

Annual Notice of Changes 2021

UnitedHealthcare Connected® (Medicare-Medicaid Plan)



Toll-free **1-800-256-6533**, TTY **711**
8 a.m. – 8 p.m. local time, Monday – Friday



www.UHCCommunityPlan.com
www.myuhc.com/CommunityPlan

Do we have the right address for you?

Please let us know so we can keep you informed about your plan.



**United
Healthcare**
Community Plan



TEXAS
Health and Human
Services

TEXAS  **Medicaid**
Medicare  **PLAN**
Your Health Plan ★ Your Choice

Find updates to your plan for next year

This notice provides information about updates to your plan, but it doesn't include all of the details. Throughout this notice you will be directed to **www.UHCCommunityPlan.com** to review the details online. All of these documents will be available online by October 15, 2020.

Provider and Pharmacy Directory

Review the 2021 Provider and Pharmacy Directory online to make sure your providers (primary care provider, specialists, hospitals, etc.) and pharmacies will be in the network next year.

Drug List (Formulary)

Review the 2021 Drug List for new restrictions and to make sure the drugs you take will be covered next year. The Drug List is a full list of drugs covered by your plan.

Member Handbook

Review your 2021 **Member Handbook** for details about what your plan covers and other details. The Member Handbook is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services and prescription drugs. It also has information about the Quality Improvement Program, how medical coverage decisions are made and your Rights and Responsibilities as a member.

Would you rather get paper copies?

If you want a paper copy of any of the documents listed above, please contact our Customer Service at **1-800-256-6533** (TTY users should call 711). Hours are 8 a.m. – 8 p.m. local time, Monday – Friday.

Annual Notice of Changes for 2021

Introduction



You are currently enrolled as a member of UnitedHealthcare Connected.®

Next year, there will be some changes to the plan’s benefits, coverage, rules and costs. This Annual Notice of Changes tells you about the changes and where to find more information about them. Key terms and their definitions appear in alphabetical order in the last chapter of the **Member Handbook**.

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If you have questions, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.

For more information, visit www.UHCCommunityPlan.com.

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For more information, visit www.UHCommunityPlan.com.

A. Disclaimers

UnitedHealthcare Connected® (Medicare – Medicaid Plan) is a health plan that contracts with both Medicare and Texas Medicaid to provide benefits of both programs to enrollees.

B. Reviewing Your Medicare and Texas Medicaid Coverage for Next Year

It is important to review your coverage now to make sure it will still meet your needs next year. If it does not meet your needs, you may be able to leave the plan. See section E2 for more information.

If you leave our plan, you will still be in the Medicare and Texas Medicaid programs as long as you are eligible.

- You will have a choice about how to get your Medicare benefits (go to page 11 to see your choices).
- If you do not want to enroll in a different Medicare-Medicaid plan after you leave UnitedHealthcare Connected®, you will go back to getting your Medicare and Texas Medicaid services separately.

B1. Additional Resources

- **ATTENTION:** If you speak Spanish, language assistance services, free of charge, are available to you. Call 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
- **ATENCIÓN:** Si habla español, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al 1-800-256-6533 (TTY 7-1-1), de 8 a.m. a 8 p.m., hora local, de lunes a viernes. La llamada es gratuita.
- You can get this Annual Notice of Changes for free in other formats, such as large print, braille or audio. Call 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
- You can call Member Services and ask us to make a note in our system that you would like this document in Spanish, large print, braille, or audio now and in the future.

B2. Information about UnitedHealthcare® Connected®

- UnitedHealthcare Community Plan of Texas, LLC. is a health plan that contracts with both Medicare and Texas Medicaid to provide benefits of both programs to enrollees.

 **If you have questions**, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
For more information, visit www.UHCCommunityPlan.com.

- Coverage under UnitedHealthcare Connected® is qualifying health coverage called minimum essential coverage. It satisfies the Patient Protection and Affordable Care Act's (ACA) individual shared responsibility requirement. Visit the Internal Revenue Service (IRS) website at www.irs.gov/affordable-care-act/individuals-and-families for more information on the individual shared responsibility requirement.
- UnitedHealthcare Connected® plan is offered by UnitedHealthcare Community Plan of Texas, LLC. When this **Annual Notice of Changes** says “we,” “us,” or “our,” it means UnitedHealthcare Community Plan of Texas, LLC. When it says “the plan” or “our plan,” it means UnitedHealthcare Connected®.

