



# 2026 Summary of Benefits

UCare Connect + Medicare  
HMO D-SNP





**Toll free 1-800-203-7225, TTY 1-800-688-2534**

Attention. If you need free help interpreting this document, call the above number.

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ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه.

သတိ။ ဤတွဲရက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមហៅទូរសព្ទតាមលេខខាងលើ ។

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Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, veuillez appeler au numéro ci-dessus.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ဟ်သူဉ်ဟ်သးဘဉ်တက့ၢ်. ဖဲနမ့ၢ်လိဉ်ဘဉ်တၢ်မၤစၤကလိလၢတၢ်ကကျိးထံဝဲဒၣ်လံာ် တီလံာ်မိတခါအံၤန့ၣ်,ကိးဘဉ် လီတဲစိနီၣ်ဂံၢ်လၢထးအံၤန့ၣ်တက့ၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 위의 전화번호로 연락하십시오.

ໂປຣດຊາບ. ຖ້າຫາກ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ຟຣີ, ຈົ່ງ ໂທໂປຣໂປທີໝາຍເລກຂ້າງເທິງນີ້.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, lakkoobsa gubbatti kenname bilbili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda (afcelinta) qoraalkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.

## Civil Rights Notice

**Discrimination is against the law. UCare** does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. You can file a complaint and ask for help filing a complaint in person or by mail, phone, fax, or email at:

UCare

Attn: Appeals and Grievances

PO Box 52

Minneapolis, MN 55440-0052

Toll Free: 1-800-203-7225

TTY: 1-800-688-2534

Fax: 612-884-2021

Email: [cag@ucare.org](mailto:cag@ucare.org)

**Auxiliary Aids and Services: UCare** provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs. **Contact** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

**Language Assistance Services: UCare** provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

## Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. You may also contact any of the following agencies directly to file a discrimination complaint.

### U.S. Department of Health and Human Services Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion (in some cases)

Contact the OCR directly to file a complaint:

Office for Civil Rights  
U.S. Department of Health and Human Services  
Midwest Region  
233 N. Michigan Avenue, Suite 240  
Chicago, IL 60601  
Customer Response Center: Toll-free: 800-368-1019  
TDD Toll-free: 800-537-7697  
Email: [ocrmail@hhs.gov](mailto:ocrmail@hhs.gov)

### **Minnesota Department of Human Rights (MDHR)**

In Minnesota, you have the right to file a complaint with the MDHR if you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights  
540 Fairview Avenue North, Suite 201  
St. Paul, MN 55104  
651-539-1100 (voice)  
800-657-3704 (toll-free)  
711 or 800-627-3529 (MN Relay)  
651-296-9042 (fax)  
[Info.MDHR@state.mn.us](mailto:Info.MDHR@state.mn.us) (email)

### **Minnesota Department of Human Services (DHS)**

You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- religion (in some cases)
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. We will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator

Minnesota Department of Human Services

Equal Opportunity and Access Division

P.O. Box 64997

St. Paul, MN 55164-0997

651-431-3040 (voice) or use your preferred relay service

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For elders age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to go to your primary care provider prior to the referral.

# UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

## Introduction

This document is a brief summary of the benefits and services covered by UCare Connect + Medicare. It includes answers to frequently asked questions, important contact information, an overview of benefits and services offered, and information about your rights as a member of UCare Connect + Medicare. Key terms and their definitions appear in alphabetical order in the last chapter of the *Member Handbook*.

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## A. Disclaimers



This is a summary of health services covered by UCare Connect + Medicare for 2026. This is only a summary. Please read the *Member Handbook* for the full list of benefits. You can view the *Member Handbook* on our website at [ucare.org/formembers](https://ucare.org/formembers). If you would like a print copy, call UCare Connect + Medicare Customer Service at the number at the bottom of this page.

- UCare is an HMO D-SNP health plan that contracts with both Medicare and the Minnesota Medical Assistance (Medicaid) program to provide benefits of both programs to enrollees. Enrollment in UCare depends on contract renewal.
- For information about choice counseling services, call the Minnesota Department of Human Services Health Care Consumer Support (HCCS) line at 1-651-297-3862 or 1-800-657-3672.
- For more information about **Medicare**, you can read the *Medicare & You* handbook. It has a summary of Medicare benefits, rights, and protections and answers to the most frequently asked questions about Medicare. You can get it at the Medicare website ([www.medicare.gov](https://www.medicare.gov)) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.
- You can call the Ombudsperson for Public Managed Care Program at 1-800-657-3729 or 711 or your preferred relay service, Monday through Friday, 8:00 a.m. – 4:30 p.m.
- You can get this document for free in other formats, such as large print, braille, or audio. Call Customer Service at the number at the bottom of this page. The call is free.
- To make or change a standing request to get this document, now and in the future, in a language other than English or in an alternate format, call Customer Service at the number at the bottom of this page.



