

- NEW COVERAGE
- REQUEST FOR CHANGE

Enrollment Application and Change Form
PLEASE PRINT CLEARLY



1 EMPLOYEE INFORMATION

LAST NAME	FIRST NAME	MI	SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	DATE OF BIRTH	SOCIAL SECURITY NUMBER	MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED
HOME ADDRESS			CITY	STATE	ZIP CODE	HOME PHONE NUMBER ()
EMPLOYER NAME Magnificus Corporation	GROUP NUMBER 918718				WORK PHONE NUMBER ()	

2 WAIVER 3 WHO SHOULD BE COVERED 5 OTHER INSURANCE

<input type="checkbox"/> I DECLINE COVERAGE FOR MYSELF <input type="checkbox"/> I DECLINE COVERAGE FOR MY DEPENDENTS REASON: <input type="checkbox"/> COVERED UNDER ANOTHER PLAN <input type="checkbox"/> OTHER: _____	<input type="checkbox"/> EMPLOYEE ONLY <input type="checkbox"/> EMPLOYEE & SPOUSE <input type="checkbox"/> EMPLOYEE & CHILD(REN) <input type="checkbox"/> EMPLOYEE & FAMILY	On the day your coverage begins, will any family members including those not listed below, be covered by any other health benefit plan, health, Medicare or Medicaid? Is another person legally responsible for coverage for your children? If you answered yes to either of these questions above, please complete the following: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">PERSON'S NAME WITH OTHER HEALTH PLAN</td> <td>SOCIAL SECURITY NUMBER</td> </tr> <tr> <td>DATE OF BIRTH</td> <td>SEX OTHER COMPANY'S NAME AND PHONE #</td> </tr> </table>	PERSON'S NAME WITH OTHER HEALTH PLAN	SOCIAL SECURITY NUMBER	DATE OF BIRTH	SEX OTHER COMPANY'S NAME AND PHONE #
PERSON'S NAME WITH OTHER HEALTH PLAN	SOCIAL SECURITY NUMBER					
DATE OF BIRTH	SEX OTHER COMPANY'S NAME AND PHONE #					

<i>*Note: If you are declining coverage for yourself or your dependents, because of coverage under other health coverage, you are required to complete this section. Your failure to do so may cause you or your dependents to be considered late enrollees if you enroll in this plan at a later date.</i>	4 PLAN SELECTION <input type="checkbox"/> 1. Choice Plus HSA BVLL Plan <input type="checkbox"/> 2. Choice Plus BCDJ Plan <input type="checkbox"/> 3. Choice Plus J64L Plan	OTHER COMPANY'S POLICY NUMBER AND EFFECTIVE DATE <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>MEDICARE NUMBER</td> <td>PART A EFFECTIVE DATE</td> <td>PART B EFFECTIVE DATE</td> </tr> </table>	MEDICARE NUMBER	PART A EFFECTIVE DATE	PART B EFFECTIVE DATE
MEDICARE NUMBER	PART A EFFECTIVE DATE	PART B EFFECTIVE DATE			

6 COVERAGE INFORMATION

(A) ADD (T) TERM (C) CHG	LAST NAME	FIRST NAME	MI	SOCIAL SECURITY NUMBER	DATE OF BIRTH (MO/DAY/YR)	SEX	OTHER INSURANCE	HANDI-CAPPED	FULL TIME STUDENT OVER 19?
	Employee					<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
	Spouse					<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
	Child-1					<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
	Child-2					<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N

7 AUTHORIZATION

On behalf of myself and anyone enrolled on or added to this form ("Us"), I authorize any health care professional or entity to give The United HealthCare Insurance Company and its affiliates (and the employer) or any of their designees ("United HealthCare"), any and all records or information pertaining to medical history or services rendered to Us for any administrative purpose, including evaluation of an application or a claim, and for any analytical or research purposes. I also authorize on behalf of Us the use of a Social Security Number for purpose of identification. I understand and agree that any omissions or incorrect statements made on this application may invalidate my and/or my dependent's coverage. I further understand that coverage will become effective only on the date specified by the Insurer or Plan Administrator after it has been approved by the Insurer or Plan Administrator and after the full premium has been paid. By signing this form, I hereby certify that all the information provided is true and correct.

If my employer's plan is a contributory plan, I direct my employer to deduct the amount of any required contribution from my pay. I can cancel this direction in writing at any time.

NOTICE OF ENROLLMENT RIGHTS

I understand that if I and/or my dependents, if any, waive coverage and desire to participate in the plan at a later date, coverage may be subject to treatment as a late enrollee. I further understand that if I decline enrollment for myself or dependents (including my spouse) because of other health coverage, I may in the future be able to enroll myself or my dependents in this plan, provided that I request enrollment within 30 days after such coverage ends. In addition, if a new dependent relationship forms as a result of marriage, birth, adoption, or placement for adoption, I may be able to enroll myself and my dependents provided that I request enrollment within 30 days after such marriage, birth, adoption, or placement for adoption.

