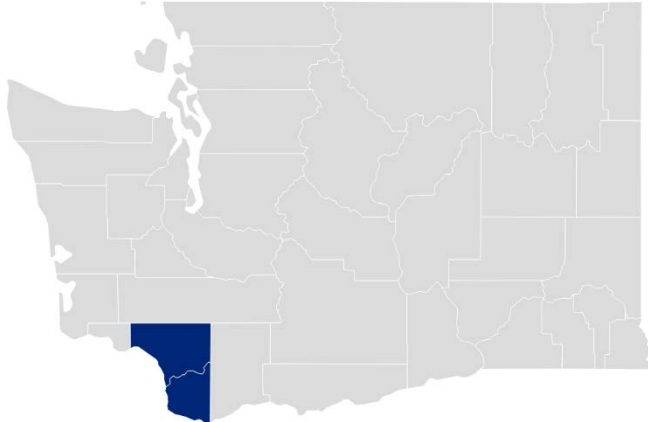


Plan Name	AARP® Medicare Advantage (HMO)	AARP® Medicare Advantage Plan 2 (HMO)
Plan ID	H3805-021-000	H3805-025-001
Plan Highlights	Low premium plan for those shopping on value and lower out-of-pocket costs	Low premium plan for those shopping on value and low out-of-pocket costs
Premium	\$24	\$19
Medical Ded.	\$0	\$0
Max OOP	\$6,700	\$6,700
PCP/Specialist	\$15 / \$50; Referral Required	\$15 / \$50; Referral Required
Inpatient Hospital	\$440 Days 1-4	\$440 Days 1-4
ASC/Outpatient	\$0 or \$435 / \$0 or \$435	\$0 or \$435 / \$0 or \$435
Telehealth	\$0 Virtual Medical & <a href="#">Mental Health Visits</a>	\$0 Virtual Medical & <a href="#">Mental Health Visits</a>
Lab Copay	\$0	\$0
Rx Ded./Copays	\$275 Tiers 3-5; \$3/\$12/\$47/\$100/28%	\$195 Tiers 3-5; \$3/\$12/\$47/\$100/29%
Dental	Not Covered; Platinum Dental Rider Available	Not Covered; Platinum Dental Rider Available
Eyewear	Not Covered	Up to \$100 every 2 years, standard lenses at no cost
Fitness	Renew Active Fitness Program	Renew Active Fitness Program
OTC	\$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
Other Benefits	Nurseline	Nurseline

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● Current Footprint   ● Footprint Expansion

2021 Medicare Advantage Service Area



Plan ID	Plan Name
H1821-002-000	AARP® Medicare Advantage Choice (PPO) <i>Washington:</i> Clark, Cowlitz, Island, King, Snohomish, Thurston
H3805-030-000	AARP® Medicare Advantage Walgreens (HMO) <i>Washington:</i> Clark
H3805-016-000	AARP® Medicare Advantage Plan 2 (HMO) <i>Washington:</i> Clark, Cowlitz
H3805-037-000	AARP® Medicare Advantage Plan 1 (HMO)
H3805-015-000	AARP® Medicare Advantage Plan 3 (HMO) <i>Washington:</i> Clark, Cowlitz, Island, King, Kitsap, Lewis, Pierce, Skagit, Snohomish, Thurston, Whatcom, Yakima

Market Landscape <sup>1</sup>	
Eligibles (as of May 2020)	129,156
YOY Eligible Growth	5.9%
MA Non-SNP Penetration	43.8%
YOY MA Non-SNP Enrollment Growth	5.8%
UHC Non-SNP Market Share	22.9%