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**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit [ucare.org](https://ucare.org).



## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

### B. Frequently asked questions (FAQ)

The following table lists frequently asked questions.

| Frequently Asked Questions  | Answers   |
|---|---|
| <b>What's a Special Needs BasicCare (SNBC) plan?</b>  | <p>Our plan is part of the Special Needs BasicCare (SNBC) program. This program was designed by the Minnesota Department of Human Services (DHS) to provide special care for people with disabilities ages 18 through 64. Our plan combines your Medicare and Medical Assistance services. It combines your doctors, hospital, pharmacies, home health care, nursing home care, and other health care providers into one coordinated care system. It also has care coordinators to help you manage all your providers and services. They all work together to provide the care you need.</p> <p>Our SNBC program is called UCare Connect + Medicare.</p>  |
| <b>Will I get the same Medicare and Medical Assistance benefits in UCare Connect + Medicare that I get now?</b> | <p>You'll get most of your covered Medicare and Medical Assistance benefits directly from UCare Connect + Medicare. You'll work with a team of providers who will help determine what services will best meet your needs. This means that some of the services you get now may change based on your needs, and your doctor and care team assessment. You may also get other benefits outside of your health plan the same way you do now, directly from another source, such as the State, county, Federal government, or Tribal nation.</p> <p>When you enroll in UCare Connect + Medicare, you and your care team will work together to develop an Individualized Support Plan to address your health and support needs, reflecting your personal preferences and goals.</p> <p>If you're taking any Medicare Part D drugs that UCare Connect + Medicare doesn't normally cover, you can get a temporary supply and we'll help you to transition to</p> |
| (table continued on the next page)  |   |



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| Frequently Asked Questions                   | Answers   |
|--|---|
| (table continued from previous page)         |   |
|  | another drug or get an exception for UCare Connect + Medicare to cover your drug if medically necessary. For more information, call Customer Service at the numbers listed at the bottom of this page.  |
| <b>Can I use the same doctors I use now?</b> | <p>This is often the case. If your providers (including doctors, hospitals, therapists, pharmacies and other health care providers) work with UCare Connect + Medicare and have a contract with us, you can keep going to them.</p> <ul style="list-style-type: none"> <li>• Providers with an agreement with us are “in-network.” Network providers participate in our plan. That means they accept members of our plan and provide services our plan covers. <b>You must use the providers in UCare Connect + Medicare’s network.</b> If you use providers or pharmacies that aren't in our network, the plan may not pay for these services or drugs.</li> <li>• If you need urgent or emergency care or out-of-area dialysis services, you can use providers outside of UCare Connect + Medicare's network. You may also use out-of-network providers for open access services and in cases when UCare Connect + Medicare authorizes the use of out-of-network providers.</li> <li>• If you're currently under treatment with a provider that's out of UCare Connect + Medicare’s network, or have an established relationship with a provider that's out of UCare Connect + Medicare’s network, call Customer Service to check about staying connected.</li> </ul> |
| (table continued on the next page)           |   |



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## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Frequently Asked Questions                                 | Answers  |
|--|--|
| (table continued from previous page)                       |  |
|  | <p>To find out if your providers are in the plan's network, call Customer Service at the numbers listed at the bottom of this page or read UCare Connect + Medicare's <i>Provider and Pharmacy Directory</i> on the plan's website at <b>ucare.org/searchnetwork</b>.</p> <p>If UCare Connect + Medicare is new for you, we'll work with you to develop an Individualized Support Plan to address your needs.</p>  |
| <b>What's a UCare Connect + Medicare care coordinator?</b> | <p>A UCare Connect + Medicare care coordinator is one main person for you to contact. This person helps to manage all your providers and services and makes sure you get what you need, including the following:</p> <ul style="list-style-type: none"> <li>• Assisting you in arranging for, getting and coordinating assessments, tests, and health and long-term care supports and services</li> <li>• Working with you to develop and update your support plan</li> <li>• Supporting you and communicating with a variety of agencies and persons</li> <li>• Coordinating other services as outlined in your support plan</li> <li>• Helping you coordinate Durable Medical Equipment needs with your providers and equipment suppliers</li> <li>• Transportation arrangements</li> <li>• Scheduling appointments</li> <li>• Discharge planning if hospitalized or requiring a higher level of care</li> </ul> |
| (table continued on the next page)                         |  |



