

Welcome

Get the most out of your benefits.



Thank you for being a UnitedHealthcare member.

We're here to help make each step of your health care experience easier. That's why we've put together this guide, to help you better understand your benefits, find care, manage costs and get more out of your health plan.

What's inside:



Need help?



Visit myuhc.com[®].

Sign up for **myuhc.com** and get a personalized website that gives you access to your health plan details.



Get on-the-go access.

When you're out and about, the Health4Me® app puts your health plan at your fingertips. Download to access your health plan ID card, find nearby care and more.



Call toll-free.

If you don't have computer access, can't find answers, or need language assistance to answer questions, call the toll-free member phone number on your health plan ID card, TTY **711**.



Connect with us.

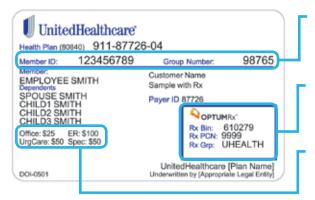
- Facebook.com/UnitedHealthcare
- ✓ Twitter.com/UHC
- Instagram.com/UnitedHealthcare
- YouTube.com/UnitedHealthcare

1 Get started.

Get to know your health plan ID card.

Your health plan ID card has information about you and your coverage. Remember to carry it with you wherever you go.

When you visit your doctor, show your card so they know how to bill for their services. You can also access a digital version through the Health4Me app. See next page for more information.



Example only. Your costs may vary.

How to get another ID card.

Visit **myuhc.com** to print an ID card or request that we send your ID card in the mail. You can also access a digital version of your card through the Health4Me app.

Member ID and group number

Use your member ID number when signing up on **myuhc.com** or calling with questions.

Your prescription coverage

Your pharmacist will use this to determine what medications are covered.

Your copayment amounts (if applicable)

Your cost for a covered service (usually due at your appointment).

How to see what's covered by your plan.

Go to **myuhc.com** to see health plan documents and to see what is and is not covered, as well as required notices. You can also request printed copies at no charge by calling the member number on your ID card.

Get started.



Sign up for myuhc.com.

Get the most out of your benefits with myuhc.com.

When it comes to managing your health plan and making more informed decisions, simpler is better. With **myuhc.com**, you have a personalized website that helps you access and manage your health plan:

- Find and estimate costs for the network care you need.
- See what's covered, and get information about preventive care.
- View claim details and account balances.
- Sign up for paperless delivery of your required plan communications.

Set up your account today.

- 1. Have your ID card handy and go to myuhc.com.
- 2. Click on Register Now and follow the step-by-step instructions.

Download the Health4Me app.

Get on-the-go access.

The Health4Me app puts your health plan at your fingertips. Download to:

- Find nearby care options in your network.
- Connect to a doctor online 24/7.
- See your claim details and view progress toward your deductible.
- View and share your ID card.
- Log on easily with Touch ID[®].

Watch short videos to learn more about your plan.

Visit **uhc.com/welcome** to watch videos about getting started with your plan, using your benefits and avoiding cost surprises.

Find a network provider.

How to find one.

Sign in to **myuhc.com** to find a doctor, clinic, hospital or lab based on location, specialty, reputation, estimated cost of services, availability, hours of operation and more. You can even see patient ratings and compare quality and costs before you choose services. If you would like more information on a doctor's professional qualifications, call the toll-free member phone number on your ID card.

Take advantage of network care.

Network doctors, mental health professionals, hospitals, clinics and laboratories charge discounted rates, which typically saves you money. Even if your plan allows you to receive care outside of your network, be aware that it could cost you more.

Choose with confidence.

The **UnitedHealth Premium® Program** uses national, evidence-based, standardized measures to evaluate physicians in various specialties to help you locate quality and cost-efficient providers. Find UnitedHealth Premium Care Physicians by going to **myuhc.com** and clicking on **Find a Doctor.** Choose smart. **Look for blue hearts.**

If you need a referral.

If your ID card states "Referrals Required," you'll need an electronic referral from your primary care provider (PCP) before seeking services from another network provider. Please refer to your health plan documents to learn which services require referrals.

If you need hospital care.

Talk to your doctor first to determine which hospital in your network can meet your medical or surgical needs. You or your doctor may be required to notify UnitedHealthcare before you're admitted.

If you need prior authorization.

