




Annual Notice of Changes 2025

UHC Dual Complete TN-Y001 (HMO-POS D-SNP)

 [MyUHC.com/CommunityPlan](https://myuhc.com/communityplan)

 Toll-free **1-800-690-1606**, TTY **711**
8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept

Do we have the right address for you?

If not, please let us know so we can keep you informed about your plan.

United
Healthcare®



Here for you every step of the way

With more than 45 years of experience, we understand Medicare coverage is personal and changes to your coverage can affect your life. As America's most chosen Medicare Advantage brand, we're committed to delivering a 2025 plan that fits your needs, especially as some regulations change across the Medicare industry.

This Annual Notice of Changes will tell you what you need to know about your plan benefits, including what's new for 2025 and what's staying the same. You can continue to count on your easy-to-use UCard,[®] only from UnitedHealthcare, to open doors for your care, rewards and so much more.

The Annual Enrollment Period (AEP) is October 15–December 7. It's an opportunity to reflect on your health plan needs. And if your needs have changed, you can explore other plan options. With plans designed for all budgets, stages and ages, UnitedHealthcare has coverage you can count on for your whole life ahead.

A few important reminders:

1. You'll be automatically enrolled in your current plan unless you take action during AEP
2. Your 2025 benefits will be effective January 1, whether you stay in your current plan or switch
3. Your current plan benefits end December 31, take advantage before it's too late



Expert guidance to support you

Questions? Contact your local licensed sales agent or call Customer Service at **1-800-690-1606, TTY 711, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept**



Visit uhc.care/next-year or scan the QR code to:

- Learn about Medicare industry changes
- View your 2025 Annual Notice of Changes online
- Review current year benefit usage

Benefits, features and/or devices may vary by plan/area. Limitations, exclusions and/or network restrictions may apply. The discounts described are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the UnitedHealthcare grievance process. Reward offerings may vary by plan and are not available in all plans. Reward program Terms of Service apply. Medicare Plan Expert is a licensed insurance sales agent/producer. Requests to disenroll or change plans remain subject to applicable Medicare regulations and Federal and state laws/regulations. © 2024 United HealthCare Services, Inc. All Rights Reserved.

**United
Healthcare[®]**

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 **MyUHC.com/CommunityPlan** to review the details online. All of the below documents will be available online by **October 15, 2024**.

Provider Directory

Review the 2025 Provider Directory online to make sure your providers (primary care provider, specialists, hospitals, etc.) will be in the network next year.

Pharmacy Directory

Review the 2025 Pharmacy Directory online to see which pharmacies are in our network next year.

Drug List (Formulary)

You can look up which drugs will be covered by your plan next year and review any new restrictions on our website.

Evidence of Coverage (EOC)

Review your 2025 EOC for details about plan costs and benefits. The EOC 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 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 what is listed above, please contact our Customer Service at **1-800-690-1606** (TTY users should call 711). Hours are 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept.

Help reduce the clutter and get plan documents faster.

Visit **MyUHC.com/CommunityPlan** to sign up for paperless delivery.

Annual Notice of Changes for 2025

Introduction



You are currently enrolled as a member of our plan.

Next year, there will be some changes to our benefits, coverage, rules, and costs. This **Annual Notice of Changes** tells you about the changes and where to find more information about them. To get more information about costs, benefits, or rules please review the **Evidence of Coverage**, which is located on our website at **MyUHC.com/CommunityPlan**. Key terms and their definitions appear in alphabetical order in the last chapter of your **Evidence of Coverage**.

Additional resources

- This document is available for free in Spanish and Arabic.
- You can get this **Annual Notice of Changes** for free in other formats, such as large print, accessible electronic document, or audio. Call Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free.
- You can call Customer Service and ask us to make a note in our system that you would like materials in Spanish, large print, braille, or audio now and in the future.
- UnitedHealthcare does not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.
- UnitedHealthcare provides free services to help you communicate with us such as documents in other languages, braille, large print, audio, or you can ask for an interpreter. For more information, please call us toll-free at the number on your member ID card or the front of your plan booklet.
- UnitedHealthcare ofrece servicios gratuitos para ayudarle a que se comunique con nosotros. Por ejemplo, documentos en otros idiomas, braille, en letra grande, o en audio. O bien, usted puede pedir un intérprete. Para obtener más información, llámenos al número gratuito que se encuentra en su tarjeta de ID de miembro o en la portada de la guía de su plan.