Health insurance or medical services benefits provided or administered by The United HealthCare Insurance Company, Hartford, CT.

X Signature _____ **Date** _____

8 TO BE COMPLETED BY EMPLOYER

DATE OF HIRE	DATE SUBMITTED	EFFECTIVE DATE	POLICY NUMBER	Division	REPORTING CODE/BRANCH	EMPLOYER SIGNATURE
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Welcome

Get the most
out of your
health plan.

Here's
how.

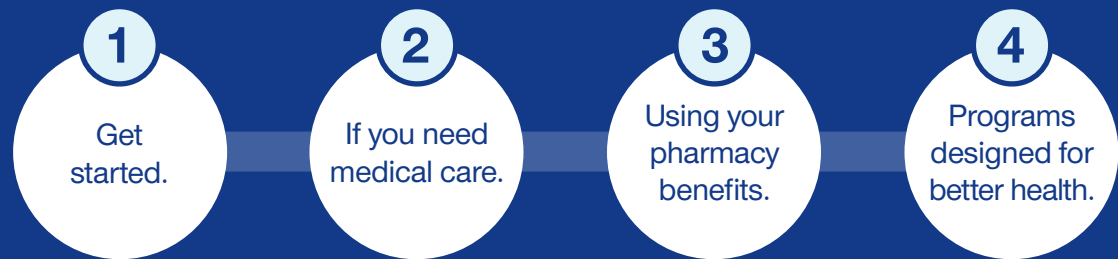


Let's
do
this.

Thank you for being a UnitedHealthcare member.

We're here to help make each step of your health care experience easier. Take a look at this guide to help you better understand your benefits, find care, manage costs and get more out of your health plan.

What's inside:



Call toll-free.

If you don't have computer access, need language assistance or still have questions after reading this, please call the toll-free member phone number on your health plan ID card, TTY 711.*



Connect with us.

- [Facebook.com/UnitedHealthcare](https://www.facebook.com/UnitedHealthcare)
- [Twitter.com/UHC](https://twitter.com/UHC)
- [Instagram.com/UnitedHealthcare](https://www.instagram.com/UnitedHealthcare)
- [YouTube.com/UnitedHealthcare](https://www.youtube.com/UnitedHealthcare)

*A TTY is a special device that lets people who are deaf, hard of hearing or speech-impaired use the telephone to communicate by allowing them to type messages back and forth to one another.

1 Get started.



Activate your myuhc.com® account.

When it comes to managing your health plan, myuhc.com lets you see what's covered, manage costs and so much more. To help everyone get the most from their plan, it's important that each member age 18 and over create their own account. Then, use it to:

- Find a network doctor.
- View and pay claims.
- Check your account balances.
- Learn about preventive care.
- Find and estimate costs.
- Watch a personalized video about your plan's coverage and costs.*
- See a breakdown of your claim, showing how much your plan covered, what you owe and remaining out-of-pocket balances.

Set up your account today.

- Go to myuhc.com > **Register Now**.
- Have your ID card handy and follow the step-by-step instructions.



Download the UnitedHealthcare® app.

The **UnitedHealthcare app** puts your health plan at your fingertips. Download it to:

- Find nearby care options in your network.
- See your claim details and view progress toward your deductible.
- View and share your health plan ID card.
- Video chat with a doctor—without leaving the app.



Access your
plan from
your car.

Or from
your couch.

*Information will vary to reflect your actual coverage. Members with a Health Incentive Account are not eligible for the video.

Get started.



Simple ways to save.

Stay in the network.

The doctors and facilities in the network have agreed to provide services at a discount—so staying in network makes sense, especially when visiting an out-of-network provider could end up costing you a lot more for care. Sign in to myuhc.com > **Find Care & Costs** to locate:

- Labs
- Hospitals
- Mental health professionals
- Network doctors
- Pharmacies

Look up the cost of a medication.

Sign in to myuhc.com > **Pharmacies & Prescriptions** to find information about your medication, prices and lower-cost options.

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. Members who comparison shop may save up to 36%* for care near them.

*UnitedHealthcare Internal Claims Analysis, 2015.

Know everything from your benefits to your balances.



Watch your personalized video for a quick and easier way to understand your coverage, out-of-pocket costs and how your plan** works. Watch (and re-watch) anytime by signing in to myuhc.com > **Coverage & Benefits**.

A little
planning...

may save a
lot of money.

**Information will vary to reflect your actual coverage. Members with a Health Incentive Account are not eligible for the video.

2 If you need medical care.



How to get the most out of your benefits.

Pick a network PCP.

