



Welcome

There are so many things to look forward to
with your health plan – check it out

United
Healthcare

We're glad you're here.



And we're glad you're using this guide – it's here to make your health care experience easier. Inside, you'll find tips and tools to help you understand your benefits and care options, save money, get the most out of your health plan and more. Let's get started.

If you're new to UnitedHealthcare and coming from a different health plan, we're here to help make your transition smooth. Visit [uhc.com/transferringcare](https://www.uhc.com/transferringcare) for first day support and answers to questions.



Call toll-free

If you're unable to access a computer, need language assistance or still have questions after reading this, please call the toll-free member phone number on your health plan ID card.

It's easier to connect to your plan

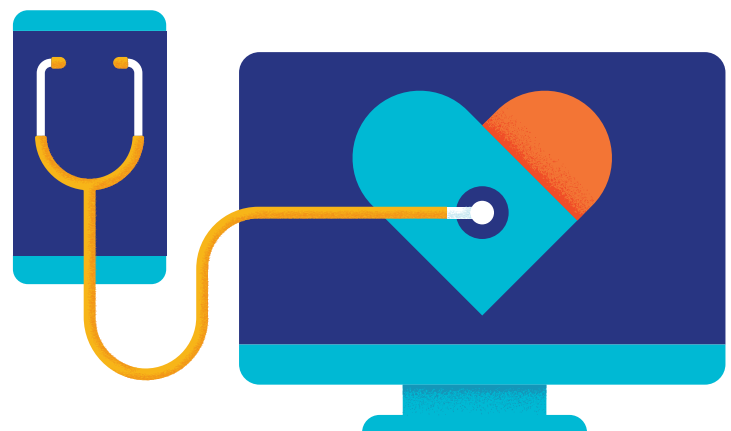
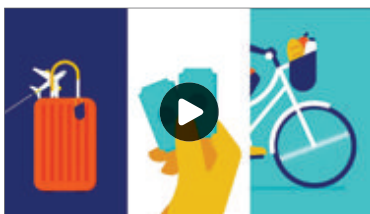
Your benefits include personalized digital tools to help you check in on your plan whenever you want, which may help make it easier to stay on top of your benefit details.



Your personalized digital tools—the UnitedHealthcare® app and **myuhc.com**®—give you quick access to resources designed to help you:

- View benefit info, claim details and account balances
- Search network providers and facilities for the type of care you may need
- Quickly compare cost estimates before you get care, which may help you save money
- Learn about covered preventive care
- Access your health plan ID card and add your plan details to your smartphone's digital wallet

Once your plan begins, you can download the UnitedHealthcare app to connect with your plan while you're on the go or sign in from home with **myuhc.com**.



Get on-the-go plan info

See how you can access your plan with **myuhc.com** and the UnitedHealthcare app.

Watch video: Digital tools to manage your plan (1:28)

Simple ways to help you save

Here are a few good-to-know things you can do to help you get more out of your health plan.



Stay in the network

The doctors and facilities in the network may have agreed to provide services at a discount – so visiting an out-of-network provider could end up costing you more for care or may not be covered at all. Sign in to myuhc.com > **Find Care & Costs** to locate:

- Labs
- Mental health professionals
- Network providers
- Hospitals



Shop around

With such a wide variety of services – from minor procedures to major surgeries – it’s a good idea to check approximate pricing first. Visit myuhc.com > **Find Care & Costs** to estimate your costs.

With a PCP, there's a doctor in your corner

A PCP is a primary care provider, sometimes called a primary care physician. They are the doctor who can help connect you to the care you need – and may help you avoid cost surprises. A PCP can be a family practitioner, internist, pediatrician or general medicine physician.* Although your plan may not require you and each covered family member to select a network PCP,** it can be a good idea to have one.

Your PCP:



Generally knows your health history and health goals



Provides routine care, which may help identify potential health issues earlier



Advises you when to see a specialist and provides electronic referrals

*Laws in some states allow you to choose a specialist, like an OB/GYN, as your PCP.
**Depending on your health plan, selection of a PCP may be required.



Keep up on preventive care

Preventive care – such as routine wellness exams and certain recommended screenings and immunizations – is covered by most of our plans when you see network providers. A preventive care visit may be a good time to help establish your relationship and create a connection for future medical services. Learn more at uhc.com/health-and-wellness/preventive-care.



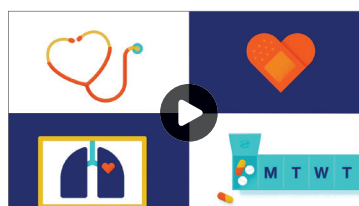
Choose a doctor

UnitedHealth Premium® helps you make more informed choices for your medical care, evaluating physicians in various specialties to identify those who meet certain quality care criteria, which includes safe, timely, effective and efficient care. Go to myuhc.com or the UnitedHealthcare app, click **Find a Provider** and look for the blue hearts next to the provider's name.

Meet your health guide

Learn more about the benefits of having a PCP – and how to find one.

Watch video: Value of a primary care provider (1:46)



Find a network provider

Sign in to myuhc.com > **Find Care & Costs** to find a network PCP, clinic, hospital or lab based on location, specialty, availability, hours of operation and more. You can even see patient ratings and estimate the cost of care before you choose a provider. If you would like more information about a provider's qualifications, call the member phone number on your ID card.

Here’s an example of how a typical health plan works

Let’s take a look at an example of how a typical plan works when you receive care from a network provider. Your plan may be different than this example, so to find your specific details go to [myuhc.com > Coverage & Benefits](#).



At the start of your plan year, you pay 100% of your covered health services until you meet your **deductible**, which is the amount you pay before your plan starts sharing costs.

