



Welcome

We're glad you're here.



Whether you're a new or returning member, we're committed to giving you the best experience possible.

There are thousands of ways into the complex health care system. We're here to help make it simpler. This guide is designed to give you access to the resources and tools to connect you with the care that is right for you.



New members

Welcome to UnitedHealthcare! We look forward to serving you.



Renewing members

Welcome back! Please take a close look at this year's benefit coverage documents to see what's changed.



For information about benefits covered under your health plan:

- Log in to your member website, myuhc.com[®]
- Check your plan's Certificate of Coverage or Benefit Summary.



Have a health care question? We're here to help.

To contact us, call the toll-free member phone number on your health plan ID card, TTY 711, or email Advocate4Me@uhc.com. You can also call 24/7 to speak with a nurse.

If you need help with language assistance, we have free language interpreter services available 8 a.m. to 8 p.m. Eastern time, Monday through Friday, at the member phone number on your ID card, TTY 711.

Let's get started



Get started



If you need care



After you receive care



Programs to help you



Rights and responsibilities

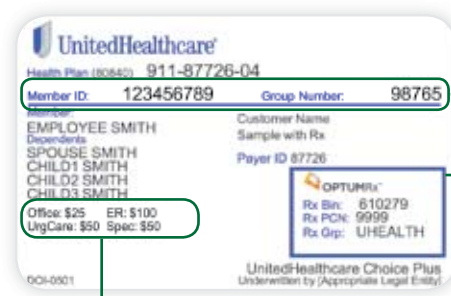
1 Get started

- Understand your ID card
- Use your website and mobile app
- Find a doctor
- Get the latest health news and more

Understand your ID card

Keep your ID card with you at all times.

Your ID card has key information about you and your coverage. When you visit your doctor, hospital or other health care provider, remember to show them the card so they know how to bill for the services they're providing you.



Member ID and Group Number

These numbers are useful when registering on myuhc.com or contacting us.

Your prescription coverage

Show your pharmacist when ordering or renewing prescriptions.

Your co-payment amounts (if applicable)

You and your doctor can easily see your co-payment amounts.



Need support and help? We're on it.

We know that managing your health plan benefits and your health isn't always easy. That's why we have a dedicated team to help make things simpler for you.

We can help you:

- Understand your benefits, coverage and treatment options
- Find a new doctor and help schedule an appointment
- Estimate treatment costs ahead of time
- Learn how to better manage your health

CONTACT US



Call the toll-free member number listed on your ID card



Email Advocate4Me@uhc.com

To help ensure your privacy, please do not include confidential information in your first email. We will respond to your question using a secure email system.

Register for myuhc.com and download the UnitedHealthcare Health4Me® mobile app

Use **myuhc.com** to find tools and information to help you manage your health and benefits.

- Find a doctor or facility that is part of your plan's network
- Find a network pharmacy and covered prescriptions
- Track claims and expenses for your family
- Plan ahead for tests and treatments
- Stay on top of your medical history
- Get tips to help improve your health



Registration is quick and simple.

- 1 Go to **myuhc.com**.
- 2 Click on **Register Now**. You'll need your ID card, or you can use your Social Security number and date of birth to register.
- 3 Follow the step-by-step instructions.

Download our Health4Me mobile app to your Apple® or Android® smartphone or tablet, and you can:

- Find nearby doctors
- Manage prescriptions and find pharmacies
- View, sort and pay claims
- Estimate costs of common procedures and conditions
- See your account balance
- Pull up an image of your ID card
- Track your physical activity, including wirelessly connecting to a Fitbit® device



Health4Me

Online communities

We offer online communities to address specific health risks and lifestyle concerns. These tools and resources address cultural differences and languages. We want you to get the most from your benefits and the health care system to help you live a healthier life.

Source4Women.com

Source4Women® offers the following information and support:

- Monthly seminars on a variety of health topics
- Tips, guidelines, checklists, and infographics to help maintain a healthy lifestyle
- Expert blogs on nutrition, emotional well-being and other important health issues
- Health topics that may be important to the whole family
- Delicious, healthy recipes

Connect with us on:

Twitter® at **@Source4Women**

Facebook® at **Source4WomenUHC**

Pinterest® and Instagram®

uhcasian.com

At uhcasian.com, you can find videos, a wellness information booklet, a searchable health care handbook and community news to help you learn about your benefits, manage your health and connect with your community.



uhclatino.com

At uhclatino.com, you can learn more about health issues that are important to you, with bilingual (English/Spanish) information including articles and animated fotonovelas that you can watch on your mobile device. There are hundreds of pages of bilingual health and fitness information and healthy, tasty recipes. Listen to informative audio podcasts while you are on the go. Use our new bilingual glossary to find simple and clear definitions of health and insurance terms, and the translation of each term in English or Spanish.

If you do not have access to a computer, call the toll-free member phone number on your ID card.



Health and benefits news — made for your busy life

When you register on myuhc.com, you'll receive two award-winning, monthly newsletters:

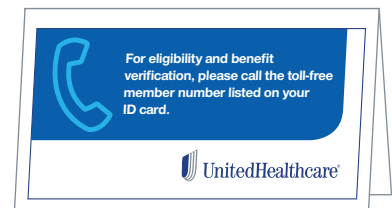
- *Healthy Mind Healthy Body*® provides health and wellness articles to help you and your family stay healthy. If a member of your family or a friend wants to receive this publication, they can go to uhc.com/myhealthnews.
- Benefit Awareness News sends you articles to help you make the most of all that your health benefits offer.

2 If you need care

- Prepare for your doctor visit
- Schedule preventive care screenings
- Know where you can get care
- Estimate costs and save money

Prepare for your doctor visit

- **Bring your ID Card** and a form of picture ID, such as a driver's license. Show them when you check in at the doctor's office.
- **Bring a list** of any medications you're taking.
- **Take any records** from previous visits with you.



Always be prepared for your doctor visits

Tear out the wallet card on the back cover of this guide – it contains simple reminders of what to consider before and during a visit.

When you need lab tests

If your doctor orders laboratory (lab) tests, ask them to make sure that a **network lab** is used. Just like using a network doctor, using a network lab will likely save you money.

Finding care when you are traveling

Call the member phone number on your ID card to learn if any restrictions apply, and to find network providers near you.



Schedule your preventive care screenings.

Most UnitedHealthcare plans pay 100% of the cost for preventive care when you see a network provider. Check your official benefit plan coverage documents for details.

Visit uhcpreventivecare.com to find age- and gender-appropriate preventive care recommendations that may be right for you.

Find a network provider

You can often save money when you see a network provider

Our network health care providers, including doctors, specialists and hospitals, charge discounted rates, which typically saves you money. If your plan allows you to receive care outside of your health plan network, seeking care from an out-of-network provider could cost you more money.

For hospital care, talk with your doctor first to determine which hospital can meet your medical or surgical needs. You may be required to notify UnitedHealthcare before your hospital admission.

Be sure to log in to myuhc.com or call us to understand how to find and obtain information about a doctor, understand your coverage details and which services may require approval.

Choose with confidence

The **UnitedHealth Premium**[®] designation program can help you find the care you want. The program evaluates doctors in 27 different medical specialties, using national standards for quality and local benchmarks for cost-efficiency. You can find a UnitedHealth Premium doctor at myuhc.com.

Estimate your health care costs before getting care

On myuhc.com, you can estimate and compare your health care costs for an upcoming treatment or procedure. Your estimate shows out-of-pocket expenses based on your plan and current benefit status.