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



Plan Name	AARP® Medicare Advantage Plan 2 (HMO)	AARP® Medicare Advantage Plan 3 (HMO)	AARP® Medicare Advantage Plan 1 (HMO)
<b>Plan ID</b>	H3805-016-000	H3805-015-000	H3805-037-000
<b>Plan Highlights</b>	\$0 premium plan for those who are cost-conscious and want affordable coverage beyond Original Medicare	Mid premium plan for those shopping on value and lower out-of-pocket costs. Plan offers coverage outside of the network for certain services	Higher premium plan with low out-of-pocket costs and rich ancillaries
<b>Premium</b>	\$0	\$45	\$88
<b>Medical Ded.</b>	\$0	\$0	\$0
<b>Max OOP</b>	\$6,700	\$5,900	\$4,200
<b>PCP/Specialist</b>	\$15 / \$50; Referral Required	\$0 / \$45; Referral Required	\$5 / \$35; Referral Required
<b>Inpatient Hospital</b>	\$440 Days 1-4	\$375 Days 1-4	\$250 Days 1-7
<b>ASC/Outpatient</b>	\$0 or \$435 / \$0 or \$435	\$0 or \$370 / \$0 or \$370	\$0 or \$245 / \$0 or \$245
<b>Telehealth</b>	\$0 Virtual Medical & <a href="#">Mental Health Visits</a>	\$0 Virtual Medical & <a href="#">Mental Health Visits</a>	\$0 Virtual Medical & <a href="#">Mental Health Visits</a>
<b>Lab Copay</b>	\$0	\$0	\$0
<b>Rx Ded./Copays</b>	\$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%
<b>Dental</b>	Not Covered; Platinum Dental Rider Available	Dental Level 1 (no cost sharing); Platinum Dental Rider Available	Dental Level 1 (no cost sharing); Platinum Dental Rider Available
<b>Eyewear</b>	Up to \$100 every 2 years, standard lenses at no cost	Not Covered	Up to \$100 every 2 years, standard lenses at no cost
<b>Fitness</b>	Renew Active Fitness Program	Renew Active Fitness Program	Renew Active Fitness Program
<b>OTC</b>	\$40/quarter catalog	\$50/quarter catalog	\$50/quarter catalog
<b>Hearing Aid</b>	\$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
<b>Other Benefits</b>	Nurseline	Nurseline, Acupuncture: \$10; 12 visits/year, Chiropractic: \$10; 12 visits/year, Naturopathy: \$10; unlimited visits/year	Nurseline, Acupuncture: \$10; 12 visits/year, Chiropractic: \$10; 12 visits/year, Naturopathy: \$10; unlimited visits/year

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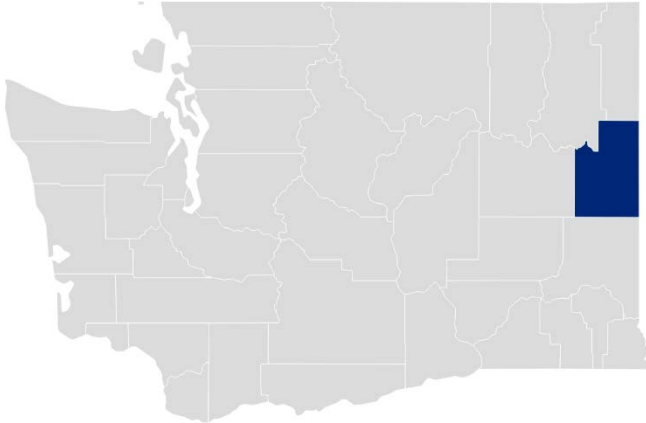
NEW PLAN

Plan Name	AARP® Medicare Advantage Walgreens (HMO)	AARP® Medicare Advantage Choice (PPO)
Plan ID	H3805-030-000 	H1821-002-000 
Plan Highlights	\$0 premium with popular ancillaries. \$0 Tier 1 and Tier 2 Rx copays at Walgreens preferred retail pharmacy. Plan offers coverage outside of the network for certain services	<b>New!</b> \$0 premium plan for those who are cost-conscious, but want provider choice
Premium	\$0	\$0
Medical Ded.	\$0	\$0
Max OOP	\$5,900	\$6,500
PCP/Specialist	\$0 / \$50; Referral Required	\$0 / \$45; No Referral Required
Inpatient Hospital	\$400 Days 1-4	\$390 Days 1-5
ASC/Outpatient	\$0 or \$300 / \$0 or \$300	\$0 or \$350 / \$0 or \$350
Telehealth	\$0 Virtual Medical & <a href="#">Mental Health Visits</a>	\$0 Virtual Medical & Mental Health Visits
Lab Copay	\$0	\$0
Rx Ded./Copays	\$125 Tiers 3-5; \$0/\$0/\$47/\$100/30% (Preferred)	\$225 Tiers 3-5; \$0/\$12/\$45/\$95/29%
Dental	Dental Level 1 (no cost sharing); Platinum Dental Rider Available	\$500 Dental Level 2 (no cost sharing); Platinum Dental Rider Available
Eyewear	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	Renew Active Fitness Program
OTC	Not Covered	\$40/quarter catalog
Hearing Aid	Not Covered	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years
Other Benefits	Nurseline	Nurseline, Meal Benefit: 42 meals over 14 days

