

UNITEDHEALTH GROUP®



## Take charge of your health.

Not sure where to start? Make **Health Care Advisor** your first call: **800-357-1371**. And use this guide throughout the year for quick access to resources and tools to get the right care, at the right time, in the right place.

Your 2021 Medical Plan User Guide:  
**HSA-eligible Plan**  
Balanced

# Got questions? Health Care Advisor has answers.

Navigating health care can be complex, but it doesn't have to be.

**Health Care Advisor** is your go-to resource for personalized health care support and guidance. And it's available to you and your family if you have medical coverage through the company.



**Health  
Care  
Advisor**

Available 24/7 to help  
answer your questions.

**800-357-1371**

**UNITEDHEALTH GROUP**





**Take charge of your health.** Whether you have a health concern or a question about your claims or coverage, **Health Care Advisor** is the *only* call you need to make. You can also email **advisor@optum.com** or connect via chat by texting “CHAT” to 58647 (message and data rates may apply).

## With **Health Care Advisor**, you can:

- **Connect** with the right resources for your situation, whether it’s managing a chronic condition, a major medical event, or your overall health and well-being. Nurses are available 24/7.
- **Find** low-cost, high-quality care, discounts, and wellness incentives to maximize your dollars.
- **Locate** a provider and schedule an appointment.
- **Select** the best place for health care that’s affordable and convenient, including alternatives to emergency room visits such as urgent care and convenience care clinics.
- **Understand** your medical and prescription drug benefits.
- **Get** help with claims and billing issues.
- **Understand** treatment options.
- **Connect** with a wellness coach to create a personalized well-being program.
- **Speak** to an expert about fitness, nutrition, weight management, stress management and much more.



### **Right care. Right time. Right place.**

The emergency room (ER) is not the right place for nonemergency situations. Our medical plans only cover ER services in a true emergency.

**Call Health Care Advisor for help choosing the right place to go.**



## Be prepared

**Start with these five steps** to get the most out of your HSA-eligible Balanced Plan.

### 1 Add Health Care Advisor to your contact list

To quickly reach **Health Care Advisor** when needed, add **800-357-1371** to your phone.

### 2 Register on [myuhc.com](https://myuhc.com)®

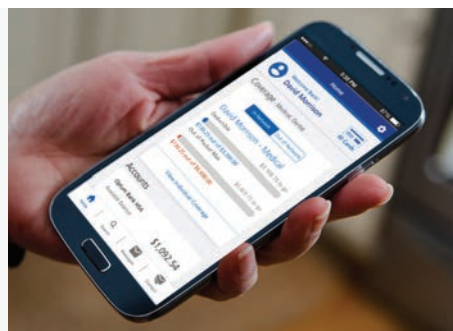
Go to **myuhc.com** and select **Register Now**. You'll need to enter identifying information, including your medical plan ID, Social Security number, ZIP code and date of birth. Then follow the instructions to complete your registration.

**You're now ready to use myuhc.com to do all this and more:**

- **Find** a network provider or facility.
- **Locate** a network pharmacy and covered prescriptions.
- **Compare** and estimate medical costs.
- **Pay** your bill.
- **Manage** your Limited-Purpose Flexible Spending Account (FSA).
- **Access** your Optum Bank® Health Savings Account (HSA).
- **Review** your medical history.

### 3 Download the UnitedHealthcare® app

Think of this handy app as **myuhc.com** on the go. Download it to access all your information wherever you are.

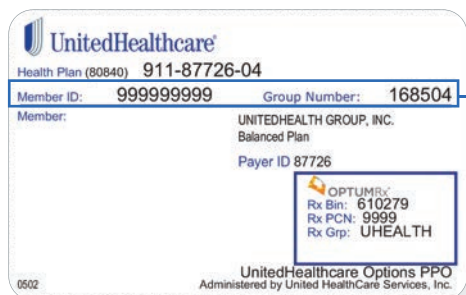


### 4 Review your medical plan ID card

Your medical plan ID card has key information about you and your medical coverage. Be sure to carry it with you at all times. You'll need to show it to your health care provider so they'll know how to bill for services. Don't have your card with you? You can access it on **myuhc.com** or the **UnitedHealthcare app** anytime.