Access to care online at any time with a virtual visit

When you or a family member doesn't feel well, the last thing you want to do is leave the comfort of home to sit in a waiting room. Now, for certain covered services, you don't have to! A virtual visit lets you see and talk to a doctor from your computer or mobile device without an appointment. And it's part of your health plan benefits.

Access virtual visits

- Log in to myuhc.com to learn more
- Choose from provider sites where you can register and receive care

Know where you can get care

Consider the information in the chart below when you need care. Still not sure where to go? Call us and we can provide information to help you make an informed decision.



	24-Hour Nurse	Doctor's Office	Virtual Visits
When to Go	If you're unsure about the care you need, you can speak with a nurse 24 hours a day.	Your doctor's office is usually the best choice for preventive exams or treatment for a current health issue. Your doctor typically knows you best and has your medical records. Your doctor can also help you manage your medications and refer you to a specialist if you need more care.	May be used for non-emergency health conditions when you want to see and talk to a doctor from your computer or mobile device without an appointment. Great for use when your regular doctor is not available, when you become ill while traveling or when your child is sick.
Type of Care*	<p>Call the number on your ID card. A nurse may be able to:</p> <ul style="list-style-type: none"> • Help manage an illness or injury • Help recognize urgent and emergency symptoms • Locate a doctor or hospital in your area • Help recognize medication interactions 	<ul style="list-style-type: none"> • Routine checkups • Immunizations • Preventive services • General health management 	<ul style="list-style-type: none"> • Allergies • Bladder infection • Bronchitis • Cough/cold • Diarrhea • Fever • Pink eye • Rash • Seasonal flu • Sinus problems • Sore throat • Stomach ache • UTI
Cost and Wait Times**	<ul style="list-style-type: none"> • No additional cost to you • Call 24/7 	<ul style="list-style-type: none"> • Often requires a co-payment and/or co-insurance • Normally requires an appointment • Usually little wait time with scheduled appointment 	<ul style="list-style-type: none"> • Often requires a co-payment and/or co-insurance • Open 24/7 but services are only available in the United States and may not be available in all states

*This is a sample list of services and may not be all-inclusive.

**Cost and time information represent averages only and are not tied to a specific condition, level of coverage or treatment. Your out-of-pocket costs will vary based on plan design.

Check your benefit documents for specific coverage details.



Convenience Care Clinic

You can't get to your doctor's office, but your condition is not urgent or an emergency. Convenience care clinics, often located in malls or retail stores, offer services for minor health conditions. Care is normally provided by nurse practitioners or physician assistants.

- Common infections (e.g., strep throat)
- Minor skin conditions (e.g., poison ivy)
- Flu shots
- Pregnancy tests
- Minor cuts
- Earaches

- Often requires a co-payment and/or co-insurance similar to office visit
- Walk-in patients are welcome with no appointments necessary, but wait times can vary

Urgent Care Center

You may need care quickly, but it is not an emergency, and your regular doctor may not be available. Urgent care centers offer treatment for non-life-threatening injuries or illnesses and are staffed by qualified doctors.

- Sprains
- Strains
- Minor broken bones (e.g., finger)
- Minor infections
- Minor burns

- Often requires a co-payment and/or co-insurance that may be higher than an office visit
- Walk-in patients are welcome, but waiting periods may be longer as patients with more urgent needs will be treated first

Emergency Room (ER)

You need immediate treatment of a very serious or critical condition. The ER is for the treatment of life-threatening or very serious conditions that require immediate medical attention. Do not ignore an emergency.

If a situation seems life-threatening, take action. Call 911 or your local emergency number right away.

- Heavy bleeding
- Large open wounds
- Sudden change in vision
- Chest pain
- Sudden weakness or trouble talking
- Major burns
- Spinal injuries
- Severe head injury
- Difficulty breathing
- Major broken bones

- Often requires a much higher co-payment and/or co-insurance
- Open 24/7, but waiting periods may be longer because patients with life-threatening emergencies will be treated first
- If you are in a true medical emergency, and you go to a network or out-of-network emergency room for care, the same co-payment and co-insurance levels will apply. However, you may incur higher out-of-pocket costs if you go to an out-of-network provider.

Prescription Benefits

Easily fill your medications.

You'll be covered through UnitedHealthcare for a wide variety of medications. Best of all, your health plan is designed to help make it easy for you to get your prescriptions filled and help you save money.

- Access thousands of retail pharmacies
- Save when you use home delivery or a network pharmacy
- Get 24/7 phone support, refill reminders and more.

Take advantage of home delivery.

With Mail Service Member SelectSM from OptumRx[®], you can get your long-term medications delivered to your door at no charge, often for less than they cost at retail. You can cancel home delivery service at any time and fill prescriptions at a retail pharmacy for your standard co-pay or cost. However, canceling this service may increase your medication costs.

UnitedHealthcare and OptumRx are working together to help make your health plan work better. OptumRx strives to make prescription medications more accessible and affordable and focuses on improving your overall health outcomes.



How we cover prescriptions.

The UnitedHealthcare Prescription Drug List (PDL) is the list of prescriptions that are covered by the plan. Choosing medications in the lower tiers may help save you money.

Search our pharmacy network at myuhc.com.



Get more at myuhc.com.

- Refill your home delivery prescriptions.
- Transfer your retail prescriptions to home delivery.
- Find network pharmacies.
- Estimate and compare costs.

3 After you receive care

- Learn how claims are paid
- Understand health statements and more

How claims are paid

When you see a network doctor:

Network doctors will submit your claims for you. The doctor's office may ask you to pay some or all of the bill before you leave. Some network doctors can instantly submit your claim online. UnitedHealthcare will then process the claim to:

- Make sure the claim is an eligible expense under your plan.
- Determine whether the claim was for eligible preventive care, so it can be paid 100 percent.
- Make sure the service is charged at a discounted rate when you see a network doctor.

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. Also, if the doctor will not submit your claim to UnitedHealthcare directly, you will need to submit a medical claim form for those services. Remember, out-of-network doctors have no contract with UnitedHealthcare and therefore discounted rates will not apply. Using them could cost you more.



Track your claims online

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



Medical claim form

Our network doctors normally take care of claim forms for you. If you receive care from a doctor who is not in our network and your plan allows out-of-network care, you may need to fill out a medical claim form. Forms and instructions can be found on myuhc.com.



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 contact us by calling the toll-free member number on your ID card, TTY 711.

Understand 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.

Our health statements give you a record of your claims that helps provide a more complete view of your health care expenses.

If you receive your health statement online, we'll send you an email whenever a new statement is posted. You can view your information and activity securely online at myuhc.com.

Member ID
012345678

Statement Period
04/17/15 - 06/12/15

Message center
Dry Winter Skin
Winter weather sends many people running inside for warmer temperatures. While warm air may feel good, it may also cause dry skin, chapped lips and nose bleeds. To avoid such problems, follow these tips: drink lots of fluids, shower with warm water instead of hot, moisturize often and use lip balm and nasal spray. A humidifier can also help by adding moisture to the air in your home. If you've tried these tips and symptoms continue or worsen, contact your doctor.

Claims processed between 04/17/15 to 06/12/15	Pay your provider(s) when they bill you*	Applied To Deductible
06/08/15 services for BRADLEY provided by TEST PROVIDER Claim Number: 0123456789012 Provider Billed: \$303.00 Payments and Adjustments: -\$136.62	\$166.38	\$166.38
Total:	\$166.38	\$166.38

What you owe
The amount you need to pay your health care provider if you did not pay at the time you received services, and what portion is applied to your deductible



Questions about a health statement??

You can contact us by calling the toll-free member number on your ID card, TTY 711. Information about the appeals and grievances process can be found in the Claims & Accounts tab on myuhc.com.