B3. Important things to do:

- **Check if there are any changes to our benefits and costs that may affect you.**
 - Are there any changes that affect the services you use?
 - It is important to review benefit and cost changes to make sure they will work for you next year.
 - Look in section D1 for information about benefit changes for our plan.
- **Check if there are any changes to our prescription drug coverage that may affect you.**
 - Will your drugs be covered? Are they in a different cost-sharing tier? Can you continue to use the same pharmacies?
 - It is important to review the changes to make sure our drug coverage will work for you next year.
 - Look in section D2 for information about changes to our drug coverage.
 - Your drug costs may have risen since last year.
 - Talk to your doctor about lower cost alternatives that may be available for you; this may save you in annual out-of-pocket costs throughout the year.
 - To get additional information on drug prices, visit go.medicare.gov/drugprices. These dashboards highlight which manufacturers have been increasing their prices and also show other year-to-year drug price information.
 - Keep in mind that your plan benefits will determine exactly how much your own drug costs may change.
- **Check to see if your providers and pharmacies will be in our network next year.**
 - Are your doctors, including specialists you see regularly, in our network? What about your pharmacy? What about the hospitals or other providers you use?
 - Look in section C for information about our **Provider and Pharmacy Directory**.

 **If you have questions**, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
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- **Think about your overall costs in the plan.**

- How much will you spend out-of-pocket for the services and prescription drugs you use regularly?
- How do the total costs compare to other coverage options?

- **Think about whether you are happy with our plan.**

If you decide to stay with UnitedHealthcare Connected®:	If you decide to change plans:
If you want to stay with us next year, it's easy — you don't need to do anything. If you don't make a change, you will automatically stay enrolled in our plan.	If you decide other coverage will better meet your needs, you may be able to switch plans (see section E2 for more information). If you enroll in a new plan, your new coverage will begin on the first day of the following month. Look in section E, page 11 to learn more about your choices.

C. Changes to the Network Providers and Pharmacies

Our provider and pharmacy networks have changed for 2021.

We strongly encourage you to **review our current Provider and Pharmacy Directory** to see if your providers or pharmacy are still in our network.

An updated **Provider and Pharmacy Directory** is located on our website at www.UHCCommunityPlan.com. You may also call Member Services at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday for updated provider information or to ask us to mail you a **Provider and Pharmacy Directory**.

It is important that you know that we may also make changes to our network during the year. If your provider does leave the plan, you have certain rights and protections. For more information, see Chapter 3 of your **Member Handbook**.



If you have questions, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.

For more information, visit www.UHCCommunityPlan.com.

D. Changes to Benefits and Costs for Next Year

D1. Changes to Benefits for Medical Services

We are changing our coverage for certain medical services next year. The following table describes these changes.

	2020 (This year)	2021 (Next year)
Acupuncture for low back pain (Medicare-covered)	You pay \$0 copay.	You pay \$0 copayment in a primary care services setting. You pay \$0 copayment in a specialist physician services setting. See Chapter 4 of the Evidence of Coverage for details.
Diabetic Services	We only cover Accu-Chek® and OneTouch® brands. Covered glucose monitors include: OneTouch Verio® Flex, Accu-Chek® Guide Me, Accu-Chek® Guide, and Accu-Chek® Aviva Plus. Test strips: OneTouch Verio®, OneTouch Ultra®, Accu-Chek® Guide, Accu-Chek® Aviva Plus, Accu-Chek® SmartView, and Accu-Chek® Compact Plus.	We only cover Accu-Chek® and OneTouch® brands. Covered glucose monitors include: OneTouch Verio Flex®, OneTouch Verio Reflect®, Accu-Chek® Guide Me, and Accu-Chek® Guide. Test strips: OneTouch Verio®, OneTouch Ultra®, Accu-Chek® Guide, Accu-Chek® Aviva Plus, and Accu-Chek® SmartView. Other brands are not covered by your plan.

