

SERFF Tracking Number: UHLC-127040636 State: Arkansas
 Filing Company: UnitedHealthcare Insurance Company State Tracking Number: 48018
 Company Tracking Number: BA25117
 TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010
 Plans 2010
 Product Name: GROUP MEDICARE SUPPLEMENT
 Project Name/Number: ADVERTISING/BA25117

Filing at a Glance

Company: UnitedHealthcare Insurance Company

Product Name: GROUP MEDICARE SUPPLEMENT SERFF Tr Num: UHLC-127040636 State: Arkansas

TOI: MS08G Group Medicare Supplement - Standard Plans 2010 SERFF Status: Closed-Filed-Closed State Tr Num: 48018

Sub-TOI: MS08G.001 Plan A 2010

Co Tr Num: BA25117

State Status: Filed-Closed

Filing Type: Advertisement

Reviewer(s): Stephanie Fowler

Authors: Michelle Ambach, Tammy Frederick, Bobbie Walton

Date Submitted: 02/17/2011

Disposition Date: 03/02/2011

Disposition Status: Filed-Closed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name: ADVERTISING

Status of Filing in Domicile: Not Filed

Project Number: BA25117

Date Approved in Domicile:

Requested Filing Mode: File & Use

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Large

Group Market Type: Association

Overall Rate Impact:

Filing Status Changed: 03/02/2011

State Status Changed: 03/02/2011

Deemer Date:

Created By: Michelle Ambach

Submitted By: Tammy Frederick

Corresponding Filing Tracking Number: BA25117

Filing Description:

We enclose for your information and review, proof copies of advertising material for use in connection with the AARP Group Health insurance program. This advertising material is an Invitation to Inquire and is new and does not replace any material previously submitted to the Department.

Final production of SA25195ST will show the component number on the bottom left hand corner of the first page.

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CMS filing approvals

BA25117 - AARP Medicare Advisor - CMS filed on 1/20/2011 which is in accordance with CMS 5 day file and use guidelines.

BA25118 - UHC Medicare Advisor - CMS filed on 2/7/2011 which is in accordance with CMS 5 day file and use guidelines.

SA25195ST - AARP PDP Plus Med Supp Insert - CMS filed on 11/24/2010 which is in accordance with CMS 5 day file and use guidelines.

Company and Contact

Filing Contact Information

Susan Cipollo, Director Susan_J_Cipollo@uhc.com
 680 Blair Mill Rd. 215-902-8444 [Phone]
 Horsham, PA 19044 215-902-8813 [FAX]

Filing Company Information

UnitedHealthcare Insurance Company CoCode: 79413 State of Domicile: Connecticut
 185 Asylum Street Group Code: 707 Company Type: Life and Health
 Hartford, CT 06103 Group Name: State ID Number:
 (860) 702-5000 ext. [Phone] FEIN Number: 36-2739571

Filing Fees

Fee Required? Yes
 Fee Amount: \$150.00
 Retaliatory? No
 Fee Explanation: 50.00 per component, 3 components
 Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

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UnitedHealthcare Insurance Company \$150.00 02/17/2011 44813180

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	03/02/2011	03/02/2011

SERFF Tracking Number: UHLC-127040636 *State:* Arkansas
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Disposition

Disposition Date: 03/02/2011

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

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Form Schedule

Lead Form Number: BA25117

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed 03/02/2011	BA25117	Advertising	BROCHURE	Initial		45.000	BA25117_Med Advisor_MS File_2-15.pdf
Filed 03/02/2011	BA25118	Advertising	BROCHURE	Initial		45.000	BA25118_UH C Med Advisor_MS File_2-15.pdf
Filed 03/02/2011	SA25195S T	Advertising	BROCHURE	Initial		45.000	SA25195ST_MS Plus PDP Insert_2-15.pdf

Medicare Advisor

Your guide to understanding Medicare.

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Medicare Part D Plans	8
Medicare Supplement Plans	10

Plans insured by UnitedHealthcare Insurance Company and affiliates (UnitedHealthcare).

Dear Friend,

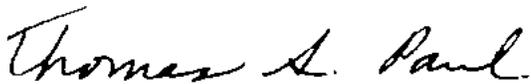
As you approach your 65th birthday, it's time to learn about Medicare and the health plans that could help you save on your health care costs. A Medicare health plan can help pay for the medical, hospital and prescription drug expenses not paid by Medicare Parts A and B. Even if you're healthy now, the right Medicare plan could give you the protection and coverage you need if your health needs change.

When to enroll in a Medicare health plan.

- **If you're planning to retire soon:** Once you retire, you have a two-month special election period to enroll in a Medicare health plan. It's important to enroll soon after your employer coverage ends to avoid a lapse in coverage. See page 5 for specific enrollment times for each plan.
- **You're turning 65 and you don't have employer coverage:** Your Initial Enrollment Period is the three months before the month you turn 65, the month of your birthday and three months after. It's important to enroll early to have coverage the month you turn 65.

Review this *Medicare Advisor* to learn how Medicare works and what the plans from UnitedHealthcare can offer you. Then call with any questions. We can help you choose a plan that's right for you.

Sincerely,



Thomas S. Paul
Chief Executive Officer, UnitedHealthcare Medicare Solutions

For more information or to review plans in your area, call UnitedHealthcare.