**Here is a sample of a medical plan ID card. Yours may look different.**

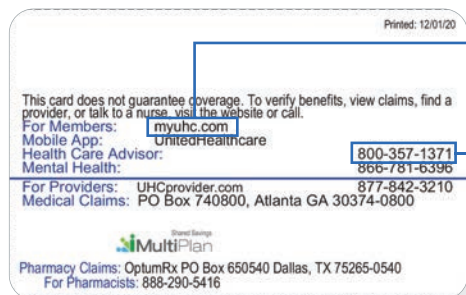
#### Front



#### Member ID and Group Number

Use these numbers when registering on **myuhc.com** or calling **Health Care Advisor**.

#### Back



#### Your member website

Visit **myuhc.com** for all your benefit and wellness information.

#### Health Care Advisor

Call this number to speak to **Health Care Advisor**.

## 5 Know your plan

The HSA-eligible medical plans work together with an Optum Bank Health Savings Account (HSA) to help you take charge of your health. You get the most out of your coverage when you actively engage in your health care and decision-making. Take time to learn about your benefits and what costs you have to pay.

- Preventive care — such as routine wellness exams and certain recommended screenings and immunizations — is covered at 100% when you see network providers. Learn more at [uhc.com/preventivecare](https://uhc.com/preventivecare).
- You pay the full cost of other services until you meet the annual deductible. Then you pay 20% coinsurance and the plan pays the balance.
- Once you meet the annual out-of-pocket maximum, covered expenses are paid at 100% for the rest of the year.





## HERE'S HOW YOUR PLAN WORKS

### At the start of your plan year...

You're responsible for paying 100% of the amount allowed for your covered health services until you reach your **deductible**, which is the amount you pay before your medical plan pays a portion.

**You pay 100%** until you reach your network deductible of \$2,800 (individual-only) or \$5,600 (family)

**You pay 100%** until you reach your out-of-network deductible of \$5,600 (individual-only) or \$11,200 (family)

### Along the way...

You may also be required to pay a fixed amount — or **copay** — each time you purchase a prescription.

**You pay 100%** of the copay, which is \$15 to \$750 for preventive prescriptions, depending on the drug tier and whether it's a retail or home delivery prescription

### Once you reach your deductible...

Your medical plan starts to share a percentage of the costs for covered health care services with you — this is your **coinsurance**.

**You pay 20%** for non-preventive prescriptions and **your plan pays 80%** after you meet your network deductible

**You pay 50% and your plan pays 50%** after you meet your out-of-network deductible

### When you reach your out-of-pocket maximum...

Your plan covers the costs (the allowed amount) for covered health services at 100%. Your **out-of-pocket maximum** is the most you'll have to pay for covered health services in a plan year — copays and coinsurance count toward this.

**Your plan pays 100%** once you reach your network out-of-pocket maximum \$5,600 (individual-only) or \$11,200 (family)

**Your plan pays 100%** once you reach your out-of-network maximum of \$11,200 (individual-only) or \$22,400 (family)

**For specific plan questions, call Health Care Advisor at 800-357-1371.**

## Your HSA

An HSA puts you in control of your health care and budget. You can use the account to pay for eligible medical expenses including the annual deductible, coinsurance or prescriptions, or save for future expenses with pretax dollars.

The company makes a contribution to your account (\$500 individual/\$1,000 family) based on your medical coverage level. The company contribution is applied to your HSA on a prorated, per-paycheck basis throughout the year. You can start, stop or change your HSA contribution amount at any time. If your HSA satisfies certain account minimums, you can invest the balance, allowing it to potentially grow even faster.

## HSA Now

HSA Now helps you manage medical costs by making a portion of the company HSA contribution available whenever you need it.

If you have a medical expense early in the year, the company will provide the amount you need to pay your medical bill, up to \$500 for employee-only coverage and \$1,000 for family coverage.

You must have a \$0 cash balance in your HSA before you are eligible to receive any company contribution through HSA Now. If you use HSA Now, future bi-weekly employer HSA contributions will be used to repay the HSA Now funds that have been used.





## Out-of-network claims


### If you use an out-of-network provider:

- You could be asked to pay some or all of the bill before you leave. Remember, out-of-network claims have a separate, higher deductible and out-of-pocket maximum than network claims.
- Services will be paid at the out-of-network coinsurance level after you meet the separate out-of-network deductible.
- You may need to complete a medical claim form. Go to **myuhc.com** for forms and instructions.
- Submit your claim form to UnitedHealthcare to be reimbursed for some of the cost, as your medical plan allows.
- If you did choose an out-of-network provider or facility, UnitedHealthcare may attempt to negotiate a lower payment, depending on your benefit plan. If negotiations are unsuccessful, you may be responsible for the balance billed by the provider.

