



**Welcome**

**Get the most out  
of your benefits.**

**For CenturyLink Employees  
and Dependents enrolled in a  
UnitedHealthcare Plan for 2020**

# Thank you for being a UnitedHealthcare member.

We're here to help make each step of your health care experience easier. This guide was designed to help you better understand your benefits, find care, manage costs and get more out of your health plan.

## What's inside:



### Visit [myuhc.com](https://myuhc.com)®.

Sign up for [myuhc.com](https://myuhc.com) and get a personalized website that gives you access to your health plan details. You'll need your health plan ID card and date of birth. **When creating your account, you should use your personal email address, not your CenturyLink work email address per the CenturyLink policy on use of company email.** There is no expectation of privacy when you use the company email system for personal communications, including any emails sent to or from your company email address.



### Get on-the-go access.

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



### Call toll-free.

If you don't have computer access, can't find answers, or need language assistance with questions on your benefits, call the CenturyLink Well Connected Health Advocate Team at **1-800-842-1219**, TTY **711**, for one-on-one support. Or call 24/7 to speak to a nurse.



### Connect with us.

**f** [Facebook.com/UnitedHealthcare](https://Facebook.com/UnitedHealthcare)  
**t** [Twitter.com/UHC](https://Twitter.com/UHC)  
**i** [Instagram.com/UnitedHealthcare](https://Instagram.com/UnitedHealthcare)  
**y** [YouTube.com/UnitedHealthcare](https://YouTube.com/UnitedHealthcare)



### CenturyLink Service Center

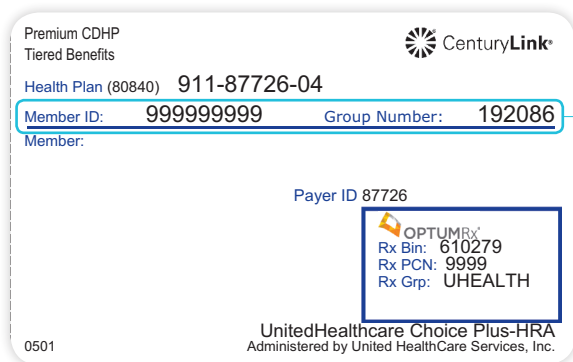
Call **1-800-729-7526** Monday through Friday, 7:30 a.m. to 5:30 p.m. MT or go online to [centurylinkhealthandlife.com](https://centurylinkhealthandlife.com). When you call, listen for and select the "health care" prompts. You can also download the UPoint® mobile app. Search: **UPoint Mobile HR App**, available at no cost from your app store.

# 1. Get started.



## Get to know your health plan ID card.

Your health plan ID card has information about you and your coverage. Remember to carry it with you wherever you go. When you visit your doctor, show your card so they know how to bill for their services. You can also access a digital version through the UnitedHealthcare app. See next page for more information.



### Member ID and group number

Use these when registering on [myuhc.com](https://myuhc.com) or calling with questions.

<sup>1</sup> Example only. Your costs may vary.

Note: You will not receive a separate prescription drug card; your health plan ID card will be for both medical and prescription drug benefits.



## Activate your [myuhc.com](https://myuhc.com) account.

When it comes to managing your health plan, [myuhc.com](https://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.

You will be able to use your HealthSafe ID username and password to connect to all of your medical plan and health and well-being benefits online at [myuhc.com](https://myuhc.com) or the UnitedHealthcare app. You will also be able to use Touch ID®.

## Set up your account today.

1. Go to [myuhc.com](https://myuhc.com).
2. Click on "Register Now." You'll need your health plan ID card and date of birth. **When creating your account, you should use your personal email address, not your CenturyLink work email address per the CenturyLink policy on use of company email.** There is no expectation of privacy when you use the company email system for personal communications, including any emails sent to or from your company email address.
3. Follow the step-by-step instructions.

## Get started.



## 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.



## Medical and Prescription Benefits Overview

Savings HDHP Plan with a Health Savings Account (HSA)		Standard CDHP with a Health Reimbursement Account (HRA)		CenturyLink Premium CDHP Plan with a Health Reimbursement Account (HRA)	
<ul style="list-style-type: none"><li>• With Employee-Funded HSA (maximum contribution):</li><li>• \$3,550 Employee</li><li>• \$7,100 Employee + 1 or more enrolled</li></ul> <p>Note: If you are 55 or older, you can contribute an extra \$1,000 “catch-up” contribution.</p>		<ul style="list-style-type: none"><li>• With Company-Funded HRA Contribution:</li><li>• \$500 Employee</li><li>• \$750 Employee + Spouse/Domestic partner</li><li>• \$750 Employee + Children</li><li>• \$1,000 Family</li></ul>		<ul style="list-style-type: none"><li>• With Company-Funded HRA Contribution:</li><li>• \$1,000 Employee</li><li>• \$1,500 Employee + Spouse/Domestic partner</li><li>• \$1,500 Employee + Children</li><li>• \$2,000 Family</li></ul>	
You pay					
In-network	Out-of-Network	In-network	Out-of-Network	In-network	Out-of-Network
Deductible (combined medical and pharmacy deductible)					
\$1,500	\$3,000	\$1,500	\$3,000	\$1,500	\$3,000
\$3,000	\$6,000	\$2,250	\$4,500	\$2,250	\$4,500
\$3,000	\$6,000	\$2,250	\$4,500	\$2,250	\$4,500
\$3,000	\$6,000	\$3,000	\$6,000	\$3,000	\$6,000
Out-of-Pocket Limit (includes deductible; combined for in-network and out-of-network expenses)					
\$3,600	\$7,200	\$3,600	\$7,200	\$3,200	\$6,400
\$6,850	\$14,400 *	\$5,400	\$10,800	\$4,800	\$9,600
\$6,850	\$14,400 *	\$5,400	\$10,800	\$4,800	\$9,600
\$6,850	\$14,400 *	\$6,850	\$14,400 *	\$6,400	\$12,800 *