 **If you have questions**, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
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	2020 (This year)	2021 (Next year)
Eyewear	Every two years, you have access to a \$70 credit for one pair of glasses or \$105 for contact lenses.	Eligible Members ages 21 and older. Must use in-network provider. Up to \$105 maximum benefit 24 months, aligning with Medicaid benefit, to cover upgrades for frames, lenses, contact lenses, or for loss or damage that are not covered by the Medicaid benefit. The benefit period is measured from the date of service. Cannot be used for a second or spare pair.
Meal Benefit	<u>Not</u> covered	Meal Support for Eligible non-Waiver members in the Community recently discharged from the hospital or skilled nursing facility. Up to 12 home-delivered meals for two weeks, with maximum of 24 meals for four weeks (28 days), each year after getting out of hospital or nursing facility or when a doctor asks as part of a supervised program to ease the effects of a chronic illness.

 **If you have questions**, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
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	2020 (This year)	2021 (Next year)
Prior Authorization	Your provider must obtain Prior Authorization for some services. See Chapter 4 of the Member Handbook for details.	The services for which your provider must obtain Prior Authorization have changed. Please see Chapter 4 of your Evidence of Coverage for details.
Medicare Part B Step Therapy	Certain drugs may be subject to Step Therapy. See Member Handbook for details.	<u>Not</u> Applicable
Transportation Services	8 one-way trips to plan approved locations	12 one-way trips to plan approved locations.
Weight Watchers	You can get 13 passes to attend Weight Watchers in-person meetings.	<u>Not</u> Covered

D2. Changes to Prescription Drug Coverage

Changes to our Drug List

An updated **List of Covered Drugs** is located on our website at www.UHCCCommunityPlan.com. You may also call Member Services at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday for updated drug information or to ask us to mail you a **List of Covered Drugs**.

We made changes to our Drug List, including changes to the drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the Drug List to **make sure your drugs will be covered next year** and to see if there will be any restrictions.

If you are affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover.
 - You can call Member Services at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday to ask for a list of covered drugs that treat the same condition.
 - This list can help your provider find a covered drug that might work for you.

 **If you have questions**, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
For more information, visit www.UHCCCommunityPlan.com.

- Ask the plan to cover a temporary supply of the drug.
 - In some situations, we will cover a **temporary** supply of the drug during the first 90 days of the calendar year.
 - This temporary supply will be for up to 30 days. (To learn more about when you can get a temporary supply and how to ask for one, see Chapter 5 of the **Member Handbook**.)
 - When you get a temporary supply of a drug, you should talk with your doctor to decide what to do when your temporary supply runs out. You can either switch to a different drug covered by the plan or ask the plan to make an exception for you and cover your current drug.

Changes to prescription drug costs

There are two payment stages for your Medicare Part D prescription drug coverage under UnitedHealthcare Connected.® How much you pay depends on which stage you are in when you get a prescription filled or refilled. These are the two stages:

Stage 1 Initial Coverage Stage	Stage 2 Catastrophic Coverage Stage
<p>During this stage, the plan pays part of the costs of your drugs, and you pay your share. Your share is called the copay.</p> <p>You begin this stage when you fill your first prescription of the year.</p>	<p>During this stage, the plan pays all of the costs of your drugs through December 31, 2021.</p> <p>You begin this stage when you have paid a certain amount of out-of-pocket costs.</p>

The Initial Coverage Stage ends when your total out-of-pocket costs for prescription drugs reaches **\$6,550**. At that point, the Catastrophic Coverage Stage begins. The plan covers all your drug costs from then until the end of the year. See Chapter 6 of your Member Handbook for more information on how much you will pay for prescription drugs.

 **If you have questions**, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
For more information, visit www.UHCCommunityPlan.com.

D3. Stage 1: “Initial Coverage Stage”

During the Initial Coverage Stage, the plan pays a share of the cost of your covered prescription drugs, and you pay your share. Your share is called the copay. The copay depends on what cost-sharing tier the drug is in and where you get it. You will pay a copay each time you fill a prescription. If your covered drug costs less than the copay, you will pay the lower price.

The table below shows your costs for drugs in each of our 3 drug tiers. These amounts apply **only** during the time when you are in the Initial Coverage Stage.

