Welcome

1 Original Medicare Basics

2 Plan Benefits, Programs and Features

3 How to Enroll
UnitedHealthcare is here for you

Helping you make the most of your plan

**One-on-one help using your Medicare plan**

At UnitedHealthcare, it’s not just customer service. It’s 1-on-1 support to help answer your questions and take the extra steps to understand your needs. It’s helping navigate your care during a health event. And it’s helping you get the most out of your plan, so you can be at your best health.

**America’s #1 Medicare plan provider**

More people turn to UnitedHealthcare than any other company* when it’s time to choose their Medicare coverage. UnitedHealthcare is proud to have been serving the health care needs of people just like you for more than 40 years — and you can count on us to be here when you need us.

[^Network size varies by plan and by market. Based on UnitedHealthcare’s national provider network report, May 2021.]
When are you eligible for Medicare?

✓ You’re 65 years old, or you’re under 65 and qualify on the basis of disability or other special situation

AND

✓ You’re a U.S. citizen or a legal resident who has lived in the United States for at least 5 consecutive years

If you (or your spouse) have contributed payroll taxes to Medicare throughout your working life, you are eligible for Medicare when you reach age 65 — regardless of your income or health status
Understanding your Medicare choices

After you enroll in Original Medicare (Parts A and B), you may choose to enroll in additional Medicare coverage.

Step 1: Enroll in Original Medicare

**Original Medicare**
Provided by the federal government

**Part A**
Helps pay for hospital stays and inpatient care

**Part B**
Helps pay for doctor visits and outpatient care
Understanding your Medicare choices

Step 2: Decide if you need additional coverage. There are 2 ways to get it.

OPTION 1       or       OPTION 2

Add 1 or both of the following to Original Medicare

University of New Mexico Offers the following

Medicare Supplement plan
Offered by private companies

★ Helps pay for some or all of the out-of-pocket costs that come with Original Medicare

Medicare Part D plan
Offered by private companies

★ Helps pay for prescription drugs

Choose a Medicare Advantage plan:

Medicare Advantage plan or Part C plan
Offered by private companies

Part C:
Combines Part A (hospital insurance) and Part B (medical insurance) in 1 plan

Part D:
Usually includes prescription drug coverage

Provides additional benefits, services and programs not provided by Original Medicare
University of New Mexico Offering

Keep Original Medicare and add:

- **Medicare Supplement plan**
  Offered by private companies
  Helps pay for some or all of the out-of-pocket costs that come with Original Medicare

- **AND/OR**

- **Medicare Part D plan** *(prescription drugs)*
  Offered by private companies
  Helps pay for prescription drugs
Where to Learn More...

If under 65 / Actively working:

Review websites to further educate yourself on plan options:
• Medicare.gov
• MedicareMadeClear.com

Understand your needs:
• How is your health?
• Do you take prescription drugs?
• Are you looking for lower premiums vs. lower out of pocket costs?

If over 65 / retiring in 6-months:

• Enroll in Medicare the month before your 65th birthday.
• This will have Medicare start the month you turn 65.
• You can go to your local Social Security office or online at Medicare.gov
• Ensure Part B is effective for the first of the month you plan to retire
• Explore websites for additional information (Medicare.gov, MedicareMadeClear.com)
Understanding Original Medicare’s rules

• You must be entitled to Medicare Part A and/or enrolled in Medicare Part B and continue to pay your Medicare Part B premium

• If you do not enroll in a Medicare Part D prescription drug plan or a Medicare Advantage plan that includes prescription drug coverage, or you do not have other creditable prescription drug coverage, you may have to pay Medicare’s Late Enrollment Penalty

• You must inform us of any current prescription drug coverage or future enrollment that includes prescription drug coverage

• When you are a member, you are encouraged to read the plan’s Evidence of Coverage (EOC), including appeals and grievance rights

• The EOC also covers specific plan benefits, copays, exclusions, limitations and other terms

• Please review the full text of the Statement of Understanding in your 2022 enrollment kit
Plan Benefits, Programs and Features
University of New Mexico
AARP Medicare Supplement
Why choose a Medicare supplement insurance plan?

