



Welcome

Get the most out of your benefits.



Helping make your health care experience better.

Helping people live healthier lives®.

Health plans are not all alike, and neither are health insurance companies. Through our health benefits plans insured or administered by Oxford, we connect you to more of what matters.

In times of change, it helps to have someone you can rely on. Count on our experience and expertise to help you navigate the changing health care landscape.

UnitedHealth Group was the top ranking company in the insurance and managed care sector on Fortune's 2019* "World's Most Admired Companies" list. This is the ninth straight year UnitedHealth Group ranked No. 1 overall in its sector.

What's inside:



Need help?



Visit myuhc.com®.

Find personalized information about your plan.



Call toll-free.

If you don't have computer access, need language assistance or can't find answers, call the toll-free member phone number on your health plan ID card, TTY **711**, 8 a.m. – 6 p.m. ET, Monday – Friday.



Connect with us.

 [Facebook.com/UnitedHealthcare](https://www.facebook.com/UnitedHealthcare)

 [Twitter.com/UHC](https://twitter.com/UHC)

 [Instagram.com/UnitedHealthcare](https://www.instagram.com/UnitedHealthcare)

 [YouTube.com/UnitedHealthcare](https://www.youtube.com/UnitedHealthcare)

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1 Get started.

We value your participation in an Oxford health benefits plan, and want the enclosed information to help you become familiar with your plan and us. For those of you who may have had coverage through an Oxford health benefits plan in the past, some of this information may be new so please be sure to review the guide in its entirety.

**We hope this guide helps make your health care experience easier.
Contact us if you need any help.**



Get to know your health plan ID card.

It has information about you and your coverage. Carry it with you wherever you go. **When you visit your provider or pharmacy, show your new card so they know how to bill for their services.** You can also access a digital version through our mobile app. (See the next page for more information.) Remember to destroy your old health plan ID card.

If you or your provider need assistance verifying coverage, please call the member phone number on your health plan ID card.

The diagram shows a sample health plan ID card with the following information and callouts:

- Member ID and group number:** Member ID: 123456789, Group Number: 1000000. Callout: Use these when registering on myuhc.com or calling with questions. Also, your providers will need this new information from you.
- Your prescription coverage:** Payer ID 06111, OPTUMRx, Rx Bin: 610279, Rx PCN: 9999, RX Grp: UNITEDRX. Callout: Your pharmacist will use this to determine which medications are covered.
- Your network:** Oxford Non-Gated PPO HSA (Freedom Network). Callout: Your network.
- Your copayment amounts (if applicable):** PCP: \$, Spec: \$. Callout: Your cost for a covered service (usually due at your appointment).

Other card details include: UnitedHealthcare Oxford, Health Plan (80840) 999-00000-00, Member: Employee Smith, DC-0501, and Underwritten by Oxford Health Insurance, Inc.

Example only. Your card and costs may vary.



Download the Health4Me® app.

Get on-the-go access.

The **Health4Me** mobile app puts your health plan at your fingertips. Download it for free today, from the Apple App Store® or Google Play®, to use the myuhc.com features listed above. Plus, view your digital health plan ID card, find nearby care and more.

Get started.



Register for myuhc.com®.

Set up your new myuhc.com account today. This is your personalized member website that helps you access and manage your Oxford health benefits plan and health information with 24 hours a day, seven days a week online access to your health plan.* All you need is your new health plan ID card to get started. Use myuhc.com to:

- View and download your Explanation of Benefits (EOB).
- Review your plan benefits and coverage.
- Find network doctors and facilities.
- Set up direct deposit for claim reimbursement.
- Estimate your costs for common procedures and conditions.
- View, sort and pay your cost-share.
- See a doctor with a virtual doctor visit** without leaving your home.
- Check your coverage and claims status once your doctor has submitted your claim.
- View and manage your prescription drug coverage if you have pharmacy benefits through OptumRx®.
- Manage prescriptions by pricing medications, alternative drug cost-comparisons, and ordering and tracking your mail-order prescriptions.
- Review preventive care services like regular checkups and recommended screenings.
- Print a health plan ID card or access it through the **Health4Me® app**.
- Register and stay on track with **Rally®** health and wellness programs.
- Find out about Real Appeal®, a step-by-step, personalized program that offers you tools for losing weight.
- Find the forms you need on the Oxford “Find a Form” page.
- Research medical and administrative policies.
- See required notices.

