2023 Plan Highlights



UCare Medicare Plans with M Health Fairview & North Memorial

UCare offers a range of Medicare Advantage plans to meet the health care needs and budgets of our Medicare-eligible members.

UCare product	Eligibility	Service area (MN counties)	Network
UCare Medicare Plans with	Must have Medicare	Anoka, Chisago, Dakota,	M Health Fairview and
M Health Fairview & North	Part A and Part B	Hennepin, Isanti, Ramsey	North Memorial
Memorial (HMO-POS)		and Washington	Health, UMN Health,
• Care Wise			Entira Family Clinics
Care Core			and Voyage
			Healthcare

UCare Medicare Plans with M Health Fairview & North Memorial are Medicare Advantage and Health Maintenance Organization Point of Service (HMO-POS) plans. UCare Medicare Plans with M Health Fairview & North Memorial plans combine medical care from M Health Fairview & North Memorial providers and health coverage from UCare. These plans offer dental and prescription drug coverage.

Resources and contacts for providers

Provider Assistance Center

Call 612-676-3300 or 1-888-531-1493 toll-free, 8 am-5 pm, Monday through Friday.

UCare.org/providers

Find information and resources related to authorizations, claims and billing, policies and resources, training and education, our network, credentialing and the Provider Manual. Log in to the provider portal to look up member eligibility, claims, EOPs and authorization status.

Sign up for email updates

Join our email list at ucare.org/providers to receive UCare's provider newsletters, bulletins and alerts.

For additional details, see back for overview of benefits and cost share information. Full details are available at ucare.org/member-documents.



In-Network Service	Care Wise	Care Core	
Primary care visits	\$0 copay		
Specialist office visits	\$45 copay	\$40 copay	
Diagnostic tests and x-rays	20% coinsurance	10% coinsurance up to a maximum of \$150 per day	
Inpatient hospital care	\$350 copay per day for days 1-5, then 100% covered	\$250 copay per day for days 1-5, then 100% covered	
Emergency care	\$100 copay		
Urgent care	\$45 copay		
Outpatient mental health care	\$40 copay		
Medicare Part D prescription drug coverage deductible	Tier 1 = \$0 Tiers 2-5 = \$480 Copays based on drug tiers/standard and preferred pharmacies	Tiers 1 & 2 = \$0 Tiers 3-5 = \$395 Copays based on drug tiers/standard and preferred pharmacies	
Preventive dental coverage	Covered up to \$300 allowance limit	Routine and restorative dental coverage at no additional cost. Deductible \$100 (does not apply to routine or periodontal services). Dental coverage up to \$2,000 max per year.	
Vision coverage	\$0 copay for annual routine eye exam \$100 annual allowance for eyeglasses or contacts		
Hearing coverage *TruHearing brand hearing aids	\$0 copay for routine exam \$699 to \$999 for hearing aids*		
Out-of-pocket maximum in network	\$5,800; then 100% covered	\$5,500; then 100% covered	