\* Charges above allowable amount not included.

This information 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.

Group Number: 192086, UnitedHealthcare Phone Number: 1-800-842-1219



## Medical and Prescription Benefits Overview

	Plan pays	
	In-network	Out-of-Network
<b>Doctors and Specialists</b> <ul style="list-style-type: none"> <li>Primary care doctor visit</li> <li>Specialist visit</li> </ul>	Plan pays 80% after deductible	Plan pays 50% of allowable amount* after deductible
<b>Preventive Care</b> <ul style="list-style-type: none"> <li>Well-child visits</li> <li>Mammogram</li> <li>Immunizations</li> <li>Annual physical</li> </ul>	Plan pays 100%, no deductible	Not covered
<b>Urgent and Emergency Care</b> <ul style="list-style-type: none"> <li>Urgent care visit</li> <li>Emergency room</li> <li>Ambulance</li> </ul>	Plan pays 80% after deductible	Plan pays 50% of allowable amount* after deductible
<b>Hospital Care</b> <ul style="list-style-type: none"> <li>Outpatient surgery</li> <li>Lab and X-ray</li> <li>Hospital stay</li> <li>Maternity stay</li> </ul>	Plan pays 80% after deductible	Plan pays 50% of allowable amount* after deductible
<b>Pharmacy (Includes retail and mail order, all tiers)</b> <ul style="list-style-type: none"> <li>Prescription drug expenses are paid the same as any other medical expenses.</li> <li>Any maintenance prescription after 2 retail refills will require future fills be made through the mail order program with OptumRx®. See pages 13-15 for more details about prescription benefits.</li> </ul>	Plan pays 80% after deductible	Plan pays 50% after deductible

\*Charges above the allowable amounts not included" refers to reasonable and customary (R&C) charges. Refer to the Summary Plan Description for information on what's not covered.

This information 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.

Group Number: 192086, UnitedHealthcare Phone Number: 1-800-842-1219



## Emergency Room Non-Emergent Visits in 2020

**Know your care options. Your choice may save you time and money.**

If you have a life-threatening condition, call 911 or go to an emergency room (ER) right away. But if it's not an emergency, start with your primary care physician (PCP) or family doctor first. If seeing your PCP isn't possible, it's important to know your other care options. (See page 10 in this guide.)

**If you use the ER for non-emergent (non-life-threatening) services, you will pay more for the visit.**

- Your plan will only pay 50% of the cost after the annual deductible is met if your visit is deemed non-emergent (non-life threatening).
- You will be responsible for meeting your annual deductible and the remaining 50%.
- This includes both in-network and out-of-network providers.

**A \$300 penalty will be charged on 4th and any subsequent ER visits in 2020 for each covered family member age 18 and over.**

- If you call UnitedHealthcare (using the number on back of your health plan ID card) within 7 days from the ER visit, the penalty will be waived.
- If you are admitted to the hospital, the penalty will not apply.
- The penalty will not apply toward your annual deductible or out-of-pocket maximums.

## 2. If you need health care.

---



### 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](https://myuhc.com) > [Find Care & Costs](#) to locate:

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

#### 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](https://myuhc.com) > [Find Care & Costs](#) to estimate your costs.

#### Look up the cost of a medication.

Sign in to [myuhc.com](https://myuhc.com) > [Pharmacies & Prescriptions](#) to find information about your medication, prices and lower-cost options.

#### Look for the Tier 1 symbol.



Where you go for care can make a difference in how much you pay. Tier 1 providers are doctors, facilities and other health care providers who may offer you the greatest value for your health care benefits. Look for the “blue dot” Tier 1 symbol when searching the network on [myuhc.com](https://myuhc.com).

#### There's coverage if you need to go out of the network.

An out-of-network provider is a doctor, health care professional or facility (like a hospital or ambulatory surgery center) that isn't part of the UnitedHealthcare network. **You may pay more for services you get from out-of-network providers.** Out-of-network providers set their own rates and may bill you for the difference between their rates and what UnitedHealthcare pays based on eligible rates. If you received a bill for this difference, you are responsible for the cost and it does not apply to your out-of-pocket limit.

**Note: Out-of-network outpatient surgery is not covered by your plan. You will be responsible for all associated costs.**

**If you need health care.**



## **How to get the most out of your benefits.**

### **Pick a PCP.**

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

### **Keep up on preventive care.**

Preventive care — such as routine wellness exams, certain recommended screenings and immunizations — is covered 100% in our network.\*

Learn more at [uhc.com/preventivecare](https://uhc.com/preventivecare).