Your plan may also require prior authorization before you receive certain services. This means that you or your network provider may need to get approval from your plan before it's covered. Call the toll-free member phone number on your ID card or view your plan documents on **myuhc.com** to check what services need prior authorization.

Choose a primary care provider (PCP).

Although your plan may not require you to choose a PCP, it's a good idea to have one main doctor with in-depth knowledge of your health.

Your PCP can share information on how to get a second opinion on your treatment or services.

Find one at **myuhc.com** or call the toll-free member phone number on your ID card.

Schedule your preventive care screenings.

Most UnitedHealthcare plans pay 100 percent of the cost of certain preventive care services with a network provider. Check your health plan documents for details.

Visit **uhc.com/preventivecare** to find age- and gender-appropriate preventive care recommendations for everyone covered under your plan.



Using your pharmacy benefits.

OptumRx[®] is your pharmacy care provider. Your pharmacy care experts are committed to providing easy and cost-effective ways to help you get the medication you need.

Fill your prescriptions, simply.

Delivered to your door.

Order up to a 3-month supply of the medication you take regularly. Your medication will be delivered right to your home, saving you a trip to the pharmacy. It's convenient—and often, less expensive.

You can sign up for home delivery on **myuhc.com**, on the Health4Me app or by calling the number on your ID card.

There's no charge for standard shipping to U.S. addresses. If you have medications you're taking currently, be sure to have a 1-month supply on hand while you transition to home delivery. If you prefer to call to set up home delivery, have the following handy:

- Your doctor's contact information.
- Names and strength of current medications.
- Payment information.

Pick up at the pharmacy.

Show your ID card at any UnitedHealthcare network retail pharmacy. Our network includes national chain and independent retail pharmacies, so you're sure to have one close to home or work. Find a list of network pharmacies using the Pharmacy Locator on **myuhc.com**, the Health4Me app or call the toll-free member phone number on your ID card.

Transferring medications.

Make sure you have at least a 1-month supply to help cover you through the transition. After your coverage starts, sign in to **myuhc.com** or use the Health4Me app to find a network pharmacy and refill your prescription.

Helpful tips to lower pharmacy costs.

Check your Prescription Drug List.

The easiest way to find out if a prescription is covered is to check your Prescription Drug List (PDL), sometimes called a formulary. This is a list of all medications, organized into cost levels, called tiers.

Look at the PDL with your doctor to review costs and any approvals you might need to get from your health plan to fill your prescriptions. You can talk to your doctor about lower cost options if a certain medication does not fit your budget.

PDL changes happen frequently, so be sure to check it often to make sure you've got the most updated information. You can find your PDL under the **Pharmacies & Prescriptions** section of **myuhc.com**.

Find the cost of a medication.

Sign in to **myuhc.com** and click on **Pharmacies & Prescriptions** to find your drug information, prices and lower-cost options.



Your cost	Drug tier*	What's covered	Helpful hints
\$ Lowest	1	Medications that provide the highest overall value. Mostly generic drugs. Some brand-name drugs may also be included.	Use Tier 1 drugs for the lowest out-of- pocket costs.
\$\$ Mid-range	2	Medications that provide good overall value. A mix of brand-name and generic drugs.	Use Tier 2 drugs instead of Tier 3 to help reduce your out-of-pocket costs.
\$\$\$ Higher	3	Medications that provide the lowest overall value. Mostly brand-name drugs, as well as some generic drugs.	Ask your doctor if a Tier 1 or Tier 2 option could work for you.

*Some pharmacy benefits may have more than 3 tiers.

Know your plan's coverage requirements.

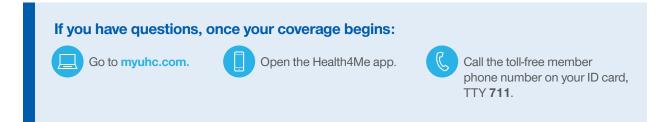
Some medications on the PDL may have letters next to them. This means there is a coverage requirement and you may have to take action before you can get that medication. Your plan may require 1 or more of the following:

- **Prior authorization (PA):** Your doctor will need to request and receive approval from UnitedHealthcare before the medication can be covered.
- Step therapy (ST): Trying one or more lower-cost medications before another.
- Supply/Quantity limits (SL): Getting a certain amount of each covered prescription.
- **Specialty medication (SM):** Medications used to treat complex or rare conditions that you may need to get from a specialty pharmacy. You may be able to use BriovaRx[®], the OptumRx specialty pharmacy. BriovaRx provides ongoing support to help you manage more complicated conditions.