### Estimate your health care costs

Costs often vary significantly between different service providers and settings. Find out what your health care expenses may be before you go for a treatment or procedure.

#### Use **myuhc.com** or the **UnitedHealthcare** app to:

- Estimate your out-of-pocket expenses.
- Find network providers.
- Look for the Premium Care Physician symbol  that indicates the physician meets the UnitedHealth Premium® program quality and cost-efficient care criteria.

# Where to go for care

**Check your options for care.** Understanding where to go for care helps you get the right care, at the right time and in the right place. And choosing the appropriate level of care for your situation can save you time and money.

## Call your primary care physician

Your primary care physician (PCP) has easy access to your records, knows the bigger picture of your health, and may offer same-day or next-day appointments. When you visit your PCP:

- Bring your medical plan ID card and picture ID, such as a driver's license. You can access your medical plan ID anytime from **myuhc.com** or the **UnitedHealthcare app**.
- Bring a list of any medications you're taking.
- Bring any records from previous visits.

If your PCP orders labs or additional tests, ask if the services will be provided by a network lab or provider.

## Health Care Advisor

When your PCP isn't available, call Health Care Advisor. Registered nurses are available 24/7 to do a basic assessment and help you decide where to go for care.

## Optum® Virtual Care

Optum Virtual Care, our new digital clinic, provides a same-day alternative to walk-in care. If you have symptoms such as a rash, headache, sore throat, fever or cough, enjoy the convenience of best-in-class virtual care and help with prescriptions from our own Optum providers.

- \$0 visits through 2021.
- Access to same-day care seven days a week, 8 a.m. to 8 p.m. in all U.S. time zones.

Schedule your visit now at **myuhc.com/optumvirtualcare**.

## The Well

The Well is an on-site clinic and health and wellness resource at select locations. Get convenient care for illnesses *plus* preventive care services, health management support and more. Spouses and domestic partners enrolled in an eligible medical plan can also use the Well.

To schedule an appointment, call **888-588-6884**.

**Average cost:** \$54; 100% coverage for preventive care



### Emergency room visits are covered only in true emergencies

An emergency room is the first place to go for a serious or life-threatening medical situation. But it's not the right place for nonemergency situations. HSA-eligible plans cover ER visits *only* in true emergencies. If you are experiencing a true medical emergency, go to your local ER or call 911.

## Overview of care options

Decisions you make about where to go for care directly affect the quality of care you receive and how much you pay for care. Become familiar with the different care settings and resources available to you.

	NETWORK COST*	GET STARTED
<b>Health Care Advisor</b>	<b>FREE</b>	Health experts, clinicians and registered nurses are available 24/7 to do a basic assessment and help you decide where to go for care. Call <b>800-357-1371</b> .
<b>Primary Care Physician</b>	<b>\$140</b>	Your PCP knows you and can provide preventive and routine care, manage your medications and refer you to a specialist, if necessary.
<b>Optum Virtual Care</b>	<b>\$0</b>	Virtual, same-day care from our own Optum providers seven days a week, 8 a.m. to 8 p.m. Schedule your visit now at <b>myuhc.com/optumvirtualcare</b> .
<b>Virtual Visit</b>	<b>\$0</b>	Consult with a provider 24/7 about minor health conditions, including prescription needs. Go to <b>myuhc.com/virtualvisits</b> or use the <b>UnitedHealthcare app</b> .
<b>The Well</b>	<b>\$54</b>	On-site clinic at select UnitedHealth Group locations that provides coordinated, accessible and personalized care. To schedule an appointment, call <b>888-588-6884</b> .
<b>Convenience Clinic</b>	<b>\$100</b>	Convenient care for minor health conditions. Convenience clinics are often located in malls and retail stores. Learn more about convenient care options and find a clinic near you at <b>uhc.com/careoptions-uhg</b> .
<b>Urgent Care Center</b>	<b>\$180</b>	Quick, after-hours care for nonemergency, urgent medical concerns. Services are available on a walk-in basis and for extended hours. To find a network urgent care center, go to <b>myuhc.com</b> or use the <b>UnitedHealthcare app</b> .
<b>Emergency Room</b>	<b>\$2,200</b>	Care for serious, immediate medical needs such as chest pain, shortness of breath, severe asthma attack, major burns, severe injuries and kidney stones. ERs are located throughout the United States.

\*Average allowed amount charged by UnitedHealthcare Network Providers and not tied to a specific condition or treatment. Actual payments may vary depending on benefit coverage.