\*Age appropriate preventive care services are covered 100% when received in the plan network. You may be required to receive approval for some services before they can be covered.

If you need health care.



## CenturyLink Standard and Premium CDHP Plans with a Health Reimbursement Account (HRA)

### Enjoy the benefits of an HRA.

An HRA is an account funded by CenturyLink to help you pay for covered health care services.

- When you have a covered service, like a doctor visit, the entire cost will apply to your deductible.
- Your HRA will pay first. This means you don't pay anything until the HRA is spent.

### Your funds roll over each year.

If you don't spend all of your HRA during the plan year, it will roll over to the next year. There is no maximum to how much you can roll over each year.

### Paying for prescriptions.

The plan has a combined medical and pharmacy deductible. This means that eligible prescription costs will apply to your deductible. Your HRA can be used to help pay for those prescriptions. If all of the HRA is spent, you will need to pay the entire cost of your prescriptions out of your pocket, unless you have enrolled in a flexible spending account (FSA), which can then be used to pay for these expenses until you meet your deductible. See page 9 for more information about FSAs.

See also your benefit plan documents for details about your prescription coverage.

### Reminder:

If you are enrolled in a traditional health care FSA and either the Standard or Premium CDHP with HRA, eligible medical and prescription drug expenses will be paid first from any grace-period FSA balance (for dates of service through March 15 of the current year) then from your HRA before using available money in your current year FSA.

**If you spend all of the money in the HRA and in your pretax FSA, you will have to pay for any health care (including pharmacy) expenses on an after-tax basis until you meet your deductible and reach your out-of-pocket limit.** Once you reach the out-of-pocket limit, the plan will pay 100% of covered services (medical and pharmacy).

## How paying for network care works with an HRA.

STEP 1

### Your deductible (Medical and Pharmacy)

Your HRA will automatically pay for all covered services first. You won't pay as long as you have money in your HRA.

**If you spend all of the money in the HRA, it's your turn to pay.** You will pay for your covered services until you've paid the remaining deductible.

Your HRA  
pays first

+

You pay

STEP 3

### Your coinsurance

After you reach the deductible, you share the costs with the plan.

Your plan  
pays 80%<sup>1</sup>

+

You pay  
20%<sup>1</sup>

STEP 3

### Your out-of-pocket limit

When you reach the limit, you are done paying. The plan pays 100% of covered services for the rest of the plan year. The out-of-pocket limit is there to protect you if you have a major medical event.

You are done paying

Preventive care is covered 100% when you use a network doctor.<sup>2</sup>

<sup>1</sup> For in-network covered services. You will pay more coinsurance for out-of-network services. Check your health plan documents for details.

<sup>2</sup> Age appropriate preventive care services are covered 100% when received in the plan network. You may be required to receive approval for some services before they can be covered.

If you need health care.



## CenturyLink Savings HDHP with a Health Savings Account (HSA)

### You may be eligible to open an HSA.

An HSA is a tax-advantaged personal savings account to help you save and pay for your health care. You don't have to pay federal taxes or, in most cases, state income taxes, when you deposit money into your HSA, let it collect interest or use it for qualified health care expenses.\* To learn more about HSAs, including eligibility, or to open your HSA with Optum Bank®, Member FDIC, please contact the CenturyLink Service Center.

### You can contribute money into your HSA.

You can contribute through pretax payroll deductions and you can earn contributions from CenturyLink when you participate in the Well Connected reward program. (Learn more about the Well Connected rewards at [centurylink.com/iamwellconnected](https://centurylink.com/iamwellconnected).)

There are contribution limits set by the Internal Revenue Service (IRS) and adjusted annually. The 2020 limits are below and are inclusive of all deposits into the account, including any Well Connected rewards:

- \$3,550 for individual coverage
- \$7,100 for family coverage
- \$1,000 extra if you're 55 or older, also known as catch-up contributions

### You own your HSA.

The money in your HSA is yours to keep, even if you retire or leave the company. And the balance rolls over from year to year—there is no use-it-or-lose-it rule with an HSA.

### Your HSA Health Care Spending Card.

Once your HSA is set up with Optum Bank and you have contributed to your HSA, you will receive a Health Care Spending Card to pay for eligible medical and pharmacy expenses. You can manage your HSA and pay claims conveniently through [myuhc.com](https://myuhc.com).

### Use your HSA to help save and pay for qualified expenses:

Qualified expenses:

- Doctor office visits
- Dental care and braces
- Prescriptions
- Chiropractic services and more
- Eyeglasses and contacts

## How paying for network care works with an HSA.

STEP  
1

### Your deductible (Medical and Pharmacy<sup>1</sup>)

You pay for all services, including prescriptions, until you meet your deductible. You can use an HSA to help pay it.

Pay with your HSA  
or pay another way

STEP  
3

### Your coinsurance

After you reach the deductible, you share the costs with the plan. You can use an HSA to help pay your share.

Your plan  
pays 80%<sup>2</sup>

+

You pay  
20%<sup>2</sup>

STEP  
3

### Your out-of-pocket limit

When you reach the limit, you are done paying. The plan will pay 100% of covered services for the rest of the plan year.