1-800-861-1764, TTY 711

8 a.m. – 8 p.m. local time, 7 days a week



[AnswersToMedicare.com/T65](https://www.answertohealthcare.com/T65)

Medicare Overview

Medicare is a federal health insurance program.

It's for people age 65 and older and others with certain disabilities. Most people are automatically enrolled in Medicare Parts A and B. Part A helps pay for hospital visits and most people receive it free. Part B has a monthly premium and helps cover doctor visits and outpatient care.

Medicare doesn't cover everything.

If you choose only Medicare Part A and Part B, you'll find there are costs not covered. You should expect to pay for some of these costs. To help pay for services not covered, many people enroll in a Medicare health plan through a private insurance provider.

- **Medicare Part C (Medicare Advantage plan):**
Covers all the services that Parts A and B cover, and may also include prescription drug coverage plus extra benefits like vision, hearing, dental and preventive services.
- **Medicare Part D (prescription drug plan):**
Helps with drug costs.
- **Medicare supplement insurance plans:**
Help cover costs that Parts A and B don't cover, including deductibles and copays.

There are limited times to enroll in a Medicare plan.

Since you're turning 65, you have a chance to enroll in a Medicare plan. If you still have employer coverage, you don't have to choose a Medicare plan until you lose that coverage. To avoid a lapse in coverage, you can enroll during a two-month special election period after losing your employer coverage. Please see page 5 for more details on when to enroll and if there are any penalties if you don't enroll early.

You're eligible to join Medicare Parts A and B if:

1. You are age 65 or older or you are otherwise eligible because of a qualified disability, and
2. You are a U.S. citizen or a legal resident, and
3. You or your spouse have paid Social Security taxes for at least 10 years.

The plan choices you make are not permanent.

If your health care needs change over time so will the health plan choices available to you. When you enroll in a Medicare plan, you're not locked into that plan permanently. Depending on which plan you enroll in, you'll have a chance to change plans at least once a year.

For over 25 years, UnitedHealthcare has provided Medicare plans for people age 65 and older, as well as individuals with certain disabilities. UnitedHealthcare offers a full range of Medicare health plans to meet your health care needs.

There Are Two Ways to Receive Medicare

There are two ways to get your Medicare benefits. You can get your benefits directly through Medicare Parts A and B with options for additional insurance. Or you may be able to choose a Medicare Advantage plan that combines all your benefits.

Option 1 Medicare Parts A and B

Medicare (Part A and Part B) is a federal government insurance program. Part A pays for hospital visits. Part B pays for doctor visits and outpatient care. You may add more insurance coverage such as a stand-alone prescription drug plan (Part D) – available through private insurance companies like UnitedHealthcare.

Part A

Covers medically necessary care that requires overnight stays in the hospital.

Part B

Covers medically necessary care that doesn't require overnight stays, such as doctor visits and outpatient care. Most people pay a Medicare Part B premium.

Part D (optional add-on)

A stand-alone prescription drug plan can be added to help with the cost of prescription drugs.

Medicare Supplement Insurance (optional add-on)

These policies cover some of the costs that aren't paid for by Parts A and B.



Option 2 Medicare Advantage (Part C)

Medicare Advantage plans offer the same coverage as Medicare Parts A and B, plus more benefits and services. You can enroll through a private insurance company like UnitedHealthcare. Medicare pays a fixed fee to the plan for your care. The plan makes payments to doctors and hospitals on your behalf.

Medicare Advantage (Part C)

Helps cover hospitalization and outpatient care, and may include prescription drug coverage and extra benefits. You must continue to pay your Part B premium.

Part D

Prescription drug coverage is included with many Medicare Advantage plans.

Additional Benefits

These are often included at no extra cost. Benefits may include vision services, hearing services and health screening tests.



Note: Medicare Part D plans and Medicare supplement plans are optional, but if you do not enroll in a Medicare Part D plan when you first become eligible, you may be subject to Medicare's late-enrollment penalty if you choose to enroll later.¹

Enrollment Windows and Timing

Timing is important when enrolling in a Medicare plan. When you turn 65, enrollment windows open. Some of these enrollment windows close quickly, so it's important for you to understand your plan choices early.

Enroll when you turn 65.

Enroll when you lose employer coverage and are Medicare-eligible.

Medicare Part A



Most people receive their Medicare card for Parts A and B three months before turning 65.

You can enroll in Medicare Parts A and B up to eight months after you retire or when your employer health plan coverage ends, whichever comes first.

Medicare Part B



Medicare Part C (Medicare Advantage)



Seven-month window

Any time within the three months before your 65th birthday month, the month of your birthday and three months after.

If you retire or lose employer coverage and are Medicare-eligible, you have a two-month special election period after you lose employer coverage to enroll.

Medicare Part D



Medicare Supplement Insurance



Six-month window for guaranteed right of acceptance²

When you turn 65 and enroll in Medicare Part B, you have a guaranteed right to buy a Medicare supplement policy for six months. You can't be refused if you sign up during this Initial Enrollment Period.

In most states, you have a right to guaranteed acceptance with certain Medicare supplement plans if you apply for coverage within 63 days from the day you retire or lose employer coverage. Time allowed varies by state.

Medicare Advantage (Part C)

Includes hospital, medical and sometimes prescription drug coverage – all in one plan.