**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit **ucare.org**.

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| Frequently Asked Questions   | Answers   |
|--|---|
| (table continued from previous page)   |   |
|  | <ul style="list-style-type: none"> <li>• Referrals to UCare's Disease Management programs</li> <li>• Referrals to community resources</li> <li>• Assistance with medication refills</li> </ul>  |
| <b>What happens if I need a service but no one in UCare Connect + Medicare's network can provide it?</b> | Most services will be provided by our network providers. If you need a service that can't be provided within our network, UCare Connect + Medicare will pay for the cost of an out-of-network provider. A prior authorization may be required before getting services from out-of-network providers.  |
| <b>Where's UCare Connect + Medicare available?</b>   | The service area for this plan includes: Anoka, Benton, Carver, Chisago, Dakota, Hennepin, Isanti, Mille Lacs, Ramsey, Scott, Sherburne, Stearns, Washington, and Wright. You must live in one of these counties to join the plan.  |
| <b>What's prior authorization?</b>   | <p>Prior authorization means an approval from UCare Connect + Medicare to seek services outside of our network or to get services not routinely covered by our network <b>before</b> you get the services. UCare Connect + Medicare may not cover the service, procedure, item, or drug if you don't get prior authorization.</p> <p><b>If you need urgent or emergency care or out-of-area dialysis services, you don't need to get prior authorization first.</b> UCare Connect + Medicare can provide you or your provider with a list of services or procedures that require you to get prior authorization from UCare Connect + Medicare before the service is provided.</p> |
| (table continued on the next page)   |   |



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## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Frequently Asked Questions   | Answers  |
|--|--|
| (table continued from previous page)   |  |
|  | <p>Refer to <b>Chapter 3</b> of the <i>Member Handbook</i> to learn more about prior authorization. Refer to the Benefits Chart in <b>Chapter 4</b> of the <i>Member Handbook</i> to learn which services require a prior authorization.</p> <p>If you have questions about whether prior authorization is required for specific services, procedures, items, or drugs, call Customer Service at the numbers listed at the bottom of this page for help.</p> |
| <b>Do I pay a monthly amount (also called a premium) under UCare Connect + Medicare?</b>                                   | <p>No. Because you have Medical Assistance, you won't pay any monthly premiums for your health coverage. However, you must continue to pay your Medicare Part B premium unless your Part B premium is paid for you by Medical Assistance or another third party.</p>   |
| <b>Do I pay a deductible as a member of UCare Connect + Medicare?</b>  | <p>No. You don't pay deductibles in UCare Connect + Medicare.</p>  |
| <b>What's the maximum out-of-pocket amount that I'll pay for medical services as a member of UCare Connect + Medicare?</b> | <p>There's no cost sharing for <b>medical services</b> in UCare Connect + Medicare, so your annual out-of-pocket costs will be \$0.</p>  |



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## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

### C. List of covered services

The following table is a quick overview of what services you may need, your costs, and rules about the benefits.

| Health need or concern        | Services you may need  | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)                           |
|-------------------------------|--|-------------------------------------|--|
| <b>You need hospital care</b> | Inpatient hospital stay  | \$0                                 | Except in an emergency, your health care provider must tell the plan of your hospital admission. |
|                               | Outpatient hospital services, including observation                                      | \$0                                 |  |
|                               | Ambulatory surgical center (ASC) services  | \$0                                 |  |
|                               | Doctor or surgeon care   | \$0                                 |  |
| <b>You want a doctor</b>      | Visits to treat an injury or illness   | \$0                                 |  |
|                               | Care to keep you from getting sick, such as flu shots and screenings to check for cancer | \$0                                 |  |
|                               | Wellness visits, such as a physical  | \$0                                 |  |
|                               | "Welcome to Medicare" (preventive visit - one time only)                                 | \$0                                 |  |
|                               | Specialist care  | \$0                                 |  |