You are done paying

Preventive care is covered 100% when you use a network doctor.<sup>3</sup>

\*To review which states tax HSA contributions, see [optumbank.com](https://optumbank.com) for more information.

<sup>1</sup> The HDHP plan has a combined medical and pharmacy deductible. This means that eligible prescription costs will apply to your deductible. You will need to pay the entire cost of your prescriptions out of your pocket (you can use any HSA funds) until you meet your deductible. See your benefit plan documents for more details about your prescription coverage.

<sup>2</sup> For in-network covered services. You will pay more coinsurance for out-of-network services. Check your health plan documents for details.

<sup>3</sup> Age appropriate preventive care services are covered 100% when received in the plan network.

You may be required to receive approval for some services before they can be covered.

If you need health care.



## Flexible Spending Account

An FSA lets you set aside money to help pay for health and dependent day care expenses. You don't pay taxes on the money you contribute, which helps save you money. You must sign up each year.

### Traditional Health Care FSA

Use it for eligible health care expenses like medical, pharmacy, dental and vision services and supplies.

### Limited-Purpose Health Care FSA (for Savings HDHP with HSA participants only)

Use it **ONLY** for eligible out-of-pocket dental and vision care expenses, including dental and/or vision plan deductibles, copayments and coinsurance not covered by other plans.

### Dependent Day Care FSA

Use it for eligible out-of-pocket day care expenses for the care of eligible dependents so that you (and your spouse, if married) can work or attend school full-time.

## Using your FSA.

### Automatic payment (Health Care FSA only):\*

We can automatically pay bills (claims) for covered services from your FSA.

- **Direct deposit:** We can reimburse your money directly into your personal bank account.
- **Online claim form:** Easily submit your claims on [myuhc.com](https://myuhc.com) to get reimbursed from your FSA.

### The MasterCard® Health Care Spending Card.

Standard and Premium CDHP with HRA plan participants who enroll in an FSA will receive a debit card for 2020 from UnitedHealthcare. Savings HDHP with HSA plan participants will not receive a separate debit card. This card makes it easier to pay for services from your FSA.



## Need assistance with an FSA?

Call **1-877-311-7849** and reference the CenturyLink Group Number:

**199383** (CenturyLink Employees and Spouses in a UnitedHealthcare Plan excluding Qwest Employees Represented by Communications Workers of America or International Brotherhood of Electrical Workers), or

**743979** (Qwest Employees Represented by Communications Workers of America or International Brotherhood of Electrical Workers).

## Keep more of your money.

With an FSA, you won't pay taxes on the money you set aside. You may save hundreds of dollars depending on how much you contribute.

### 2020 Contribution Limits

- **Health Care FSA:**  
\$150 – \$2,750 per year. FSA limits are determined by the IRS and are subject to change for 2020.
- **Dependent Care FSA:**  
\$150 – \$5,000 per year. Per IRS guidelines, highly compensated employees maximum is \$2,000; if married, filing separate returns, maximum is \$2,500.

2020 FSA funds can be used for eligible expenses incurred from Jan. 1, 2020, to March 15, 2021. You have until April 30, 2021, to file claims, or remaining funds are forfeited. The Internal Revenue Service (IRS) does not allow expenses incurred by domestic partners or their dependents to be reimbursed through an FSA unless you can and do claim your domestic partner's dependents on your income tax return.

Any unused FSA balance is forfeited annually unless you file eligible reimbursement claims by April 30 of the following year.

\*Will not work for out-of-network services and Dependent Care FSA services.

## If you need health care.



# Know where to go.

## See your primary care provider whenever possible.

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

**Telemedicine**  
options include UnitedHealthcare Virtual Visits and MDLIVE®.

To use UnitedHealthcare Virtual Visits or learn more, visit [uhc.com/virtualvisits](https://uhc.com/virtualvisits), the UnitedHealthcare app, or call the number on your health plan ID card.

To use MDLIVE or learn more, visit [centurylink.com/mdlive](https://centurylink.com/mdlive) or call 1-888-632-2738.

