

2021 Dual Special Needs Plans

Clarity Guide



Clear answers to your Dual Special Needs plan questions. Get complete coverage in one plan. United Healthcare[®] Dual Complete

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Helping you get the benefits you deserve

Choosing the right health plan is a big decision. It's important you get the plan that has the right benefits for you and your needs.

This guide will help you see if a Dual Special Needs Plan (D-SNP) from UnitedHealthcare® is right for you.

What is a Dual Special Needs Plan?

A plan for people who have both Medicaid and Medicare

Dual Special Needs Plans (D-SNPs) are for people who have both Medicaid and Medicare. These plans are also known as dual health plans.

More than a Medicare plan

Dual plans are for people who may need extra help because of their age, or because they have a disability or other health issue. With a dual plan from UnitedHealthcare, you could get:

- Extra benefits beyond Original Medicare.
- A coordinated care experience.
- Wellness support.
- Access to a local network of doctors and pharmacies.

Dual plans offer more benefits and features at no cost, which may include:



Doctor visits:

- Outpatient care
- Screenings and shots
- Lab tests



Extra benefits like:

- Hearing
- Vision
- Dental
- Transportation



Hospital stays:

- Skilled nursing
- Home health



Prescription drug coverage:

 Included in many Dual Special **Needs Plans**

Who can join?

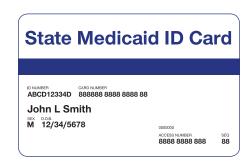
Here's how you can tell

If you can answer "yes" to the 4 questions below, chances are you can qualify for a Dual Special Needs Plan.



Do you qualify for state Medicaid?

- You could qualify for Medicaid based on income or due to a disability or some other special situation.
- You could also be 65 years old or older and receive extra assistance from your state.





Do you have Medicare Parts A and B?

 You're at least 65 years old, or you're under 65 and qualify on the basis of disability or other special situations.

AND

 You're a U.S. citizen or a legal resident who has lived in the USA for at least 5 years in a row.





Do you live in the plan's coverage area?

 Your UnitedHealthcare Licensed Sales Agent can confirm that your home address is in the plan's coverage area.



Do you meet the health requirements?

- Some dual plans have extra requirements based on health conditions.
- Speak with your UnitedHealthcare Licensed Sales Agent to discuss your specific situation.

What do dual plans offer?

Same Medicaid and Medicare coverage plus more

With a dual plan, you'll keep your Medicaid coverage and get added health care support compared with Original Medicare. A dual plan is complete coverage in one, which may also give you more choice and flexibility.

	What you may have now:	What you could have:
Medicaid benefits		✓
Hospital stays	/	/
Doctor and outpatient care	✓	✓
Prescription drugs	✓	✓
More choices of doctors		✓
More hospital choices		✓
More prescription drug coverage		✓
Extra benefits		/

Extra benefits for a \$0 plan premium

UnitedHealthcare dual plans include extra benefits to help you get care and services you may be missing today with Medicaid or Medicare alone. You could get:



Dental services not covered by Original Medicare including certain commonly used exams, X-rays, and cleanings. May also include coverage for additional dental services.



Virtual medical visits with an online doctor who can answer questions and treat many common conditions and prescribe most medications.2



Credits to shop for over-the-counter health care supplies like medications, vitamins and home medical needs.



Credits to buy fruits, vegetables, meats, dairy and other healthy foods.



Rides to appointments or approved places, such as your local pharmacy to take care of your health care needs.



Home delivery of fresh meals after a hospital stay to maintain proper nutrition during recovery.



Vision coverage with access to comprehensive routine eye exams, plus credits toward eyewear.



Drug coverage on thousands of commonly prescribed medications with home delivery.3



Emergency response device for in-home or on-the-go, to provide quick access to help 24/7/365 in any situation.1



And much, much more.

¹You must have a working landline and/or cellular phone coverage to take part in the personal emergency response monitoring benefit. Device may vary.

²Not all medical conditions can be treated through Virtual Medical Visits. The telehealth doctor will identify if you need to see an in-person doctor for treatment. Doctors can't prescribe medications in all states. Prescriptions cannot be written for opioids. Benefits and availability may vary by plan and location.

³Depending on your level of Medicaid eligibility, costs may vary. If you receive Medicare Extra Help, your premium and prescription drug costs may be lower.

What are your health needs?

Choosing the health plan that's right for you.

1	Do you take any prescription drugs?	☐ Yes	□ No
2	Are you looking for a preferred doctor, hospital or clinic?	☐ Yes	□ No
3	Do you expect changes to your finances in the coming year?	□ Yes	□ No
4	How's your current health? Some plans are designed for specific conditions.		
5	What are your vision needs?		
6	What are your hearing needs?		