Be sure to check your PDL on **myuhc.com** to learn if any of these requirements apply to your medications. Your plan may use these requirements to help manage costs or make sure the medication you are taking is appropriate for your condition.

Talk to your doctor.

When you talk with your doctor, use the Health4Me app to confirm coverage and costs. You can also talk about what you need to do to get your medication.





Know where to go.

See your primary care provider whenever possible.

Your primary care provider usually has easy access to your records, knows the bigger picture of your health, and many offer same-day appointments to meet your needs. When seeing your provider is not possible, it's important to know your quick care options to find the place that's right for you and help avoid financial surprises.

Quick Care Options	Needs or Symptoms	Average Cost ¹
24/7 Nurse Line Call the toll-free member phone number on your health plan ID card for expert advice.	 Choosing where to get medical care. Finding a doctor or hospital. Health and wellness help. Answers to questions about medicines. 	\$0
Virtual Visits Anywhere, anytime online doctor visits. To learn more, visit uhc.com/VirtualVisits.	 Cold Flu Fever Pinkeye Sinus problems 	\$50°
Convenience Care Clinic Treatment that's nearby.	Skin rashFlu shotMinor injuriesEarache	\$90
Urgent Care Center Quick after-hours care.	 Low back pain Respiratory illness (cough, pneumonia, asthma) Stomach illness (pain, vomiting, diarrhea) Infections (skin, eye, ear/nose/throat, genital-urinary) Minor injuries (burns, stitches, sprains, small fractures) 	\$170
Emergency Room (ER) ³ Care for serious needs.	 Chest pain Shortness of breath Severe asthma attack Major burns Severe injuries Kidney stones 	\$2,000

Freestanding ERs

Many people have been surprised by their bill after visiting a freestanding emergency room (FSER). FSERs, sometimes referred to as urgency centers, can be 2x the cost of an ER and 20x the cost of an Urgent Care Center. Neither located in nor attached to a hospital, FSERs are able to treat similar conditions as an ER but do not have an ER's ability to admit patients.

Ask before you enter:

1. Is this an Urgent Care Center or ER?

2. Is this facility a network provider?

¹ Source: 2017 average allowed amounts charged by UnitedHealthcare Network Providers and not tied to a specific condition or treatment. Actual payments may vary depending upon benefit coverage. (Estimated \$1,800 difference between the average emergency room visit and the average urgent care visit.) The information and estimates provided are for general informational and illustrative purposes only and are not intended to be nor should be construed as medical advice or a substitute for your doctor's care. Please discuss with your doctor how the information provided is right for you.

² The designated Virtual Visit provider's reduced rate for a Virtual Visit is subject to change at any time.

³ You should consult with an appropriate health care professional to determine what may be right for you. In an emergency, including a behavioral health crisis, call 911 or go to the nearest emergency room.



Finding care when you are traveling.

Call the toll-free member phone number on your ID card or use the Health4Me app to find providers near you and to learn about your coverage when you travel.

Estimate costs.

Know your potential costs before getting care.

You can find and estimate the price of care you need for an upcoming treatment or procedure on **myuhc.com.** Your cost estimate shows out-of-pocket expenses based on your plan and current benefit status. Members who comparison shop may save up to 36 percent* for care near them.

*UnitedHealthcare Internal Claims Analysis, 2015.

Prepare for your visit.

What to bring:

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- Your ID card and one form of picture ID, such as a driver's license.
- A list of medications you're taking.
- Records from previous visits.
- Questions you want to ask your doctor.

Go mobile.

Download the Health4Me app to have what you need for your next doctor's visit, from your ID card to your claim details—all in one place.

3 After you receive care.

Know how claims are processed.

When you see a network doctor.

Claims are submitted for you and you may be asked to pay some or all of the bill before you leave. UnitedHealthcare will process the claim to:

- Make sure it's an eligible expense under your plan.
- Make sure the service is paid at the discounted network rate.

When you see an out-of-network doctor.

If your plan allows visits to out-of-network providers, you may be asked to pay some or all of the bill before you leave.

- If the doctor doesn't submit your claim, you may be responsible for submitting the claim.
- Find medical claim forms and instructions on **myuhc.com**.
- Remember, discounted rates don't apply to out-of-network doctors so you may pay more.