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| Health need or concern  | Services you may need   | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)  |
|-------------------------|-------------------------|-------------------------------------|---|
| You need emergency care | Emergency room services | \$0                                 | You may use any emergency room if you reasonably believe you need emergency care. You don't need prior authorization and you don't have to be in-network. Emergency room services aren't covered outside of the U.S. and its territories. Contact the plan for details. |
|                         | Urgent care             | \$0                                 | Urgently needed care isn't emergency care. You don't need prior authorization and you don't have to be in-network. Urgently needed care services aren't covered outside the U.S. and its territories. Contact the plan for details.                                     |



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| Health need or concern                                   | Services you may need  | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)  |
|--|--|-------------------------------------|---|
| <b>You need medical tests</b>                            | Diagnostic radiology services (for example, X-rays or other imaging services, such as CAT scans or MRIs) | \$0                                 |   |
|  | Lab tests and diagnostic procedures, such as blood work  | \$0                                 |   |
| <b>You need hearing/auditory services</b>                | Hearing screenings   | \$0                                 |   |
|  | Hearing aids   | \$0                                 |   |
| <b>You need dental care</b> (continued on the next page) | Dental check-ups and preventive care   | \$0                                 | <b>Additional and supplemental services</b> <ul style="list-style-type: none"> <li>• One comprehensive oral evaluation per year</li> <li>• One panoramic x-ray once each year</li> <li>• One full mouth series x-ray per year</li> <li>• One porcelain fused to high noble metal crown per calendar year</li> <li>• One crown repair per year</li> </ul> <p>Additional coverage limits may apply. Call Customer Service at the number at the bottom of this page.</p> |



**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit [ucare.org](https://www.ucare.org).



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| Health need or concern                          | Services you may need   | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)   |
|---|---|-------------------------------------|--|
| <b>You need dental care</b> (continued)         | Restorative and emergency dental care   | \$0                                 |  |
| <b>You need eye care</b>                        | Eye exams   | \$0                                 |  |
|   | Glasses or contact lenses   | \$0                                 | Selection may be limited. <ul style="list-style-type: none"> <li>• One pair of eyeglasses or contact lenses after each cataract surgery, or contact lenses for certain conditions when eyeglasses will not work</li> <li>• Anti-glare lens coating, once per year</li> <li>• Photochromic ("transition") lens tinting, once per year</li> <li>• Progressive (no-line) lenses, once per year</li> </ul> |
|   | Other vision care   | \$0                                 |  |
| <b>You need mental health services</b>          | Mental health services  | \$0                                 | State eligibility requirements may apply.  |
|   | Inpatient and outpatient care and community-based services for people who need mental health services | \$0                                 | State eligibility requirements may apply.  |
| <b>You need substance use disorder services</b> | Substance use disorder services   | \$0                                 |  |



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| Health need or concern  | Services you may need                    | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)   |
|---|--|-------------------------------------|--|
| <b>You need a place to live with people available to help you</b>               | Skilled nursing care                     | \$0                                 | Medically necessary skilled nursing care is covered.<br><br>Prior authorization may be required.   |
|   | Nursing home care                        | \$0                                 | Prior authorization may be required.   |
| <b>You need therapy after a stroke or accident</b>                              | Occupational, physical or speech therapy | \$0                                 | There may be limits on physical therapy, occupational therapy, and speech therapy services. If so, there may be exceptions to these limits.      |
| <b>You need help getting to health services</b><br>(continued on the next page) | Ambulance services                       | \$0                                 | Ambulance services must be medically necessary. You do not need prior authorization for ambulance services and you do not have to be in-network. |
|   | Emergency transportation                 | \$0                                 |  |



**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit [ucare.org](https://ucare.org).

## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Health need or concern   | Services you may need                               | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)   |
|--|---|-------------------------------------|--|
| <b>You need help getting to health services</b><br>(continued)                           | Transportation to medical appointments and services | \$0                                 | <p>UCare Connect + Medicare isn't required to provide transportation to your primary care clinic (PCC) if it's over 30 miles from your home.</p> <p>UCare Connect + Medicare isn't required to provide transportation to your specialty care clinic if it's over 60 miles from your home.</p> <p>Call Customer Service if you do not have a primary care clinic that is available within 30 miles of your home and/or if it is over 60 miles to your specialty provider.</p> |
| <b>You need drugs to treat your illness or condition</b><br>(continued on the next page) | Medicare Part B drugs                               | \$0                                 | <p>Part B drugs include drugs given by your doctor in their office, some oral cancer drugs, and some drugs used with certain medical equipment. Read the <i>Member Handbook</i> for more information on these drugs.</p> <p>Some Medicare Part B drugs may need prior authorization or have step therapy requirements.</p>   |