4 Programs to help you

- Health and wellness
- Special support

Health and wellness

Sign up for RallySM – a personalized, interactive health experience on myuhc.com.

How Rally Works:



Getting started with Rally

Once you register for Rally, you will choose an avatar to participate in online communities or other activities.



Take your health survey

The health survey will guide you with visual prompts that are clear and easy to follow. Upon completion of the health survey, you will receive your results as a “Rally Age” – a number that provides you with an indicator of how your actual age compares with your health age.



Pick your Missions

In addition to your Rally Age, you will also receive personalized results and recommended missions, or individual action plans, based on your health survey results. Missions provide activities to help improve or maintain your health. Choose missions that may help you look and feel healthier, like getting enough sleep at night or cooking at home.



Earn your rewards

You will earn coins when you check in to Rally and track your progress on your missions. You can use these coins to enter sweepstakes for great prizes. The more you take part in Rally, the more chances you'll have to win!



Health discounts

You can save from 10% - 25% on certain health and wellness services that aren't covered by your medical plan. You can save on:

- Cosmetic dental care, such as teeth whitening
- Laser eye surgery
- Acupuncture, chiropractic care, massage therapy and natural medicine
- Long-term care services, such as assisted living and durable medical equipment
- Infertility treatment
- Hearing devices

Log in to myuhc.com to find a participating provider.

When you need special support

Disease management

We provide additional support to help you manage a chronic disease. Experienced nurses will contact you with information to help you make more informed decisions. Log in to myuhc.com to find the programs offered with your health plan.

Centers of Excellence

We can help you find a doctor or medical center when you are diagnosed with a special condition. We'll help you understand your illness and work with you to schedule appointments and treatment. To find the covered conditions, log in to myuhc.com.

Emotional Health

Your Employee Assistance Program (EAP) and behavioral health benefit provide confidential support for your everyday challenges and life's more serious problems. Get help, 24/7, for:

- Alcohol and drug abuse recovery
- Coping with grief and loss
- Depression, anxiety or stress
- Relationship difficulties

All your personal records, including medical information, referrals and evaluations, are kept confidential in compliance with HIPAA and other privacy laws. To find out more, call the toll-free member number on your ID card or visit liveandworkwell.com.



Pregnancy Support

The Healthy Pregnancy Program is designed to provide expectant mothers with help through all pregnancy stages. It's best to enroll within the first 12 weeks of your pregnancy, but you can enroll through week 34. The program is provided to you at no extra charge, as part of your benefit plan.

To enroll, call **1-888-246-7389*** or visit healthy-pregnancy.com for more information.

*Please note: access for questions and concerns is available 24/7. Program enrollment is limited to 8 a.m. to 8 p.m. Central time.

5

Your UnitedHealthcare Bill of Rights

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.
- 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 other 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, 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 as a UnitedHealthcare Member

- 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 co-payment 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.
- Log in to myuhc.com or call us when you have a question about your eligibility, benefits, claims and more.
- Log in to myuhc.com or call us before receiving services to verify that your doctor or health care professional participates in the UnitedHealthcare network.

How to Voice a Complaint

If you are dissatisfied with the handling of a claim processing issue by UnitedHealthcare or any other experience with UnitedHealthcare, you may file a complaint by calling the toll-free member number on your ID card.



Wallet Card

This wallet card is a great way to remember what to bring and ask your doctor, pharmacist or other provider during an appointment. Cut it out and take it with you to your appointment.



This wallet card is a great way to remember what to bring and ask your doctor, pharmacist or other provider during an appointment.



For eligibility and benefit verification, please call the toll-free member number listed on your ID card.



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 service is 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 service 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.

The health care reform law requires the coverage of certain preventive services, based on your age, gender and other health factors, with no cost-sharing. The preventive care services covered are those preventive services specified in the health care reform law. UnitedHealthcare also covers other routine services, which may require a co-payment, co-insurance 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 does 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.

Source4Women 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 in making informed coverage decisions.

The medical centers and programs in UnitedHealthcare's network and within OptumHealthSM Care Solutions are independent contractors who render care and treatment to UnitedHealthcare members. UnitedHealthcare does not provide health services or practice medicine. The medical centers and programs are solely responsible for medical judgments and related treatments. UnitedHealthcare is not 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 not 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.

All UnitedHealthcare members can access a cost estimator online tool. Depending on your specific benefit plan and the ZIP code that is entered, either the myHealthcare Cost Estimator, or the Treatment Cost Estimator will be available. A mobile version of myHealthcare Cost Estimator is available, and additional ZIP codes and procedures will be added soon. This tool is not intended to be a guarantee of your costs or benefits. Your actual costs and/or benefits may vary. When accessing the tool, please refer to the Terms and Conditions of Use and Why Your Costs May Vary sections for further information regarding cost estimates. Refer to your health plan coverage document for information regarding your specific benefits.

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.

Participation in the health survey is voluntary. Your health survey 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 Healthy Pregnancy Program follows national practice standards from the Institute for Clinical Systems Improvement. The Healthy Pregnancy Program can not diagnose problems or recommend specific treatment. The information provided is not a substitute for your doctor's care.

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. 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.

Twitter is a registered trademark of Twitter, Inc. Facebook is a registered trademark of Facebook, Inc. Pinterest is a registered trademark of Pinterest, Inc. Instagram is a registered trademark of Instagram, LLC. Apple is a registered trademark of Apple, Inc. Android is a registered trademark of Google, Inc. Fitbit is a registered trademark of Fitbit Inc.

Information for individuals residing in the state of Louisiana or 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 co-payments, co-insurance, 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 Customer Care telephone number that appears on your ID Card.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates. Health Plan coverage provided by or through a UnitedHealthcare company.

Tips to make your doctor's visit worthwhile

Before your appointment:

- 1** Make a list of all questions you have for your doctor, nurse or pharmacist.
- 2** Write down medications you are currently taking, including prescriptions, over-the-counter medicines and herbal supplements.
- 3** Plan to bring a family member or friend to your visit if you have a hard time remembering what your doctor tells you.

During your appointment:

- 1** Tell your doctor if a family member has been diagnosed with a serious disease or condition. Also mention if you have or will be traveling outside the country.
- 2** Ask your doctor at every visit to send any laboratory tests to a network facility.
- 3** Before you leave, make sure you can read and/or understand your doctor's or pharmacist's instructions. If you don't, it's okay to ask them to explain again.



Health4Me

Health care management resources at your fingertips

UnitedHealthcare Health4Me™ lets you easily access your health care information and gives you tools to help estimate costs, manage claims and find providers – anytime and anywhere. It's built to be your go-to health care resource when you're on the go.



More useful info

Get information to help you stay connected to your care management.

- View and share health plan ID cards via email or fax
- Check account balances and benefit amounts
- Collect, track and share past and current Personal Health Records
- View and manage claims
- Pay providers for out-of-pocket expenses



More great tools

Get access to resources to help you get the most out of your benefit plan.

- Estimate costs of common procedures and conditions up front
- Find nearby providers, hospitals and quick care facilities
- Connect with helpful professionals 24/7
- Search Pharmacies, claims, drug pricing and mail orders

Stay connected to your benefit plan



App Store is a service mark of Apple, Inc. Android is a registered trademark of Google, Inc.

*Some features may not be available for all employer plans. Insurance coverage provided by or through a UnitedHealthcare Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates.

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Virtual Visits

Access to care online at any time



When you don't feel well, or your child is sick, the last thing you want to do is leave the comfort of home to sit in a waiting room. Now, you don't have to.