Medicare Advantage plans (Part C) offer the same coverage as Medicare Parts A and B, plus offer additional health and wellness benefits like screenings, vision care and hearing care.

Medicare Advantage plans offer health benefits at a low or no additional monthly premium. You must continue to pay your Medicare Part B premium. Many plans also offer a cap on your annual out-of-pocket spending. Part D prescription drug coverage is often included at no extra cost.

Medicare Advantage coverage is not automatic. You decide whether or not to enroll in a plan. Medicare pays private insurance companies like UnitedHealthcare to manage these plans. With most Medicare Advantage plans, you help share the costs by paying copays.

All Medicare Advantage plans offer nationwide coverage for emergency care, urgent care and renal dialysis. Medicare Advantage plans are not available in all areas; you must live in the county or region where a specific plan is offered.

Choosing a Medicare Advantage plan.

There are different types of Medicare Advantage plans. The majority of people choose a Health Maintenance Organization (HMO) or Preferred Provider Organization (PPO). In these plans, doctors and hospitals work together to coordinate your care.

HMO plans provide care through a broad group, or network, of local doctors and hospitals. Your primary care doctor will oversee your care and refer you to specialists as necessary.

PPO plans provide more flexibility. You choose your doctors and hospitals. Typically, you don't need a referral to see a specialist. If you go outside the network, you usually pay a higher cost.



Enrollment

Enrollment times are limited.

You can enroll during your seven-month Initial Enrollment Period. You enroll in Medicare Advantage plans directly with a company that offers the plan, like UnitedHealthcare.

You can change coverage at least once a year.

You have the chance to change your coverage each year during the Annual Enrollment Period. You can also switch plans if you move out of your plan's service area.

Your plan will renew automatically each year as long as the plan is still available in your service area.

How to choose a Medicare Advantage plan.

Since costs vary by plan, you'll want to consider the premium, copays and any other costs for provided services. You should also consider whether a plan's network (if it has one) includes the doctors you want to see. If you would like prescription drug coverage, look for a Medicare Advantage plan that includes it and make sure your drugs are on the plan's drug list.

Costs

Each Medicare Advantage plan is different depending on the county and state you live in. The AARP® MedicareComplete® from SecureHorizons® plans, insured through UnitedHealthcare, offer monthly premiums as low as \$0, and most include prescription drug coverage plus extra benefits like preventive care.

Medicare Advantage Plan Highlights

- Covers hospital stays, doctor visits and more
- May include prescription drug coverage, often with no additional premium
- Provides preventive services and other benefits

Medicare Part D

Medicare Part D helps pay for the prescription drugs you take. Part D enrollment is optional. There are two ways you can be covered by Part D:

- With a stand-alone Part D prescription drug plan (with the option to add Medicare supplement insurance for hospital and medical benefits, and more complete coverage overall).

OR

- With a Medicare Advantage plan that includes Part D.

You cannot enroll in both a stand-alone Part D plan and a Medicare Advantage plan that includes Part D. Be sure to review the plan's drug list when deciding on a plan. Most stand-alone Part D plans cover more drugs and provide better coverage than Medicare Advantage plans.

Even if you're not taking many prescription drugs, it may be smart to enroll in Part D coverage. If you delay signing up until after you are eligible, you may be subject to Medicare's late-enrollment penalty.¹

You can change plans at least once a year.

You can change your Part D plan each year during the Annual Enrollment Period. You can also switch plans if you move out of your plan's service area.

Your Part D coverage will renew automatically each year unless you choose to change plans during the Annual Enrollment Period.

Costs

Part D plans vary by list of covered drugs and costs like premiums, deductibles and copays. You will want to consider all of your costs when choosing a plan.

The AARP® MedicareRx Plans, insured through UnitedHealthcare, offer two plans based on different coverage needs. Both plans offer a \$0 annual deductible.



Medicare Part D Plan Highlights

- Save on the cost of your medications
- Predictable drug costs can help you manage your health care budget
- Enroll early to avoid paying the Medicare late-enrollment penalty.¹

The Medicare Part D Coverage Cycle

There are four drug payment stages in the coverage cycle. Medicare Part D coverage begins a new cycle on January 1 of each year.

Stage	Costs	Plan Benefit
Stage 1 Annual Deductible (starts January 1)	Deductible amount. Not all plans have a deductible.	You Pay: \$0 for AARP MedicareRx Plans or the deductible that may be charged by other plans.
Stage 2 Initial Coverage	Up to \$2,840 in total drug costs.	You Pay: Copay or coinsurance for each covered drug. Plan Pays: The rest of the costs for each covered drug.
Stage 3* Coverage Gap	After \$2,840 in total drug costs, up to \$4,550 in True Out-of-Pocket costs.	You Pay: <ul style="list-style-type: none"> • Approximately 50% of the cost of most brand-name drugs. • 93% of the cost of generic drugs. • You may pay less if your plan has better coverage in the gap. Plan Pays: The rest of the costs for drugs covered by your plan during the gap. Some of these costs are also paid by drug manufacturer discounts.
Stage 4 Catastrophic Coverage	After \$4,550 in True Out-of-Pocket costs, no limit.	You Pay: A small copay or coinsurance for each covered drug. Plan Pays: The rest of the costs for each covered drug until the end of the year. There is no limit.