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● Current Footprint    ● Footprint Expansion

2021 Medicare Advantage Service Area



Plan ID	Plan Name
H1821-001-000	AARP® Medicare Advantage Choice (PPO)
<i>Washington: Spokane</i>	
H3805-033-000	AARP® Medicare Advantage Plan 1 (HMO-POS)
H3805-034-000	AARP® Medicare Advantage Plan 2 (HMO-POS)
<i>Washington: Spokane</i>	

Market Landscape <sup>1</sup>	
Eligibles (as of May 2020)	115,422
YOY Eligible Growth	5.0%
MA Non-SNP Penetration	31.5%
YOY MA Non-SNP Enrollment Growth	10.1%
UHC Non-SNP Market Share	56.0%


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

# 2021 PRODUCT BENEFIT GRID

## SPOKANE



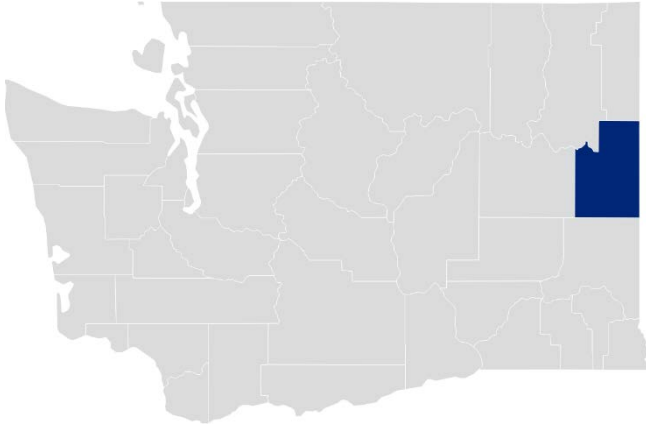
### NEW PLAN

Plan Name	AARP® Medicare Advantage Choice (PPO)	AARP® Medicare Advantage Plan 1 (HMO-POS)	AARP® Medicare Advantage Plan 2 (HMO-POS)
Plan ID	H1821-001-000 	H3805-033-000	H3805-034-000
Plan Highlights	<b>New!</b> \$0 premium plan for those who are cost-conscious, but want provider choice	\$0 premium plan for those who are cost-conscious and want affordable coverage beyond Original Medicare. POS for dental only. Passport included	Mid premium plan for those shopping on value and lower out-of-pocket costs. POS for dental only. Passport included
Premium	\$0	\$0	\$54
Medical Ded.	\$0	\$0	\$0
Max OOP	\$6,200	\$5,500	\$4,200
PCP/Specialist	\$0 / \$50; No Referral Required	\$0 / \$45; No Referral Required	\$0 / \$35; No Referral Required
Inpatient Hospital	\$395 Days 1-4	\$395 Days 1-4	\$320 Days 1-5
ASC/Outpatient	\$0 or \$390 / \$0 or \$390	\$0 or \$390 / \$0 or \$390	\$0 or \$315 / \$0 or \$315
Telehealth	\$0 Virtual Medical & Mental Health Visits	\$0 Virtual Medical & <b>Mental Health Visits</b>	\$0 Virtual Medical & <b>Mental Health Visits</b>
Lab Copay	\$0	\$0	\$0
Rx Ded./Copays	\$200 Tiers 3-5; \$2/\$8/\$45/\$95/29%	\$150 Tiers 3-5; \$2/\$8/\$45/\$95/30%	\$180 Tiers 3-5; \$2/\$8/\$45/\$95/29%
Dental	Dental Level 1 (no cost sharing); Platinum Dental Rider Available	<b>\$500 Dental Level 2 (no cost sharing);</b> Platinum Dental Rider Available	<b>\$1,000 Dental Level 3 (\$0 - 50% cost sharing)</b>
Eyewear	Up to \$100 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	Renew Active Fitness Program	Renew Active Fitness Program
OTC	\$40/quarter catalog	\$50/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	Nurseline	Nurseline

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● Current Footprint    ● Footprint Expansion

2021 Medicare Advantage Service Area



Plan ID      Plan Name

H3805-035-000    AARP® Medicare Advantage Patriot (HMO-POS)

*Washington:* Spokane

Market Landscape<sup>1</sup>

Eligibles (as of May 2020)	115,422
YOY Eligible Growth	5.0%
MA Non-SNP Penetration	31.5%
YOY MA Non-SNP Enrollment Growth	10.1%
UHC Non-SNP Market Share	56.0%