A virtual visit lets you see and talk to a doctor from your mobile device or computer without an appointment. Most visits take about 10-15 minutes and doctors can write a prescription*, if needed, that you can pick up at your local pharmacy. And, it's 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
- Diarrhea
- Rash
- Bronchitis
- Fever
- Sinus problems
- Cold/flu
- Migraine/headaches
- Sore throat
- Pink eye
- Stomach ache

Access virtual visits

Log in to myuhc.com[®] 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.

To learn more, login to myuhc.com

Use virtual visits when:

- ▶ Your doctor is not available
- ▶ You become ill while traveling
- ▶ You are considering visiting a hospital emergency room for a non-emergency health condition

Not good for:

- ▶ Anything requiring an exam or test
- ▶ Complex or chronic conditions
- ▶ Injuries requiring bandaging or sprains/ broken bones



* Prescription services may not be available in all states.

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.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates.

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Take advantage of preventive care to help manage your health

UnitedHealthcare is dedicated to helping people live healthier lives, and we encourage our members to receive age and gender appropriate preventive health care services.

Preventing disease and detecting health issues at an early stage, if they occur, are important to living a healthy life. Following the recommended guidelines, based on your age and gender, along with the advice of your doctor, may help you stay healthy. For specific health questions and concerns, talk with your doctor and follow his or her direction as to the preventive care services that may be right for you.

Under the Affordable Care Act (ACA)¹, most UnitedHealthcare members are eligible to receive certain preventive health care services, based upon age, gender and other factors without cost sharing, (100% without charging a co-payment, co-insurance or deductible), as long as you obtain the services from a health plan network provider. Diagnostic (non-preventive) services are also covered for UnitedHealthcare members. These services may require a co-payment, co-insurance or deductible. Always refer to your plan documents for your specific coverage.



Preventive Care Guideline Recommendations for Children



It's important for children of all ages to have preventive medical checkups. Preventive care promotes healthy growth and development and includes screening, counseling, and immunization services for children at appropriate ages.

You can help promote your child's good health by scheduling regular check ups with a network physician for age-appropriate preventive care services and immunizations. During these preventive care visits you will want to provide the doctor with information about your child, as well as information about illnesses or medical conditions your child may have, and the medicines your child takes, if any. The doctor will likely:

- ▶ Ask you questions about your child's growth and development
- ▶ Give your child a complete physical examination
- ▶ Make sure your child has up-to-date immunizations
- ▶ Give you advice to help your child stay safe and healthy

Recommended services for children at each preventive care visit will vary based on age, but will include some of the following when provided in a primary care setting:

- ▶ Age-appropriate well child examination
- ▶ Measurement of your child's head size
- ▶ Measurement of length/height and weight
- ▶ Metabolic screening panel for newborns - age 0-90 days old
- ▶ Screening blood tests, if appropriate
- ▶ Age-appropriate immunizations
- ▶ Vision screening for children less than age 5
- ▶ Oral health risk assessment
- ▶ Fluoride application for ages 0-6 years, under certain circumstances
- ▶ Hearing screening
- ▶ Autism screening at 18 months and 24 months. May be done earlier or more frequently for young children at defined risk
- ▶ Counseling on the harmful effects of smoking and illicit use of drugs (for older children and adolescents)
- ▶ Counseling for children and their parents on promoting a healthy diet and exercise
- ▶ Screening certain children at high risk for high cholesterol, sexually transmitted diseases, lead poisoning, tuberculosis and more
- ▶ Screening for depression
- ▶ Evaluate the need for iron supplements

Not all children require all of the services identified above. Following your child's preventive visit the doctor should also provide you with information about your child's growth, development and general health, and answer any questions you may have about your child.

Source: www.archive.ahrq.gov/clinic/prevenix.htm

Source: www.allkids.com/customers/checkups.html

Development, psychosocial, and chronic disease issues for children and adolescents may require frequent counseling and treatment visits separate from preventive care visits. These guidelines represent a consensus by the American Academy of Pediatrics (AAP) and Bright Futures. The recommendations in this statement do not indicate an exclusive course of treatment or standard of medical care. Variations, taking into account individual circumstances, may be appropriate. Discuss with your doctor how these guidelines may be right for your child, and always consult your doctor before making any decisions about medical care.

These clinical guidelines are provided for informational purposes only, and do not constitute medical advice.

Preventive Care benefits may not apply to certain services listed above. Always refer to your plan documents for your specific coverage.



You can take steps toward protecting your child from serious illness by maintaining the doctor recommended schedule of preventive care visits and immunizations. UnitedHealthcare encourages regular preventive care visits with a network physician to help maintain your child's health.

Childhood Immunizations

Newborn to 6 Years



Immunizations save millions of lives each year, and can help protect your child against many childhood diseases. The following immunization schedule provided by the Centers for Disease Control and Prevention (CDC), will provide you with the guideline recommendations for children newborn to 6 years.

Recommended Childhood Immunization schedule for children newborn to 6 years United States • 2014

Vaccine	Newborn	1 Month	2 Months	4 Months	6 Months	9 Months	12 Months	15 Months	18 Months	19-23 Months	2-3 Years	4-6 Years
Hepatitis B		HepB			HepB							
Rotavirus			RV	RV	RV							
Diphtheria, tetanus, pertussis			DTaP	DTaP	DTaP			DTaP				DTaP
Haemophilus influenzae type b			Hib	Hib	Hib		Hib					
Pneumococcal			PCV	PCV	PCV		PCV					
Inactivated poliovirus			IPV	IPV	IPV							IPV
Influenza					Influenza (yearly) ¹							
Measles, mumps, rubella							MMR					MMR
Varicella							Varicella					Varicella
Hepatitis A							HepA ²					

Shaded boxes indicate that vaccine can be given in the shown age range.

www.cdc.gov/vaccines

Note: If your child misses a shot, talk with your child's doctor for his/her direction and to answer any questions about vaccines.

¹ Two doses given at least four weeks apart are recommended for children aged 6 months through 8 years of age who are getting a flu vaccine for the first time and for some other children in this age group.

² Two doses of HepA vaccine are needed for lasting protection. The first dose of HepA vaccine should be given between 12 months and 23 months of age. The second dose should be given 6 months later. HepA vaccination may be given to any child 12 months and older to protect against HepA. Children and adolescents who did not receive the HepA vaccine and are at high-risk, should be vaccinated against HepA.

If your child has any medical conditions that put him/her at risk for infection or is traveling outside of the United States, talk to your child's doctor about additional vaccines that he/she may need.

SOURCE: Centers for Disease Control and Prevention, Recommended immunization schedules for persons aged 0 through 6 years – United States, 2014, at: www.cdc.gov/vaccines/pubs/ACIP-list.htm

These clinical guidelines are provided for informational purposes only, and do not constitute medical advice. Discuss with your doctor how these guidelines may be right for your child, and always consult your doctor before making any decisions about medical care. Preventive Care benefits may not apply to certain services listed above. Always refer to your plan documents for your specific coverage.