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## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Health need or concern  | Services you may need  | Your costs for in-network providers   | Limitations, exceptions and benefit information (rules about benefits)   |
|---|--|---|--|
| <b>You need drugs to treat your illness or condition</b><br>(continued) | Medicare Part D drugs<br><br>Tier 1 generic drugs<br><br>Tier 1 brand name drugs | Tier 1 generic drugs:<br>\$0/\$1.60/\$5.10 for a 30-day supply.<br><br>Tier 1 brand name drugs:<br>\$0/\$4.90/\$12.65 for a 30-day supply.<br><br>Copays for drugs may vary based on the level of Extra Help you get. Please contact the plan for more details. | There may be limitations on the types of drugs covered. Please refer to UCare Connect + Medicare's <i>List of Covered Drugs</i> (Drug List) for more information.<br><br>UCare Connect + Medicare may require you to first try one drug to treat your condition before it will cover another drug for that condition.<br><br>Some drugs have quantity limits.<br><br>Your provider must get prior authorization from UCare Connect + Medicare for certain drugs. |



**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit [ucare.org](https://www.ucare.org).

## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Health need or concern  | Services you may need | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)  |
|---|-----------------------|-------------------------------------|---|
| <p><b>You need drugs to treat your illness or condition</b><br/>(continued)</p> |                       |                                     | <p>You must use certain pharmacies for a very limited number of drugs, due to special handling, provider coordination, or patient education requirements that can't be met by most pharmacies in your network. These drugs are listed on the plan's website, <i>List of Covered Drugs</i> (Drug List), and printed materials, as well as on the Medicare Plan Finder on <a href="http://www.medicare.gov">www.medicare.gov</a>.</p> <p>Once you or others on your behalf pay \$2,100 you have reached the catastrophic coverage stage and you pay \$0 for all your Medicare drugs. Read the <i>Member Handbook</i> for more information on this stage.</p> <p>An extended-day supply is available at both mail and retail pharmacy locations. The cost-sharing amount for this extended-day supply is the same as for a one month supply.</p> |



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## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Health need or concern   | Services you may need              | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)   |
|--|------------------------------------|-------------------------------------|--|
| <b>You need drugs to treat your illness or condition</b><br>(continued)  | Over-the-counter (OTC) drugs       | \$0                                 | There may be limitations on the types of drugs covered.<br><br>Please refer to UCare Connect + Medicare's <i>List of Covered Drugs</i> (Drug List) for more information. |
| <b>You need help getting better or have special health needs</b>   | Rehabilitation services            | \$0                                 | Prior authorization may be required.   |
|  | Medical equipment for home care    | \$0                                 | Prior authorization may be required.   |
|  | Dialysis services                  | \$0                                 |  |
| <b>You need foot care</b>  | Podiatry services                  | \$0                                 |  |
|  | Orthotic services                  | \$0                                 |  |
| <b>You need durable medical equipment (DME)</b><br><br><b>Note:</b> This isn't a complete list of covered DME. For a complete list, contact Customer Service or refer to Chapter 4 of the <i>Member Handbook</i> . | Wheelchairs, crutches, and walkers | \$0                                 | Prior authorization may be required.   |
|  | Nebulizers                         | \$0                                 | Prior authorization may be required.   |
|  | Oxygen equipment and supplies      | \$0                                 | Prior authorization may be required.   |



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## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Health need or concern                                     | Services you may need          | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)  |
|--|--------------------------------|-------------------------------------|---|
| <b>You need help living at home</b>                        | Home health care               | \$0                                 | State eligibility requirements may apply.<br><br>Prior authorization may be required.   |
| <b>You need interpreter services</b>                       | Spoken language interpreter    | \$0                                 |   |
|  | Sign language interpreter      | \$0                                 |   |
| <b>Additional services</b><br>(continued on the next page) | 24/7 Nurse line                | \$0                                 |   |
|  | Acupuncture                    | \$0                                 |   |
|  | Care coordination              | \$0                                 |   |
|  | Chiropractic services          | \$0                                 | Up to 12 routine visits per year for members with musculoskeletal disorders, including exams and adjustment of extremities.<br><br>Prior authorization may be required. |
|  | Diabetes supplies and services | \$0                                 | There are limitations on the test strips and meters covered. Please see UCare Connect + Medicare's <i>List of Covered Drugs</i> (Drug List) for more information.       |
|  | Family planning                | \$0                                 |   |
|  | Housing stabilization services | \$0                                 | State eligibility requirements may apply.   |