Set up your account today.

1. Go to myuhc.com.
2. Click on “Register Now.” You’ll need your new health plan ID card and your date of birth.
3. Follow the step-by-step instructions.

Please note:

- Any of your dependents age 13 and older can register for their own login.
- If you have UnitedHealthcare dental and vision benefits, in addition to Oxford medical benefits, then you will only need to register (i.e., create a HealthSafe ID® username and password) once on myuhc.com. Anytime you sign in with your HealthSafe ID username and password, you will be asked which benefits information you’d like to view—either medical or dental and vision. If you already registered on myuhc.com because you had dental and vision benefits in the previous policy year, then you should continue to use your existing HealthSafe ID username and password to access your benefits information.
- If you only have Oxford medical benefits and UnitedHealthcare vision benefits, then you will need to register on myuhc.com (to access your medical benefit information) and on myuhcvision.com (to access your vision benefit information and ID card) separately.

*Services may not be available at all times or in all locations.

** 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 the availability of online doctor visits and prescription services. Always refer to your plan documents for your specific coverage. Online doctor visits are not an insurance product, health care provider or a health plan. Online doctor 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 their physician. Online doctor 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 may have a cost-share responsibility and all claims are adjudicated according to the terms of the member’s benefit plan. Payment for online doctor visits services does not cover pharmacy charges; members must pay for prescriptions (if any) separately.

2 If you need care.



Find a network provider.*

Choose your primary doctor.

Your plan might require you to choose a primary care physician (PCP), sometimes called a primary care provider or primary doctor. Your PCP:

- Knows your history.
- Builds an in-depth knowledge of your health over time.
- Helps guide you on the best path of care.
- Can advise you when to see a specialist and provide referrals.

With some plans, your out-of-pocket costs may be less when you use UnitedHealth Premium® Care Physicians. Check your health plan documents for details.

How do you find a network provider?

Go to myuhc.com and click on “Find Medical and Mental Health Providers and Facilities.” Choose your Oxford network (located on the front of your health plan ID card). If you are outside of the Connecticut, New Jersey or New York area, select “Choice Plus.”* Then, select by name, facility, specialty, location and other options. You can get more information about doctors, your coverage and learn which services may require preauthorization (sometimes referred to as precertification).

To search for a Behavioral Health provider, visit liveandworkwell.com.

Take advantage of network care.

Network doctors, mental health professionals, hospitals, clinics and laboratories charge discounted rates, which typically saves you money (referrals from your PCP may be required). Even if your plan allows you to receive care outside of your network, it could cost you more.

Choose with confidence.

The UnitedHealth Premium® designation program is a resource for informational purposes only. Designations are displayed in 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 doctor and may be used as one of many factors you consider when choosing a doctor. If you already have a doctor, you may also wish to talk with him or her about selecting other doctors.** Doctor 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.

Need hospital care?

If possible, talk to your PCP first to determine which hospital can meet your medical or surgical needs. You or your PCP may be required to get approval from us before you're admitted to the hospital. Do not ignore an emergency. If a situation seems life-threatening, take action. Call 911 or your local emergency number right away.

*National network may not be available for all groups. Certain UnitedHealthcare Choice Plus doctors (e.g., certain Mayo Clinic doctors) are not participating in all Oxford plan networks, but may appear in results from a UnitedHealthcare Choice Plus search. Call the number on your health plan ID card for help finding a network provider.

If you need care.



Schedule your preventive care screenings.

Certain preventive care services are provided as specified by the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you.