*People with limited incomes may qualify for Extra Help for their prescription drug costs. If you qualify, Medicare could pay for 75% or more of drug costs including monthly prescription drug premiums, annual deductibles and coinsurance. Additionally, those who qualify won't have a coverage gap or late-enrollment penalty.

Extra Help for People on a Limited Income

If you are on a limited income and you enroll in a plan that offers prescription drug coverage, you may be able to get extra financial help to pay for your premiums, deductibles and copays.

UnitedHealthcare encourages you to apply even if you aren't sure you qualify. To find out about all of the programs that may offer help, call your local Social Security Administration office. Please see page 11 for contact information.

Medicare Supplement

Medicare supplement insurance plans help cover costs that Medicare Parts A and B don't pay for, like deductibles and copays. Medicare supplement plans do not have network restrictions and allow you to visit any provider who accepts Medicare patients. They are insurance policies provided by private companies like UnitedHealthcare.

If you enroll in a Medicare supplement plan, you can add a stand-alone Part D prescription drug plan for more complete coverage.

Enrollment

Enroll early to keep your costs low.

When you turn 65 and enroll in Medicare Part B, you have a guaranteed right of acceptance for six months.²

If you enroll after your Open Enrollment Period, depending on your state of residence, your insurer could refuse coverage or charge you a higher premium based on your health.

You can change coverage any time?

You can drop a Medicare supplement plan and apply for another whenever you like. If you drop your current plan and apply for a new one, you may be charged a higher premium or refused coverage entirely. Make sure your new plan is in place before you cancel your current plan.

Your policy automatically renews every year.

Medicare supplement plans renew automatically from year to year as long as you pay your premiums when due and you do not make any material misrepresentation when you apply for the plan. However, your rate may change.

Plan Choices

Even though there are standard plans defined by the government, not all plans have the same costs or are available in all states. Call UnitedHealthcare to learn about the plans available in your area.

Medicare Supplement Plan Highlights

- Helps cover some of the costs that Medicare Parts A and B don't pay for
- When you turn 65 and enroll in Medicare Part B, you have a guaranteed right of acceptance for six months²
- No network restrictions allow you to visit any provider who accepts Medicare patients

Not connected with or endorsed by the U.S. Government or the Federal Medicare program.

Important Resources

Social Security Administration

1-800-772-1213

7 a.m. – 7 p.m., Monday – Friday

TTY users, call: **1-800-325-0778**

www.socialsecurity.gov

Medicare Helpline

1-800-MEDICARE (1-800-633-4227)

24 hours a day, 7 days a week

TTY users, call: **1-877-486-2048**

www.medicare.gov

Call UnitedHealthcare today!



1-800-861-1764, TTY 711

8 a.m. – 8 p.m. local time,

7 days a week



AnswersToMedicare.com/T65

A UnitedHealthcare® Medicare Solution

¹If you qualify for extra help, you will not have a late-enrollment penalty (LEP). Also, if you have other prescription coverage at least as good as Medicare (also known as creditable coverage), you may not be assessed a LEP.

²In CT, MA, NY and VT, individuals are guaranteed acceptance and guaranteed issue in Medicare supplement plans at all times. In other states, there are other situations in which a person may be eligible for guaranteed issue.

For some plans, plan benefits may change January 1, 2012. The benefit information provided herein is a brief summary, not a comprehensive description of benefits. For more information contact the plan.

The family of AARP Medicare Plans includes Part D Prescription Drug Plans, Medicare Supplement Insurance Plans and Medicare Advantage Plans featuring the AARP® brand name. Plans are insured or covered by UnitedHealthcare Insurance Company or an affiliate, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor.

AARP and its affiliate are not insurance agencies or carriers and do not employ or endorse insurance agents, brokers, producers, representatives or advisors.

AARP doesn't make individual recommendations for health-related products, services, insurance or programs. You are encouraged to evaluate your needs and compare products.

The AARP® Medicare Supplement Insurance Plans, AARP® MedicareComplete® and AARP® MedicareRx plans carry the AARP name, and UnitedHealthcare pays a royalty fee to AARP for use of the AARP intellectual property. Amounts paid are used for the general purpose of AARP and its members. Neither AARP nor its affiliate is the insurer.

AARP Medicare Supplement Insurance Plans are insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY, for New York residents). Policy Form No. GRP 79171 GPS-1 (G-36000-4). Each insurer has sole responsibility for its own products. In some states plans may be available to persons eligible for Medicare by reason of disability.

All plans may not be available in your state/area and for some plans you must reside in the plan's federally approved service area to obtain health care coverage. Call to receive complete information including benefits, costs, eligibility requirements, exclusions and limitations.

This is a solicitation of insurance. A licensed agent/producer may contact you.

Benefits, formulary, pharmacy network, premium and/or co-payments/co-insurance may change on January 1, 2012.



UnitedHealthcare
P.O. Box 29300
Hot Springs, AR 71903-9300

Mail_Full Name
Mail_Address_1
Mail_Address_2
Mail_City, Mail_State Mail_Zip

Learn what Medicare can do for you.

See inside for important Medicare information.

This is an advertisement.

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Medicare Advisor

Your guide to understanding Medicare.