Quick Care Options	Needs or Symptoms	Cost									
<b>CenturyLink Well Connected Health Advocate Team</b> Call 1-800-842-1219, TTY: 711.	<ul style="list-style-type: none"> <li>Choosing where to get medical care</li> <li>Finding a doctor or hospital</li> <li>Health and wellness help</li> <li>Answers to questions about medicines</li> </ul>	<div>\$</div> <div>Lowest</div>									
<b>Telemedicine</b> 24/7 access to medical care for common conditions when traveling or when your doctor is unavailable. Doctors can write a prescription, if needed, that you can pick up at your local pharmacy.	<ul style="list-style-type: none"> <li>Cold</li> <li>Flu</li> <li>Fever</li> <li>Pink eye</li> <li>Sinus</li> </ul>	<div>Cost per visit:</div> <table> <tr> <th></th><th>MDLIVE</th><th>UnitedHealthcare</th></tr> <tr> <td>CDHP:</td><td>\$0<sup>1</sup></td><td>\$49<sup>2,3</sup></td></tr> <tr> <td>HDHP:</td><td colspan="2">\$40/\$59 for dermatology visit<sup>2,3</sup></td></tr> </table>		MDLIVE	UnitedHealthcare	CDHP:	\$0 <sup>1</sup>	\$49 <sup>2,3</sup>	HDHP:	\$40/\$59 for dermatology visit <sup>2,3</sup>	
	MDLIVE	UnitedHealthcare									
CDHP:	\$0 <sup>1</sup>	\$49 <sup>2,3</sup>									
HDHP:	\$40/\$59 for dermatology visit <sup>2,3</sup>										
<b>Convenience Care Clinic</b> Located within a local retail store, drugstore or grocery store. No appointment is needed and you'll typically have shorter wait times than the urgent care center or ER. To find one near you, log in to <a href="https://myuhc.com">myuhc.com</a> or use the UnitedHealthcare app.	<ul style="list-style-type: none"> <li>Skin rash</li> <li>Flu shot</li> <li>Minor injuries</li> <li>Earache</li> </ul>										
<b>Urgent Care Center</b> Walk in without an appointment. Wait times are generally much shorter than the ER.	<ul style="list-style-type: none"> <li>Low back pain</li> <li>Respiratory illness (cough, pneumonia, asthma)</li> <li>Stomach illness (pain, vomiting, diarrhea)</li> <li>Infections (skin, eye, ear/nose/throat, genital-urinary)</li> <li>Minor injuries (burns, stitches, sprains, small fractures)</li> </ul>										
<b>Emergency Room (ER)</b> For life-threatening care needs and emergencies, call 911 or visit the emergency room.	<ul style="list-style-type: none"> <li>Chest pain</li> <li>Shortness of breath</li> <li>Severe asthma attack</li> <li>Major burns</li> <li>Severe injuries</li> <li>Kidney stones</li> </ul>	<div>\$\$\$</div> <div>Highest</div>									

### Freestanding ERs

Many people have been surprised by their bill after visiting a freestanding emergency room (FSER). FSERs, sometimes referred to as urgency centers, typically bill at ER rates and can be \$1,900 or more than an urgent care center. Neither located in nor attached to a hospital, FSERs are able to treat similar conditions as an ER but do not have an ER's ability to admit patients.

#### Ask before you enter:

1. Is this an urgent care center or ER?
2. Is this facility a network provider?

Nurses cannot diagnose problems or recommend specific treatment and are not a substitute for your doctor's care.

The information is 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.

Note: MDLIVE is not a service or benefit provided by or administered by UnitedHealthcare. For more information, visit [mdlive.com](https://mdlive.com).

Nurses cannot diagnose problems or recommend specific treatment and are not a substitute for your doctor's care.

<sup>1</sup> Deductible does not apply. Cost per visit is \$0.

<sup>2</sup> This number is the amount you pay per consultation if you have not met your annual deductible. After deductible is met, you would be responsible for 20% of the cost until you meet your out-of-pocket maximum, after which the plan will pay 100% of eligible expenses.

<sup>3</sup> UnitedHealthcare Virtual Visits do not include dermatology consults.



## 2nd.MD Second Opinion Service

Connect with a world-renowned, board-certified specialist for a video or phone consultation when you have questions about any condition, including:

- A new diagnosis
- Changes in your treatment plan
- A chronic condition
- Medication reviews
- Possible surgery or procedures

2nd.MD's specialist network covers all medical specialties and includes physicians from top hospitals, such as Boston Children's Hospital, Harvard, Cleveland Clinic and many more.

This benefit is provided at no cost to you, your spouse and your eligible dependents enrolled in a CenturyLink medical plan option.

### Activate your 2nd.MD membership

1. Download the 2nd.MD app (iTunes® or Google Play™) or visit [centurylink.com/2ndmd](https://centurylink.com/2ndmd).
2. Activate your account with your ZIP code.
3. Add your eligible dependents.
4. Submit a consult request online, through the app, or by calling the 2nd.MD Care Team at **1-866-269-3534**.

“What we appreciated most about 2nd.MD was the quick access to a leading specialist and constant follow-up from 2nd.MD to make sure our concerns were resolved. Had we not used 2nd.MD, frankly, my wife would have likely not survived her medical issue. If you have a medical challenge and are considering 2nd.MD, don't hesitate, just make the call.”

Randy, 2nd.MD member

## Back Pain Resource Guide

A comprehensive online tool that provides answers so you can feel better now and prevent back pain from getting you down in the future. Visit [CenturyLink.com/BackHealth](https://CenturyLink.com/BackHealth).



Your CenturyLink plan covers your first 3 chiropractic or physical therapy visits at 100% for in-network back pain-related health care.

If you need health care.



## Why is preventive care so important?

Regular preventive care visits and health screenings help you learn your current health status and may help identify potential health issues before they become more serious. Working with your doctor can help you determine what preventive care services may be right for you.

### Common preventive care office services

- Annual wellness exam
- Biometric screening of your weight, blood pressure, glucose (blood sugar) and cholesterol
- Immunization vaccines, such as flu shots
- Well-baby and well-child visits

### Common preventive care screening services

- Cancer screenings, such as mammography, colorectal and cervical
- Osteoporosis screening
- Tobacco use and sexually transmitted diseases screening
- Healthy diet, physical activity and depression screening

### How is preventive care covered?

Certain preventive health services will be covered based on age, gender and other factors without cost sharing (100% without charging a copayment, deductible or coinsurance), as long you receive these services from a network provider.