Track your claims online.

Follow your claims from start to finish, and track payments you've made to health care providers in one place. You can also pay your bills online at **myuhc.com**.

Problem with a claim?

Information about the appeals and grievances process can be found in **Claims & Accounts** on **myuhc.com**. You can also call the toll-free member phone number on your ID card, TTY **711**.

Claim videos created just for you.

New claim videos available on **myuhc.com** make understanding your claims easier. Each video helps you quickly and easily see a breakdown of your claim, showing you how much your plan covered, what you owe and your remaining out-of-pocket balances.

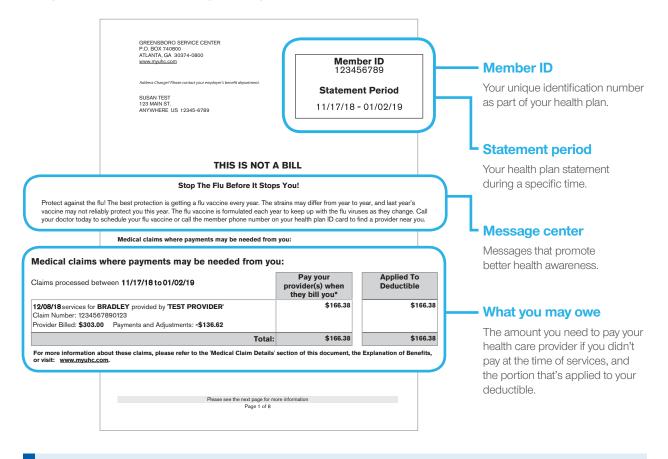
After you receive care.



Understanding your health statements.

We'll send you health statements when you or one of your covered dependents use your health plan. You can see all claims processed for that period, plus your network and out-of-network balance and deductible information.

If you receive your health statements online, you'll get an email whenever a new one is posted. You can view your information and activity securely at **myuhc.com**.



How to submit a complaint.

If you disagree with how a claim was processed, or you are dissatisfied with any other experience with UnitedHealthcare, you may file a complaint by calling the toll-free member number on your ID card, or in writing through the Medical Appeals and Grievances information on **myuhc.com**.

4 Programs to help you.

Once your health plan becomes active, you can choose to participate in the following programs. There's no cost to you—just the opportunity to get guidance and support for your health care needs. Find out more by logging in to **myuhc.com**.

Health and Wellness

Your path to better health.

Sign up for **Rally**[®] on **myuhc.com**. It's a program to help you move more and eat better. It even rewards you for your progress. **How it works**.

- Take your health survey. The health survey will guide you with visual prompts to follow. You'll receive your results as a "Rally AgeSM"—a number to help you assess your actual age compared to your health age based on your survey responses.
- **Pick your focus.** Get personalized activities and recommended missions—or individual action plans—based on your survey results. Missions provide activities to help improve or maintain your health. Choose ones that fit your lifestyle.
- Earn rewards. As you complete certain activities, you'll get coins. Use them to enter sweepstakes for chances to win prizes, get discounts, support charities or bid in auctions. The more you participate in Rally, the more chances to win.

Get help losing weight and keeping it off.

Whether you want to lose a lot of weight or just a few extra pounds, **Real Appeal®*** is designed to help with simple steps and support along the way for lasting weight loss. As a benefit of your health plan, it includes:

- A personalized transformation coach who will guide you, customizing steps to fit your needs, personal preferences, medical history and goals.
- 24/7 online support and a mobile app to help you stay on track and help you reach your goals.
- A success kit featuring program guides, exercise videos, digital food scale and more.

*Access to Real Appeal not available in Hawaii.

Be healthy. Save money.

· Cosmetic dental teeth whitening.

• Fitness equipment.

Save 10 percent to 50 percent on these health and wellness products and services that may not be covered by your medical plan:

- Acupuncture, chiropractic care, massage therapy and natural medicine.
- Hearing devices.
- Infertility treatment.
- Laser eye surgery.
- Long-term care services.

Log in to myuhc.com to access the health discount program.*

*Health discounts are not available to all health plans. Check your full plan benefits at myuhc.com to see if you are eligible for health discounts.

Decision Support

Talk to a registered nurse 24/7.

When a health question comes up, you can talk with a registered nurse any time, day or night. They can:

- Discuss care options to address immediate symptomatic needs.
- Determine if the emergency room, a doctor visit or self-care is right for your needs.
- Help identify network providers and facilities.
- Provide help understanding a diagnosis and exploring different treatment options and outcomes.