Childhood Immunizations Age 7 to 18 Years



Recommended Childhood Immunization schedule for children age to 18 years United States • 2014

Vaccine	7–10 years	11–12 years	13–18 years	
Tetanus, diphtheria, pertussis ¹	Tdap ¹	Tetanus, Diphtheria, Pertussis (Tdap) Vaccine	Tdap	
Human papillomavirus ²		Human Papillomavirus (HPV) Vaccine (3 Doses) ²	HPV	
Meningococcal ³	MCV4	Meningococcal Conjugate Vaccine (MCV4) Dose 1 ³	MCV4 Dose 1 ³	Booster at 16 years old
Influenza ⁴	Influenza (Yearly) ⁴			
Pneumococcal ⁵	Pneumococcal Vaccine ⁵			
Hepatitis A ⁶	Hepatitis A (HepA) Vaccine Series ⁶			
Hepatitis B	Hepatitis B (HepB) Vaccine Series			
Inactivated poliovirus	Inactivated Polio Vaccine (IPV) Series			
Measles, mumps, rubella	Measles, Mumps, Rubella (MMR) Vaccine Series			
Varicella	Varicella Vaccine Series			

These shaded boxes indicate when the vaccine is recommended for all children unless your doctor tells you that your child cannot safely receive the vaccine.

These shaded boxes indicate the vaccine should be given if a child is catching-up on missed vaccines.

These shaded boxes indicate the vaccine is recommended for children with certain health conditions that put them at high risk for serious diseases. Note that healthy children can get the HepA series⁶. See vaccine-specific recommendations at www.cdc.gov/vaccines/pubs/ACIP-list.htm.

www.cdc.gov/vaccines/teens

Note: If your child misses a shot, talk with your child's doctor for his/her direction and to answer any questions about vaccines.

- ¹ Tdap vaccine is combination vaccine that is recommended at age 11 or 12 to protect against tetanus, diphtheria and pertussis. If your child has not received any or all of the DTaP vaccine series, or if you don't know if your child has received these shots, your child needs a single dose of Tdap when they are 7 -10 years old. Talk to your child's health care provider to find out if they need additional catch-up vaccines.
- ² All 11 or 12 year olds – both girls and boys – should receive 3 doses of HPV vaccine to protect against HPV-related disease. Either HPV vaccine (Cervarix® or Gardasil®) can be given to girls and young women; only one HPV vaccine (Gardasil®) can be given to boys and young men.
- ³ Meningococcal conjugate vaccine (MCV) is recommended at age 11 or 12. A booster shot is recommended at age 16. Teens who received MCV for the first time at age 13 through 15 years will need a one-time booster dose between the ages of 16 and 18 years. If your teenager missed getting the vaccine altogether, ask their health care provider about getting it now, especially if your teenager is about to move into a college dorm or military barracks.
- ⁴ Everyone 6 months of age and older—including preteens and teens—should get a flu vaccine every year. Children under the age of 9 years may require more than one dose. Talk to your child's health care provider to find out if they need more than one dose.
- ⁵ Pneumococcal Conjugate Vaccine (PCV13) and Pneumococcal Polysaccharide Vaccine (PPSV23) are recommended for some children 6 through 18 years old with certain medical conditions that place them at high risk. Talk to your healthcare provider about pneumococcal vaccines and what factors may place your child at high risk for pneumococcal disease.
- ⁶ Hepatitis A vaccination is recommended for older children with certain medical conditions that place them at high risk. HepA vaccine is licensed, safe, and effective for all children of all ages. Even if your child is not at high risk, you may decide you want your child protected against HepA. Talk to your healthcare provider about HepA vaccine and what factors may place your child at high risk for HepA.

If your child has any medical conditions that put him/her at risk for infection or is traveling outside of the United States, talk to your child's doctor about additional vaccines that he/she may need.

SOURCE: Centers for Disease Control and Prevention, Recommended immunization schedules for persons aged 7 through 18 years – United States, 2014 at: www.cdc.gov/vaccines/pubs/ACIP-list.htm

These clinical guidelines are provided for informational purposes only, and do not constitute medical advice.

Discuss with your doctor how these guidelines may be right for you, and always consult your doctor before making any decisions about medical care. Preventive Care benefits may not apply to certain services listed above. Always refer to your plan documents for your specific coverage.

Preventive Care Guideline Recommendations for Adult Screenings



A preventive health visit may help you establish the baseline for your current health, and help identify any health issues before they become more serious. You and your doctor can then work together to identify care options that may help maintain or improve your health. The following information provides guideline recommendations for preventive care screenings, to evaluate general health and development in adults over age 18.

Recommendations for Adult Screenings – Men and Women

Well Examination
Recommended age and gender appropriate exam, based on Affordable Care Act (ACA) ¹ guidelines.
Obesity Screening
Recommended weight assessment at each visit.
Blood Pressure Screening
Recommended blood pressure assessment at each visit.
Diabetes Screening
Screening for type 2 diabetes in asymptomatic adults who have sustained blood pressure (either treated or untreated) greater than 135/80 mm Hg.
Cholesterol Screening (Lipid disorders - with no prior history)
Screening recommended for all men and women age 20 and up and if at increased risk for coronary heart disease.

Colorectal Cancer Screening
Routine colorectal cancer screening recommended for ages 50 to 75. High risk persons may need diagnostic screenings at younger ages and more frequently than persons at standard risk. Speak with your physician regarding screening methods and appropriate screening intervals.
Human Immunodeficiency Virus (HIV)
Screening for human immunodeficiency virus (HIV).
Lung Cancer Screening with low-dose CT Scan
Recommended for ages 55 to 80 with at least a 30 pack-year smoking history, requires prior authorization.
Hepatitis C Virus Infection
Recommended for all persons at high risk for infection.

Recommendations for Adult Screenings – Men

Abdominal Aortic Aneurysm Screening
Recommended screening for abdominal aortic aneurysm in men 65-75 years old who have ever smoked.

Recommendations for Adult Counseling – Men and Women

Every day, you make countless decisions that affect your health and well-being. Understanding and managing your lifestyle and everyday health behaviors is one way to help maintain or improve your overall health. The following guidelines provide the primary care counseling recommendations for adults over age 18.

Tobacco/Nicotine Use
Counseling and interventions by network primary care physician, to prevent Tobacco use and Tobacco related disease. May include certain smoking cessation medications as prescribed by physician and meeting approved guidelines.
Alcohol/Illicit Drug Use
Routine screening and counseling by network primary care physician, to detect potential health risks associated with alcohol/Illicit drug use.

Healthy diet, Physical Activity, Depression and Injury and Fall Prevention
Screening and counseling by network primary care physician to assess health issues and promote healthy lifestyle behaviors.
Intimate Partner Violence Screening
Screening and counseling by network primary care physician to assess health issues and promote healthy behaviors.

The recommended age bands for each screening, immunization or counseling service are indicated for either both men and women, just men or just women as identified by the colors shown in the grid below.

Men and Women	Men	Women
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¹ These guidelines are based on the recommendations of the U.S. Preventive Services Task Force (USPSTF), U.S. Department of Health and Human Services and the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention. They are provided for informational purposes only, and do not constitute medical advice. Individuals with symptoms or at high risk for disease may need additional services or more frequent interventions. Discuss with your doctor how these guidelines may be right for you, and always consult your doctor before making any decisions about medical care. These guidelines do not necessarily reflect the vaccines, screenings or tests that will be covered by your benefit plan. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on your health plan ID card.

These clinical guidelines are provided for informational purposes only, and do not constitute medical advice. Discuss with your doctor how these guidelines may be right for you, and always consult your doctor before making any decisions about medical care. Preventive Care benefits may not apply to certain services listed above. Always refer to your plan documents for your specific coverage.

Preventive Care Guideline Recommendations for Adult Immunizations



Immunizations save millions of lives each year, and may help protect you against many illnesses and diseases. The following immunization schedule provided by the Centers for Disease Control and Prevention (CDC) will provide you with the guideline recommendations for adults over age 18.