### How do I know if a service is preventive care or not?

Preventive care focuses on your current health when you are symptom-free. If you are receiving treatment due to a symptom or an existing illness, the services provided usually won't be considered or covered as preventive care.



### Will my health plan consider medications a preventive service?

Plans that include a pharmacy benefit may cover some prescriptions as preventive care. These may include:

- Certain FDA-approved women's contraceptives
- Folic acid supplements for women who may become pregnant
- Iron supplements for children at risk for anemia

Certain over-the-counter preventive medications may also be covered under your plan.

## Unlock your rewards

Complete your biometric screening and your Rally® Health Survey to earn \$150 in wellness rewards from CenturyLink. You'll also unlock your opportunity to earn all of your wellness incentives—up to \$600!

If you are a spouse or domestic partner also enrolled in the CenturyLink plan, you can also earn up to \$600 in wellness rewards.

Visit [centurylink.com/iamwellconnected](https://centurylink.com/iamwellconnected) to learn more and to get started.

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.

This content is provided for informational purposes only, and does not constitute medical advice. Always consult your doctor about any decisions about medical care. The services outlined here do not necessarily reflect the services, vaccines, screenings, or tests that will be covered under your benefit plan. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member number on your health plan ID card.

Certain procedures may not be fully covered under some benefit plans.

Certain preventive care services are provided as specified by the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services are based on your age, gender and other health factors. UnitedHealthcare also covers other routine services that may require a copay, coinsurance or deductible.

# 3. Using your pharmacy benefits.



Your medical plan includes prescription drug coverage through OptumRx.

Manage your prescription drug benefits online.

Log in to your account at [myuhc.com](https://myuhc.com) or the UnitedHealthcare app to:

- Set up OptumRx Home Delivery.
- Opt in to receive email reminders when it is time to refill your prescriptions.
- Find a pharmacy near you.
- Confirm the medication you are taking is covered and find out if there is a lower-cost alternative.
- Review the formulary/preferred drug list.

We’re ready to help.

For additional information and specific questions about your benefits, log on to [myuhc.com](https://myuhc.com) or call the number on the back of your health plan ID card.

## How to fill your prescriptions

Your CenturyLink pharmacy benefits include 3 types of medications. It’s important to know what type of medication you need, as it will determine where and how you get your prescriptions filled.

	1. Non-maintenance medications	2. Maintenance medications	3. Specialty medications
Type of medication	Medications prescribed for short-term conditions and for no more than a 30-day supply. Often prescribed for: * <ul style="list-style-type: none"><li>• Seasonal allergies</li><li>• Flu</li><li>• Short-term pain management</li><li>• Infections (e.g., ear, bronchial, urinary tract, etc.)</li></ul>	Medications prescribed for chronic, long-term conditions and are taken on a regular, recurring basis. Often prescribed for: * <ul style="list-style-type: none"><li>• Diabetes</li><li>• High cholesterol</li><li>• Hypertension</li><li>• Chronic pain</li><li>• Birth control</li></ul>	Medications used to treat complex, long-term conditions that may be injected, inhaled or taken by mouth. These medications often require additional care, unique handling (i.e., storage and shipping) and special support to ensure proper use and prescription dispensing. They may not be available at retail pharmacies. Often prescribed for: * <ul style="list-style-type: none"><li>• Inflammatory disease</li><li>• Cancer</li><li>• Multiple sclerosis</li><li>• Hemophilia</li><li>• HIV</li></ul>
Length of prescription fill	Up to 30 days, no refills	Up to 90 days, with up to 3 refills	Up to 30 days per fill
Where to fill	Retail pharmacy	Mandatory mail order through OptumRx Home Delivery	Mandatory mail order through BrivoRx® Specialty Pharmacy



Remember that you can use your Health Care Spending Card or Savings Card (depending on your medical plan election) to help pay for your prescriptions.

\*For example only. Not an extensive list of conditions commonly treated with these medications.

