



CareFlex Plan

A new plan for 2025! The CareFlex Plan gives members more control over their Medicare dollars to help **lower, or even eliminate, out-of-pocket costs** associated with Medicare-covered services.

Help pay for Medicare-covered copays for:
Specialist visits
Hospital stays
...and more

Where is it available?



7.8M eligible members in select counties in Arizona, Florida, Illinois, Massachusetts, Missouri, Rhode Island, Texas and Wisconsin.



14 MAPD plans. Look for the plan name descriptor 'CareFlex' to easily identify these plans (e.g., AARP Medicare Advantage CareFlex from UHC TX-44 (HMO-POS)).

Why UnitedHealthcare?

- This plan is for members whose priority is lower health care costs and more flexibility, helping them access and afford the care they need.
- Plan designs range from a \$350 to \$550 credit per quarter.

How does it work?

- CareFlex Plans include a Visa debit card that is separate from the UnitedHealthcare UCard® and typically arrives within 2 weeks of the member's approved enrollment.
- Members on a CareFlex Plan will continue to have a barcode (not a magnetic stripe) on their UCard in 2025.
- Before funds can be loaded, members will need to activate their CareFlex card by calling the number on their card or by visiting activatecareflex.uhc.com.
- Quarterly credits rollover from quarter to quarter, allowing members to spend credits on larger expenses, but expire at the end of the year or if the member disenrolls from the plan.





How does it work? Continued...

- Credits can only be spent on cost-shares for eligible Medicare Parts A and B covered items and services such as copays for specialist visits, hospital stays, diagnostic testing, outpatient surgery, physical therapy, durable medical equipment and more.
- Members cannot spend their credit on ancillary benefits, Part D prescription drugs or Part B prescription drugs from a *retail* pharmacy, or any other benefits not listed as included.
- CareFlex credits can only be used on covered items and services received at sites of service that use an approved healthcare Merchant Category Code (MCC) for billing. Some covered items and services may not be eligible for CareFlex credits due to a different MCC being used; this is most common with Medicare-covered vision and dental care.
 - For example, if a member has cataract surgery at an eye care clinic, their CareFlex credit can only be used if the clinic is using an approved healthcare MCC. If using a vision retailer MCC, the CareFlex credit transaction will be denied.

How can you support your members?

- Help members know what to expect for 2025 and how to get the most out of their plan.
- If an eligible member mentions a large medical expense, remind them CareFlex credits can help lower or eliminate out-of-pocket costs associated with Medicare-covered (Part A / B) services.
- See eligible expenses highlighted in the Medicare Product Portal.
- Remind members to activate and not lose their CareFlex card, which is separate from their UCard.