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Medicare Advantage (Part C) Plans.....	6
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Medicare Supplement Plans.....	10

Plans insured by UnitedHealthcare Insurance Company and affiliates (UnitedHealthcare).

Dear Friend,

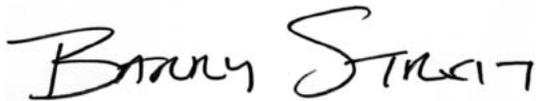
As you approach your 65th birthday, it's time to learn about Medicare and the health plans that could help you save on your health care costs. A Medicare health plan can help pay for the medical, hospital and prescription drug expenses not covered by Original Medicare. Even if you're healthy now, the right Medicare plan could give you the protection and coverage you need if your health needs change.

When to enroll in a Medicare health plan.

- **If you're planning to retire soon:** Once you retire, you have a two-month special election period to enroll in a Medicare health plan. It's important to enroll soon after your coverage ends to avoid a lapse in coverage.
- **You're turning 65 and you don't have employer coverage:** Your Initial Enrollment Period is the three months before the month you turn 65, the month of your birthday and three months after. It's important to enroll early to have coverage the month you turn 65.

Review this *Medicare Advisor* to learn how Medicare works and what the plans from UnitedHealthcare can offer you. Then call with any questions. We can help you choose a plan that's right for you.

Sincerely,



Barry Streit
Vice President, UnitedHealthcare Medicare Solutions

For more information or to review plans in your area, call UnitedHealthcare.



1-800-861-1764, TTY 711

8 a.m. – 8 p.m. local time, 7 days a week



AnswersToMedicare.com/T65

Un Representante Bilingüe se complacerá en contestar todas sus preguntas.

Medicare Overview

Medicare is a federal health insurance program.

It's for people age 65 and older and others with certain disabilities. Most people are automatically enrolled in Medicare Parts A and B. Part A helps pay for hospital visits and most people receive it free. Part B has a monthly premium and helps cover doctor visits and outpatient care.

Medicare doesn't cover everything.

If you choose only Medicare Part A and Part B, you'll find there are costs not covered. You should expect to pay for some of these costs. To help pay for services not covered, many people enroll in a Medicare health plan through a private insurance provider.

- **Medicare Part C (Medicare Advantage plan):**

Covers all the services that Parts A and B cover, and may also include prescription drug coverage plus extra benefits like vision, hearing, dental and preventive services.

- **Medicare Part D (prescription drug plan):**

Helps with drug costs.

- **Medicare supplement insurance plans:**

Help cover costs that Parts A and B don't cover, including deductibles and copays.

There are limited times to enroll in a Medicare plan.

Since you're turning 65, you have a chance to enroll in a Medicare plan. If you still have employer coverage, you don't have to choose a Medicare plan until you lose that coverage. When you lose your employer coverage you have a two-month special election period to enroll in a Medicare plan. Please see page 5 for more details on when to enroll and if there are any penalties if you don't enroll early.

You're eligible to join Original Medicare (Parts A and B) if:

1. You are age 65 or older or you are otherwise eligible because of a qualified disability, and
2. You are a U.S. citizen or a legal resident, and
3. You or your spouse have paid Social Security taxes for at least 10 years.

The plan choices you make are not permanent.

If your health care needs change over time so will the health plan choices available to you. When you enroll in a Medicare plan, you're not locked into that plan permanently. Depending on which plan you enroll in, you'll have a chance to change plans at least once a year.

For over 25 years, UnitedHealthcare has provided Medicare plans for people age 65 and older, as well as individuals with certain disabilities. UnitedHealthcare offers a full range of Medicare health plans to meet your health care needs.

There Are Two Ways to Receive Medicare

There are two ways to get your Medicare benefits. You can get your benefits directly through Medicare Parts A and B with options for additional insurance. Or you may be able to choose a Medicare Advantage plan that combines all your benefits.

Option 1 Medicare Parts A and B

Medicare (Part A and Part B) is a federal government insurance program. Part A pays for hospital visits. Part B pays for doctor visits and outpatient care. You may add more insurance coverage such as a stand-alone prescription drug plan (Part D) — available through private insurance companies like UnitedHealthcare.

Part A

Covers medically necessary care that requires overnight stays in the hospital.

Part B

Covers medically necessary care that doesn't require overnight stays, such as doctor visits and outpatient care. Most people pay a Medicare Part B premium.

Part D (optional add-on)

A stand-alone prescription drug plan can be added to help with the cost of prescription drugs.

Medicare Supplement Insurance (optional add-on)

These policies cover some of the costs that aren't paid for by Parts A and B.



Option 2 Medicare Advantage (Part C)

Medicare Advantage plans offer the same coverage as Medicare Parts A and B, plus more benefits and services. You can enroll through a private insurance company like UnitedHealthcare. Medicare pays a fixed fee to the plan for your care. The plan makes payments to doctors and hospitals on your behalf.

Medicare Advantage (Part C)

Helps cover hospitalization and outpatient care, and may include prescription drug coverage and extra benefits. You must continue to pay your Part B premium.

Part D

Prescription drug coverage is included with many Medicare Advantage plans.

Additional Benefits

These are often included at no extra cost. Benefits may include vision services, hearing services and health screening tests.