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



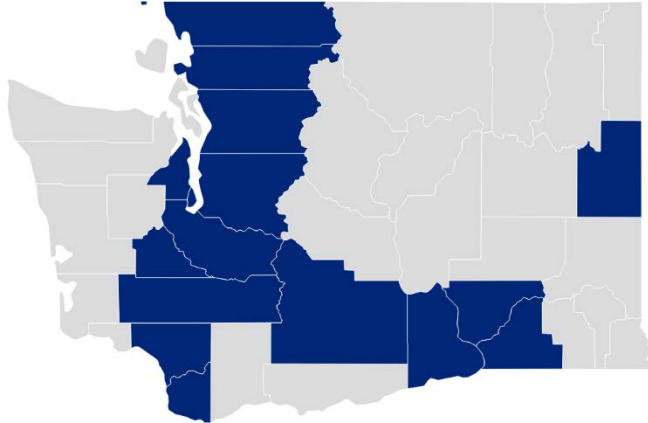


<b>Plan Name</b>	AARP® Medicare Advantage Patriot (HMO-POS)
<b>Plan ID</b>	H3805-035-000
<b>Plan Highlights</b>	Plan designed for those who want affordable coverage beyond Original Medicare, but don't need Prescription Drug coverage - works well with VA coverage. POS for dental only. Passport included
<b>Premium</b>	\$0; Part B Rebate: \$60
<b>Medical Ded.</b>	\$0
<b>Max OOP</b>	\$5,500
<b>PCP/Specialist</b>	\$0 / \$45; No Referral Required
<b>Inpatient Hospital</b>	\$395 Days 1-4
<b>ASC/Outpatient</b>	\$0 or \$390 / \$0 or \$390
<b>Telehealth</b>	\$0 Virtual Medical & <a href="#">Mental Health Visits</a>
<b>Lab Copay</b>	<a href="#">\$0</a>
<b>Rx Ded./Copays</b>	Not Covered
<b>Dental</b>	<a href="#">\$1,500 Dental Level 3 (no cost sharing)</a>
<b>Eyewear</b>	Up to \$100 every 2 years, standard lenses at no cost
<b>Fitness</b>	Renew Active Fitness Program
<b>OTC</b>	\$100/quarter catalog
<b>Hearing Aid</b>	\$375 - \$2,075 copay for each device; limited to 2 devices every 2 years
<b>Other Benefits</b>	Nurseline

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● Current Footprint    ● Footprint Expansion

### 2021 Medicare Advantage Service Area



Plan ID	Plan Name
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H5008-002-000	UnitedHealthcare Dual Complete® (HMO D-SNP)
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**Washington:** Benton, Clark, Cowlitz, Franklin, King, Kitsap, Lewis, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Yakima

#### Market Landscape<sup>1</sup>

Est. Dual Eligibles	171,776
D-SNP Enrollees	60,072
D-SNP Penetration (All Plans)	35.0%
Total UHC D-SNP Enrollees	39,695
UHC D-SNP Market Share	35.0%

<sup>1</sup> UHC Dual SNP service area only; Estimated Dual Eligibles are projected based on September 2019 CMS.gov data (includes approx. 24,838 partial duals who may or may not be eligible).

WASHINGTON DUAL



<b>Plan Name</b>	UnitedHealthcare Dual Complete® (HMO D-SNP)
<b>Plan ID</b>	H5008-002-000 <b>\$0 Rx</b>
<b>Medicaid Eligibility</b>	Full: FBDE, QMB, QMB+, SLMB+; Partial: QDWI, QI, SLMB
<b>Premium</b>	\$0
<b>Acupuncture</b>	\$0, 12 visits per year
<b>Chiro</b>	\$0, 12 visits per year
<b>Dental</b>	\$3,000 Dental Level 4 (no cost sharing)
<b>Eyewear</b>	Up to \$200 per year, standard lenses at no cost
<b>Fitness</b>	Renew Active Fitness Program
<b>Foot Care</b>	\$0, 4 visits per year
<b>Hearing Aid</b>	\$2,000 allowance for hearing aids every 2 years
<b>Meal Program</b>	Not Covered
<b>Healthy Foods</b>	Not Covered
<b>OTC</b>	\$295/quarter debit card
<b>PERS</b>	\$0
<b>Telehealth</b>	\$0 Virtual Medical & Mental Health Visits
<b>Transportation</b>	48 one-way trips to or from approved locations
<b>Other Benefits</b>	Nurseline

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