**Your coverage travels with you.**
Your coverage goes with you when traveling anywhere in the U.S. and is guaranteed to continue as long as you pay your premium when due.*

**It can make budgeting easier.**
Helps you manage some of the out-of-pocket costs that Medicare Parts A and B don’t pay.

**You’ll have access to many doctors.**
You’ll be able to visit any hospital or physician that accepts Medicare patients. And start off with a 30-day “free look” period.

*You also do not misstate one or more material facts when you apply for this plan.

This presentation is for retirees of ATC Management, Inc. who reside in Wisconsin.
Are you eligible?

If you can answer yes to these questions, then you are eligible to apply!

- Will you be enrolled in Medicare Parts A and B at the time your coverage begins?
- AND
- Are you a resident of the state in which you are applying for coverage?
Choose the right plan for you.

Discover which AARP Medicare Supplement Insurance Plan best fits your needs and budget.
What to expect

from an AARP® Medicare Supplement Insurance Plan insured by UnitedHealthcare Insurance Company (UnitedHealthcare).

**Stability**
- The only Medicare supplement plans endorsed by AARP
- Offering Medicare supplement plans in all states and most U.S. territories
- The largest Medicare supplement plan, with 1 in 3 Medicare beneficiaries nationwide enrolled in an AARP Medicare Supplement Plan¹

**Service**
- 96% of insured members are satisfied with their AARP Medicare Supplement Plan²
- Currently, insured members may change plans at any time³
- 98% of claims are processed in 10 days or less⁴
- 95% of active insured members currently renew their AARP Medicare Supplement Insurance Plans⁴

³If you choose to change from your current AARP Medicare Supplement Plan to AARP Medicare Supplement Plan G outside of your Open Enrollment or Guaranteed Issue Periods, you may be underwritten, you may not be accepted into the plan, or your rates may change.

This presentation is for retirees of ATC Management, Inc. who reside in Wisconsin.

PT10026WIGRS

CM_ATC
What to expect

Value
• Exclusive member services available at no additional cost to you\(^1\)
• Affordable, competitive rates\(^2\)

Experience
• Trusted by more than 4 million members\(^2\)
• Backed by the experience and expertise of UnitedHealthcare
• 9 out of 10 plan holders would recommend their plan to a friend or family member\(^3\)

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\(^1\)These are additional insured member services apart from the AARP Medicare Supplement Plan benefits, are not insurance programs, are subject to geographical availability, and may be discontinued at any time.


Your AARP Medicare Supplement Plan options:

<table>
<thead>
<tr>
<th>Description of service</th>
<th>G</th>
<th>N</th>
<th>L</th>
<th>K</th>
<th>B</th>
<th>A</th>
<th>F</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare Part A coinsurance and hospital costs (up to an additional 365 days after Medicare benefits are used)</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Medicare Part A deductible</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicare Part B coinsurance or copayment</td>
<td>✔</td>
<td></td>
<td>75%</td>
<td></td>
<td>50%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicare Part B deductible</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicare Part B excess charges</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blood (first three pints)</td>
<td>✔</td>
<td></td>
<td>75%</td>
<td></td>
<td>50%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foreign travel emergency (up to plan limits)</td>
<td>80%</td>
<td>80%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>80%</td>
<td>80%</td>
</tr>
<tr>
<td>Hospice care coinsurance or copayment</td>
<td>✔</td>
<td>✔</td>
<td>75%</td>
<td></td>
<td>50%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skilled nursing facility coinsurance</td>
<td>✔</td>
<td>✔</td>
<td>75%</td>
<td></td>
<td>50%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2019 out-of-pocket limit (Plans K and L only)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$2,780</td>
<td>$5,560</td>
</tr>
</tbody>
</table>

1Note: IMPORTANT: Plans C and F are only available to eligible Applicants (a) with a 65th birthday prior to 1/1/2020 or (b) who will be age 65 or older on or after 1/1/2020 on with a Medicare Part A effective date prior to 1/1/2020. Please call a licensed insurance agent if you have any questions 1-800-545-1797.

2Plan N pays 100% of the Part B coinsurance, except for a copayment of up to $20 for some office visits and up to a $50 copayment for emergency room visits that don’t result in an inpatient admission.