Note: Medicare Part D plans and Medicare supplement plans are optional, but if you do not enroll in a Medicare Part D plan when you first become eligible, you may be subject to Medicare's late-enrollment penalty if you choose to enroll later.¹

Enrollment Windows and Timing

Timing is important when enrolling in a Medicare plan. When you turn 65, enrollment windows open. Some of these enrollment windows close quickly, so it's important for you to understand your plan choices early.

Enroll when you turn 65.

Enroll when you lose employer coverage and are Medicare-eligible.

Medicare Part A



Most people receive their Medicare card for Parts A and B three months before turning 65.

You can enroll in Medicare Parts A and B up to eight months after you retire or when your employer health plan coverage ends, whichever comes first.

Medicare Part B



Medicare Part C (Medicare Advantage)



Seven-month window

Any time within the three months before your 65th birthday month, the month of your birthday and three months after.

If you retire or lose employer coverage and are Medicare-eligible, you have a two-month special election period after you lose employer coverage to enroll.

Medicare Part D



Medicare Supplement Insurance Six-month window for guaranteed right of acceptance²



When you turn 65 and enroll in Medicare Part B, you have a guaranteed right to buy a Medicare supplement policy for six months. You can't be refused if you sign up during this Initial Enrollment Period.

In most states, you have a right to guaranteed acceptance with certain Medicare supplement plans if you apply for coverage within 63 days from the day you retire or lose employer coverage. Time allowed varies by state.

Medicare Advantage (Part C)

Hospital, medical and may include prescription drug coverage — all in one plan.

Medicare Advantage plans (Part C) offer the same coverage as Medicare Parts A and B, plus offer additional health and wellness benefits like screenings, vision care and hearing care.

Medicare Advantage plans offer health benefits at a low or no additional monthly premium. You must continue to pay your Medicare Part B premium. Many plans also offer a cap on your annual out-of-pocket spending. Part D prescription drug coverage is often included at no extra cost.

Medicare Advantage coverage is not automatic. You decide whether or not to enroll in a plan. Medicare pays private insurance companies like UnitedHealthcare to manage these plans. With most Medicare Advantage plans, you help share the costs by paying copays.

All Medicare Advantage plans offer nationwide coverage for emergency care, urgent care and renal dialysis. Medicare Advantage plans are not available in all areas; you must live in the county or region where a specific plan is offered.

Choosing a Medicare Advantage plan.

There are different types of Medicare Advantage plans. The majority of people choose a Health Maintenance Organization (HMO) or Preferred Provider Organization (PPO). In these plans, doctors and hospitals work together to coordinate your care.

HMO plans provide care through a broad group, or network, of local doctors and hospitals. Your primary care doctor will oversee your care and refer you to specialists as necessary.

PPO plans provide more flexibility. You choose your doctors and hospitals. Typically, you don't need a referral to see a specialist. If you go outside the network, you usually pay a higher cost.



Enrollment

Enrollment times are limited.

You can enroll during your seven-month Initial Enrollment Period. You enroll in Medicare Advantage plans directly with a company that offers the plan, like UnitedHealthcare.

You can change coverage at least once a year.

You have the chance to change your coverage each year during the Annual Enrollment Period. You can also switch plans if you move out of your plan's service area.

Your plan will renew automatically each year as long as the plan is still available in your service area.

How to choose a Medicare Advantage plan.

Since costs vary by plan, you'll want to consider the premium, copays and any other costs for provided services. You should also consider whether a plan's network (if it has one) includes the doctors you want to see. If you would like prescription drug coverage, look for a Medicare Advantage plan that includes it and make sure your drugs are on the plan's drug list.

Costs

Each Medicare Advantage plan is different depending on the county and state you live in. The AARP® MedicareComplete® from SecureHorizons® plans, insured through UnitedHealthcare, offer monthly premiums as low as \$0, and most include prescription drug coverage plus extra benefits like preventive care.

Medicare Advantage Plan Highlights

- Covers hospital stays, doctor visits and more
- May include prescription drug coverage, often with no additional premium
- Provides preventive services and other benefits

Medicare Part D

Medicare Part D helps pay for the prescription drugs you take. Part D enrollment is optional. There are two ways you can be covered by Part D:

- With a stand-alone Part D prescription drug plan (with the option to add Medicare supplement insurance for hospital and medical benefits, and more complete coverage overall).

OR

- With a Medicare Advantage plan that includes Part D.

You cannot enroll in both a stand-alone Part D plan and a Medicare Advantage plan that includes Part D. Be sure to review the plan's drug list when deciding on a plan. Most stand-alone Part D plans cover more drugs and provide better coverage than Medicare Advantage plans.

Even if you're not taking many prescription drugs, it may be smart to enroll in Part D coverage. If you delay signing up until after you are eligible, you may be subject to Medicare's late-enrollment penalty.¹

You can change plans at least once a year.

You can change your Part D plan each year during the Annual Enrollment Period. You can also switch plans if you move out of your plan's service area.

Your Part D coverage will renew automatically each year unless you choose to change plans during the Annual Enrollment Period.

Costs

Part D plans vary by list of covered drugs and costs like premiums, deductibles and copays. You will want to consider all of your costs when choosing a plan.

The AARP® MedicareRx Plans, insured through UnitedHealthcare, offer two plans based on different coverage needs. Both plans offer a \$0 annual deductible.