These services are based on your age, gender and other health factors. We also cover other routine services that may require a copay, coinsurance or deductible.

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. Always refer to your plan documents for your specific coverage.

How to find your complete plan details.

Sign in to myuhc.com, your health plan member website, to see health plan documents such as your policy, riders, amendments, required notices and welcome materials. You can also request printed copies at no extra charge by calling the toll-free member phone number on your health plan ID card.

If you need care.



Know where to go.

With many options for getting care, how do you choose? In addition to talking with your PCP, this chart may help you understand where to go for what — and how you can save money.

Where to go	When to use	Cost
<p>24-hour Nurse</p> <p>You can speak with a registered nurse 24 hours a day, seven days a week. Call the toll-free phone number on your health plan ID card to get started.</p>	<ul style="list-style-type: none"> • Choosing appropriate medical care. • Finding a doctor or hospital. • Understanding treatment options. • Supporting a healthier lifestyle. • Answering medication questions. 	<p>\$0</p>
<p>Virtual Doctor's Visit*</p> <p>A virtual doctor visit lets you see a doctor using the camera on your smartphone, tablet or computer. You can even get a prescription sent to your local pharmacy, all in about 30 minutes or less.</p>	<ul style="list-style-type: none"> • Allergies • Bladder/urinary tract infections • Bronchitis • Cough/colds • Diarrhea • Fever • Pinkeye • Rashes • Seasonal flu • Sinus problems • Sore throat • Stomachaches 	<p>\$\$</p>
<p>Convenience Care Clinic</p> <p>Visit a convenience care clinic when you can't see your doctor and your health issue isn't urgent. These clinics are often in pharmacies and retail stores.</p>	<ul style="list-style-type: none"> • Common infections (such as strep throat) • Minor skin conditions (such as poison ivy) • Vaccinations • Pregnancy tests • Minor injuries • Earaches 	<p>\$\$+</p>
<p>Urgent Care**</p> <p>Urgent care is an option when you need care quickly but it's not an emergency (and your doctor isn't available). Urgent care centers treat issues that aren't life-threatening.</p>	<ul style="list-style-type: none"> • Sprains • Strains • Small cuts that may need a few stitches • Minor burns • Minor infections • Minor broken bones 	<p>\$\$\$</p>
<p>Emergency Room (ER)***</p> <p>The ER is for life-threatening or very serious conditions that require immediate care. This is also when to call 911 or your local emergency number</p>	<ul style="list-style-type: none"> • Heavy bleeding • Large open wounds • Sudden change in vision • Chest pain • Sudden weakness or trouble talking • Major burns • Spinal injuries • Severe head injury • Breathing difficulty • Major broken bones 	<p>\$\$\$\$</p>

Finding care when you are traveling.

Call the toll-free member phone number on your health plan ID card to find providers near you, and to learn if any restrictions apply.

Still need help deciding where to go?

Call the toll-free member phone number on your health plan ID card (TTY **711**).

* The designated virtual doctor visit provider's reduced rate for a virtual doctor visit is subject to change at any time.

** Urgent care facility names, addresses, phone numbers and network statuses are subject to change without notice.

*** 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.

If you need care.



Prepare for your visit.

What to bring:

- **Your new health plan ID card and one form of ID**, such as a driver's license.
- List of medications you're taking.
- Records from previous visits.
- Questions you want to ask your doctor.



Estimate your cost* for network covered services.

With such a wide variety of services, it's a good idea to check estimated pricing first.

When you search for providers on myuhc.com, you can get cost estimates so you can comparison-shop and know what to expect before you go.

* 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.

If you need care.



Using your pharmacy benefits.

Managing your benefits.

Check your health plan ID card to determine if you have pharmacy benefits through OptumRx.

1. Sign in to myuhc.com and click on “Pharmacies & Prescriptions” at the top of the page.
2. To manage your medications on the go, download the **Health4Me** app from the Apple App Store® or Google Play®.

Filling your prescriptions.

Delivered to your door.