Recommendations for Adult Immunizations – Men and Women

United States • 2014

Vaccine	19-21 years	22-26 years	27-49 years	50-59 years	60-64 years	≥ 65 years
Influenza	1 dose annually					
Tetanus, diphtheria, pertussis (Td/Tdap)	Substitute 1-time dose of Tdap for Td booster; then boost with Td every 10 yrs					
Varicella	2 doses					
Human papillomavirus (HPV) Female	3 doses					
Human papillomavirus (HPV) Male	3 doses	3 doses				
Zoster					1 dose	
Measles, mumps, rubella (MMR)	1 or 2 doses					
Pneumococcal 13-valent conjugate (PCV13)	1 dose					
Pneumococcal polysaccharide (PPSV23)	1 or 2 doses					1 dose
Meningococcal	1 or more doses					
Hepatitis A	2 doses					
Hepatitis B	3 doses					
Haemophilus influenzae type b (Hib)	1 or 3 doses					

	For all persons in this category who meet the age requirements and who lack documentation of vaccination or have no evidence of previous infection; zoster vaccine recommended regardless of prior episode of zoster.		Recommended if some other risk factor is present (e.g., on the basis of medical, occupational, lifestyle, or other indication)		No recommendation
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Additional information about the vaccines in this schedule, extent of available data, including a full list of footnotes and contraindications for vaccination is also available at www.cdc.gov/vaccines or from the CDC-INFO Contact Center at 800-CDC-INFO (800-232-4636) in English and Spanish, 8 a.m. - 8 p.m. Eastern Time, Monday - Friday, excluding holidays. For a complete list of footnote references please visit: www.cdc.gov/vaccines/recs/acip.

The recommendations in this schedule were approved by the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP), the American Academy of Family Physicians (AAFP), the American College of Physicians (ACP), American College of Obstetricians and Gynecologists (ACOG) and American College of Nurse-Midwives (ACNM).

These clinical guidelines are provided for informational purposes only, and do not constitute medical advice. Discuss with your doctor how these guidelines may be right for you, and always consult your doctor before making any decisions about medical care. Preventive Care benefits may not apply to certain services listed above. Always refer to your plan documents for your specific coverage.

Preventive Care Guideline Recommendations for Screenings in Adult Women



Recommendations for Adult Screenings – Women

UnitedHealthcare is committed to advancing prevention and early detection of disease. The following information reflects the guidelines for women’s preventive care services provided under the Affordable Care Act (ACA)¹.

<p>Well Women Exams</p> <p>Recommended for all women, with sufficient visits each year to obtain all required preventive care services.</p>	<p>Mammography screening for all adult women</p> <p>Screening Mammography available for all adult women of standard risk every one to two years beginning at age 40 or as directed by your physician. Women at defined high risk should be screened earlier.</p>
<p>Sexually Transmitted Infections Counseling</p> <p>Recommended for all sexually active women.</p>	<p>Folic Acid</p> <p>Recommended for all women beginning at age 18 who are planning or capable of childbearing and who are 24 to 28 weeks pregnant. And at the first pre-natal visit for those who are at high risk of development of gestational diabetes.</p>
<p>HIV Screening and Counseling</p> <p>Recommended for all sexually active women.</p>	<p>Breast Cancer prevention counseling strategies</p> <p>Recommended for women at high risk for breast cancer. Consult with your physician regarding breast cancer prevention alternatives with low risk of adverse effects.</p>
<p>Cervical Cancer Screening (Pap Smear)</p> <p>Recommended screening in women for ages 21 to 65 years.</p>	<p>Osteoporosis Screening for certain populations</p> <p>Routine screening recommended for women age 65 and older. Screening for post-menopausal women at defined high risk, discuss with your physician.</p>
<p>Human papilloma virus (HPV) DNA Testing</p> <p>Recommended for women age 30+ as directed by your physician.</p>	

Recommendations for Pregnant women

<p>Gestational Diabetes Screening</p> <p>Recommended screening for gestational diabetes mellitus in asymptomatic pregnant women after 24 weeks of gestation.</p>	<p>Folic Acid – Recommended Dosage is 0.4 - 0.8mg daily</p> <p>Recommended for all women beginning at age 18 who are planning or capable of childbearing and who are 24 to 28 weeks pregnant. Also recommended at the first pre-natal visit for those who are at high risk of development of gestational diabetes.</p>
<p>Screening for Rubella, Iron Deficiency Anemia, Urinary Tract Infection</p> <p>Recommended for pregnant women at first pre-natal visit.</p>	<p>Hepatitis B, Blood Type and RH(D) Incompatibility Screening</p> <p>Recommended for pregnant women at first pre-natal visit.</p>

The recommended age bands for each screening, immunization or counseling service are indicated for either both men and women, just men or just women as identified by the colors shown in the grid below.

Men and Women	Men	Women
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¹ These guidelines are based on the recommendations of the U.S. Preventive Services Task Force (USPSTF), U.S. Department of Health and Human Services and the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention. They are provided for informational purposes only, and do not constitute medical advice. Individuals with symptoms or at high risk for disease may need additional services or more frequent interventions. Discuss with your doctor how these guidelines may be right for you, and always consult your doctor before making any decisions about medical care. These guidelines do not necessarily reflect the vaccines, screenings or tests that will be covered by your benefit plan. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on your health plan ID card.

These clinical guidelines are provided for informational purposes only, and do not constitute medical advice. Discuss with your doctor how these guidelines may be right for you, and always consult your doctor before making any decisions about medical care. Preventive Care benefits may not apply to certain services listed above. Always refer to your plan documents for your specific coverage.

Preventive Care Guidelines Recommended for Adult Counseling in Women



UnitedHealthcare is committed to advancing prevention and early detection of disease. The following guidelines reflect the expanded women's preventive care services provided under the Affordable Care Act (ACA)¹. The following guidelines provide the counseling recommendations for women over age 18.

Recommendations for Adult Counseling – Women

<p>Interpersonal and Domestic Violence Screening and Counseling</p> <p>Recommended screening and counseling, by a network primary care physician, for all women.</p>	<p>Breast feeding and Post-Partum Counseling, Equipment and Supplies</p> <p>Recommended as part of pre/post-natal counseling for pregnant women, with purchase of certain breast feeding equipment through approved vendors.</p>
<p>FDA Approved Contraception Methods and Counseling</p> <p>Recommended screening and counseling, by a network primary care physician, for all women. Approved female contraception and sterilization procedures with patient education and counseling.</p>	<p>Breast Cancer Genetic Test Evaluation and Counseling (BRCA)</p> <p>Recommended for women ages 18+ with a family history of breast or ovarian cancer, requires prior authorization. Talk with your doctor if your family has a history of breast or ovarian cancer. (Not all women with a family history of breast cancer require this genetic test.)</p>

The recommended age bands for each screening, immunization or counseling service are indicated for either both men and women, just men or just women as identified by the colors shown in the grid below.

Men and Women	Men	Women
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See www.preventiveservices.ahrq.gov for U.S. Preventive Services Task Force recommendations on clinical preventive services.

For more information on preventive care guideline recommendations, visit our website at www.uhcpreventivecare.com to identify your age and gender-specific preventive care guidelines, based on recommendations of the U.S. Preventive Services Task Force and other health organizations. You can also email, download or print your results and sign up for preventive care email reminders. Use these recommendations to talk with your doctor about the preventive health services that may be right for you.



¹ These guidelines are based on the recommendations of the U.S. Preventive Services Task Force (USPSTF), U.S. Department of Health and Human Services and the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention. They are provided for informational purposes only, and do not constitute medical advice. Individuals with symptoms or at high risk for disease may need additional services or more frequent interventions. Discuss with your doctor how these guidelines may be right for you, and always consult your doctor before making any decisions about medical care. These guidelines do not necessarily reflect the vaccines, screenings or tests that will be covered by your benefit plan. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on your health plan ID card.