# Prescription drug coverage

**Your prescription drug coverage is provided through OptumRx® pharmacy programs.** When you need to fill a prescription, you'll use a pharmacy that participates in the OptumRx Select Network, which includes retail pharmacies, OptumRx home delivery and the Optum Specialty Pharmacy. There is no prescription drug coverage if you go out of network.

Note: CVS pharmacies (including those in Target stores) do not participate in the OptumRx Select Network.

	WHEN TO USE	GET STARTED
<b>Retail Network</b>	For most short-term prescription needs. More than 50,000 retail pharmacies participate in the network, so it's easy to find one that's convenient for you.	<b>Find a network pharmacy:</b> <ul style="list-style-type: none"><li>• Use the <b>UnitedHealthcare app</b>.</li><li>• Call <b>Health Care Advisor</b>.</li><li>• Log in to <b>myuhc.com</b> and use the <b>Pharmacy Locator</b>.</li></ul>
<b>Home Delivery</b>	Save time and money on medications you take regularly. Order up to a 90-day supply. Medications are conveniently delivered right to your home.	<b>Home delivery can be set up in one of the following ways:</b> <ul style="list-style-type: none"><li>• You or your provider's office can call <b>Health Care Advisor</b>.</li><li>• Use the <b>UnitedHealthcare app</b>.</li><li>• Log in to <b>myuhc.com</b>.</li></ul>
<b>Specialty Pharmacy</b>	For specialty medications prescribed by an appropriate specialist for complex health conditions. Prescriptions are filled by Optum Specialty Pharmacy.	<b>Specialty prescriptions can be set up in one of the following ways:</b> <ul style="list-style-type: none"><li>• You or your provider's office can call <b>Health Care Advisor</b>.</li><li>• Log in to <b>myuhc.com</b>.</li></ul>

## Prescription drug costs

Your prescription drug costs depend on the type of drug, the drug tier and where you purchase your medication. Call **Health Care Advisor**, log in to **myuhc.com** or use the **UnitedHealthcare app** for information on prescription drug costs.

### Here's how you pay for prescription drugs:

- For **preventive prescription drugs**, you pay a copay based on the drug tier. You don't need to meet the deductible. Some preventive medications are covered at 100%.
- For **non-preventive prescription drugs**, you pay the full amount until you meet the deductible; then you pay 20% of the cost, up to the out-of-pocket maximum.
- For **home delivery prescriptions**, up to a 90-day supply, you can save money because the copay is usually lower than if you purchase three 30-day supplies at a retail pharmacy. Ordering prescriptions or refills is easy. You can do it online, by mail or by phone.

COPAYS	TIER 1	TIER 2	TIER 3	TIER 4
<b>Preventive</b>				
Network Retail (30-day)	\$15	\$40	\$85	\$300
Home Delivery (90-day)	\$35	\$90	\$190	\$750
<b>Non-Preventive</b>				
	20% after deductible is met			

Select home delivery using any of the following options:





- ePrescribe: Your provider can send an electronic prescription to OptumRx.
- Online: Register at **myuhc.com** and select **Manage Your Prescriptions**.
- Call: **Health Care Advisor** at **800-357-1371**.

# After you receive care

## **Paying for your care and understanding how the billing process works is important.**

Using a network provider or facility can simplify the process. Providers in the UnitedHealthcare network have agreed to charge lower prices. This means your costs will likely be lower than if you see an out-of-network provider. The one exception is emergency care. Benefits are paid for both network and out-of-network emergency room visits only in true emergencies.

## **CLAIMS AND BILLING PROCESS WITH A NETWORK PROVIDER**

<b>1</b>	 <b>Provider</b> Your provider's office submits your claim to UnitedHealthcare. Some providers can instantly submit your claim online and may ask you to pay at the time of your visit.
<b>2</b>	 <b>UnitedHealthcare</b> UnitedHealthcare reviews your claim to see if the service is covered by your medical plan. If the service is covered and you used a network provider or facility, UnitedHealthcare applies a discount. <ul style="list-style-type: none"><li>• <b>If your claim was for preventive care</b>, the claim will be paid 100% and the process is complete.</li><li>• <b>If your claim was for non-preventive care</b>, UnitedHealthcare will notify you and your provider of the amount you owe.</li></ul>
<b>3</b>	 <b>Provider</b> Your provider's office will bill you for payment, if applicable.
<b>4</b>	 <b>You</b> Pay your bill using your HSA debit card, cash, credit card or check. It's easy to pay your bills online using the <b>Pay Now</b> feature on <b>myuhc.com</b> .