Dual Special Needs Plans

	What are your dental needs?		
	What are your durable medical equipment (DME) needs?		
	Do you often buy health care products?	☐ Yes	□ No
0	Would you like to be able to visit online with a doctor or mental health provider?	☐ Yes	□ No
	What other services do you need?		

Take the next step today

Our friendly and knowledgeable licensed sales agents can help you compare all your choices and find the right plan for you.



Ask your agent to help you:

- See if your doctors, hospitals, specialists and clinics are in our provider network.
- Check that your prescription medicines are on a plan's drug list.
- Find out if you have a medical condition that could make you eligible for a certain type of special needs plan.
- Understand how a dual health plan works.

Using your enrollment guide

The enrollment guide has a lot of important information. It includes:

- Benefit highlights: A quick overview of common plan benefits.
- Summary of benefits: Plan details, plus information about your rights as a member.
- Medicare plan ratings: Yearly quality and performance ratings for all plans.
- Multi-language interpreter services: To get free help with translation and to answer questions.
- Plan information: About how your plan works and extra programs and services beyond Original Medicare.
- Drug list: Prescriptions covered by the plan.
- Customer service: Phone numbers and contact information.
- Enrollment: Everything you need to enroll, including forms and a checklist.

Other helpful resources

As well as your licensed sales agent, here are other resources that may be useful to you.

Medicare

Medicare Made Clear

An educational platform developed by UnitedHealthcare to help you better understand Medicare. Find out more at MedicareMadeClear.com.

Medicare Helpline

For questions about Medicare and detailed information about plans and policies available in your area, visit Medicare.gov or call Medicare at 1-800-633-4227, TTY 1-877-486-2048, 24 hours a day, 7 days a week.

Medicare and You

Official Medicare handbook for Medicare programs, updated each year. You can download a copy at **Medicare.gov** or call the Medicare Helpline to request a copy.

Online plan finders

For online tools to find and compare drug plans, Medicare Advantage plans and Medicare supplement plans, go to Medicare.gov.

Social Security

Social Security Administration

Get answers to questions about Medicare eligibility and enrollment, Social Security retirement benefits or disability benefits. You can also ask about your eligibility for financial help. Call 1-800-772-1213, TTY **1-800-325-0778**, 7 a.m. – 7 p.m., Monday - Friday. Or go to **SSA.gov**.

Low-Income Subsidy (LIS)

Extra Help with prescription drug costs

Dual plan members may get as much as \$4,000 per year in Extra Help to cover Medicare prescription drug costs. To see if you qualify, visit ssa.gov/medicare/prescriptionhelp.

Administration on Aging

Eldercare locator

For help in finding local, state and community-based organizations that serve older adults and their caregivers in your area, call 1-800-677-1116, TTY 711, 9 a.m. - 8 p.m. ET, Monday - Friday. Or go to **Eldercare.gov**.

State Resources

Your State's Medical Assistance or **Medicaid Office**

To learn whether you're eligible for financial help with the costs of Medicare, call your state's Medical Assistance or Medicaid office. They can answer questions about programs like PACE (Program of All-Inclusive Care for the Elderly) and the Medicare Savings Program.

You can also call the Medicare Helpline and ask the operator for the telephone number for your state's Medical Assistance or Medicaid office.

Why UnitedHealthcare?

Not all Dual Special Needs Plans are the same

Many private insurance companies offer dual special needs plans. As the industry leader, you can be more confident when you choose UnitedHealthcare as your dual plan insurance carrier.

Reasons to choose UnitedHealthcare:

- More than 40 years serving members with special needs.
- More dual-eligible members in more states than any other health care company.¹
- Members like and keep our dual plans.²
- We have the confidence of many community organizations who work with us.
- You have our promise and commitment to helping you live a healthier life.

Get a plan that gives you more

With a Dual Special Needs Plan from UnitedHealthcare, you could get many extra benefits to help you get care and services you may be missing today. Call your licensed sales agent with questions and for help to find the right plan for you.

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UnitedHealthcare Dual Complete® ONE (HMO D-SNP) is a Dual Eligible Special Needs Plan (D-SNP) with a Medicare contract and a contract with the New Jersey Medicaid program. Enrollment in UnitedHealthcare Dual Complete® ONE depends on contract renewal. This plan is available to anyone who has both Medicare and full New Jersey Medicaid benefits. Members must use network plan providers, pharmacies, and DME (Durable Medical Equipment) suppliers. Members will be enrolled into Medicare Part D prescription drug coverage under the plan and will be automatically disenrolled from any other Medicare Advantage or Medicare Part D prescription drug coverage. This information is not a complete description of benefits. Call 1-855-277-4716, TTY 711 for more information. Other pharmacies/physicians/providers are available in our network. Out-of-network/non-contracted providers are under no obligation to treat Plan/Part D sponsor members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

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¹Based on national market share, as of February 2019.

² Based on an average member stay of 4.5 years, as of February 2018, and a Net Promoter Score of 62, as of March 2018.