As a member, you can connect with a nurse by calling the number on your health plan ID card or signing in to myuhc.com.

Programs to help you.



Women's Health

Get support throughout your pregnancy.

The **Maternity Support Program** provides expectant mothers with support before, during, and after pregnancy. You'll work with a maternity nurse who is available to answer questions and provide educational information. It's best to enroll within the first 12 weeks of pregnancy, but you can start through week 34. The program is provided at no additional cost, as part of your plan. To enroll, call **1-877-201-5328***, TTY **711**, or visit **myuhc.phs.com/maternitysupport** for more information.

*Questions are answered 24/7, but enrollment is only open from 8 a.m.-8 p.m. CT.

Extra Care Support

Emotional support.

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Your behavioral health benefit provides confidential support. Get help 24/7 for:

- Alcohol and drug use recovery.
- Coping with grief and loss.
- Depression, anxiety and stress.
- Relationship difficulties.

If you need behavioral health support, visit liveandworkwell.com or call the toll-free member phone number on your ID card.

Get care online with Virtual Visits.

A Virtual Visit lets you see and talk to a doctor from your mobile device* or computer without an appointment. The doctor can provide a diagnosis and, if appropriate, send a prescription** to your local pharmacy, all in 30 minutes or less. It's all part of your health benefits.

Conditions commonly treated through a Virtual Visit.

Doctors can diagnose and treat a wide range of non-emergency medical conditions, including:

- Bladder infection/Urinary tract infection
- Bronchitis
- Cold/flu

- FeverPinkeyeBash
- Sinus problemsSore throat
 - Stomachache

It's easy to get started.

Visit **uhc.com/VirtualVisits** and choose from provider sites where you can register for a Virtual Visit. After registering and requesting a visit, you will pay your portion of the service costs according to your medical plan, and then you will enter a virtual waiting room. During your visit you will be able to talk to a doctor about your health concerns, symptoms and treatment options.

*Data rates may apply.

** Prescription services may not be available in all states.

Start living tobacco-free.

The **Quit For Life®** program is here to help you reach your goals—**at no additional cost to you**. Since 1985, we've helped more than 2 million tobacco users. Now offering the latest online tools, like a mobile app and website, Quit For Life is just like having a coach right at your fingertips—anytime you need support.

Enroll today at **myuhc.com.**

Find support for dealing with cancer.

Many questions come up when you or a loved one has cancer. With the Cancer Support Program, dedicated cancer nurses will help you find information and emotional support for you and your family. We will work with you throughout your cancer journey.

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5 Rights and responsibilities.

You have the right to:

- Be treated with respect and dignity by UnitedHealthcare personnel, network doctors and other health care professionals.
- Privacy and confidentiality for treatments, tests and procedures you receive. See Notice of Privacy Practices in your benefit plan documents for a description of how UnitedHealthcare protects your personal health information.
- Voice concerns about the service and care you receive.
- Register complaints and appeals concerning your health plan and the care provided to you.
- Get timely responses to your concerns.
- Candidly discuss with your doctor the appropriate and medically necessary treatment options for your conditions, regardless of cost or benefit coverage.
- Access doctors, health care professionals and other health care facilities.
- Participate in decisions about your care with your doctor and other health care professionals.
- Get and make recommendations regarding the organization's rights and responsibilities policies.
- Get information about UnitedHealthcare, our services, network doctors and health care professionals.
- Be informed about, and refuse to participate in, any experimental treatment.
- Have coverage decisions and claims processed according to regulatory standards, when applicable.
- Choose an Advance Directive to designate the kind of care you wish to receive should you become unable to express your wishes.



Your responsibilities:

- Know and confirm your benefits before receiving treatment.
- Contact an appropriate health care professional when you have a medical need or concern.
- Show your ID card before receiving health care services.
- Pay any necessary copayment at the time you receive treatment.
- Use emergency room services only for injuries and illnesses that, in the judgment of a reasonable person, require immediate treatment to avoid jeopardy to life or health.
- Keep scheduled appointments.
- Provide information needed for your care.
- Follow the agreed-upon instructions and guidelines of doctors and health care professionals.
- Participate in understanding your health problems and developing mutually agreed-upon treatment goals.
- Notify your employer of any changes in your address or family status.
- Sign in to myuhc.com or call us when you have a question about your eligibility, benefits, claims and more.
- Sign in to myuhc.com or call us before receiving services to verify that your doctor or health care professional participates in the UnitedHealthcare network.