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Welcome

A guide to using your
Pharmacy Benefit Services.



**Live your life.
Enjoy your life.**

- Welcome to your pharmacy benefit services
- Making informed pharmacy decisions
- Programs designed to save you money
- OptumRx® Mail Service Pharmacy
- Information online and on the go



Welcome to your Pharmacy Benefit Services

Get the most out of your pharmacy benefit services

- ▶ We provide access to a wide variety of U.S. Food and Drug Administration FDA-approved prescription medication.
- ▶ Our programs and tools are designed to help you make informed decisions about your choice of prescription medication and pharmacy products.
- ▶ The more you know about what choices are available, the better you can decide what is best to meet your health needs.

Choose a pharmacy that is in our network

- ▶ You have access to thousands of retail pharmacies including all large national chains, many community pharmacies, and the OptumRx® Mail Service Pharmacy.
- ▶ If you fill your prescriptions outside our pharmacy network you may pay a higher cost or your prescriptions may not be covered.

Find a pharmacy

- ▶ Log on to myuhc.com®, click the *Manage My Prescriptions* button and enter your ZIP code under *Locate a Pharmacy*.
- ▶ Or call the toll-free member phone number on the back of your health plan ID card and a representative can help you.

What you pay

- ▶ Simply show your health plan ID card to the pharmacist. Your pharmacist will tell you how much you owe for the prescription.
- ▶ Or call the number on the back of your health plan ID card.



Thousands of pharmacies
in our network

The right medication for you

Make informed decisions

UnitedHealthcare Prescription Drug List (PDL)

The PDL includes most brand and generic prescription medications approved by the U.S. Food and Drug Administration (FDA). Medications are placed on different “tiers” based on our evaluation about their overall value. Tier 1 is the lowest-cost tier option. When selecting a medication, you and your doctor may consult the PDL to see if there is a Tier 1 (lowest cost) option that your doctor thinks is right for you.

Specialty medications

Specialty medications are high-cost and may be used to treat complex conditions. For most plans, these medications are managed through the Specialty Pharmacy Program. Take advantage of this personalized support designed to help you get the most of your treatment plan. The Specialty Pharmacy Program offers access to pharmacists around-the-clock, cost-savings information, and much more. Visit UHCSpecialtyRx.com or call the number on the back of your health plan ID card to learn more.

Want to learn more about a specific medication?

Log on to myuhc.com and click *Manage My Prescriptions* to access details about your medication.

Save money

Look for potential lower-cost alternatives

Log on to myuhc.com to look for your lowest-cost options. Ask your doctor if a lower-cost alternative medication may be right for you.

Generic options

Approximately 75% of brand medications have generic equivalents available. A generic equivalent contains the same active ingredients (the chemicals that make a medication work) as the brand name version of the medication and meets the same FDA medication standards.



Call the OptumRx® Specialty Pharmacy
at **888-739-5820**.



Programs designed to save you money

Mail Service Member SelectSM

Your plan may include this home delivery program, which encourages you to use the OptumRx Mail Service Pharmacy for medication you take regularly. Choosing home delivery can help you better manage your medication and may save you time and money.

- ▶ Simply call the number on the back of your plan ID card and a customer service advocate can get you started and help switch any medication to home delivery.
- ▶ Or you can choose to disenroll from mail service and continue filling your prescription at a retail pharmacy for your standard co-pay or cost.
- ▶ You have up to two fills at your retail pharmacy before making a decision.
- ▶ If the medication you are taking is included in this program, you will receive a communication explaining what action you need to take.

Select Designated Pharmacy Program

The Select Designated Pharmacy Program is designed to help you save money on select higher-cost prescription medications. If eligible, please choose one of these options:

- ▶ **Move to OptumRx Mail Service Pharmacy:** Keep taking your current medication and get up to a three-month supply delivered to your home, likely for less than you would pay at a retail pharmacy.
- ▶ **Switch to a lower-cost medication:** Some medicines treat the same condition, but cost much less. Ask your doctor if a lower cost medication is right for you.
- ▶ **Do both:** Use OptumRx Mail Service Pharmacy and switch to a lower-cost medication to maximize your savings.



Log on to myuhc.com

You can access tools to help you get the most out of your pharmacy benefit. It's convenient and secure.

Get medication delivered right to your door



With the OptumRx Mail Service Pharmacy you get:

Savings

- ▶ Depending on your benefit plan, you may save money by having your doctor order a three-month supply of medication.

Pharmacists on call

- ▶ Pharmacists are available to answer your questions about your medication anytime, any day.

Helpful reminders

- ▶ Set up text and email reminders to take or refill your medication through myuhc.com.¹ You can also set up automatic refills by enrolling in our Hassle-Free FillSM program.

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

To set up home delivery, follow these simple steps:

1 Talk to your doctor

Get the right prescription. Ask your doctor for a three-month supply with refills for up to one year (if appropriate).

2 Contact OptumRx Mail Service Pharmacy one of these ways



Phone:

- Call the member phone number on the back of your health plan ID card to talk with a customer service representative right away. It's helpful to have your health plan ID card and medication bottle available. The representative can also contact your doctor directly if you need a new prescription.



By fax or ePrescribe:

- Ask your doctor to call **1-800-791-7658** for instructions on how to fax your prescription directly to OptumRx Mail Service Pharmacy. Or your doctor can send an electronic prescription to OptumRx Mail Service Pharmacy.



By mail:

- Ask your doctor for a new prescription for up to a three-month supply, plus refills for up to one year. Then go to **myuhc.com** and download the New Prescription Order Form.² Mail to the address provided on the bottom of the form.



Online:

- Log on to **myuhc.com**
- Click on *Manage My Prescriptions*.

Once OptumRx receives your complete order for a new prescription, your medication should arrive within 10 business days. Completed refill orders should arrive in about seven days. Need your medication right away? Ask your doctor for a one-month supply that can be immediately filled at a participating retail pharmacy.

2. The information you supply on the order form is kept confidential in accordance with applicable laws. The health and allergy information you provide helps the pharmacist check for possible problems with some medications.



Need more information?

Call the toll-free member phone number on the back of your health plan ID card. Representatives are available to assist you 24 hours a day, 7 days a week.

Information when you need it

Your online tools

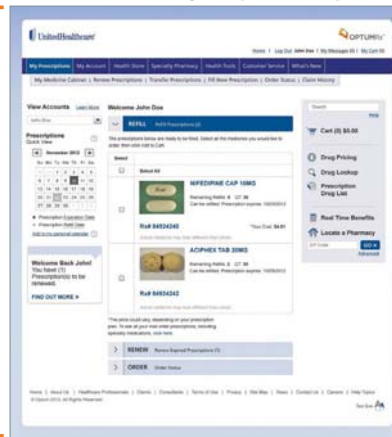
myuhc.com provides you access to the tools and information you need any time:

- ▶ Look up possible lower-cost medication alternatives.
- ▶ Compare medication pricing and options.
- ▶ Manage your mail service pharmacy account.
- ▶ View your prescription history.
- ▶ Set up email or text message reminders to take medication and order refills.³

myuhc.com



Manage My Prescriptions



Note: Some sections are only available if you are logged in to your account. Not all sections of the website are available to all members — access to features and tools are determined by your benefits plan.

Convenient mobile access:

Access your pharmacy benefit and mail service prescriptions from your smartphone, iPad or other handheld device by logging on to **optumrx.com**. Here you can manage your pharmacy benefit on the go.