Follow your claims from start to finish and track payments you've made to health care providers on **myuhc.com** or the **UnitedHealthcare app**.



## UNDERSTANDING HEALTH STATEMENTS

Each time you or a covered dependent uses your medical plan, you'll receive an email letting you know that a new health statement is available online. You can view your information and activity securely at **myuhc.com** or on the **UnitedHealthcare app**.

### Check your statement to see:

- All claims processed for that period
- Network and out-of-network balance
- Deductible information

Here is a sample health statement.  
Yours may look different.



**Rather view your health statement online?**

### Here's how:

- **Log in** to your **myuhc.com** account — or create an account if you don't have one.
- Go to **Account Settings** at the top or bottom of the page and select **Change Mailing and Email Preferences**.
- Choose **Paperless** for your plan communications.

GREENSBORO SERVICE CENTER  
P.O. BOX 740800  
ATLANTA, GA 30374-0800  
[www.myuhc.com](http://www.myuhc.com)

*Address Change? Please contact your employer's benefit department.*

DPS888PKG  
SUSAN TEST  
123 MAIN ST.  
ANYWHERE US 12345-6789

UnitedHealthcare  
A UnitedHealth Group Company  
UNITEDHEALTHCARE INSURANCE COMPANY

**Member ID**  
012345678  
**Statement Period**  
11/17/20 - 01/02/21

### THIS IS NOT A BILL

Customer Care 1-888-888-8888

#### Stop The Flu Before It Stops You!

Protect against the flu! The best protection is getting a flu vaccine every year. The strains may differ from year to year, and last year's vaccine may not reliably protect you this year. The flu vaccine is formulated each year to keep up with the flu viruses as they change. Call your doctor today to schedule your flu vaccine or call the member phone number on your health plan ID card to find a provider near you.

#### Medical claims where payments may be needed from you:

Claims processed between 11/17/20 to 01/02/21

	Pay your provider(s) when they bill you*	Applied To Deductible
12/08/20 services for <b>BRADLEY</b> provided by <b>TEST PROVIDER</b> Claim Number: 0123456789012 Provider Billed: <b>\$303.00</b> Payments and Adjustments: <b>-\$136.62</b>	<b>\$166.38</b>	<b>\$166.38</b>
<b>Total:</b>	<b>\$166.38</b>	<b>\$166.38</b>

For more information about these claims, please refer to the 'Medical Claim Details' section of this document, the Explanation of Benefits, or visit: [www.myuhc.com](http://www.myuhc.com).

**This is not a bill.** Your provider will bill you directly unless you have already paid them. Please check your records. These charges represent your responsibility as defined by your health benefit plan. They may include your deductible, coinsurance, or a product or service that is not an eligible expense. If you have coverage with another insurance carrier or Medicare, these charges may not include any product or service in which the other insurance carrier or Medicare was primary. In addition, the amount in the "Pay your provider(s) when they bill you" area above may include payments made to the subscriber. Please see your coverage documents for more information.

\* If you have a Health Reimbursement Account (HRA) or a Flexible Spending Account (FSA), that payment may have been made after this statement was created and will be reflected on your next statement.

Please see the next page for more information

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### Member ID

Your unique member ID protects your Social Security number.

### Statement Period

Your health statement during a specific time.

### Message Center

Messages that promote better health awareness.

### What You Owe

The amount you need to pay your health care provider if you did not pay at the time you received services.

# Health Resources and Programs

Our goal is to make it easier for all of us to pursue better health and use our expertise and resources to move toward healthier together. And we do it through Stride, our well-being movement, where you'll discover resources and support to help you on your journey.

Visit **[stride.uhg.com](https://stride.uhg.com)** to find resources to help you move more, eat better, stress less and lose weight. Most are available to you at no cost.

## Sanvello™

Sanvello is an app with on-demand resources to help with stress, anxiety, depression and other conditions. It's designed to improve overall mental well-being by helping us develop self-care routines, habits and strategies in our day-to-day lives. Unlock premium access for Sanvello by downloading the app and registering with your work email address. Spouses and domestic partners can visit **[liveandworkwell.com](https://liveandworkwell.com)** (access code: united) to register and learn more.

## Employee Assistance Program

The Employee Assistance Program (EAP) is available 24/7 and provides confidential counseling services over the phone, online and in person for you and your family. The EAP provides up to five free, in-person and/or virtual sessions, per issue, per person, per year. It also offers quick access to experts who can help you with a wide range of well-being and family support services, including adult/elder care services, child care referrals, backup care, college coach, legal and financial resources, convenience services and more. Call **866-781-6396** or visit **[liveandworkwell.com](https://liveandworkwell.com)** (access code: united) to learn more.