## Using your pharmacy benefits.



	1. Non-maintenance medications	2. Maintenance medications	3. Specialty medications
<b>Filling a NEW prescription</b>  <div> <b>Where's the nearest network pharmacy?</b>            Log on to <a href="http://myuhc.com">myuhc.com</a> or use the <b>UnitedHealthcare app</b> to find a network pharmacy near you.         </div>	<p>Ask your provider to call in your prescription or take it to a local network retail pharmacy.</p>	<p>You'll need both the following from your doctor:</p> <p>One 30-day prescription with up to 1 refill* that you can fill at any network retail pharmacy to get started.</p> <p>AND</p> <p>One 90-day prescription with up to 3 refills for OptumRx Home Delivery.</p> <p>There are 2 options for getting your new maintenance medication set up for home delivery:</p> <ol style="list-style-type: none"> <li>1. Use ePrescribe. Ask your provider to send the electronic prescription to OptumRx for you. He or she can also fax in the order, if needed.</li> <li>2. Go to <a href="http://myuhc.com">myuhc.com</a> or the UnitedHealthcare app to submit the new prescription online. You will need to have the written prescription from your doctor to complete your setup.</li> </ol> <div> <b>Opt in to receive refill reminders</b>            When you register on <a href="http://myuhc.com">myuhc.com</a> or use the UnitedHealthcare app you can opt in to receive email reminders when it is time to refill your prescriptions.         </div> <p>Take note:</p> <ul style="list-style-type: none"> <li>• -Manufacturer coupons and copay cards are not accepted with Home Delivery. Note: If you choose to pay for your maintenance medications outside of the plan using coupons or copay cards, you can submit a Member Reimbursement Claim Form for coverage review. If covered, the amount allowed will apply to your deductible and out-of-pocket costs.</li> <li>• It will take approximately 10 days for your new 90-day prescription to be filled and delivered to your door by OptumRx. It's important to set up your new prescription with OptumRx as soon as possible. Remember to fill your first 30-day prescription at your retail pharmacy.</li> <li>• Your CenturyLink health plan benefits allow up to 2 fills at retail before your medication must be set up/transferred to home delivery for refilling.*</li> </ul>	<p>Call BriovaRx at <b>1-855-427-4682</b> to get started. They will contact your provider for you to get your specialty medication prescription transferred and filled.</p> <div> <b>Special handling requirements?</b>            If there are any special handling requirements for your medication, your BriovaRx specialist will talk to you about this when setting up your prescription.         </div> <p>Take note:</p> <ul style="list-style-type: none"> <li>• You will receive only a 30-day supply per specialty medication fill.</li> <li>• Drug manufacturers' copay cards or coupons (if available) can be used to help decrease your out-of-pocket cost, including copays or coinsurance, for select medications. In many instances, these copay cards or coupons may also be used while you are in the deductible phase or have not yet reached your out-of-pocket maximum.</li> <li>• As of Jan. 1, 2018, cost-share amounts paid by a drug copay card or coupon no longer count toward your deductible or out-of-pocket maximum. Drug copay cards and coupon amounts still may be used to help cover your cost share for your medications filled through BriovaRx; however, only the money you pay out of pocket will apply to your deductible and out-of-pocket total. You can review your deductible and out-of-pocket amounts online anytime by logging in to <a href="http://myuhc.com">myuhc.com</a> or the UnitedHealthcare app.</li> </ul>
<b>REFILLING a prescription</b>	N/A	<p>Use 1 of the 3 convenient options:</p> <ul style="list-style-type: none"> <li>• Go to <a href="http://myuhc.com">myuhc.com</a> or the UnitedHealthcare app to place your refill order online.</li> <li>• Call the customer service number on the back of your health plan ID card.</li> <li>• Complete the reorder form included with each medication shipment and submit it to OptumRx for processing.</li> </ul>	<p>Your BriovaRx specialist will talk to you about this when setting up your prescription.</p>

\*Your CenturyLink health plan benefits allow up to 2 fills at retail before your medication must be set up/transferred to home delivery for refilling.

## Using your pharmacy benefits.



## Get familiar with special requirements

Your pharmacy plan has special requirements for certain medications to be covered by your benefits.

### Prior authorization

To see if prior authorization requirements apply to your prescription, check your PDL on [myuhc.com](https://myuhc.com). If you see “PA” next to your medication, you need a prior authorization. Prior authorization requires your doctor to tell us why you are taking your medication in order to determine if you will receive benefit coverage. This is based on uses listed in the U.S. Food and Drug Administration (FDA) approved medication labeling and other clinical criteria.

### Step therapy

To see if the step therapy requirement applies to your prescription, check your PDL on [myuhc.com](https://myuhc.com). If you see “ST” next to your medication, you must first try a lower-cost option before the brand-name medication will be covered. Usually Step 1 medications are generic medications that have proven effective for people with certain conditions. Talk to your doctor about what options could work for you.

### Quantity limits

To see if the quantity limit applies to your prescription, check your PDL on [myuhc.com](https://myuhc.com). If your medication has a “QL” by it on the PDL, there is a quantity limit restriction and you will need to make sure your prescription is written only for the covered amount. If your prescription is written for a greater amount than what your plan covers, you will need to request a prior authorization to confirm coverage. Either you or your doctor can contact OptumRx for prior authorization or with any questions.

## There are 2 ways to request a prior authorization:

1. Ask your doctor to submit an online notification/prior authorization request directly to OptumRx.
2. Call the number on the back of your health plan ID card to request a prior authorization. With your permission, we will contact your doctor.



## Save money with the PDL

Located on [myuhc.com](https://myuhc.com), the prescription drug list (PDL) is a list of covered medications broken into sections called tiers. Choosing medications in lower tiers may save you money.

## 4. After you receive care.



### Know how claims are processed.

#### When you see a network doctor.

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

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

#### When you see an out-of-network doctor.

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

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



#### Track your claims online.

Follow your claims from start to finish, and track payments you've made to health care providers in one place. You can also pay your bills online at [myuhc.com](https://myuhc.com).



#### Problem with a claim?

Information about the appeals and grievances process can be found on [myuhc.com](https://myuhc.com). You can also call the toll-free member number on your health plan ID card, TTY **711**.

# 5. Programs designed for better health.



## Health and Wellness

### Take care of your health and be rewarded.

Through CenturyLink, you have a wellness program called **Well Connected** that gives you the opportunity to earn valuable rewards for completing certain health activities, such as completing the Rally Health Survey, getting your preventive screenings, participating in personal coaching, Real Appeal®, completing a Rally City Walk or Team Challenge and more!