- ▶ Refill mail service prescriptions.
- ▶ Create and update text message reminders.
- ▶ View your prescription claims history.
- ▶ Search your Prescription Drug List (PDL).
- ▶ Compare medications with the Drug Pricing Tool.



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



Get the most out of your
pharmacy benefit. The more you
know, the more you can save.
Visit myuhc.com today!



myuhc.com

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates. Health plan coverage provided by or through a UnitedHealthcare company. OptumRx, Inc. is an affiliate of UnitedHealthcare Insurance Company.

Included in Kit #104-0009

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1 Please fill out Section 1, then have your physician fill out Section 2 and FAX it to 1-800-491-7997. NOTE: THIS FAX IS VOID UNLESS RECEIVED DIRECTLY FROM YOUR PHYSICIAN'S OFFICE.

Primary Member ID Number _____ (Additional coverage, if applicable)
 Secondary Member ID Number _____
 Last Name _____ MI _____
 Delivery Address _____ Apt. # _____
 City _____ State _____ ZIP _____ Phone Number with Area Code _____
 Date of Birth (mm/dd/yyyy) _____ Gender M F Email _____

Medication Allergies:
 None Known
 Penicillin Sulfas
 Cephalosporins NSAIDs Erythromycin
 Aspirin Herceptin Sildenafil
 Quinolones Others: _____

Health Conditions:
 None Known
 Asthma Glaucoma
 Arthritis Heart Condition
 Osteoporosis High Blood Pressure
 Thyroid Disease High Cholesterol
 Diabetes Others: _____

Over-the-counter/Herbal medications taken regularly:
 Codeine Quinolones
 Penicillin NSAIDs
 Aspirin Herceptin Sildenafil
 Quinolones Others: _____

Keep on file. Do not ship. If you are including any prescriptions that you want to keep on file for shipment at a later date, please list them here:

Notes to Pharmacy:

2 **PHYSICIAN** —
 Please fill out Section 2, or attach your office prescription to this form.
Then FAX to 1-800-491-7997 or Physician-Only Phone: 1-800-791-7658
 This document, including any attachments, contains personal and sensitive information related to a patient's health care. The information contained in this document is intended only for the sole use of the physician or agent responsible to deliver it to the intended recipient, you are hereby notified that any disclosure, copying, distribution or use of the contents of the information is strictly prohibited and will be vigorously prosecuted.
 If you have received this document in error, please immediately notify the sender or OptumRx by phone or fax at the numbers listed above.

Physician Name _____
Street Address _____
City, State, ZIP _____
NPI _____
Date _____

Physician Signature _____
Date _____

3 **Frequently Asked Questions**

- Can the OptumRx Mail Service Pharmacy help me save money compared to a retail pharmacy?
 Yes, most plans entitle members to a lower copay when they receive their medications through the mail service pharmacy.
- Does the OptumRx Mail Service Pharmacy have other ways to help me keep costs down?
 Yes. One way is by identifying less expensive alternatives to brand-name medications that you may discuss with your doctor.
- Can the OptumRx Mail Service Pharmacy ship medications that need refrigeration?
 Yes. Perishable medications are shipped expedited at no charge in temperature-controlled packages when appropriate.
- How are medications sent through the mail?
 All medications are sealed helping to protect your safety and privacy.

For more information, call the toll-free member phone number on the back of your health plan ID card or visit myuhc.com*

UnitedHealthcare
myuhc.com

If you currently have UnitedHealthcare pharmacy benefits administered by MetLife, OptumRx Mail Service Pharmacy will be the mail order pharmacy for new business as of January 1, 2012, and for existing UnitedHealthcare customers after their transition to OptumRx Pharmacy benefit services in 2013.
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Discover the convenience of the
OptumRx™ Mail Service Pharmacy
 As part of your pharmacy benefit, you may be able to save money and time by using the mail service pharmacy.



Care24[®] services providing member health and well-being information and support resources.



Life is full of ups and downs. Care24 provides you with support services and health information to help. You may have health concerns, personal or family issues, or work-related challenges. This service gives you a wider range of health and well-being information through one toll-free telephone number, provided at no cost to you as part of your health plan.



Care24 for you This trusted source of information and support lets you speak directly with an experienced registered nurse or master's-level counselor any time.



How does it work? Simply call the Care24 toll-free number, **1-888-887-4114**, whenever you have health-related questions. Registered nurses are available to help you with questions about health conditions or symptoms and provide information that helps you choose appropriate care for your needs.

What kind of support do counselors provide?

Counselors are available to help you address a wide range of personal concerns such as emotional distress, relationship worries, anxiety, grief and much more. When you call, you also can connect with legal* and financial professionals.

When can I call? Nurses and master's-level counselors are available 24 hours a day, every day of the year. With the Care24 services, you don't need to make an appointment, rearrange your schedule or wait for Monday morning to get answers to your questions. You don't even need to go anywhere – you just need a telephone.



Do I have access to an audio library? Yes, when you call the Care24 number, press * to speak with a nurse who will provide you with information on the health topics, along with the three digit access pin number. This allows you to listen to recorded health and well-being messages.

Is there a website? Yes, **myuhc.com** ® offers customer service, information on hospitals and doctors, pharmacy service, health news, resources and more.



Can I reach a nurse online? Live Nurse Chat connects you with a registered nurse for a personal online conversation — 24 hours a day. Visit **myuhc.com**.

Care24 Services providing help and information at your fingertips

Findadoctor in your area that will work with you to help you get the right care, at the right time, in the right health care setting.

Healthcoaching from registered nurses who are here to help you improve your health and save money.

- ▶ Learn to recognize when self-care, a doctor visit or the emergency room is appropriate.
- ▶ Understand medication interactions and how to reduce your prescription costs.

Emotionalsupport is also available from master's-level counselors when you need help dealing with life's challenges. Get help with stress, anxiety, depression, grief, and much more.

TheHealthInformationLibrary consists of more than 1,100 messages to provide you with useful health and wellness information, and is updated regularly. To listen to your message of choice, press * to speak with a nurse who will provide you with information on the health topics along with the three digit access pin number.

Care24[®] services

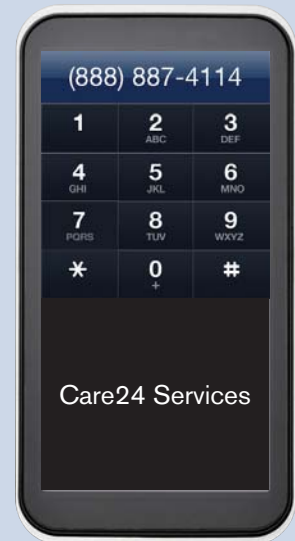
Available 24 hours a day, 7 days a week.
Call **1-888-887-4114**.

myuhc.com[®]

TTY/TDD callers, please call the National Relay Center at **1-800-828-1120** and ask for the number above.



To keep the Care24 number handy by removing the decal and posting it in a convenient place. Or add the number to your cell phone so that it is available at your fingertips when you need it.



CallCare24 servicesabout:

- Routine illness
- Minor injuries
- Stress and anxiety
- Relationship worries
- Coping with grief and loss
- Questions to ask your doctor
- Personal legal concerns*
- Men's, women's and children's health
- Prevention
- Self-care information
- Help Finding a doctor
- Information on medications
- General Health Information

* Because of the potential for conflict of interest, legal consultation will not be provided on issues that may involve legal action against UnitedHealthcare or its affiliates, or an entity through which the caller is receiving Care24 services, directly or indirectly (e.g., employer or health plan).



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Nurses can't diagnose problems nor recommend specific treatment. They are not a substitute for your doctor's care.

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Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates.