UnitedHealthcare Dual Complete® ONE (HMO D-SNP)

As a UnitedHealthcare Dual Complete[®] ONE (HMO D-SNP) member, you have no out-of-pocket expenses. You will not be responsible for any copayments or coinsurance for drugs or other covered services provided by plan providers.

This is a short description of your 2023 plan benefits. For complete information, please refer to your Evidence of Coverage. Limitations, exclusions, and restrictions may apply.

Plan costs

Monthly plan premium \$0

Medical benefits

	Your cost
Doctor's office visit	
Primary care provider (PCP)	\$0 copay
Specialist	\$0 copay (no referral needed)
Virtual visits	\$0 copay to talk with a network telehealth provider online through live audio and video
Preventive services	\$0 copay
Inpatient hospital care	\$0 copay per stay (no limit on days)
Skilled nursing facility (SNF)	\$0 copay per stay (no limit on days)
Outpatient hospital, including surgery	\$0 copay
Outpatient mental health	
Group therapy	\$0 copay
Individual therapy	\$0 copay
Virtual visits	\$0 copay to talk with a network telehealth provider online through live audio and video
Diabetes monitoring supplies	\$0 copay for covered brands
Diagnostic radiology services (such as MRIs, CT scans)	\$0 copay
Diagnostic tests and procedures (non- radiological)	\$0 copay
Lab services	\$0 copay
Outpatient x-rays	\$0 copay
Ambulance	\$0 copay for ground or air
Emergency care	\$0 copay (worldwide)

Medical benefits

	Your cost
Urgently needed services	\$0 copay (worldwide)

Benefits and Services Beyond Original Medicare

	Your cost
Acupuncture	\$0 copay
Chiropractic Services	\$0 copay
Dental Services	\$0 сорау
Durable Medical Equipment (DME)	\$0 copay
Family Planning Services and Supplies	\$0 copay
Federally Qualified Health Centers (FQHC)	\$0 copay
Fitness program	\$0 copay for Renew Active, which includes a free gym membership, plus online fitness classes, brain health challenges and 1 Fitbit [®] device
Hearing services — hearing exams and hearing aids	\$0 copay
Home support services	\$150 credit per quarter to spend on extra support at home
Managed Long Term Services and Supports (MLTSS)	\$0 copay
Meal benefit	\$0 copay for 28 home-delivered meals immediately after an inpatient hospitalization or skilled nursing facility (SNF) stay
Medical Day Care	\$0 copay
Nurse Midwife Services	\$0 copay
Nursing Facility (long term/custodial care)	\$0 copay
NurseLine	Speak with a registered nurse (RN) 24 hours a day, 7 days a week
Food, over-the-counter (OTC) and utility bill credit	\$300 credit every month to pay for covered groceries, OTC products and certain utility bills
Personal Care Assistant	\$0 copay
Personal Emergency Response System (PERS)	\$0 copay for 24/7 emergency response services through monitoring system we install in your home
Podiatry – routine	\$0 сорау
Private Duty Nursing	\$0 copay
Transportation – routine	\$0 copay
Vision Care Services	\$0 copay

Prescription drugs

30-day or 100-day supply from retail network pharmacy	
Generic (including brand drugs treated as generic)	\$0 copay Some covered drugs limited to a 30-day supply
All other drugs	\$0 copay Some covered drugs limited to a 30-day supply



UnitedHealthcare Dual Complete® ONE (HMO D-SNP) is a Dual Eligible Special Needs Plan (D-SNP) with a Medicare contract and a contract with the New Jersey Medicaid program. Enrollment in UnitedHealthcare Dual Complete® ONE depends on contract renewal. This plan is available to anyone who has both Medicare and full New Jersey Medicaid benefits.

This information is not a complete description of benefits. Contact the plan for more information. Premiums are covered for enrollees of UnitedHealthcare Dual Complete ONE (HMO D-SNP). Members must use network plan providers, pharmacies, DME (Durable Medical Equipment) suppliers, and follow the rules on referrals. Members will be enrolled into Medicare Part D prescription drug coverage under the plan and will be automatically disenrolled from any other Medicare Advantage or Medicare Part D prescription drug coverage.

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