## Maternity Support

Receive research-based support to improve mothers' and babies' health. Feel confident and supported as you welcome your new baby. Talk one-on-one with an obstetrics nurse from preconception through your baby's first weeks of life. Participate in person at the Well, virtually by downloading the UnitedHealthcare Healthy Pregnancy® app, or speak to a nurse on the phone. Call **Health Care Advisor** to learn more.

## Smoking Cessation Support

Quit For Life® is a phone-based coaching and web-based learning support service to help you quit smoking. You can also receive select prescription medications to help stop tobacco use. Call **Health Care Advisor** to learn more.

## Real Appeal®

The Real Appeal weight-loss program is personalized just for you and fits into *your* schedule for lasting results, fast! Get personalized support and professional coaching to make smarter choices and truly transform yourself. To enroll, visit **[uhg.realappeal.com](https://uhg.realappeal.com)**.

## Medical Weight Loss

Medical Weight Loss focuses on understanding the underlying conditions, medications and lifestyle behaviors that may affect your weight-loss efforts and offers you a comprehensive, evidence-based treatment plan, along with one-on-one support to meet your unique needs. Medical Weight Loss services are offered at select locations. Call **Health Care Advisor** to learn more.

## Orthopedic Health Support

If you or your covered dependent is suffering from back, knee or joint pain, enroll in the Orthopedic Health Support (OHS) program to receive coverage.

Enrolling in the OHS program is required to access coverage for certain orthopedic procedures. If surgery is the right path for you, a registered nurse can help you find a Center of Excellence (COE) provider. **Effective Jan. 1, 2021, if you live within 50 miles of a COE, you may be required to use the COE, or the procedure will not be covered.** Call **Health Care Advisor** to learn more.

## And more!

- Cancer Support Program
- Congenital Heart Disease Resource Services
- Fertility Solutions Program
- Kidney Resource Services
- Neonatal Resource Services
- Transplant Resource Services
- Wellness Coaching



Call **Health Care Advisor**. Talk to health experts and clinicians who can help you navigate health care, including when to go to the ER. Nurses are available 24/7 by calling **800-357-1371**, texting "CHAT" to 58647\* or emailing **advisor@optum.com**.

\*Message and data rates may apply.



# Rewards for Health

Every health journey is unique. Rewards for Health has been designed to motivate and support you on your journey. This new personalized program will guide you to the actions that help you maximize your health. With Rewards for Health, your medical plan pays you back when you Stride toward healthier.

**Earn up to \$600 — or \$1,200 when your enrolled spouse or domestic partner participates, too.**



## Start earning up to \$600 in rewards. Here's how:

- 1 Take the health survey: Earn \$25**
- 2 Complete a biometric screening\*: Earn \$75**

### Get started early!

Take your health survey and complete your biometric screening as soon as possible. The data from these will unlock your personalized recommended actions and give you more time to earn your full reward.

- 3 Complete recommended actions: Earn up to \$500**

Log in to Rally after completing the health survey and biometric screening to see your personalized recommendations and choose the actions you'd like to participate in to max out your rewards.

### Redeem your rewards.

You have several reward options to choose from in the new Rewards for Health Marketplace:

- HSA contribution
- Medical plan premium discount
- **NEW!** Stride Rewards

And more options will be added throughout the year, including charity donations!

### Visit Rally today.

Employees, visit [rewardsforhealth.uhg.com/rewards](https://rewardsforhealth.uhg.com/rewards).

Spouses and domestic partners, visit [uhg.werally.com](https://uhg.werally.com).

\*You are not required to complete a biometric screening if you are pregnant or participate in the Cancer Support Program, Comprehensive Care Management, Maternity Support Program or Medical Weight Loss. You must still complete the health survey to earn Rewards for Health.

Your health plan is committed to helping you achieve your best health. Rewards for participating in a well-being program are available to all eligible employees. If you think you may be unable to complete your recommended activities, you may qualify for an opportunity to earn the same reward by different means.

Contact a Healthcare Advisor at **800-357-1371** (and, if you wish, with your doctor) to find a well-being program that will meet your needs.

This communication is intended to be a high-level summary. Each plan is governed by a legal plan document. If there are any differences between this summary and the legal plan document, the plan document will resolve the difference.