3While most Medicare supplement insurance plans do not have an annual out-of-pocket maximum, 2019 Plan K has an out-of-pocket maximum of $5,560 and Plan L has an out-of-pocket maximum of $2,780. Services under Plan K and Plan L that do not count toward out-of-pocket maximums include Part B excess charges and any service not covered by Medicare. After you meet your out-of-pocket yearly limit and your yearly Part B deductible ($185 in 2019), the Medicare supplement plans pay 100% of covered services for the rest of the calendar year. Exception: Plans K and L will pay 100% of Part B coinsurance for preventive services covered by Medicare.

4Beneficiaries must pay a separate deductible for a foreign travel emergency ($250 per year) and a lifetime maximum benefit of $50,000 applies.

5The plan pays 100% of covered services for the rest of the calendar year once beneficiaries have paid the out-of-pocket annual limit and annual Part B deductible ($185 in 2019).

This presentation is for retirees of University of New Mexico who reside in New Mexico.
Prefer to have more benefits and less out-of-pocket expense?

<table>
<thead>
<tr>
<th>Description of service</th>
<th>G</th>
<th>C¹</th>
<th>F¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare Part A coinsurance and hospital costs (up to an additional 365 days after Medicare benefits are used)</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Medicare Part A deductible</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Medicare Part B coinsurance or copayment</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Medicare Part B deductible</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Medicare Part B excess charges</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Blood (first three pints)</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Foreign travel emergency (up to plan limits)²</td>
<td>80%</td>
<td>80%</td>
<td>80%</td>
</tr>
<tr>
<td>Hospice care coinsurance or copayment</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Skilled nursing facility coinsurance</td>
<td>✔️</td>
<td>✔️</td>
<td>✔️</td>
</tr>
</tbody>
</table>

If yes, then plans G, C, or F may be right for you. These plans typically have a higher premium, for the additional benefits.

¹NOTE: IMPORTANT: Plans C and F are only available to eligible Applicants (a) with a 65th birthday prior to 1/1/2020 or (b) who will be age 65 or older on or after 1/1/2020 with a Medicare Part A effective date prior to 1/1/2020. Please call a licensed insurance agent if you have any questions 1-800-392-7537.

²Beneficiaries must pay a separate deductible for a foreign travel emergency ($250 per year) and a lifetime maximum benefit of $50,000 applies. Chart reflects 2019 data.
A Medicare supplement plan in action.

Meet Allen.

He has osteoporosis and broke his leg when he fell getting out of the shower. After being hospitalized for several days, he was released to a skilled nursing facility for an additional 22 covered days. During this time he also had two follow-up appointments with his doctor. This is a cost comparison of what Allen could expect to pay out of pocket under different Medicare supplement plans.

<table>
<thead>
<tr>
<th>Description of service</th>
<th>Original Medicare (Parts A &amp; B)</th>
<th>Plan N</th>
<th>Plan G</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part A deductible for hospital stay</td>
<td>$1,364</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Part A coinsurance for two days in a skilled nursing facility (Days 1-20 are paid by Medicare. Days 21 and 22 are paid by Medicare, except for 2 coinsurance days (2 days at $170.50/day).)</td>
<td>$341</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Part B deductible (Assumes Allen has not satisfied his Part B deductible for the year)</td>
<td>$185</td>
<td>$185</td>
<td>$185</td>
</tr>
<tr>
<td>Part B coinsurance/copayment (20% of the Medicare-approved amount)</td>
<td>$37</td>
<td>$40</td>
<td>$0</td>
</tr>
<tr>
<td><strong>Total Allen pays</strong></td>
<td><strong>$1,927</strong></td>
<td><strong>$225</strong></td>
<td><strong>$185</strong></td>
</tr>
</tbody>
</table>

Information in this chart reflects cost and cost-sharing information from 2019. In this example, the Medicare-approved amount for each doctor visit is $185 and the doctor accepts Medicare’s assignment.

The situation above is fictitious and for illustrative purposes only.
Plan Highlights

Highlights and availability

- AARP Medicare Supplement Insurance Plans A, B, C, F, G, K, L, and N are available in New Mexico if you are age 65 or older.
- Plans are competitively priced.

Discounts available for insured members

SAVE $2
You can take $2 off the total monthly household premium if you pay your premium through EFT (electronic funds transfer).

SAVE 5%
You may be eligible to take 5% off your monthly premium.