A PCP is a primary care provider, sometimes called a primary care physician or doctor. It can be a family practitioner, internist, pediatrician or general medicine physician. Although your plan may not require you to choose a PCP,* it's a good idea to have one. Your PCP generally:

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

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, reputation, estimated cost of services, availability, hours of operation and more. You can even see patient ratings and compare quality and costs before you choose a provider. If you would like more information about a provider's qualifications, call the toll-free member phone number on your ID card.

Make more informed choices.

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

Keep up on preventive care.

Preventive care—such as routine wellness exams, certain recommended screenings and immunizations—is covered by most UnitedHealthcare plans at no additional cost when you see network providers. Learn more at uhc.com/preventivecare.

*Depending on your health plan, selection of a primary care physician may be required.

If you need medical care.



Know what to do if you need:

Referrals.

If your ID card states “Referrals Required,” you’ll need an electronic referral from your PCP before seeking services from another network provider. To learn what services require referrals, sign in at myuhc.com > Coverage & Benefits to view your coverage details.

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 UnitedHealthcare before you’re admitted.

Prior authorization.

Your plan may also require prior authorization before you receive certain services. This means that you or your network provider may need to get approval from your plan before the services are covered. Call the toll-free member phone number on your ID card or sign in at myuhc.com > Coverage & Benefits to check if prior authorization is needed.



Here’s an example of how a 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. Find your specific plan details at myuhc.com > Coverage & Benefits.

And here’s the breakout.

At the start of your plan year... You’re responsible for paying 100% of your covered health services until you reach your deductible , which is the amount you pay before your health plan pays a portion.	YOU PAY 100%
Along the way... You may also be required to pay a fixed amount—or copay —each time you see a provider or purchase a prescription.	YOU PAY 100% of the copay
Once you reach your deductible... Your health plan starts to share a percentage of the costs for covered health care services with you—this is your coinsurance .*	YOU PAY 20% YOUR PLAN PAYS 80%
When you reach your out-of-pocket limit... Your plan covers your costs (the allowed amount) at 100%. Your out-of-pocket limit is the most you’ll pay for covered health services in a plan year—copays and coinsurance count toward this.	YOUR PLAN PAYS 100%






*Your coinsurance may vary by service. This example is for illustrative purposes only. Please visit myuhc.com > Coverage & Benefits for your coverage details.

If you need medical care.



Get to know your care options and costs.

How much you pay for care can depend on where you go. You'll want to make your PCP your first stop whenever possible. For life-threatening conditions, call 911 or go to an emergency room.

Care Options	START HERE				
	 PCP	 Virtual Visits	 Convenience Care	 Urgent Care	 Emergency Room
	Care from the doctor who knows you best.	See a doctor whenever, wherever.	Basic conditions that aren't life-threatening.	Serious conditions that aren't life-threatening.	Life- and limb-threatening emergencies.
Average Cost*	Varies by plan type	Less than \$50**	\$90	\$170	\$2,000
Hours	Varies by location	24/7	Varies by location	Varies by location —may be open nights/weekends	24/7
How to Connect	Contact your PCP	myuhc.com/virtualvisits	myuhc.com	myuhc.com	myuhc.com

✓ indicates the recommended place for care when it comes to the following common conditions:

Broken bone				✓	✓
Chest pain					✓
Cough	✓	✓	✓		
Fever	✓	✓	✓		
Muscle strain	✓		✓		
Pinkeye	✓	✓	✓		
Shortness of breath					✓
Sinus problems	✓	✓	✓		
Sore throat	✓	✓	✓		
Sprain	✓		✓	✓	
Urinary tract infection	✓	✓	✓		

Did you know?

Emergency rooms are the most expensive place to get care. When you need to be seen, consider the chart above to help you find care. If you're still unsure about what's best for your situation, sign in to myuhc.com > **Find Care & Costs** to locate a network provider or call the member phone number on your ID card for support. If you have a question about what's covered by your plan, visit myuhc.com > **Coverage & Benefits** for answers.

*Source: 2017 Average allowed amounts charged by UnitedHealthcare Network Providers and not tied to a specific condition or treatment. Actual payments may vary depending upon benefit coverage. (Estimated \$1,800.00 difference between the average emergency room visit and the average urgent care visit.) The information and estimates provided are for general informational and illustrative purposes only and is 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 Visits and video chat with a doctor are not an insurance product, health care provider or a health plan. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 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.

**The Designated Virtual Visit Provider's reduced rate for a virtual visit is subject to change at any time.

Check your official health plan documents to see what services and providers are covered by your health plan.

3 Using your pharmacy benefits.



Say hello to savings.

With OptumRx®, your pharmacy care provider, it's easier to save on medications and easier to keep track of them, too—whether you're online or on the go.

Manage your meds.

Visit myuhc.com > Pharmacies & Prescriptions to:



- Find and compare medication costs.
- Locate a network pharmacy.
- See if your medications have any requirements before filling them.