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## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Health need or concern                    | Services you may need                  | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)  |
|---|--|-------------------------------------|---|
| <b>Additional services</b><br>(continued) | Prosthetic services                    | \$0                                 |   |
|   | Radiation therapy                      | \$0                                 |   |
|   | Services to help manage your disease   | \$0                                 |   |
|   | Quit Smoking and Vaping Program        | \$0                                 | Learn how to stop smoking, vaping or chewing tobacco. UCare members can get help at no charge to quit through the Tobacco and Nicotine Quit Line. Nicotine patches, gum or lozenges are also available to eligible members. |
|   | Car seat and car seat safety education | \$0                                 | Car seat and car seat safety education at no cost from UCare through our Seats, Education, And Travel Safety (SEATS) Program.   |



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## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Health need or concern                                | Services you may need                                | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)  |
|---|--|-------------------------------------|---|
| <b>Additional services:</b><br>Post-discharge support | Lutheran Social Services Healthy Transitions Program | \$0                                 | For eligible members, individualized support, education and resources from a specially trained and certified Community Health Worker (CHW) who provides a series of four touch point visits (two in-home and two telephone) during the first critical 30 days after discharge from a hospital or short-term rehabilitation center. CHW collaborates with your Connect + Medicare care coordinator and you to ensure that all needs are being met. |
|   | Post-discharge meals                                 | \$0                                 | Two meals a day for up to 14 days following a discharge from an inpatient facility.   |
|   | Post-discharge medication reconciliation             | \$0                                 | Medication reconciliation provided by a pharmacist after discharge from an inpatient facility.  |



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## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Health need or concern  | Services you may need | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)   |
|---|-----------------------|-------------------------------------|--|
| <b>Additional services:</b><br>Fitness/Health Maintenance<br>(continued on the next page) | One Pass              | \$0                                 | <ul style="list-style-type: none"> <li>• Access to participating fitness locations nationwide</li> <li>• On-demand and livestreaming fitness classes</li> <li>• Workout builders to create your own workouts and walk you through each exercise</li> <li>• Home fitness kits available upon request (one kit per year)</li> <li>• Personalized, online brain-training program to help improve memory, attention and focus</li> <li>• Social activities, community classes, and events available for online or in-person participation</li> </ul> |



**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit [ucare.org](https://ucare.org).

## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Health need or concern  | Services you may need            | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)   |
|---|----------------------------------|-------------------------------------|--|
| <b>Additional services:</b><br>Fitness/Health Maintenance (continued) | Over-the-counter (OTC) allowance | \$0                                 | \$55 quarterly Over-the-counter (OTC) allowance loaded to the Healthy Benefits+ Visa® card to purchase eligible items like cough drops, first aid supplies, pain relief, sinus medications, toothpaste and more at participating retailers. Dollars you don't use expire at the end of the quarter or upon plan termination. |
|   | Medication Toolkit               | \$0                                 | One Medication Toolkit per year to help make taking your medication easier.  |
|   | Grocery Discounts                | \$0                                 | Grocery discounts on pre-qualified healthy foods. This includes items such as milk, whole-grain bread, lean meat, eggs, yogurt, fruits, vegetables and more. Weekly discounts are pre-loaded onto your Healthy Benefits+ Visa® card.   |



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## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Health need or concern                                | Services you may need   | Your costs for in-network providers | Limitations, exceptions and benefit information (rules about benefits)  |
|---|-------------------------|-------------------------------------|---|
| <b>Additional services:</b><br>Caregiver Support      | Caregiver support       | \$0                                 | Caregiver support is available to caregivers of all members.  |
| <b>Additional services:</b> Chronic Condition Support | Connect to Wellness Kit | \$0                                 | Stress reduction kits for members diagnosed with hypertension, diabetes, lipid disorders, depression, or anxiety.<br><br>One kit per year per member. |
|   | ADHD/Autism Kit         | \$0                                 | One ADHD/Autism kit per year for members with ADHD or Autism.   |

The above summary of benefits is provided for informational purposes only and isn't a complete list of benefits. For a complete list and more information about your benefits, you can read the UCare Connect + Medicare *Member Handbook*. If you don't have a *Member Handbook*, call UCare Connect + Medicare Customer Service at the numbers listed at the bottom of this page to get one. If you have questions, you can also call Customer Service or visit [ucare.org/formembers](https://ucare.org/formembers).