OMB Approval 0938-1444 (Expires: June 30, 2026)



If you have questions, please call UHC Dual Complete TN-Y001 (HMO-POS D-SNP) at Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free. **For more information**, visit **MyUHC.com/CommunityPlan**.

Table of Contents

A.	Disclaimers	6
B.	Reviewing your Medicare and TennCare (Medicaid) coverage for next year	6
	B1. Information about UHC Dual Complete TN-Y001 (HMO-POS D-SNP)	6
	B2. Important things to do	7
C.	Changes to our network providers and pharmacies	8
D.	Changes to benefits and costs for next year	8
	D1. Changes to benefits and costs for medical services	8
	D2. Changes to prescription drug coverage.....	13
E.	Administrative changes	15
F.	Choosing a plan	15
	F1. Staying in our plan.....	15
	F2. Changing plans.....	15
G.	Getting help	18
	G1. Our plan	18
	G2. TN SHIP (TN State Health Insurance Assistance Program)	19
	G3. Long-Term Care Ombudsman	19
	G4. Medicare.....	19
	G5. TennCare	20

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A. Disclaimers

- Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a contract with the State Medicaid Program. Enrollment in the plan depends on the plan's contract renewal with Medicare.
- The plan also has a written agreement with the Tennessee Medicaid program to coordinate your Medicaid benefits.
- Notice: TennCare is not responsible for payment for these benefits, except for appropriate cost sharing amounts. TennCare is not responsible for guaranteeing the availability or quality of these benefits. Any additional Medicare benefit mentioned in this communication above Original Medicare is applicable to the Medicare benefit only and does not indicate increased Medicaid benefits.
- The healthy food benefit is a special supplemental benefit only available to chronically ill enrollees with a qualifying condition, such as high blood pressure, high cholesterol, chronic and disabling mental health conditions, diabetes and/or cardiovascular disorders, and who also meet all applicable plan coverage criteria. There may be other qualified conditions not listed. Contact us for details.

B. Reviewing your Medicare and TennCare (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 doesn't meet your needs, you may be able to leave our plan. Refer to **Section D** for more information on changes to your benefits for next year.

If you choose to leave our plan, your Medicare membership will end on the last day of the month in which your request was made. The specific date your TennCare will end depends on when we take action on your case. Your notice will tell you when your TennCare ends, it may not be the last day of the month. You will still be in the Medicare and TennCare programs as long as you are eligible.

If you leave our plan, you can get information about your:

- Medicare options in the table in **Section F2**.
- TennCare options and services in **Section F2**

B1. Information about UHC Dual Complete TN-Y001 (HMO-POS D-SNP)

- UHC Dual Complete TN-Y001 (HMO-POS D-SNP) is a health plan that contracts with both Medicare and Medicaid to provide benefits of both programs to members.



If you have questions, please call UHC Dual Complete TN-Y001 (HMO-POS D-SNP) at Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free. **For more information**, visit **MyUHC.com/CommunityPlan**.

- Coverage under UHC Dual Complete TN-Y001 (HMO-POS D-SNP) 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 [irs.gov/Affordable-Care-Act/Individuals-and-Families](https://www.irs.gov/Affordable-Care-Act/Individuals-and-Families) for more information on the individual shared responsibility requirement.
- When this **Annual Notice of Changes** says “we,” “us,” “our,” or “our plan,” it means UHC Dual Complete TN-Y001 (HMO-POS D-SNP).

B2. 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?
 - Review benefit changes to make sure they will work for you next year.
 - Refer to **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? Can you use the same pharmacies? Will there be any changes such as prior authorization, step therapy or quantity limits?
 - Review changes to make sure our drug coverage will work for you next year.
 - Refer to **Section D2** for information about changes to our drug coverage.
- **Check if your providers and pharmacies will be in our network next year.**
 - Are your doctors, including your specialists, in our network? What about your pharmacy? What about the hospitals or other providers you use?
 - Refer to **Section C** for information about our **Provider and Pharmacy Directory**.
- **Think about your overall costs in the plan.**
 - 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 UHC Dual Complete TN-Y001 (HMO-POS D-SNP):	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 automatically stay enrolled in UHC Dual Complete TN-Y001 (HMO-POS D-SNP).	If you decide other coverage will better meet your needs, you may be able to switch plans (refer to Section F2 for more information). If you enroll in a new plan, or change to Original Medicare, your new coverage will begin on the first day of the following month.



If you have questions, please call UHC Dual Complete TN-Y001 (HMO-POS D-SNP) at Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free. For more information, visit MyUHC.com/CommunityPlan.

C. Changes to our network providers and pharmacies

Our Provider and Pharmacy Networks have changed for 2025.

Please review the 2025 Provider and Pharmacy Directory to find out if your providers or pharmacy are in our network. An updated **Provider and Pharmacy Directory** is located on our website at **MyUHC.com/CommunityPlan**. You may also call Customer Service at the numbers at the bottom of the page for updated provider information or to ask us to mail you a **Provider and Pharmacy Directory**.

It's important that you know that we may also make changes to our network during the year. If your provider leaves our plan, you have certain rights and protections. If a mid-year change in our providers affects you, please contact Customer Services so we may assist you. For more information, refer to **Chapter 3** of your **Evidence of Coverage**.

D. Changes to benefits and costs for next year

D1. Changes to benefits and costs for medical services

We're changing our coverage for certain medical services next year. The table below describes these changes.



If you have questions, please call UHC Dual Complete TN-Y001 (HMO-POS D-SNP) at Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free. **For more information**, visit **MyUHC.com/CommunityPlan**.

	2024 (this year)	2025 (next year)
Diabetes Self-Management Training, Diabetic Services and Supplies	<p>You pay a \$0 copayment.</p> <p>We only cover Accu-Chek® and OneTouch® brands.</p> <p>Covered glucose monitors include: OneTouch Verio Flex®, OneTouch Verio Reflect®, OneTouch® Verio, OneTouch®Ultra 2, Accu-Chek® Guide Me, and Accu-Chek® Guide.</p> <p>Test strips: OneTouch Verio®, OneTouch Ultra®, Accu-Chek® Guide, Accu-Chek® Aviva Plus, and Accu-Chek® SmartView.</p> <p>Other brands are not covered by your plan. If you use a brand of supplies that is not covered by your plan, you should speak with your doctor to get a new prescription for a covered brand.</p>	<p>You pay a \$0 copayment.</p> <p>We only cover Accu-Chek® and OneTouch® brands.</p> <p>Covered glucose monitors include: OneTouch Verio Flex®, OneTouch®Ultra 2, Accu-Chek® Guide Me, and Accu-Chek® Guide.</p> <p>Test strips: OneTouch Verio®, OneTouch Ultra®, Accu-Chek® Guide, Accu-Chek® Aviva Plus, and Accu-Chek® SmartView.</p> <p>Other brands are not covered by your plan. If you use a brand of supplies that is not covered by your plan, you should speak with your doctor to get a new prescription for a covered brand.</p>
Fitness Program	<p>You have access to a fitness program.</p> <p>With this benefit, you can also get 1 Fitbit® device every 2 years at no additional cost.</p> <p>You must use network providers to access this benefit.</p>	<p>You have access to a fitness program.</p> <p>Fitbit® device is not covered. Fitness trackers will be available through a member discount. See your member site for details.</p> <p>You must use network providers to access this benefit.</p>

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	2024 (this year)	2025 (next year)
<p>Hearing services</p> <p>Hearing aids</p> <p>Other hearing exam providers are available in the UnitedHealthcare network.</p>	<p>You receive a \$3,600 allowance for up to 2 OTC or prescription hearing aids every year (select products only).</p> <p>Home-delivered hearing aids are available nationwide through UnitedHealthcare Hearing (select products only).</p> <p>You must use UnitedHealthcare Hearing providers to access this benefit.</p>	<p>You receive a \$3,200 allowance for up to 2 OTC or prescription hearing aids every year (select products only).</p> <p>Home-delivered hearing aids are available nationwide through UnitedHealthcare Hearing (select products only).</p> <p>You must use UnitedHealthcare Hearing providers to access this benefit.</p>



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	2024 (this year)	2025 (next year)
<p>Food, over-the-counter (OTC) and home and bath safety devices credit-Special supplemental benefits for the chronically ill</p>	<p>\$309 credit a month loaded to your UnitedHealthcare UCard® for covered over-the-counter products, select home and bath safety devices, healthy food and certain utility bills.</p> <p>The healthy food and utility bills options are only available to qualifying members through the Value-Based Insurance Design (VBID) Model.</p> <p>Your credit amount expires at the end of each month.</p>	<p>\$336 credit a month loaded to your UnitedHealthcare UCard® for covered over-the-counter products and select home and bath safety devices.</p> <p>The healthy food option is only available to qualifying members through the Special Supplemental Benefits for the Chronically Ill (SSBCI). Utility bills are not covered by the credit.</p> <p>Your credit amount expires at the end of each month.</p> <p>Use your UCard online or in-store to access your benefits.</p> <p>See your Evidence of Coverage for more information.</p>