	2020 (This year)	2021 (Next year)
Drugs in Tier 1 <i>(Generic Drugs)</i> Cost for a one-month supply of a drug in Tier 1 that is filled at a network pharmacy	Your copay for a one month (30-day) supply is \$0 - \$3.60 per prescription (depending on income level)	Your copay for a one month (30-day) supply is \$0 - \$3.70 per prescription (depending on income level)
Drugs in Tier 2 <i>(Brand Drugs)</i> Cost for a one-month supply of a drug in Tier 2 that is filled at a network pharmacy	Your copay for a one month (30-day) supply is \$0 - \$8.95 per prescription (depending on income level)	Your copay for a one month (30-day) supply is \$0 - \$9.20 per prescription (depending on income level)
Drugs in Tier 3 <i>(OTC/Non-Part-D Drugs)</i> Cost for a one-month supply of a drug in Tier 3 that is filled at a network pharmacy	Your copay for a one month (30-day) supply is \$0 per prescription.	Your copay for a one month (30-day) supply is \$0 per prescription.

The Initial Coverage Stage ends when your total out-of-pocket costs reach \$6,550. At that point the Catastrophic Coverage Stage begins. The plan covers all your drug costs from then until the end of the year. See Chapter 6 of your Member Handbook for more information on how much you will pay for prescription drugs.

D4. Stage 2: “Catastrophic Coverage Stage”

When you reach the out-of-pocket limit for your prescription drugs, the Catastrophic Coverage Stage begins. You will stay in the Catastrophic Coverage Stage until the end of the calendar year.

 **If you have questions**, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
For more information, visit www.UHCCommunityPlan.com.

- When you are in the Catastrophic Coverage Stage, you will continue to make copays for your Medicaid-covered drugs.
- To locate more information about which of your prescriptions are covered by Texas Medicaid versus Medicare, see the List of Covered Drugs located at www.UHCCommunityPlan.com.

E. How to choose a plan

E1. How to stay in our plan

We hope to keep you as a member next year.

You do not have to do anything to stay in your health plan. If you do not sign up for a different Medicare-Medicaid Plan, change to a Medicare Advantage Plan, or change to Original Medicare, you will automatically stay enrolled as a member of our plan for 2021.

E2. How to change plans

You can end your membership at any time during the year by enrolling in another Medicare Advantage Plan, enrolling in another Medicare-Medicaid Plan, or moving to Original Medicare.

These are the four ways people usually end membership in our plan:

<p>1. You can change to: A different Medicare-Medicaid Plan</p>	<p>Here is what to do:</p> <p>Call MAXIMUS at 1-877-782-6440, 8 a.m. – 6 p.m. local time, Monday – Friday. TTY users should call 7-1-1 or 1-800-735-2989. Tell them you want to leave UnitedHealthcare Connected® and join a different Medicare-Medicaid plan. If you are not sure what plan you want to join, they can tell you about other plans in your area; OR</p> <p>Send MAXIMUS an Enrollment Change Form. You can get the form by calling MAXIMUS at 1-877-782-6440 if you need them to mail you one.</p> <p>Your coverage with UnitedHealthcare Connected® will end on the last day of the month that we get your request.</p>
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 **If you have questions**, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
For more information, visit www.UHCCommunityPlan.com.

<p>2. You can change to:</p> <p>A Medicare health plan, such as a Medicare Advantage plan or Program of All-inclusive Care for the Elderly (PACE)</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the State Health Insurance Assistance Program (SHIP) at 1-800-252-3439. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). <p>You will automatically be disenrolled from UnitedHealthcare Connected® when your new plan's coverage begins.</p>
<p>3. You can change to:</p> <p>Original Medicare with a separate Medicare prescription drug plan</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the State Health Insurance Assistance Program (SHIP) at 1-800-252-3439. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). <p>You will automatically be disenrolled from UnitedHealthcare Connected® when your Original Medicare coverage begins.</p>

 **If you have questions**, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
For more information, visit www.UHCCommunityPlan.com.