### D. Benefits covered outside of UCare Connect + Medicare

There are some services that you can get that aren't covered by UCare Connect + Medicare but are covered by Medicare, Medical Assistance, or a State or county agency. This isn't a complete list. Call Customer Service at the numbers listed at the bottom of this page to find out about these services.



**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit [ucare.org](https://ucare.org).

## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

| Other services covered by Medicare, Medical Assistance, or a State agency   | Your costs |
|---|------------|
| Specialty mental health and substance use disorder services, waiver programs, home and community supports, and regional center services | \$0        |
| Certain hospice care services covered outside of UCare Connect + Medicare   | \$0        |
| Personal care assistant services/Community First Supports and Services (CFSS)   | \$0        |
| Home care nursing services  | \$0        |
| Waiver services provided under Home and Community-Based Services waivers  | \$0        |

### E. Services that UCare Connect + Medicare, Medicare, and Medical Assistance don't cover

This isn't a complete list. Call Customer Service at the numbers listed at the bottom of this page to find out about other excluded services.

| Services UCare Connect + Medicare, Medicare, and Medical Assistance don't cover  |
|--|
| Services not considered “reasonable and necessary” according to standards of Medicare and Medical Assistance                         |
| Experimental medical and surgical treatments, items, or drugs unless covered by Medicare or under a Medicare-approved clinical study |
| Surgical treatment for morbid obesity except when medically necessary  |
| Elective or voluntary enhancement procedures   |
| Cosmetic surgery or other cosmetic work unless criteria are met  |
| Lasik surgery  |



**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit [ucare.org](https://www.ucare.org).

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### F. Your rights as a member of the plan

As a member of UCare Connect + Medicare, you have certain rights. You can exercise these rights without being punished. You can also use these rights without losing your health care services. We will tell you about your rights at least once a year. For more information on your rights, please read the *Member Handbook*. Your rights include, but aren't limited to, the following:

- **You have a right to respect, fairness, and dignity.** This includes the right to:
  - Get covered services without concern about medical condition, health status, receipt of health services, claims experience, medical history, disability (including mental impairment), marital status, age, sex (including sex stereotypes and gender identity), sexual orientation, national origin, race, color, religion, creed, or public assistance
  - Get information in other languages and formats (for example, large print, braille, or audio) free of charge
  - Be free from any form of physical restraint or seclusion
- **You have the right to get information about your health care.** This includes information on treatment and your treatment options. This information should be in a language and format you can understand. This includes the right to get information on:
  - Description of the services we cover
  - How to get services
  - How much services will cost you
  - Names of health care providers and care coordinator
- **You have the right to make decisions about your care, including refusing treatment.** This includes the right to:
  - Choose a primary care provider (PCP) and change your PCP at any time during the year
  - Use a women's health care provider without a referral
  - Get your covered services and drugs quickly
  - Know about all treatment options, no matter what they cost or whether they're covered
  - Refuse treatment, even if your health care provider advises against it
  - Stop taking medicine, even if your health care provider advises against it
  - Ask for a second opinion. UCare Connect + Medicare will pay for the cost of your second opinion visit.



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## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

- Make your health care wishes known in an advance directive
- **You have the right to timely access to care that doesn't have any communication or physical access barriers.** This includes the right to:
  - Get timely medical care
  - Get in and out of a health care provider's office. This means barrier free access for people with disabilities, in accordance with the Americans with Disabilities Act.
  - Have interpreters to help with communication with your health care providers and your health plan
- **You have the right to seek emergency and urgent care when you need it.** This means you have the right to:
  - Get emergency services without prior authorization in an emergency
  - Use an out-of-network urgent or emergency care provider, when necessary
- **You have a right to confidentiality and privacy.** This includes the right to:
  - Ask for and get a copy of your medical records in a way that you can understand and to ask for your records to be changed or corrected
  - Have your personal health information kept private
  - Have privacy during treatment
- **You have the right to make complaints about your covered services or care.** This includes the right to:
  - File a complaint or grievance against us or our providers
  - Ask for a State Appeal (Fair Hearing with the State)
  - Get a detailed reason for why services were denied

For more information about your rights, you can read the *Member Handbook*. If you have questions, you can call UCare Connect + Medicare Customer Service at the numbers listed at the bottom of this page.