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	2024 (this year)	2025 (next year)
In-home support services	<p>You pay a \$0 copayment for up to 36 hours of in-home support every month. This includes help with housekeeping, personal care, getting to medical appointments and shopping. See Chapter 4 of the Evidence of Coverage for details.</p> <p>You must obtain prior authorization from your health plan.</p>	<p>You pay a \$0 copayment for up to 45 hours of in-home support every month. This includes help with housekeeping, personal care, getting to medical appointments and shopping.</p> <p>See Chapter 4 of the Evidence of Coverage for details.</p> <p>You must obtain prior authorization from your health plan.</p>
Personal Emergency Response System	Covered	<p>Not covered</p> <p>Similar service will be available through a member discount. See your member site for details.</p>



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	2024 (this year)	2025 (next year)
NurseLine	Covered	<p>NurseLine is not covered. Your plan offers virtual care at no additional cost. You can talk to a network telehealth provider online through live audio and video.</p> <ul style="list-style-type: none"> • \$0 virtual visits from any network provider that offers virtual care • \$0 virtual visits with Amwell, including 24/7 urgent care <p>Access virtual care through the UnitedHealthcare app or MyUHC.com/CommunityPlan.</p>

D2. Changes to prescription drug coverage

Changes to our Drug List

An updated **List of Covered Drugs** is located on our website at **MyUHC.com/CommunityPlan**. You may also call Customer Service at the numbers at the bottom of the page for updated drug information or to ask us to mail you a **List of Covered Drugs**.

We made changes to our **Drug List**, which could include removing or adding drugs, changing 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 find out if there are any restrictions.

Most of the changes in the **Drug List** are new for the beginning of each year. However, we might make other changes are allowed by Medicare and/or the state that will affect you during the plan year. We update our online **Drug List** at least monthly to provide the most up to date list of drugs. If we make a change that will affect a drug you are taking, we will send you a notice about the change.

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

? **If you have questions**, please call UHC Dual Complete TN-Y001 (HMO-POS D-SNP) at Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free. **For more information**, visit **MyUHC.com/CommunityPlan**.

- Work with your doctor (or other prescriber) to find a different drug that we cover.
 - You can call Customer Service at the numbers at the bottom of the page or contact your care coordinator 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.
- Ask us to cover a temporary supply of the drug.
 - In some situations, we cover a **temporary** supply of the drug during the first 90 days of the calendar year.
 - This temporary supply is for up to 30 days. (To learn more about when you can get a temporary supply and how to ask for one, refer to **Chapter 5** of your **Evidence of Coverage**.)
 - When you get a temporary supply of a drug, talk with your doctor about what to do when your temporary supply runs out. You can either switch to a different drug our plan covers or ask us to make an exception for you and cover your current drug.

Starting in 2025, we may immediately remove brand name drugs or original biological products on our **Drug List** if, we replace them with new generics or certain biosimilars versions of the brand name drug or original biological product on the same or lower cost-sharing tier and with the same or fewer rules. Also, when adding a new version, we may decide to keep the brand name drug or original biological product on our **Drug List**, but immediately add new rules.

This means, for instance, if you are taking a brand name drug or biological product that is being replaced by a generic or biosimilar version, you may not get notice of the change 30 days before we make it or get a month's supply of your brand name drug or biological product at a network pharmacy. If you are taking the brand name drug or biological product at the time we make the change, you will still get information on the specific change we made, but it may arrive after we make the change.

Some of these drug types may be new to you. For definitions of drug types, please see **Chapter 12** of your **Evidence of Coverage**. The Food and Drug Administration (FDA) also provides consumer information on drugs. Refer to the FDA website: [fda.gov/drugs/biosimilars/multimedia-education-materials-biosimilars#For%20Patients](https://www.fda.gov/drugs/biosimilars/multimedia-education-materials-biosimilars#For%20Patients). You may also contact Customer Service at the number at the bottom of the page or ask your health care provider, prescriber, or pharmacist for more information.