Medicare Part D Plan Highlights

- Save on the cost of your medications
- Predictable drug costs can help you manage your health care budget
- Enroll early to avoid paying the Medicare late-enrollment penalty.¹

The Medicare Part D Coverage Cycle

There are four drug payment stages in the coverage cycle. Medicare Part D coverage begins a new cycle on January 1 of each year.

Stage	Costs	Plan Benefit
Stage 1 Annual Deductible (starts January 1)	Deductible amount. Not all plans have a deductible.	You Pay: \$0 for AARP MedicareRx Plans or the deductible that may be charged by other plans.
Stage 2 Initial Coverage	Up to \$2,840 in total drug costs.	You Pay: Copay or coinsurance for each covered drug. Plan Pays: The rest of the costs for each covered drug.
Stage 3* Coverage Gap	After \$2,840 in total drug costs, up to \$4,550 in True Out-of-Pocket costs.	You Pay: <ul style="list-style-type: none"> ▪ Approximately 50% of the cost of most brand-name drugs. ▪ 93% of the cost of generic drugs. ▪ You may pay less if your plan has better coverage in the gap. Plan Pays: The rest of the costs for drugs covered by your plan during the gap. Some of these costs are also paid by drug manufacturer discounts.
Stage 4 Catastrophic Coverage	After \$4,550 in True Out-of-Pocket costs, no limit.	You Pay: A small copay or coinsurance for each covered drug. Plan Pays: The rest of the costs for each covered drug until the end of the year. There is no limit.

*People with limited incomes may qualify for Extra Help for their prescription drug costs. If you qualify, Medicare could pay for 75% or more of drug costs including monthly prescription drug premiums, annual deductibles and coinsurance. Additionally, those who qualify won't have a coverage gap or late-enrollment penalty.

Extra Help for People on a Limited Income

If you are on a limited income and you enroll in a plan that offers prescription drug coverage, you may be able to get extra financial help to pay for your premiums, deductibles and copays.

UnitedHealthcare encourages you to apply even if you aren't sure you qualify. To find out about all of the programs that may offer help, call your local Social Security Administration office. Please see page 11 for contact information.

Medicare Supplement

Medicare supplement insurance plans help cover costs that Medicare Parts A and B don't pay for, like deductibles and copays. Medicare supplement plans do not have network restrictions and allow you to visit any provider who accepts Medicare patients. They are insurance policies provided by private companies like UnitedHealthcare.

If you enroll in a Medicare supplement plan, you can add a stand-alone Part D prescription drug plan for more complete coverage.

Enrollment

Enroll early to keep your costs low.

When you turn 65 and enroll in Medicare Part B, you have a guaranteed right of acceptance for six months.²

If you enroll after your Initial Enrollment Period, depending on your state of residence, your insurer could refuse coverage or charge you a higher premium based on your health.

You can change coverage any time?

You can drop a Medicare supplement plan and apply for another whenever you like. If you drop your current plan and apply for a new one, you may be charged a higher premium or refused coverage entirely. Make sure your new plan is in place before you cancel your current plan.

Your policy automatically renews every year.

Medicare supplement plans renew automatically from year to year as long as premiums are paid. However, your rate may change.

Plan Choices

Even though there are standard plans defined by the government, not all plans have the same costs or are available in all states. Call UnitedHealthcare to learn about the plans available in your area.

Medicare Supplement Plan Highlights

- Helps cover some of the costs that Medicare Parts A and B don't pay for
- When you turn 65 and enroll in Medicare Part B, you have a guaranteed right of acceptance for six months²
- No network restrictions allow you to visit any provider who accepts Medicare patients

Not connected with or endorsed by the U.S. Government or the Federal Medicare program.

Important Resources

Social Security Administration

1-800-772-1213

7 a.m. – 7 p.m., Monday – Friday

TTY users, call: **1-800-325-0778**

www.socialsecurity.gov

Medicare Helpline

1-800-MEDICARE (1-800-633-4227)

24 hours a day, 7 days a week

TTY users, call: **1-877-486-2048**

www.medicare.gov

Call UnitedHealthcare today!



1-800-861-1764, TTY 711

8 a.m. – 8 p.m. local time,

7 days a week



AnswersToMedicare.com/T65

A UnitedHealthcare® Medicare Solution

¹If you qualify for extra help, you will not have a late-enrollment penalty (LEP). Also, if you have other prescription coverage at least as good as Medicare (also known as creditable coverage), you may not be assessed a LEP.

²In CT, MA, NY and VT, individuals are guaranteed acceptance and guaranteed issue in Medicare supplement plans at all times. In other states, there are other situations in which a person may be eligible for guaranteed issue.

The benefit information provided herein is a brief summary, not a comprehensive description of benefits. For more information contact the plan.

The family of UnitedHealthcare® Medicare Solutions plans are insured or covered by an affiliate of UnitedHealthcare, a Medicare Advantage organization with a Medicare contract and Medicare-approved Part D Sponsor.

AARP and its affiliate are not insurance agencies or carriers and do not employ or endorse insurance agents, brokers, producers, representatives or advisors.

AARP doesn't make individual recommendations for health-related products, services, insurance or programs. You are encouraged to evaluate your needs and compare products.