Join millions of people who are able to better manage the medications they take regularly by using OptumRx home delivery. Not only is home delivery safe and reliable, it also offers cost-savings; convenience; 24 hours a day, seven days a week access to a pharmacist; and text and email reminders to help you remember to take and order your medications. To order home delivery of up to a three-month supply of the medication you take regularly:

- Use the **Health4Me** app.
- Sign in to myuhc.com.
- Call the toll-free member phone number on your health plan ID card.

There is no charge for standard shipping to U.S. addresses.

Pick up at the pharmacy.

- Show your new health plan ID card at any network retail pharmacy.
- To see a list of network pharmacies, use the **Health4Me** app, visit myuhc.com or call the toll-free phone number on your ID card.

Go mobile.

With the **Health4Me** app on your smartphone or tablet, you can refill prescriptions, track your prescription history, compare medication pricing and options, search your Prescription Drug List (PDL) and more.*

Set up medication reminders.

Use myuhc.com to set up automatic email or text message** reminders for when to take your medication and order refills.

*Some sections are only available if you're logged in to your account. Not all sections are available to all members. Access to tools and features is determined by your plan.

**OptumRx provides this service at no additional cost. Standard message and data rates charged by your carrier may apply.

If you need care.



Using your pharmacy benefits (continued).

Lowering your pharmacy costs.

Here are some tips.

Know your plan.

Your plan may require one or more of the following before you can fill your prescription:

- **Preauthorization (sometimes referred to as precertification)** – approval to get a medication.
- **Step therapy (also known as First Start)** – trying one medication before another.
- **Quantity limits** – getting a certain amount of each prescription.

Check your Prescription Drug List (PDL).

Your PDL is a list of covered medications. The list is broken into sections called tiers. Choosing medications in lower tiers may help you save money. To find your PDL, sign in to myuhc.com and click on “Pharmacies & Prescriptions” at the top of the page. The PDL can change, so be sure to check it often.

Talk to your provider.

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

Consider generic drugs.

Generic medications usually have a lower copay than brand-name medications. Ask your doctor if there’s a generic option for you.

Compare prices.

Comparing the prices of brand-name and generic medications is easy. Just sign in to myuhc.com and click on “Pharmacies & Prescriptions” at the top of the page. Then click on “Drug Pricing” on the left side of the page.

Transfer/reconfirm your current medications.

To help make sure you continue to get the medications you need:

1. Enter them into the drug pricing tool on myuhc.com to check your coverage.
2. Review information on how to continue to get your current medications or how to switch to a lower-cost alternative.

Questions? We can help.

- Sign in to myuhc.com.
- Use the **Health4Me** app.
- Call the toll-free member phone number on your new health plan ID card.

3 After you receive care.



Know how claims are processed.

When you see a network provider:

Claims for network services are submitted by your provider. Your provider may ask you to pay some or all of your cost-share. You are only responsible for your cost-share as determined by your plan benefit. We will process the claim and determine what is covered and the amount you owe.

When you see an out-of-network provider:

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

- If the doctor doesn't submit your claim, you'll be responsible for submitting it.
- Find medical claim forms and instructions on myuhc.com.

You may be responsible for the entire cost of the services rendered if you do not have out-of-network benefits. Please refer to your plan documents to determine your benefits and out-of-pocket costs.

Track your claims online.

Follow your claims from start to finish, and track payments you've made to network health care providers in one place. You can also pay your bills online with the Make Payment feature at myuhc.com. Select "Manage my Claims," and for each claim you can choose to "Make Payment."

Problem with a claim?

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

4 Programs to help you.



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 Age—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.

Oxford® Sweat Equity.

