



Peoples Health Complete Care LA-5 HMO-POS C-SNP

H1961-022-000

This plan is available in Ascension, East Baton Rouge, East Feliciana, Iberville, Jefferson, Livingston, Orleans, St. Charles, St. Helena and West Baton Rouge parishes.

Peoples Health Complete Care LA-6 HMO-POS C-SNP

H1961-023-000

This plan is available in Acadia, Allen, Avoyelles, Beauregard, Bienville, Bossier, Caddo, Calcasieu, Caldwell, Cameron, Catahoula, Claiborne, Concordia, DeSoto, East Carroll, Evangeline, Franklin, Grant, Iberia, Jackson, Jefferson Davis, Lafayette, LaSalle, Lincoln, Madison, Morehouse, Natchitoches, Ouachita, Rapides, Red River, Richland, Sabine, St. Landry, St. Martin, St. Tammany, Tangipahoa, Tensas, Union, Vermilion, Vernon, Washington, Webster, West Carroll and Winn parishes.

Peoples Health Complete Care LA-7 HMO-POS C-SNP

H1961-025-000

This plan is available in Assumption, Lafourche, Plaquemines, Pointe Coupee, St. Bernard, St. James, St. John the Baptist, St. Mary, Terrebonne and West Feliciana parishes.

2025

Live your best life with Peoples Health.

Peoples Health is the choice of more than 110,000 people with Medicare in Louisiana. Founded in 1994 by medical providers and physicians, we focus on one thing: helping people with Medicare enjoy the best health possible.

Today, Peoples Health is part of the UnitedHealthcare® family of plans. Peoples Health has a long history of caring, compassionate, one-on-one service for our plan members. That commitment remains.

Peoples Health plan types

Peoples Health HMO-POS* C-SNPs (Chronic Condition Special Needs Plans) are designed for people with diabetes, cardiovascular disease or chronic heart failure, and include benefits and services tailored to support these conditions.

The following plan types are covered in separate booklets:

Peoples Health HMO-POS* (Health Maintenance Organization) plans feature coordinated care through our extensive network of providers. Most of these plans include Part D drug coverage.

Peoples Health HMO-POS* D-SNPs (Health Maintenance Organization Dual-Eligible Special Needs Plans) are available to people who have both Medicare and Medicaid. If you have both Medicare and medical assistance from the state, you may be eligible for one of these plans.

Peoples Health PPO (Preferred Provider Organization) plans let you choose in- or out-of-network providers. In most cases, you'll have lower out-of-pocket costs for services received in-network. We offer two PPO options, one with Part D drug coverage and one without.

*Point-of-service (POS) option allows out-of-network dental services. Those out-of-network services may have a higher cost to members. Dental coverage maximums vary by plan.

Peoples Health + UnitedHealthcare



Since joining the UnitedHealthcare family, we've been able to expand many benefits and services. Members of the Peoples Health plans described in this booklet can enjoy:



UCard—Get simplified access to care and benefits through your member ID card. Most Peoples Health plans offer an allowance for purchasing over-the-counter items. The allowance is loaded onto your member ID card, called a UCard. You can use this allowance to purchase covered items. Your UCard also lets you access your fitness benefit. No need to carry a separate fitness center membership card.



UnitedHealth Passport® program—Peoples Health has always offered worldwide emergency and urgent care coverage. Through the Passport program, you can also access plan-covered services while traveling outside your plan service area in the United States. The Passport program lets you access covered services with participating providers in the Passport service area at in-network costs.

Still, the best part is this: As a Peoples Health plan member, you enjoy the quality that comes from people who really care. Peoples Health is a company born and raised in Louisiana, and our members have been our neighbors, our friends and our family. It's simple. We want you to enjoy the best health possible.

Chronic Condition Special Needs Plans

If you have diabetes, chronic heart failure or a cardiovascular disorder, ask about our NEW C-SNPs.

These plans offer a monthly allowance for healthy food[^] and health & wellness items and may include lower copays than some of our other plans for specialist visits and certain prescription drugs.