The AARP® Medicare Supplement Insurance Plans, AARP® MedicareComplete® and AARP® MedicareRx plans carry the AARP name, and UnitedHealthcare pays a royalty fee to AARP for use of the AARP intellectual property. Amounts paid are used for the general purposes of AARP and its members. Neither AARP nor its affiliate is the insurer.

AARP Medicare Supplement Insurance Plans are group insurance plans and are insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY, for New York residents). Policy Form No. GRP 79171 GPS-1 (G-36000-4).

SecureHorizons® Medicare Supplement Insurance Plans are individual insurance plans and are insured by PacifiCare Life and Health Insurance Company or PacifiCare Life Assurance Company. Each insurer has sole responsibility for its own products. In some states plans may be available to persons eligible for Medicare by reason of disability.

All plans may not be available in your state/area and for some plans you must reside in the plan's federally approved service area to obtain health care coverage. Call to receive complete information including benefits, costs, eligibility requirements, exclusions and limitations.

This is a solicitation of insurance. A licensed agent/producer may contact you.

Benefits, formulary, pharmacy network, premium and/or co-payments/co-insurance may change on January 1, 2012.



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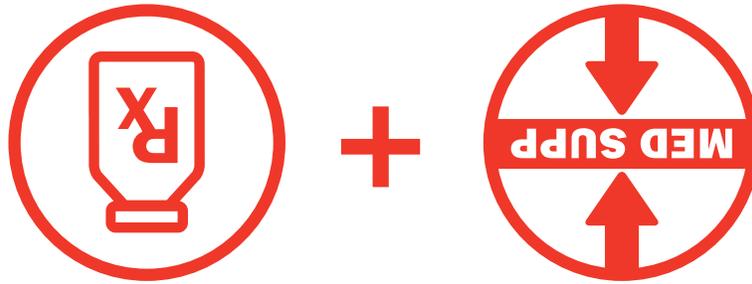
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See inside to learn how to complete your coverage.

Medicare only covers some of your costs.

A UnitedHealthcare® Medicare Solution

¹In CT, MA, NY and VT, individuals are guaranteed acceptance and guaranteed issue in Medicare supplement plans at all times. In other states, there are other situations in which a person may be eligible for guaranteed issue.

²Based on the total number of UnitedHealth Group enrollments received by CMS website plan data compared with the total number of Medicare beneficiaries as of January 2010.

The family of AARP Medicare Plans includes Part D Prescription Drug Plans, Medicare Supplement Insurance Plans and Medicare Advantage Plans featuring the AARP® brand name. Plans are insured or covered by UnitedHealthcare® Insurance Company or an affiliate, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor.

AARP and its affiliate are not insurance agencies or carriers and do not employ or endorse insurance agents, brokers, producers, representatives or advisors.

AAARP doesn't make individual recommendations for health-related products, services, insurance or programs. You are encouraged to evaluate your needs and compare products.

The AARP® Medicare Supplement Insurance Plans, AARP® MedicareComplete® and AARP® MedicareRx plans carry the AARP name, and UnitedHealthcare pays a royalty fee to AARP for use of the AARP intellectual property. Amounts paid are used for the general purpose of AARP and its members. Neither AARP nor its affiliate is the insurer.

AARP Medicare Supplement Insurance Plans are insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY, for New York residents). Policy Form No. GRP 79171 GPS-1 (G-36000-4). Each insurer has sole responsibility for its own products. In some states plans may be available to persons eligible for Medicare by reason of disability.

Not connected or endorsed by the U.S. Government or the federal Medicare program.

All plans may not be available in your state/area and for some plans you must reside in the plan's federally approved service area to obtain health care coverage. Call to receive complete information including benefits, costs, eligibility requirements, exclusions and limitations.

This is a solicitation of insurance. A licensed agent may contact you.

Medicare supplement insurance plus Part D provides more complete coverage.

Enrolling in Medicare Parts A and B alone won't cover all of your hospital, medical and prescription drug costs. To help pay for costs not covered, many people enroll in an AARP® Medicare Supplement Insurance Plan and an AARP® MedicareRx Plan, insured through UnitedHealthcare Insurance Company.



AARP Medicare Supplement Insurance Plans

All Medicare supplement plans help cover hospital and medical costs not covered by Medicare Parts A and B.

- You can choose any doctor or hospital that accepts Medicare patients
- When you turn 65 and enroll in Medicare Part B, you are guaranteed acceptance into a plan for six months¹
- You're covered anywhere you travel in the United States and U.S. territories



AARP MedicareRx Plans



Medicare Part D prescription drug plans help cover drug costs.

- \$0 annual deductible and predictable copays for your drugs
- More than 60,000 convenient network retail locations to fill your prescriptions
- Coverage for thousands of prescription drugs
- You're covered anywhere you travel in the United States and U.S. territories

Two insurance plans from one provider.

When combined, an AARP Medicare Supplement Insurance Plan and an AARP MedicareRx Plan could provide the complete coverage you're missing. Enroll in one or both plans today and have the peace of mind from knowing UnitedHealthcare helps millions of people just like you with their Medicare needs.²

Complete your coverage today.

For a personalized plan quote, call UnitedHealthcare today.



1-866-255-4524, TTY 711

8 a.m. – 8 p.m. local time, 7 days a week



[AnswersToMedicare.com/T65](https://www.answers-to-medicare.com/T65)