Rights and responsibilities.



We do not treat members differently because of sex, age, race, color, disability or national origin.

If you think you weren't treated fairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator:

Mail: UnitedHealthcare Civil Rights Grievance P.O. Box 30608

Salt Lake City, UT 84130

Online: UHC_Civil_Rights@uhc.com

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again. If you need help with your complaint, please call the toll-free member phone number listed on your ID card. You can also file a complaint with the U.S. Dept. of Health and Human Services:

Online: https://ocrportal.hhs.gov/ocr/portal/lobby.jsf

Complaint forms are available at

http://www.hhs.gov/ocr/office/file/index.html.

Phone: Toll-free 1-800-368-1019, 1-800-537-7697 (TDD)

Mail: U.S. Dept. of Health and Human Services

200 Independence Avenue SW, Room 509F HHH Building

Washington, DC 20201

We provide free services to help you communicate with us such as letters in other languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free member phone number listed on your health plan ID card.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意:如果您說**中文**(Chinese),我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

XIN LƯU Ý: Nếu quý vị nói tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: 한국어(Korean)를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

PAALALA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является **русский (Russian)**. Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

تنبيه: إذا كنت تتحدث العربية (Arabic)، فإن خدمات المساعدة اللغوية المجانية متاحة لك. الرجاء الاتصال على رقم الهاتف المجاني الموجود على معرّف العضوية.

ATANSYON: Si w pale **Kreyòl ayisyen (Haitian Creole)**, ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

ATTENTION : Si vous parlez **français (French)**, des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

UWAGA: Jeżeli mówisz po **polsku (Polish)**, udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala **português (Portuguese)**, contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação. ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

توجه: اگر زبان شما **فارسی (Farsi)** است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفا با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यद आिप **हदिौ (Hindi)** बोलते है, आपको भाषा सहायता सेबाएं, नाःशुलुक उपलब्धु है। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर काल करें।

DÍÍ BAA'ÁKONÍNÍZIN: **Diné (Navajo)** bizaad bee yániłti'go, saad bee ákayanídayawoyígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shoodí ninaaltsoos niti'izí bee nééhozinígíí bine'déev t'áá jíík'ehgo béésh bee hane'í biká'ígíí bee hodíilnih.

Visit www.uhc.com/legal/required-state-notices to view important state required notices.

Rally Health provides health and well-being information and support as part of your health plan. It does not provide medical advice or other health services, and is not a substitute for your doctor's care. If you have specific health care needs, consult an appropriate health care professional. Participation in the health survey is voluntary. Your responses will be kept confidential in accordance with the law and will only be used to provide health and wellness recommendations or conduct other plan activities.

Real Appeal is a voluntary weight loss program that is offered to eligible participants as part of their benefit plan. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical and/or nutritional advice. Participants should consult an appropriate health care professional to determine what may be right for them. Any items/tools that are provided may be taxable and participants should consult an appropriate tax professional to determine any tax obligations they may have from receiving items/tools under the program.

The information provided under the Maternity Support Program is for general informational purposes only and is not intended to be nor should be construed as medical and/or nutritional advice. Participants should consult an appropriate health care professional to determine what may be right for them. Employers are responsible for ensuring that any wellness programs they offer to their employees comply with applicable state and/or federal law, including, but not limited to, GINA, ADA and HIPAA wellness regulations, which in many circumstances contain maximum incentive threshold limits for all wellness programs combined that are generally limited to 30 percent of the cost of self-only coverage of the lowest-cost plan, as well as obligations for employers to provide certain notices to their employees. Employers should discuss these issues with their own legal counsel

Member phone number services should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through the member phone number services are for informational purposes only and provided as part of your health plan. Wellness nurses, coaches and other representatives cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. Please discuss with your doctor how the information provided is right for you. Your health information is kept confidential in accordance with the law. Member phone number services are not an insurance program and may be discontinued at any time

Access to Virtual Visits and prescription services may not be available in all states or for all groups. Go to **myuhc.com** for more information about availability of Virtual Visits and prescription services. Always refer to your plan documents for your specific coverage. Virtual Visits are not an insurance product, health care provider or a health plan. Virtual Visits are an Internet-based service provided by contracted UnitedHealthcare providers that allow members to select and interact with independent physicians and other health care providers. It is the member's responsibility to select health care professionals. Care decisions are between the consumer and physician. Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times or in all locations. Members have cost share responsibility and all claims are adjudicated according to the terms of the member's benefit plan. Payment for Virtual Visit services does not cover pharmacy charges; members must pay for prescriptions (if any) separately. No controlled substances may be prescribed. Other prescriptions may be available where clinically appropriate and permitted by law, and can be transmitted to the pharmacy of the member's choice.