SAVE $24 per year
You can take $24 off your annual household premium amount if you pay your full premium amount at once.

*Plans C and F are only available to eligible Applicants (a) with a 65th birthday prior to 1/1/2020 or (b) who will be age 65 or older on or after 1/1/2020 with a Medicare Part A effective date prior to 1/1/2020. Please call a licensed insurance agent if you have any questions 1-800-392-7537.
How does MACRA affect your options?

The Medicare Access and CHIP Reauthorization Act (MACRA) of 2015 is changing Medicare Supplement Plan C and Plan F that cover the Part B deductible for anyone eligible after January 1, 2020.

Did you turn 65 before January 1, 2020?
If yes, you can enroll in Plans F or C even after 2020 and can keep your plan as long as you choose.

Do you turn 65 on or after January 1, 2020?
You will only be able to purchase Medicare Supplement Insurance Plans F or C if you have a Medicare Part A effective date prior to 2020.
Get value-added services.*

**AARP® Staying Sharp‡‡**
An online brain health program that helps support a healthy brain lifestyle.
AARP Staying Sharp includes:
- A brain health assessment
- Brain-healthy recipes
- Brain-boosting activities
- Articles and brain games designed to help brain health

**24/7 Nurse Line†**
Speak directly with registered nurses, toll-free, 24 hours a day, 365 days a year.

*These are additional services, apart from the AARP Medicare Supplement Insurance Plan benefits, are not insurance programs, are subject to geographic availability and may be discontinued at any time.*
Get value-added services.* continued

**Hearing Care Program by HearUSA††**
A discount on hearing aids and access to screenings by certified HearUSA hearing care providers. The Hearing Care Program by HearUSA includes:

- The AARP member rate plus an additional $100 discount on hearing devices in the top 5 tiers of technology and features, ranging from standard to premium
- Extended warranties on many of HearUSA’s digital hearing aids
- Your very own hearing health support team

**AARP® Vision Discounts provided by EyeMed‡**
As an AARP Medicare Supplement plan holder, you have access to exclusive savings on eye health services that include:

- Routine eye exams for just $50§
- Only at LensCrafters, take an additional $50 off the AARP Vision Discount or best in-store offer on progressive lenses with frame purchase††

*These are additional services, apart from the AARP Medicare Supplement Insurance Plan benefits, are not insurance programs, are subject to geographic availability and may be discontinued at any time.
AARP membership provides:

- Access to exclusive discounts on everyday items like groceries, car repair and electronics.
- Health and wellness discounts for costs such as pharmacy, health supplies and vision.
- A subscription to the award-winning AARP The Magazine and AARP Bulletin.
- Travel discounts, from car rentals and hotels to flights and cruises.
- Important information on health, Medicare, Social Security and much more.

You must be an AARP member to enroll in an AARP Medicare Supplement Plan.

AARP membership is available to individuals age 50 and older and can include up to two members in one household.
Plan Benefits, Programs and Features
University of New Mexico
Part D Plan (PDP)
Your Part D (Prescription Drug) Plan

• UnitedHealthcare has thousands of national, regional, local chain and independent neighborhood pharmacies in our network

• Thousands of covered brand-name and generic prescription drugs

Check your plan’s drug list online at www.aarpmedicarerx.com or call Customer Service to see if your prescription drugs are covered
## Drug payment stages — standard coverage in the gap

<table>
<thead>
<tr>
<th>Initial coverage</th>
<th>Coverage gap</th>
<th>Catastrophic coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>In this drug payment stage:</strong></td>
<td><strong>After your total drug costs reach $4,430:</strong></td>
<td><strong>After your out-of-pocket costs reach $7,050:</strong></td>
</tr>
<tr>
<td>You pay a copay or coinsurance (percentage of a drug’s total cost) and the plan pays the rest</td>
<td>You pay 25% of the cost of brand-name drugs and 25% of the cost of generic drugs</td>
<td>You pay a small copay or coinsurance amount</td>
</tr>
<tr>
<td>You stay in this stage until your total drug costs reach $4,430</td>
<td>You stay in this stage until your out-of-pocket costs reach $7,050</td>
<td>You stay in this stage for the rest of the plan year</td>
</tr>
</tbody>
</table>
## Individual Part D (Prescription Drug) Plans