This type of plan could be a good fit if you:



Have diabetes, a cardiovascular disorder or chronic heart failure



Regularly see a specialist in our network to manage one of these conditions



Could use a monthly allowance for healthy foods and OTC items



Do not have Medicaid or medical assistance from the state

■ **Peoples Health Complete Care LA-5** HMO-POS C-SNP

■ **Peoples Health Complete Care LA-6** HMO-POS C-SNP

■ **Peoples Health Complete Care LA-7** HMO-POS C-SNP

	Complete Care LA-5	Complete Care LA-6	Complete Care LA-7
Monthly Plan Premium	\$0	\$0	\$0
Maximum Out-of-Pocket Costs	\$3,900	\$6,700	\$5,900
Doctor Visits			
Primary Care Provider Visit	\$0	\$0	\$0
Specialist Visit	\$10	\$25	\$20
Telehealth Visit	\$0	\$0	\$0
Preventive Care*			
Pap Smears, Pelvic Exams, Mammograms	\$0	\$0	\$0
Prostate & Colorectal Cancer Screenings	\$0	\$0	\$0
Bone Mass Measurement	\$0	\$0	\$0
Vaccinations (COVID-19, flu, pneumonia, hepatitis B)	\$0	\$0	\$0
Labs & Tests*			
Lab Services	\$0	\$0	\$0
Diagnostic Procedures/Tests	\$25	\$35	\$40
X-rays	\$15	\$35	\$20
Advanced Imaging (MRI, MRA, CT, CTA, PET scans, etc.)	\$150	\$250	\$250
Outpatient Surgery			
Surgery (outpatient hospital)	\$125	\$245	\$155
Surgery (ambulatory surgical center)	\$125	\$245	\$155
Inpatient Hospital Care per Admission			
Inpatient Deductible	\$0	\$0	\$0
Inpatient Stay per Day	\$95 days 1-10 \$0 days 11+	\$245 days 1-10 \$0 days 11+	\$155 days 1-10 \$0 days 11+
Worldwide Emergency Care, Urgent Care and Emergency Transportation*			
Emergency Care	\$140	\$125	\$125
Urgently Needed Care	\$65	\$55	\$55
Emergency Ambulance Services (per one-way trip, ground or air)	\$145	\$200	\$120
Emergency or Urgent Care Outside U.S.	\$0	\$0	\$0
Mental Health & Substance Abuse Treatment			
Inpatient Mental Health Care (per day)	\$95 days 1-10 \$0 days 11-90	\$245 days 1-10 \$0 days 11-90	\$155 days 1-10 \$0 days 11-90
Outpatient Mental Health Visit	\$15 group	\$15 group	\$15 group
Substance Abuse Treatment Visit	\$25 individual	\$25 individual	\$25 individual
Home Health & Skilled Nursing Facility Care			
Home Health Care	\$0	\$0	\$0
Skilled Nursing Facility Care per Day (semiprivate room and board)	\$0 days 1-20 \$203 days 21-100	\$0 days 1-20 \$203 days 21-100	\$0 days 1-20 \$203 days 21-100

*Office visit copay may apply.

*Emergency care copay waived if admitted to inpatient hospital care within 24 hours for the same condition

Outpatient Services & Supplies			
Occupational, Physical or Speech Therapy Visit	\$10	\$20	\$20
Durable Medical Equipment - DME (wheelchairs, oxygen, etc.)	20% coinsurance	20% coinsurance	20% coinsurance
Diabetes Monitoring Supplies (DME provider or network retail pharmacy)	\$0	\$0	\$0
Additional Benefits Not Covered by Medicare			
Allowance for Food and Over-the-Counter Health & Wellness Items	\$107/month	\$58/month	\$77/month
Meals After Inpatient Hospital Stay (up to 28 meals over 14 days)	\$0	\$0	\$0
Routine Eye Exam (one per year)	\$0	\$0	\$0
Eyeglass Lenses (every two years)	\$0-\$153	\$0-\$153	\$0-\$153
Frames or Contact Lenses (every two years)	\$300 allowance	\$300 allowance	\$200 allowance
Routine Hearing Exam (one per year)	\$0	\$0	\$0
Hearing Aids (up to two per year; includes OTC and prescription hearing aids; cost listed is per hearing aid)	Prescription: \$199-\$1,249	Prescription: \$199-\$1,249	Prescription: \$199-\$1,249
	OTC: \$99-\$829	OTC: \$99-\$829	OTC: \$99-\$829
Dental - Preventive* (oral exams, cleanings and X-rays)	\$0	\$0	\$0
Dental - Comprehensive/Restorative*	\$0	\$0	\$0
Platinum Dental Rider for Comprehensive Services	N/A	\$54/month	\$54/month
Dental - Bridges or Dentures*	50% coinsurance	50% coinsurance	50% coinsurance
Dental - Coverage Maximum	\$4,000	\$1,500	\$1,500
Respite Care (12 sessions per year for members with dementia, including Alzheimer's disease)	\$0	\$0	\$0
Fitness Benefit	\$0	\$0	\$0