Now, your health plan starts to share a percentage of the costs with you – this is your **coinsurance**.*

Here, your plan’s got you covered at 100%. Your **out-of-pocket limit** is the most you could pay for covered services in a plan year – copays and coinsurance count toward this.

Along the way, you may also be required to pay a fixed amount – or **copay** – each time you see a provider.

*Your deductible and coinsurance may vary by plan or service. This example is for illustrative purposes only. Please refer to your official plan documents for coverage details.

Here’s what to do if you need:



Hospital care

Talk to your PCP first to determine which hospital in your network can meet your medical or surgical needs. You or the admitting physician may be required to notify us before you’re admitted.



Prior authorization

Your plan may also require prior authorization, sometimes called preauthorization, before you receive certain services. Call the member phone number on your ID card or sign in at [myuhc.com > Coverage & Benefits](#) to check if prior authorization is needed.



Referrals

If your ID card says “Referrals Required,” have your PCP send us an electronic referral before you make an appointment with a specialist or other network provider. Without it, your care may not be covered and you may end up paying more. To learn what services require referrals, or to confirm that a referral has been made, sign in at [myuhc.com > Coverage & Benefits](#).

See a plan in action

Take a look at how copays, deductibles and more work together throughout your plan year.

Watch video: How a health plan works (1:30)



Compare options, help keep costs down

Getting care at the place that may best fit your condition or situation may save you up to \$1,500 compared to an emergency room (ER) visit.*

Care options to consider	START HERE				
					
	Primary care provider (PCP) The provider who may know you best	24/7 Virtual Visits A care provider over the phone or video	Convenience care Nurse practitioners and physician assistants at retail pharmacy clinics	Urgent care Physicians and care teams at walk-in clinics	Emergency room Physicians and care teams at hospital emergency departments
Average cost*	In-person: \$160 Virtual: \$99 or less**	\$54***	\$80	\$165	\$1,700
Allergies	✓	✓			
Bladder infection/UTI	✓	✓		✓	
Broken bone				✓	✓
Bronchitis	✓	✓		✓	
Chest pain					✓
Cough	✓	✓	✓		
COVID-19 symptoms	✓	✓		✓	
Earache	✓	✓	✓		
Fever	✓	✓			
Flu/common cold	✓	✓	✓		
Migraine/headache	✓	✓			
Muscle ache/sprain	✓			✓	
Pinkeye	✓	✓			
Shortness of breath					✓
Sinus infection	✓	✓			
Skin rash	✓	✓	✓		
Sore throat	✓	✓			
Stomach pain (nausea, vomiting, diarrhea)	✓	✓		✓	
Yeast infection	✓	✓			

✓ Indicates the care option to consider for the common conditions listed above.

To learn more, visit uhc.com/quickcare.

*2023: Median 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 \$1,500 difference between the median emergency room visit, \$1,700 and the median urgent care visit \$165.) 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. You should consult with an appropriate health care professional to determine what may be right for you. In an emergency, call 911 or go to the nearest emergency room.

**Virtual primary care are services available with a provider via video, chat, email, or audio-only where permitted under state law. Virtual primary care services are only available if the provider is licensed in the state that the member is located at the time of the appointment. Virtual primary care is 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, or for all members. Certain prescriptions may not be available, and other restrictions may apply.

***The Designated Virtual Visit Provider's reduced rate for a 24/7 Virtual Visit is subject to change and may apply after the deductible according to plan design. Data rates may apply. Individuals should check their benefit documents for specific coverage details.



Here's the fine print

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

Complaint forms are available at
www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/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 LUU Y: 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 русским (**Russian**). Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

تويوغللا قذعاسملا تامدخ ناف، (Arabic) ةيبرعلا شذحتت تنك اذ: ةيبن قاطب يل ع جردملا ين اجملا فتا ملا مقرب لاصتالا يجرى. لكل ةحاتم ةين اجملا لئب فصا خلا فيرعتلا

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. لطفاً با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप हदी (**Hindi**) बोलते हैं, आपको भाषा सहायता सेवाएं, नःशुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

DÍÍ BAA'ÁKONÍNÍZIN: Diné (**Navajo**) bizaad bee yániłti'go, saad bee áka'anída'awo'ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shqódi ninaaltsoos nitl'izi bee nééhozinígíí bine'déé' t'áá jíík'ehgo béésh bee hane'i bika'ígíí bee hodiilnih.

Visit www.uhc.com/legal/required-state-notices 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. 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.

Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. Other routine services may be covered under your plan, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

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.

The information in this guide is a general description of your coverage. It is not a contract and does not replace the official benefit coverage documents which may include a Summary of Benefits and Coverage and Certificate of Coverage/Summary Plan Description. If descriptions, percentages, and dollar amounts in this guide differ from what is in the official benefit coverage documents, the official benefits coverage documents prevail.

The UnitedHealthcare® app is available for download for iPhone® or Android®. iPhone is a registered trademark of Apple, Inc. Android is a registered trademark of Google LLC.

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

UnitedHealth Premium® 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.

24/7 Virtual Visits is a service available with a Designated Virtual Network Provider via video, or audio-only where permitted under state law. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 24/7 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, or for all members. Check your benefit plan to determine if these services are available.

Please note that services may be available in person or via telehealth from your primary care provider, treating specialist, or from another contracting health professional, clinic, or health facility. In addition, if your health plan includes out-of-network benefits, these services may be available either via telehealth or on an in-person basis at the out-of-network cost-share, which is generally higher than the in-network cost share, however, the balance billing protections that generally apply if you seek coverage from an in-network provider will typically not apply. Please check your health plan for specific coverage details.

Take care, take note

[illegible]



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ASO Standard Welcome Brochure

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