<table>
<thead>
<tr>
<th>At a Glance</th>
<th>Low plan premiums featuring Walgreens as the exclusive Preferred Network Pharmacy</th>
<th>Low plan premiums, plus coverage for most generics and many commonly used brand-name drugs</th>
<th>Good value with robust drug coverage</th>
</tr>
</thead>
</table>

### Drug List
- Includes many generic and brand-name drugs covered by Medicare Part D
- Includes most generic and many commonly used brand-name drugs covered by Medicare Part D
- Includes most generic and commonly used brand-name drugs covered by Medicare Part D

<table>
<thead>
<tr>
<th>Annual Deductible</th>
<th>$0 Tiers 1–2</th>
<th>$445 Tiers 3–5</th>
<th>$445</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Monthly Premium</th>
<th>$29.40</th>
<th>$31.00</th>
<th>$97.90</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1 Copay*</td>
<td>$0</td>
<td>$1</td>
<td>$5</td>
</tr>
<tr>
<td>Tier 2 Copay*</td>
<td>$10</td>
<td>$11</td>
<td>$10</td>
</tr>
<tr>
<td>Tier 3 Copay*</td>
<td>$40</td>
<td>$42</td>
<td>$45</td>
</tr>
<tr>
<td>Tier 4 Coinsurance*</td>
<td>40%</td>
<td>40%</td>
<td>40%</td>
</tr>
<tr>
<td>Tier 5 Coinsurance*</td>
<td>27%</td>
<td>25%</td>
<td>33%</td>
</tr>
</tbody>
</table>

*Cost-share ranges apply to Preferred Pharmacies.
**Depends on region; territories not included.
^You will pay a maximum of $35 for a 1-month supply of insulin during the deductible, initial coverage and coverage gap or "donut hole" stages of your benefit. You will pay 5% of the cost of your insulin in the catastrophic stage. Your cost may be less if you receive Extra Help from Medicare.
More ways you can save

Review your medications
Discuss all your prescription drugs with your doctor at least once a year.

Use your UnitedHealthcare® member ID card
Show your member ID card at the pharmacy to get the plan’s discounted rates.

Use participating network pharmacies
You may save on the medication you take regularly.

Take advantage of lower cost-sharing amounts through the use of our Preferred Retail Pharmacy Network<sup>1</sup> or Walgreens Preferred Network<sup>1</sup>

Consider using OptumRx® Home Delivery Pharmacy
You could save time and trips to the pharmacy.
Preferred Retail Pharmacy Network

You could save on the cost of generic prescription drugs

• With the Preferred Retail Pharmacy Network, you can fill your prescriptions for as low as $<0>* at participating pharmacies located in grocery, discount and drug stores where you may already shop<1>

• Many, but not all, of the pharmacies in UnitedHealthcare’s pharmacy network participate in the Preferred Retail Pharmacy Network for the AARP® MedicareRx Preferred and Saver Plus plans

• The preferred network for the AARP MedicareRx Walgreens plan is limited to Walgreens and Duane Reade pharmacies

• Visit www.aarpmedicarerx.com for more information

Note: Other pharmacies are available in our network.

*Copays as low as $0 for the AARP MedicareRx Walgreens (PDP) plan, $1 for the AARP MedicareRx Saver Plus (PDP) plan and $5 for the AARP MedicareRx Preferred (PDP) plan.
Home Delivery Pharmacy

After you’ve chosen OptumRx and your order has been placed:

1. Your order enters the OptumRx fulfillment system
2. A pharmacist reviews your information for drug interactions, allergies and dosage
3. For your safety, another pharmacist reviews your medication for accuracy after it is dispensed
4. OptumRx seals your medication in a tamper-evident package
5. OptumRx mails your medication to you and notifies you when it has been shipped
What to Expect Next
What to expect after enrollment

✓ You will receive your new UnitedHealthcare® Member ID card and you can start using it as soon as your plan is effective.

✓ You will receive a Quick Start Guide/Welcome Package that gives you more information on how your benefits work and how to get the most out of your plan.