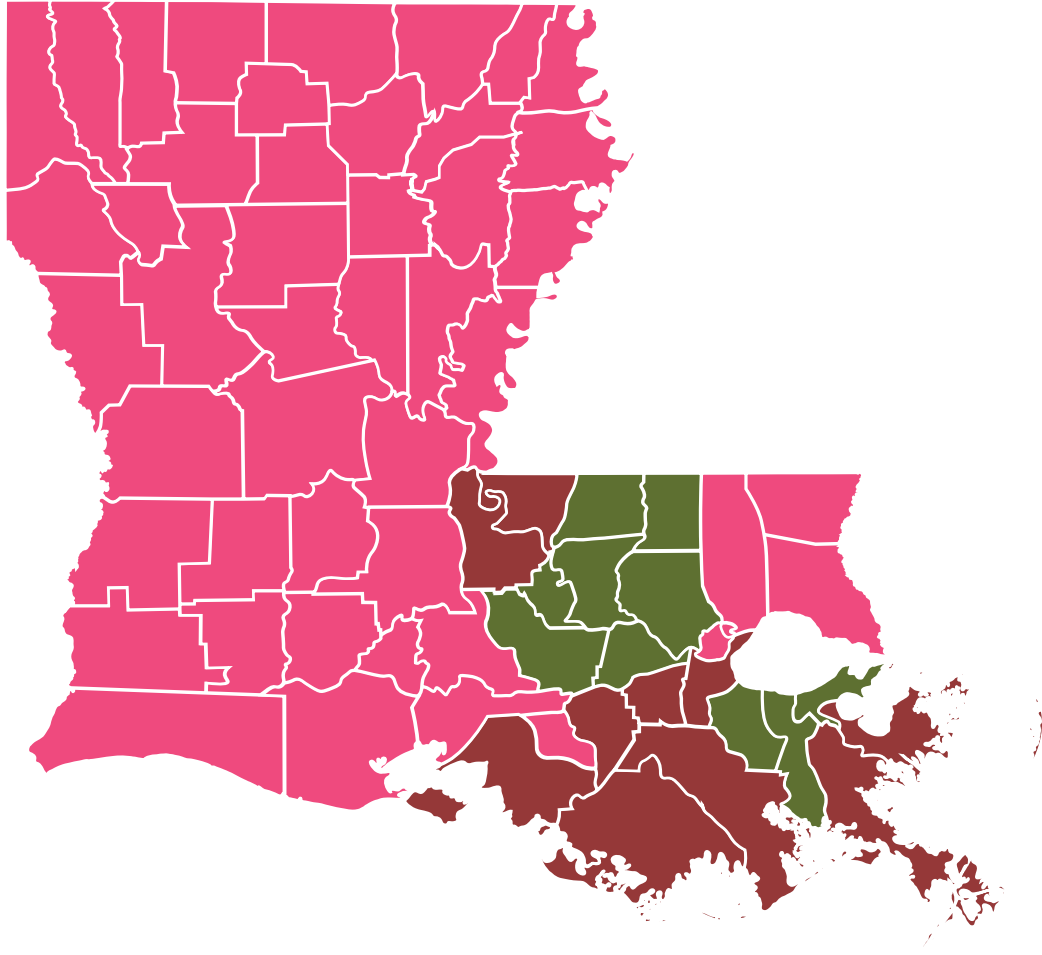
Part D Prescription Drug Coverage

	Complete Care LA-5		Complete Care LA-6		Complete Care LA-7	
Deductible Stage	\$255 deductible for tiers 3-5		\$255 deductible for tiers 3-5		\$255 deductible for tiers 3-5	
Initial Coverage Stage	30-Day Supply	100-Day Supply	30-Day Supply	100-Day Supply	30-Day Supply	100-Day Supply
Tier 1	\$0	\$0	\$0	\$0	\$0	\$0
Tier 2	\$5	\$0 preferred mail order	\$10	\$0 preferred mail order	\$5	\$0 preferred mail order
Tier 3	\$47	\$141	\$47	\$141	\$47	\$141
Tier 4	\$100	30-day supply only	\$100	30-day supply only	\$100	30-day supply only
Tier 5	30% coinsurance	30-day supply only	30% coinsurance	30-day supply only	30% coinsurance	30-day supply only

If you have a limited income, you may be eligible for Medicare's Extra Help program. It could lower your costs for prescription drugs. Ask us about eligibility.

*Out-of-network dental services may have higher member costs.

C-SNP Availability



Peoples Health Complete Care LA-5 (HMO-POS C-SNP)

Peoples Health Complete Care LA-6 (HMO-POS C-SNP)

Peoples Health Complete Care LA-7 (HMO-POS C-SNP)

Online Search Tools



Check for covered drugs, tier levels and requirements, such as quantity limits or step therapy for certain drugs.



Find hospitals, pharmacies, physicians and other health care providers.

When Can I Enroll?