Changes to prescription drug costs

The plan will stop using the CMS Value-Based Insurance Design (VBID) for Medicare Part D prescription drugs in 2025. Depending on your TennCare eligibility, you may have to pay a cost share for covered Part D drugs. Since you have full TennCare benefits, your cost share will most likely be a \$0 copayment.



If you have questions, please call UHC Dual Complete TN-Y001 (HMO-POS D-SNP) at Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free. For more information, visit MyUHC.com/CommunityPlan.

E. Administrative changes

	2024 (this year)	2025 (next year)
Rewards Administration	Rewards did not expire 1 month after your plan ended.	Rewards expire 1 month after your plan ends.

F. Choosing a plan

F1. Staying in our plan

We hope to keep you as a plan member. You do not have to do anything to stay in our plan. If you do **not** change to another Medicare plan or change to Original Medicare, you automatically stay enrolled as a member of our plan for 2025.

F2. Changing plans

For your TennCare plan, TennCare members may change their Managed Care Organization (MCO) one (1) time within the initial ninety (90) calendar days from the date of the letter informing them of their MCO assignment. You will remain a member of the designated MCO until you are given an opportunity to change once each year during an annual change period. The annual change period will occur each year in March for members in West Tennessee, in May for members in Middle Tennessee, and in July for members in East Tennessee. Most people with Medicare can end their membership during certain times of the year. Because you have TennCare you can end your membership in our plan any month of the year.

In addition, you may end your membership in our plan during the following periods:

- The **Annual Enrollment Period**, which lasts from October 15 to December 7. If you choose a new plan during this period, your membership in our plan ends on December 31 and your membership in the new plan starts on January 1.
- The **Medicare Advantage (MA) Open Enrollment Period**, which lasts from January 1 to March 31. If you choose a new plan during this period, your membership in the new plan starts the first day of the next month.

There may be other situations when you are eligible to make a change to your enrollment. For example, when:

- You moved out of our service area,
- Your eligibility for TennCare or Extra Help changed, **or**



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- You recently moved into, currently are getting care in, an institution (like a skilled nursing facility or a long-term care hospital). If you recently moved out of an institution, you can change plans or change to Original Medicare for two full months after the month you move out.

Your Medicare services

You have three options for getting your Medicare services listed below any month of the year. You have an additional option listed below during certain times of the year including the **Annual Enrollment Period** and the **Medicare Advantage Open Enrollment Period** or other situations described in **Section G2**. By choosing one of these options, you automatically end your membership in our plan.

<p>1. You can change to:</p> <p>Another plan that provides your Medicare and most or all of your Medicaid benefits and services in one plan, also known as an integrated dual-eligible special needs plan (D-SNP)</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>For Program of All-inclusive Care for the Elderly (PACE) inquiries, call 1-855-921-PACE (7223).</p> <p>If you need help or more information:</p> <ul style="list-style-type: none"> • Call the TN SHIP at the Tennessee Commission on Aging and Disability 1-877-801-0044 TTY 1-800-848-0299, For more information or to find a local TN SHIP office in your area, please visit tnmedicarehelp.com. <p>OR</p> <p>Enroll in a different integrated D-SNP.</p> <p>You will automatically be disenrolled from our plan when your new plan’s coverage begins.</p> <p>Your TennCare enrollment will not be affected by this change.</p>
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? **If you have questions**, please call UHC Dual Complete TN-Y001 (HMO-POS D-SNP) at Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free. **For more information**, visit **MyUHC.com/CommunityPlan**.

<p>2. 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 TN SHIP at the Tennessee Commission on Aging and Disability 1-877-801-0044 TTY 1-800-848-0299, For more information or to find a local TN SHIP office in your area, please visit tnmedicarehelp.com. <p>OR</p> <p>Enroll in a different Medicare prescription drug plan.</p> <p>You will automatically be disenrolled from our plan when your Original Medicare coverage begins.</p> <p>Your TennCare enrollment will not be affected by this change</p>
<p>3. 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 TN SHIP at the Tennessee Commission on Aging and Disability 1-877-801-0044 TTY 1-800-848-0299, tnmedicarehelp.com.</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 TN SHIP at the Tennessee Commission on Aging and Disability 1-877-801-0044 TTY 1-800-848-0299, tnmedicarehelp.com. <p>You will automatically be disenrolled from our plan when your Original Medicare coverage begins.</p> <p>Your TennCare enrollment will not be affected by this change.</p>



If you have questions, please call UHC Dual Complete TN-Y001 (HMO-POS D-SNP) at Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free. For more information, visit **MyUHC.com/CommunityPlan**.