✓ After you receive your member ID card, you can register online at UHCRetiree.com to get access to your plan information. You can start using your member ID card as soon as your plan is effective.
How to Enroll
How To Enroll

You should have received an Open Enrollment packet via mail from the University of New Mexico. If you haven’t received one, please call your University of New Mexico Benefits Representative:

• Jane Brantley: A, D, L – Q
  505-277-5847

• Lana Robinson: B, E – K, X – Z
  505-277-1857

• Laverne Brooks: C, R – W
  505-277-1705

• Email: hrbenefits@unm.edu

• Retirees will only pay a percentage of the premium quoted by UHC

• Surviving spouses will pay 100%

• The percentage the retiree will pay is shown on the rates page in the Open Enrollment Guide that was mailed to you and is also online at https://hr.unm.edu/retiree/benefits/65-plus-open-enrollment

Please make sure to work with UNM Benefits to coordinate your enrollment. Otherwise they might not receive UNM’s contribution toward premiums because they might not be correctly coded as a UNM retiree by UHC when enrolled.
Questions and Answers
Thank You

We look forward to welcoming you to our Medicare family
Additional information

Benefits, features and/or devices vary by plan/area. Limitations and exclusions apply.

[[Formularies and/or provider/pharmacy networks disclaimer] [The <formulary, pharmacy network, and/or provider network> may change at any time. You will receive notice when necessary.]]

You must continue to pay your Medicare Part B premium [,,] [if not otherwise paid for under Medicaid or by another third party.]

Out-of-network/non-contracted providers are under no obligation to treat <Plan> 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.

This document is available in alternative formats. If you receive full or partial subsidy for your premium from a plan sponsor (former employer, union group or trust), the amount you owe may be different than what is listed in this document. For information about the actual premium you will pay, please contact your plan sponsor’s benefit administrator directly.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract [and a Medicare-approved Part D sponsor]. Enrollment in the plan depends on the plan’s contract renewal with Medicare.

[[AARP/Walgreens PDP Plans] AARP MedicareRx Walgreens (PDP)’s pharmacy network offers limited access to pharmacies with preferred cost sharing in urban ND; suburban CA, HI, ND, PA and rural AK, AR, HI, IA, ID, KS, MN, MO, MS, MT, NE, OK, PA, SD, TX and WY. There are an extremely limited number of preferred cost share pharmacies in rural ND. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including pharmacies with preferred cost sharing, please call us or consult the online pharmacy directory using the contact information that appears on the booklet cover.]
Additional information

<1> [[Preferred Retail Pharmacy Network] Member may use any pharmacy in the network but may not receive preferred retail pharmacy pricing. Pharmacies in the Preferred Retail Pharmacy Network may not be available in all areas. [Copays apply after deductible.]]

<2> OptumRx is an affiliate of UnitedHealthcare Insurance Company. You are not required to use OptumRx home delivery for a [<90- or 100-day>] supply of your maintenance medication. If you have not used OptumRx home delivery, you must approve the first prescription order sent directly from your doctor to OptumRx before it can be filled. Prescriptions from OptumRx should arrive within 5 business days after we receive the complete order. Contact OptumRx anytime at 1-888-279-1828, TTY 711.]

[[AARP® MedicareRx Preferred Retail Pharmacy Network disclaimer] [AARP MedicareRx Preferred (PDP) and AARP MedicareRx Saver Plus (PDP)’s pharmacy network includes limited lower-cost pharmacies in rural AK, MT, NE, ND, SD and WY. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including whether there are any lower-cost preferred pharmacies in your area, please call us or consult the online pharmacy directory using the contact information that appears on the booklet cover.]]

[[AARP® MedicareRx Walgreens Retail Pharmacy Network disclaimer] [AARP MedicareRx Walgreens (PDP)’s pharmacy network includes limited lower-cost pharmacies in urban ND; suburban CA, HI, ND, PA, and rural AK, AR, HI, IA, ID, KS, MN, MO, MS, MT, NE, OK, PA, SD, TX, and WY. There are an extremely limited number of preferred cost share pharmacies in rural ND. The lower costs advertised in our plan materials for these pharmacies may not be available at the pharmacy you use. For up-to-date information about our network pharmacies, including whether there are any lower-cost preferred pharmacies in your area, please call us or consult the online pharmacy directory using the contact information that appears on the booklet cover.]]

[Other pharmacies are available in our network.]

[Members may use any pharmacy in the network but may not receive preferred retail pharmacy pricing. [Copays apply after deductible.]]

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