If you have diabetes, cardiovascular disease or chronic heart failure, you have a special enrollment period that lets you enroll in a Peoples Health chronic condition special needs plan.

You may also join a Medicare Advantage plan, like a Peoples Health chronic condition special needs plan, during:



Medicare's Annual Enrollment Period (AEP): From Oct. 15 through Dec. 7, you can change the way you get your Medicare benefits. Coverage changes made during this time go into effect Jan. 1.

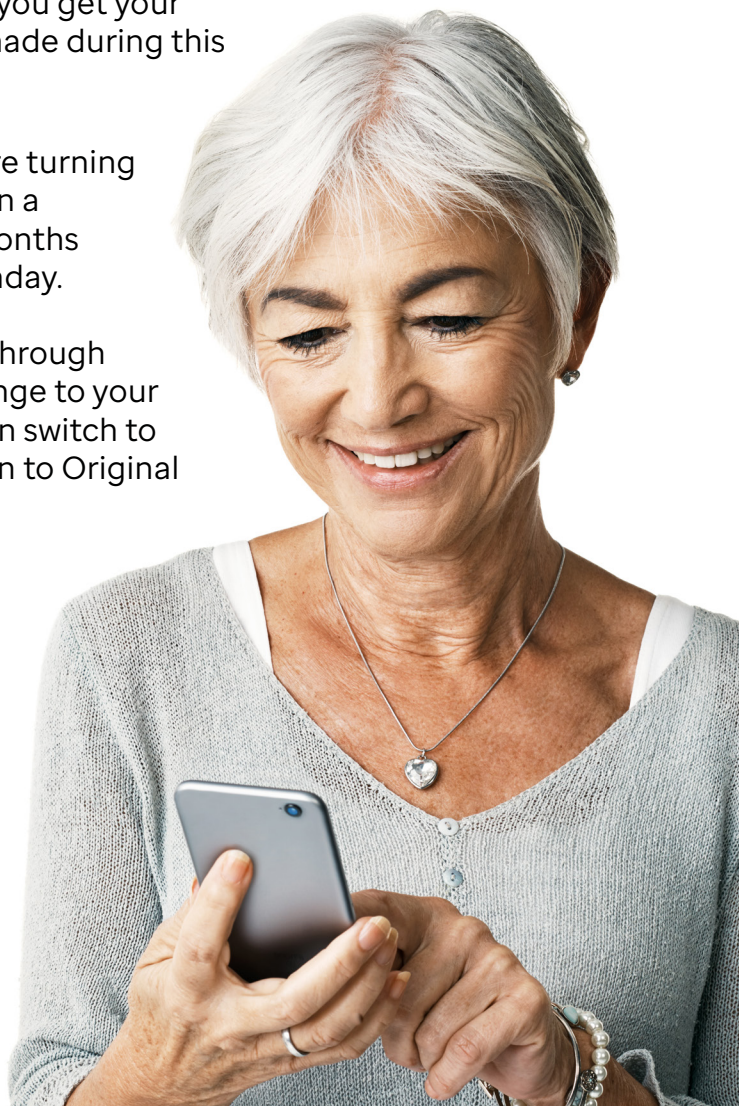


Initial Enrollment Period (IEP): If you are turning 65 and new to Medicare, you can enroll in a Medicare Advantage plan up to three months before and after the month of your birthday.



Other Enrollment Periods: From Jan. 1 through March 31, you can make a one-time change to your Medicare coverage. For example, you can switch to a new Medicare Advantage plan or return to Original Medicare.

There are a number of exceptions to the standard Medicare enrollment periods. Call the number on the back of this booklet to learn more.





A UnitedHealthcare Company

For more information on Medicare or our plan benefits, call toll-free:

1-877-897-3389 (TTY: 711)

Daily: 7 a.m. to 10 p.m.

Asistencia disponible en español.

Peoples Health Medicare Center | 3017 Veterans Memorial Blvd. | Metairie, LA 70002
peopleshealth.com

Open Monday to Friday, 8 a.m. to 5 p.m.



Connect with us.



Scan the QR code to learn more.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies. For Medicare Advantage Plans: A Medicare Advantage organization with a Medicare contract. For Dual Special Needs Plans: 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. Out-of-network/noncontracted providers are under no obligation to treat Peoples Health members, except in emergency situations. Please call our Customer Service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services. Contact the plan for more information. ^The healthy food benefit is a special supplemental benefit only available to chronically ill enrollees with a qualifying condition, such as diabetes, chronic heart failure and/or cardiovascular disorders, and who also meet all applicable plan coverage criteria. Contact us for details. Y0066_25PHAEPMemQG_CCLA5_CCLA6_CCLA7_M 1/25