Two easy ways to fill your prescriptions.

1 Home delivery.

Order up to a 3-month supply of medications you take regularly. Sign up on myuhc.com, use the **UnitedHealthcare app** or call the number on your ID card. There's free standard shipping to U.S. addresses. Make sure you have at least a 1-month supply to cover you through the transition.

2 Pick up at the pharmacy.

Show your ID card at any UnitedHealthcare network pharmacy—which can be found by checking the **Pharmacy Locator** on myuhc.com, the **UnitedHealthcare app** or by calling the member number on your ID card.

Get your fill.

One way
or another.

4

Programs designed for better health.

Once your health plan becomes active, you can choose to participate in the following programs. There's no additional cost to you—just the opportunity to get information and support. Find out more at myuhc.com.

Jump in.



Health and Wellness

Your path to better health.

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

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

Everything you need to help you lose weight and keep it off.

Whether you want to lose a lot of weight or just a few extra pounds, try **Real Appeal®**,* a digital weight loss program focused on making small changes to help you live a healthier life. It includes:

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

*The Real Appeal program is available at no additional cost to eligible members as part of your health plan. Access to Real Appeal not available in Hawaii.



Support for Parents

Get support throughout your pregnancy.

Learn what to expect, how to stay healthy, and how to manage your health through pregnancy and postpartum with various resources and tools offered by UnitedHealthcare. Call the number on your health plan ID card to get more information.

Programs designed for better health.

1

2

3

4



Care for Specific Conditions

Emotional support.

Your behavioral health benefit provides access to a network of nearby providers with options for either in-person care or a Virtual Visit 24/7. Get started and find a provider today by visiting liveandworkwell.com or call the toll-free member phone number on your ID card. The behavioral health benefit offers support for:

- Alcohol and drug use recovery.
- Coping with grief and loss.
- Compulsive habits and disorders.
- Depression, anxiety and stress.
- Relationship difficulties.
- Medication management.

Get 24/7 care by video with Virtual Visits.

A **Virtual Visit** lets you video chat with a doctor 24/7 from your computer or mobile device* for everyday conditions like the flu, coughs, infections and more without an appointment. The doctor can provide a diagnosis and, if appropriate, send a prescription** to your local pharmacy. It's all part of your health benefits.

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

- Allergies
- Bladder/Urinary tract infections
- Bronchitis
- Eye infections
- Flu
- Headaches/migraines
- Rashes
- Sore throats
- Stomachaches

It's easy to get started. Visit myuhc.com/virtualvisits to sign in to your account or set one up if you don't have one. Complete a brief health profile and request 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'll be able to talk to a doctor about your health concerns, symptoms and treatment options.

*Data rates may apply.

**Certain prescriptions may not be available, and other restrictions may apply.

Start living tobacco-free.

Since 1985, **Quit For Life**® has helped more than 3.5 million tobacco users quit for good. It's a personal support program available at no additional cost to you. Choose from a variety of online tools and get access to a Quit Coach® and a mobile app to customize a quit plan to help you break free from tobacco. Enroll today at myuhc.com.

Find support for dealing with cancer.

Many questions come up when you or a loved one has cancer. With the **Cancer Support Program**, dedicated cancer nurses will help you find information and emotional support for you and your family. We will work with you throughout your cancer journey. Call the member phone number on your ID card, TTY **711** or visit myuhc.phs.com/cancerprograms to learn more.

And that's
a wrap.

Easy peasy.

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

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

Mail: UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UT 84130

Online: UHC_Civil_Rights@uhc.com

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

You can also file a complaint with the U.S. Dept. of Health and Human Services:

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

Complaint forms are available at
<http://www.hhs.gov/ocr/office/file/index.html>.

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

Mail: U.S. Dept. of Health and Human Services
200 Independence Avenue SW, Room 509F
HHH Building
Washington, DC 20201

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

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

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

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

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

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

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

تدع اسم الما تامدخ ناف، (Arabic) ةيبرعلا ثدحتت تنك اذا: ةيبن ت
يناجملا فتامل مقرب لاصتال ا جري. لكل ةحاتم ةيناجملا ةيوغلل
لكب تصاخلا فيرعتلا ةقاطب ولع جردملا

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**), udostępniłmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala português (**Portuguese**), contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ACHTUNG: Falls Sie Deutsch (**German**) sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

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

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

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

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

Member phone number services should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through the member phone number services are for informational purposes only and provided as part of your health plan. Wellness nurses, coaches and other representatives cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. 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.

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

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

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

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

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.

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Virtual Visits and video chat with a doctor are not an insurance product, health care provider or a health plan. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 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.

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

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

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

The UnitedHealthcare Healthy Pregnancy application is only available to eligible members of certain employer-sponsored plans. Application registration is required.

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

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.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. OptumRx® is an affiliate of United HealthCare Insurance Company.