You can also call the Office of the Ombudsperson for Public Managed Health Care Programs at 1-800-657-3729 (TTY: 711 or use your preferred relay service). The call is free.



**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit [ucare.org](https://ucare.org).

### G. How to file a complaint or appeal a denied service

If you have a complaint or think UCare Connect + Medicare should cover something we denied, call Customer Service at the numbers listed at the bottom of the page. You may be able to appeal our decision.

For questions about complaints and appeals, you can read Chapter 9 of the *Member Handbook*. You can also call UCare Connect + Medicare Customer Service at the numbers listed at the bottom of the page.

- **For oral grievances and complaints, call UCare Connect + Medicare Customer Service:**  
612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week.
- **For oral appeals, call UCare Appeals and Grievances:**  
612-676-6841 or 1-877-523-1517 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 4:30 pm, Monday – Friday.
- **For written appeals, grievances and complaints, mail UCare at:**  
Attn: Appeals and Grievances  
UCare  
PO Box 52  
Minneapolis, MN 55440-0052
- **You can also fax your written appeal, grievance or complaint to UCare at:**  
612-884-2021 or 1-866-283-8015
- **Or email us at:** [cag@ucare.org](mailto:cag@ucare.org)

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### H. What to do if you suspect fraud

Most health care professionals and organizations that provide services are honest. Unfortunately, there may be some who are dishonest.

If you think a doctor, hospital, or other pharmacy is doing something wrong, please contact us.

- Call us at UCare Connect + Medicare Customer Service at the phone numbers listed at the bottom of this page.
- Call the UCare Connect + Medicare Fraud Hot Line at 1-877-826-6847 (this call is free), 24 hours a day, seven days a week. TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week.
- Or, call the Minnesota Program Integrity Oversight Hotline at 651-431-2650 or 1-800-657-3750. TTY users may call 711. The call is free.



**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit [ucare.org](https://www.ucare.org).



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- Or, call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users may call 1-877-486-2048. You can call these numbers for free.



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**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit [ucare.org](https://ucare.org).





## UCare Connect + Medicare (HMO D-SNP): 2026 Summary of Benefits

### **If you have general questions or questions about our plan, services, service area, billing, or Member ID Cards, please call UCare Connect + Medicare Customer Service:**

612-676-3310 or 1-855-260-9707 (this call is free)

8 am – 8 pm, seven days a week

Customer Service also has free language interpreter services available for non-English speakers.

TTY: 612-676-6810 or 1-800-688-2534 (this call is free)

8 am – 8 pm, seven days a week

These numbers require special telephone equipment and are only for people who have difficulties with hearing or speaking.

### **If you have questions about your health:**

- Call your primary care provider (PCP). Follow your PCP's instructions for getting care when the office is closed.
- If your PCP's office is closed, you can also call UCare's 24/7 Nurse Line. A nurse will listen to your problem and tell you how to get care. (Example: urgent care, emergency room). The numbers for the UCare 24/7 Nurse Line are:

1-800-942-7858 (this call is free)

24 hours a day, seven days a week

UCare Connect + Medicare also has free language interpreter services available for non-English speakers.

TTY: 1-855-307-6976 (this call is free)

24 hours a day, seven days a week

### **If you need immediate mental health or substance use disorder care, please call the Integrated Care Management Triage Line:**

612-676-6533 or 1-833-276-1185 (this call is free)

8 am – 5 pm, Monday – Friday

UCare Connect + Medicare also has free language interpreter services available for non-English speakers.

TTY: 612-676-6810 or 1-800-688-2534 (this call is free)

8 am – 5 pm, Monday – Friday

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**If you have questions**, please call UCare Connect + Medicare at 612-676-3310 or 1-855-260-9707 (this call is free), TTY 612-676-6810 or 1-800-688-2534 (this call is free), 8 am – 8 pm, seven days a week. **For more information**, visit [ucare.org](https://www.ucare.org).