4. You can change to:

Any Medicare health plan during certain times of the year including the **Annual Enrollment Period** and the **Medicare Advantage Open Enrollment Period** or other situations described in **Section A**.

Here is what to do:

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**.

If you need help or more information:

Call the TN SHIP at **1-877-801-0044**. In TN, the SHIP is called Tennessee Commission on Aging & Disability.

OR

Enroll in a different Medicare plan.

You are automatically disenrolled from our Medicare plan when your new plan's coverage begins.

Your TennCare services

For questions about how to get your TennCare services after you leave our plan, contact the TN SHIP at **1-877-801-0044**, TTY **1-800-848-0299**, **tnmedicarehelp.com**. Ask how joining another plan or returning to Original Medicare affects how you get your TennCare coverage.

G. Getting help**G1. Our plan**

We're here to help if you have any questions. Call Customer Service at the numbers at the bottom of the page during the days and hours of operation listed. These calls are toll-free.

Read your Evidence of Coverage

Your **Evidence of Coverage** is a legal, detailed description of our plan's benefits. It has details about benefits and costs for 2025. It explains your rights and the rules to follow to get services and prescription drugs we cover.

The **Evidence of Coverage** for 2025 will be available by October 15. An up-to-date copy of the **Evidence of Coverage** is available on our website at **MyUHC.com/CommunityPlan**. You may also call Customer Service at the numbers at the bottom of the page to ask us to mail you an **Evidence of Coverage** for 2025.

Our website

You can visit our website at **MyUHC.com/CommunityPlan**. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (**Provider and Pharmacy**



If you have questions, please call UHC Dual Complete TN-Y001 (HMO-POS D-SNP) at Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free. **For more information**, visit **MyUHC.com/CommunityPlan**.

Directory) and our **Drug List (List of Covered Drugs)**.

G2. TN SHIP (TN State Health Insurance Assistance Program)

You can also call the state health insurance program (SHIP). In Tennessee the SHIP is called the TN SHIP. TN SHIP can help you understand your plan choices and answer questions about switching plans. TN SHIP is not connected with us or with any insurance company or health plan. TN SHIP has trained counselors **statewide** and services are free. TN SHIP phone number is **1-877-801-0044**. For more information or to find a local TN SHIP office in your area, please visit **tnmedicarehelp.com**.

G3. Long-Term Care Ombudsman

The Ombudsman works with many agencies and may be able to help resolve questions or concerns that involve state and federal agencies administering services to the elderly. Concerns can include quality of care, financial information, resident rights, admissions, transfer, and discharge. Also included are questions regarding nursing homes, homes for the aged, assisted care living facilities, Medicaid, and Medicare.

The Ombudsperson Program can help you if you have a problem with our plan. The ombudsperson's services are free and available in all languages. The Ombudsperson Program:

- 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.
- Makes sure you have information related to your rights and protections and how you can get your concerns resolved.
- Is not connected with us or with any insurance company or health plan. The phone number for the Ombudsperson Program is **1-877-236-0013**.

G4. Medicare

To get information directly from Medicare, call **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day, 7 days a week. TTY users should call **1-877-486-2048**.

Medicare's Website

You can visit the Medicare website (**medicare.gov**). If you choose to disenroll from our plan and enroll in another Medicare plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare plans.

You can find information about Medicare plans available in your area by using Medicare Plan Finder on Medicare's website. (For information about plans, refer to **medicare.gov** and click on "Find plans.")

Medicare & You 2025

You can read the **Medicare & You 2025** 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



If you have questions, please call UHC Dual Complete TN-Y001 (HMO-POS D-SNP) at Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free. **For more information**, visit **MyUHC.com/CommunityPlan**.

to the most frequently asked questions about Medicare. This handbook is also available in Spanish, Chinese, and Vietnamese.

If you don't have a copy of this booklet, you can get it at the Medicare website ([medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf](https://www.medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf)) 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**.

G5. TennCare

TennCare is the state of Tennessee's Medicaid program. It provides healthcare to mostly low-income pregnant women, parents or caretakers of a minor child, children, and individuals who are elderly or have a disability. Have questions about your TennCare coverage? Call your health plan or call TennCare Connect at **1-855-259-0701** or **1-800-848-0298** TTY.