Get reimbursed up to \$200 in a six-month period for your fitness expenses when you meet the required goals and submit a completed reimbursement form. To get started, choose a gym or sign up for fitness classes.*

Qualifying fitness facilities and classes include:

- Aerobics
- Boot camps
- Boxing/Kickboxing
- CrossFit®
- Indoor rock climbing
- Martial arts
- Personal training
- And many more

* Reimbursement amounts vary depending upon your plan. Refer to your health plan documents or check with your benefits administrator to determine how much you may be reimbursed. You may submit a request for reimbursement under the program once every six months. Consult with an appropriate tax professional to determine if you have any tax obligations from receiving reimbursement under this program.

Programs to help you.



Extra support.

Disease Management

There's additional support for those who need help managing a chronic disease, including cancer. Experienced nurses will contact you with information to help you make more informed decisions. To access your Cancer Support benefit, call **1-866-936-6002**.

To see information about programs offered by your health plan to help you manage your health, sign in to myuhc.com, click on the "Coverage & Benefits" tab, and then click on "Health Resources."

Health Programs and Resources.

If you have a special condition, you can get help finding a doctor and medical center as well as help with understanding your illness and scheduling appointments. To see covered conditions, sign in to myuhc.com.

Emotional Health.

Your behavioral health benefit provides confidential support. Get help 24 hours a day, seven days a week 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 health plan ID card.

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.

5 Rights and responsibilities.



You have the right to:

- Be treated with respect and dignity by UnitedHealthcare, including Oxford, 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 we protect 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.
- Receive 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 health care facilities.
- Participate in decisions about your care with your doctor and other health care professionals.
- Receive and make recommendations regarding the organization's rights and responsibilities policies.
- Receive information about UnitedHealthcare, Oxford, 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 health plan 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 when you have a question about your eligibility, benefits, claims and more.
- Sign in to myuhc.com or call before receiving services to verify that your doctor or health care professional participates in your plan's 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.

You have the right to get help and information in your language at no cost. To request an interpreter, call the toll-free member phone number listed on your health plan ID card, press 0. TTY 711.

Tiene derecho a recibir ayuda e información en su idioma sin costo. Para solicitar un intérprete, llame al número de teléfono gratuito para miembros que se encuentra en su tarjeta de identificación del plan de salud y presione 0. TTY 711

您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員，請撥打您健保計劃會員卡上的免付費會員電話號碼，再按0。聽力語言殘障服務專線 711

Quý vị có quyền được giúp đỡ và cấp thông tin bằng ngôn ngữ của quý vị miễn phí. Để yêu cầu được thông dịch viên giúp đỡ, vui lòng gọi số điện thoại miễn phí dành cho hội viên được nêu trên thẻ ID chương trình bảo hiểm y tế của quý vị, bấm số 0. TTY 711

귀하는 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 통역사를 요청하기 위해서는 귀하의 플랜 ID카드에 기재된 무료 회원 전화번호로 전화하여 0번을 누르십시오. TTY 711

May karapatan kang makatanggap ng tulong at impormasyon sa iyong wika nang walang bayad. Upang humiling ng tagasalin, tawagan ang toll-free na numero ng telepono na nakalagay sa iyong ID card ng planong pangkalusugan, pindutin ang 0. TTY 711

Вы имеете право на бесплатное получение помощи и информации на вашем языке. Чтобы подать запрос переводчика позвоните по бесплатному номеру телефона, указанному на обратной стороне вашей идентификационной карты и нажмите 0. Линия TTY 711

لك الحق في الحصول على المساعدة والمعلومات بلغتك دون تحمل أي تكلفة. لطلب مترجم فوري، اتصل برقم الهاتف المجاني الخاص بالأعضاء المدرج ببطاقة مُعرّف العضوية الخاصة بخطتك الصحية، واضغط على 0. الهاتف النصي 711 (TTY)

Ou gen dwa pou jwenn èd ak enfòmasyon nan lang natifnatal ou gratis. Pou mande yon entèprèt, rele nimewo gratis manm lan ki endike sou kat ID plan sante ou, peze 0. TTY 711

Vous avez le droit d'obtenir gratuitement de l'aide et des renseignements dans votre langue. Pour demander à parler à un interprète, appelez le numéro de téléphone sans frais figurant sur votre carte d'affilié du régime de soins de santé et appuyez sur la touche 0. ATS 711.