Preventive care: Certain preventive care services are provided as specified by the Patient Protection and Affordable Care Act (PPACA), based on your age, gender and other health factors, with no cost-sharing. The preventive care services covered are those preventive services specified in PPACA. UnitedHealthcare also covers other routine services, which may require a copayment, coinsurance or deductible. Always refer to your plan documents for your specific coverage.

Evaluation of New Technologies: UnitedHealthcare's Medical Technology Assessment Committee reviews clinical evidence that impacts the determination of whether new technology and health services will be covered. The Medical Technology Assessment Committee is composed of Medical Directors with diverse specialties and subspecialties from throughout UnitedHealthcare and its affiliated companies, guest subject matter experts when required, and staff from various relevant areas within UnitedHealthcare. The Committee meets monthly to review published clinical evidence, information from government regulatory agencies and nationally accepted clinical position statements for new and existing medical technologies and treatments, to assist UnitedHealthcare in making informed coverage decisions.

For informational purposes only. Nurse, coach, and EAP services should not be used for emergency or urgent care situations. In an emergency, call 911 or go to the nearest emergency room. The nurse or coach service can't diagnose problems or recommend specific treatment. The information provided by the nurse, coach or EAP services are not a substitute for your doctor's care.

All UnitedHealthcare members can access a cost estimate online or on the mobile app. None of the cost estimates are intended to be a guarantee of your costs or benefits. Your actual costs may vary. When accessing a cost estimate, please refer to the Website or Mobile application terms of use under Find Care & Costs section.

The UnitedHealth Premium[®] designation program is a resource for informational purposes only. Designations are displayed in UnitedHealthcare online physician directories at myuhc.com[®]. You should always visit myuhc.com for the most current information. **Premium designations are a guide to choosing a physician and may be used as one** of many factors you consider when choosing a physician. If you already have a physician, you may also wish to confer with him or her for advice on selecting other physicians. You should also discuss designations with a physician before choosing him or her. Physician evaluations have a risk of error and should not be the sole basis for selecting a physician. Please visit myuhc.com for detailed program information and methodologies.

Information for individuals residing in the state of Louisiana or who have policies issued in Louisiana: Health care services may be provided to you at a network health care facility by facility-based physicians who are not in your health plan. You may be responsible for payment of all or part of these fees for those out-of-network services, in addition to applicable amounts due for copayments, coinsurance, deductibles, and non-covered services. Specific information about in-network and out-of-network facility-based physicians can be found at myuhc.com or by calling the toll-free member telephone number that appears on your ID card.

The Quit For Life® program provides information regarding tobacco cessation methods and related well-being support. Any health information provided by you is kept confidential in accordance with the law. The Quit For Life program does not provide clinical treatment or medical services and should not be considered a substitute for your doctor's care Participation in this program is voluntary. If you have specific health care needs or questions, consult an appropriate health care professional. This service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room.

The Health Discount Program is administered by HealthAllies®, Inc., a discount medical plan organization. The Health Discount Program is NOT insurance. The discount program provides discounts at certain health care providers for medical services. The discount program does not make payments directly to the providers of medical services. The discount program member is obligated to pay for all health care services but will receive a discount from those health care providers who have contracted with the discount plan organization. HealthAllies, Inc., is located at P.O. Box 10340, Glendale, CA, 91209, 1-800-860-8773, www.unitedhealthallies.com, ohacustomercare@optumhealth.com.

The health discount program is offered to existing members of certain products underwritten or provided by UnitedHealthcare Insurance Company or its affiliates to provide specific discounts and to encourage participation in wellness programs. Health care professional availability for certain services may be dependent on licensure, scope of practice restrictions or other requirements in the state. United Healthcare does not endorse or guarantee health products/services available through the discount program. This program may not be available in all states or for all groups. Components subject to change.

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