<p>4. You can change to:</p> <p>Original Medicare without a separate Medicare prescription drug plan</p> <p>NOTE: If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.</p> <p>You should only drop prescription drug coverage if you have drug coverage from another source, such as an employer or union. If you have questions about whether you need drug coverage, call the Health Information Counseling & Advocacy Program of Texas (HICAP). at 1-800-252-3439.</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the State Health Insurance Assistance Program (SHIP) at 1-800-252-3439. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). <p>You will automatically be disenrolled from UnitedHealthcare Connected® when your Original Medicare coverage begins.</p>
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F. How to get help

F1. Getting help from UnitedHealthcare Connected®

Questions? We're here to help. Please call Member Services at 1-800-256-6533 (TTY only, call 7-1-1). We are available for phone calls 8 a.m. – 8 p.m. local time, Monday – Friday. Calls to these numbers are free.

Your 2021 Member Handbook

The **2021 Member Handbook** is the legal, detailed description of your plan benefits. It has details about next year's benefits and costs. It explains your rights and the rules you need to follow to get covered services and prescription drugs.

The **2021 Member Handbook** will be available by October 15th. An up-to-date copy of the **2021 Member Handbook** is always available on our website at www.UHCCCommunityPlan.com. You may also call Member Services at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday to ask us to mail you a **2021 Member Handbook**.

Our website

You can also visit our website at www.UHCCCommunityPlan.com. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (**Provider and Pharmacy Directory**) and our Drug List (**List of Covered Drugs**).



If you have questions, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.

For more information, visit www.UHCCCommunityPlan.com.

F2. Getting help from MAXIMUS

MAXIMUS can help you find a Medicaid health care provider, explain Medicaid covered services, obtain Medicaid brochures and publications, and understand Medicaid benefits.

You can call MAXIMUS at 1-877-782-6440, 8 a.m. – 6 p.m. local time, Monday – Friday. TTY users should call 7-1-1 or 1-800-735-2989.

F3. Getting help from the HHSC Office of the Ombudsman

The HHSC Office of the Ombudsman helps people enrolled in Texas Medicaid with service or billing problems. The ombudsman's services are free.

- The HHSC Office of the Ombudsman is an ombudsman program that works as an advocate on your behalf. They can answer questions if you have a problem or complaint and can help you understand what to do.
- The HHSC Office of the Ombudsman can help you file a complaint or an appeal with our plan. They can help you if you are having a problem with UnitedHealthcare Connected® .
- The HHSC Office of the Ombudsman makes sure you have information related to your rights and protections and how you can get your concerns resolved.
- The HHSC Office of the Ombudsman is not connected with us or with any insurance company or health plan. The phone number for the HHSC Office of the Ombudsman is 1-866-566-8989.

F4. Getting help from the State Health Insurance Assistance Program (SHIP)

You can also call the State Health Insurance Assistance Program (SHIP). The SHIP counselors can help you understand your Medicare-Medicaid Plan choices and answer questions about switching plans. In Texas, the SHIP is called the Health Information Counseling & Advocacy Program of Texas (HICAP). HICAP is not connected with any insurance company or health plan, and HICAP's services are free.

The HICAP phone number is 1-800-252-3439.

F5. Getting help from Medicare

To get information directly from Medicare:

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

 **If you have questions**, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.
For more information, visit www.UHCCommunityPlan.com.

Medicare's Website

You can visit the Medicare website (www.medicare.gov). If you choose to disenroll from your Medicare-Medicaid Plan and enroll in a Medicare Advantage plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare Medicare Advantage plans. You can find information about Medicare Advantage plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to www.medicare.gov and click on "Find plans.")

Medicare & You 2021

You can read the *Medicare & You 2021* Handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare.

If you don't have a copy of this booklet, you can get it at the Medicare website (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.

F6. Getting help from Texas Medicaid

The phone number for Texas Medicaid is 1-800-252-8263. This call is free. TTY users should call 1-800-735-2989 or 7-1-1.



If you have questions, please call UnitedHealthcare Connected® at 1-800-256-6533 (TTY 7-1-1), 8 a.m. – 8 p.m. local time, Monday – Friday. The call is free.

For more information, visit www.UHCCommunityPlan.com.

UnitedHealthcare Connected® (Medicare-Medicaid Plan)

Member Service:



Call **1-800-256-6533**

Calls to this number are free. 8 a.m. – 8 p.m. local time, Monday – Friday.

TTY 711

Calls to this number are free. 8 a.m. – 8 p.m. local time, Monday – Friday.

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



Write **14141 Southwest Freeway, Suite 500**
Sugar Land, TX 77478



Website **www.UHCCommunityPlan.com**