? **If you have questions**, please call UHC Dual Complete TN-Y001 (HMO-POS D-SNP) at Toll-free **1-800-690-1606**, TTY **711**, 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. The call is free. **For more information**, visit **MyUHC.com/CommunityPlan**.

Do you need free help with this letter?

If you speak a language other than English, help in your language is available for free. This page tells you how to get help in a language other than English. It also tells you about other help that's available.

Spanish: Español

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-690-1606 (TTY:711).

Kurdish: کوردی

ئاگاداری: ئهگهر به زمانی کوردی قهسه دهکهیت، خزمهتگوزاریهکانی یارمهتی زمان، بهخوڕایی، بۆ تو بهردهسته. پهیههندی به 1-800-690-1606 (TTY:711)..بکه

Arabic: ربيّةعلا

وظةحلم: اذا ملكنته غللا ربيّةعلا اتمدخدةعاسملا ويغلا رةفوتم كلة انجام. اتصل مقبر: 1-800-690-1606 (TTY: 711) مقرر فتاه صملا و مكبلا

Chinese: 繁體中文

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-690-1606 (TTY:711)。

Vietnamese: Tiếng Việt

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-690-1606 (TTY:711).

Korean: 한국어

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-690-1606 (TTY:711) 번으로 전화해 주십시오.

French: Français

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-690-1606 (TTY:711).

Amharic: አማርኛ

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያገዝዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ 1-800-690-1606 (መስማት ለተሳናቸው: TTY:711)።

Gujarati: ગુજરાતી

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-690-1606 (TTY:711).

Laotian: ພາສາລາວ

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີ ພ້ອມໃຫ້ທ່ານ. ໂທ 1-800-690-1606 (TTY:711).

German: Deutsch

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-690-1606 (TTY:711).

Tagalog: Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-690-1606 (TTY:711).

Hindi: हिंदी

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-690-1606 (TTY:711). पर कॉल करें।

Serbo-Croatian: Srpsko-hrvatski

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-800-690-1606 (TTY- Telefon za osobe sa oštećenim govorom ili sluhom: 711).

Russian: Русский

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-690-1606 (телетайп: TTY:711).

Nepali: नेपाली

ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निम्ति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ । फोन गर्नुहोस् 1-800-690-1606 (टिडिवाइ: TTY:711).

Persian: فارسی

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-800-690-1606 تماس بگیرید. (TTY:711)

- **Do you need help talking with us or reading what we send you?**
- **Do you have a disability and need help getting care or taking part in one of our programs or services?**
- **Or do you have more questions about your health care?**

Call us for free at 1-800-690-1606. We can connect you with the free help or service you need. (For TTY call: 711)

We obey federal and state civil rights laws. We do not treat people in a different way because of their race, color, birthplace, language, age, disability, religion, or sex.

Do you think we did not help you or you were treated differently because of your race, color, birthplace, language, age, disability, religion, or sex?

You can file a complaint by mail, by email, or by phone. Here are three places where you can file a complaint:

TennCare, Office of Civil Rights Compliance

310 Great Circle Road, 3W
Nashville, TN 37243

Email: HCFA.Fairtreatment@tn.gov

Phone: 1-855-857-1673 (TRS 711)

You can get a complaint form online at:

tn.gov/tenncare/members-applicants/civil-rights-compliance.html

Civil Rights Coordinator, UnitedHealthcare Civil Rights Grievance

P.O. Box 30608
Salt Lake City, UT 84130

Email: UHC_Civil_Rights@uhc.com

Phone: 1-800-690-1606

U.S. Department of Health & Human Services, Office for Civil Rights

200 Independence Avenue SW, Room 509F, HHH Building
Washington, DC 20201

Phone: 1-800-368-1019 (TDD: 1-800-537-7697)

You can get a complaint form online at: hhs.gov/ocr/office/file/index.html

Or you can file a complaint online at: ocrportal.hhs.gov/ocr/portal/lobby.jsf

UHC Dual Complete TN-Y001 (HMO-POS D-SNP) Customer Services

 **MyUHC.com/CommunityPlan**



Call 1-800-690-1606

Calls to this number are free. 8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept. Customer Service also has free language interpreter services available for non-English speakers.

TTY 711

Calls to this number are free.

8 a.m.–8 p.m.: 7 Days Oct–Mar; M–F Apr–Sept.



Write **P.O. Box 30769**

Salt Lake City, UT 84130-0769