Você tem o direito de obter ajuda e informação em seu idioma e sem custos. Para solicitar um intérprete, ligue para o número de telefone gratuito que consta no cartão de ID do seu plano de saúde, pressione 0. TTY 711

Masz prawo do uzyskania bezpłatnej informacji i pomocy w własnym języku. Po usługi tłumacza zadzwoń pod bezpłatny numer umieszczony na karcie identyfikacyjnej planu medycznego i wcisnij 0. TTY 711

Sie haben das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um einen Dolmetscher anzufordern, rufen Sie die gebührenfreie Nummer auf Ihrer Krankenversicherungskarte an und drücken Sie die 0. TTY 711

ご希望の言語でサポートを受けたり、情報を入手したりすることができます。料金はかかりません。通訳をご希望の場合は、医療プランのIDカードに記載されているメンバー用のフリーダイヤルまでお電話の上、0を押してください。TTY専用番号は711です。

شما حق دارید که کمک و اطلاعات به زبان خود را به طور رایگان دریافت نمایید. برای درخواست مترجم شفاهی با شماره تلفن رایگان قید شده در کارت شناسایی برنامه بهداشتی خود تماس حاصل نموده و ۰ را فشار دهید. TTY 711

Hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per richiedere un interprete, chiama il numero telefonico verde indicato sulla tua tessera identificativa del piano sanitario e premi lo 0. Dispositivi per non udenti/TTY: 711

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

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. 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.

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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 the availability of online doctor visits and prescription services. Always refer to your plan documents for your specific coverage. Online doctor visits are not an insurance product, health care provider or a health plan. Online doctor 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 their physician. Online doctor 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 may have a cost-share responsibility and all claims are adjudicated according to the terms of the member's benefit plan. Payment for online doctor visits services does not cover pharmacy charges; members must pay for prescriptions (if any) separately.

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 and Oxford also cover other routine services, which may require a copayment, coinsurance or deductible. Always refer to your plan documents for your specific coverage.

Disease Management programs and services may vary on a location-by-location basis and are subject to change with written notice. UnitedHealthcare and Oxford do not guarantee availability of programs in all service areas and provider participation may vary. Certain items may be excluded from coverage and other requirements or restrictions may apply. If you select a new provider or are assigned to a provider who does not participate in the Disease Management program, your participation in the program will be terminated. Self-Funded or Self-Insured Plans (ASO) covered persons may have an additional premium cost. Please check with your employer.

Some content and materials are for information purposes only, are not intended to be used for diagnosing problems and/or recommending treatment options, and are not a substitute for your doctor's care. Lists of potential treatment options and/or symptoms may not be all-inclusive.

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, including Oxford, in making informed coverage decisions.

The medical centers and programs in UnitedHealthcare's and Oxford's networks and within OptumHealthSM Care Solutions are independent contractors who render care and treatment to our members. UnitedHealthcare and Oxford do not provide health services or practice medicine. The medical centers and programs are solely responsible for medical judgments and related treatments. Neither UnitedHealthcare or Oxford are liable for any act or omission, including negligence, committed by any independent contracted health care professional, medical center or program.

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. On topical articles (giving tips and advice to members), the information and therapeutic approaches in this article are provided for informational and/or educational purposes only. They are not meant to be used in place of professional clinical consultations for individual health needs. Certain treatments may not be covered in some benefit plans. Check your health plan regarding your coverage of services.

Rally 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.

This program 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 program is for informational purposes only and provided as part of your health plan. The wellness team cannot diagnose problems or recommend treatment and is not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. The program is not an insurance program and may be discontinued at any time.

The Real Appeal program is provided to eligible members at no additional cost to you as part of your benefit plan. Real Appeal is a voluntary weight loss program that is offered to eligible participants over age 18 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 UnitedHealth Premium[®] designation program is a resource for informational purposes only. Designations are displayed in 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.

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