Your participation in Well Connected, including completion of the online Health Survey, is confidential. Personal health information is protected by applicable privacy laws and is not shared with CenturyLink.

All you have to do to improve your health and start earning rewards is follow these 3 steps.



### Get started:

Visit [centurylink.com/iamwellconnected](https://centurylink.com/iamwellconnected).

#### Step 1:

##### Complete your Rally Health Survey and Biometric Screening — Earn \$150

Note: Completing the Rally Health Survey and biometric screening is required to earn other rewards.

#### Step 2:

##### Complete your Health Actions — Earn up to \$450

Get and stay healthy with a wide variety of programs, actions and challenges. No matter your goal, you have the resources for every step of your wellness journey. View health actions on the following page and get complete information at [centurylink.com/iamwellconnected](https://centurylink.com/iamwellconnected).

#### Step 3:

##### Redeem your Rewards — Up to \$600 in HSA or HRA deposits or gift cards!\*

**These services are for informational purposes only and should not be used for emergency or urgent care situations. In an emergency, call 911 or go to the nearest emergency room.** UnitedHealthcare representatives cannot diagnose problems or recommend specific treatment and are not a substitute for your doctor's care. Your personal health information is kept private in accordance with applicable privacy laws and regulations.

\*Reward format based on CenturyLink employee election during open enrollment period. Reward format is also applicable to eligible spouse or domestic partner. An Optum Bank health savings account (HSA) is required to have your rewards deposited into your HSA.

## Programs designed for better health.



### Get help losing weight and keeping it off.

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

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

To learn more or enroll, go to [centurylink.com/realappeal](https://centurylink.com/realappeal). Note: If you have already completed Real Appeal and want to re-enroll, please call **1-844-344-7325**.

### Let the doctor come to you.

When you need care—anytime, day or night—telemedicine can be a convenient option. From treating flu and fevers to caring for migraines and allergies, you can video chat or talk with a doctor 24/7 from your desktop, tablet or phone.

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

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

The doctor can provide a diagnosis and, if appropriate, send a prescription\* to your local pharmacy. It's all part of your health benefits.

To use UnitedHealthcare Virtual Visits or learn more, visit [uhc.com/virtualvisits](https://uhc.com/virtualvisits), the UnitedHealthcare app, or call the number on your health plan ID card.

To use MDLIVE or learn more, visit [centurylink.com/mdlive](https://centurylink.com/mdlive) or call **1-888-632-2738**.

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

MDLIVE is not a service or benefit provided by or administered by UnitedHealthcare. For more information, visit [mdlive.com](https://mdlive.com).

## Programs designed for better health.



## Substance use treatment support.

The Substance Use Treatment Helpline at **1-855-780-5955** is available 24/7 to connect you and your family to a local network provider who can recommend the appropriate substance use treatment you need. It is available to anyone, including individuals who are not covered by a UnitedHealthcare health plan. This confidential service is provided at no added cost to you. Your personal information will be kept confidential in accordance with state and federal laws.

Call **1-855-780-5955** or visit [liveandworkwell.com/recovery](https://liveandworkwell.com/recovery).

This service provides referrals as well as information to help you maintain and enhance your personal health management. This service and information is not meant to replace professional medical advice. Certain treatments may not be included in your insurance benefits. Check your health plan regarding your coverage of services.

## Decision Support

### Have a health plan question?

We're here to help you find information and resources.

- Have questions about your benefits?
- Need help resolving a claim?
- Not sure where to go for care?
- Have questions about a recent screening or test?
- Can't find a doctor?

Contact us for help with a personal touch. Call the member phone number listed on your ID card or sign in to [myuhc.com](https://myuhc.com).

### Get access to the nation's leading health care facilities.

If you have a special condition, our Centers of Excellence network provides help finding a doctor and medical center as well as help with understanding your illness. To see covered conditions, log in to [myuhc.com](https://myuhc.com).

## Programs designed for better health.



## Care for Specific Conditions

### Support for those in need of a transplant.

The **Transplant Resource Services** program can connect you to transplant **Centers of Excellence**. Our experienced nurses will work with you and your doctors throughout your care. If you have questions, please call the member phone number on your ID card, TTY **711**.

### You don't have to face cancer alone.

With **Cancer Resource Services**, you'll get personal support from an experienced cancer nurse who can help you understand your diagnosis and share information to help you make more informed decisions about your care. Call the member phone number on your ID card, TTY **711** or visit [myuhc.phs.com/cancerprograms](https://myuhc.phs.com/cancerprograms) to learn more.

### Get help if you have congenital heart disease.

A team of specialized **Congenital Heart Disease** nurses will support you through all stages of treatment and recovery. They'll help you make more informed decisions and provide information to **Centers of Excellence** providers.

### Breathe easier.

Get help managing your asthma with the **Asthma Disease Management Program**. It can help you avoid asthma triggers and reduce hospital stays and missed days at work or school.

## Programs designed for better health.



## Support for Parents

### Get support throughout pregnancy.

The **Maternity Support Program** provides expectant mothers with support before, during and after pregnancy. When you enroll in the program, you'll be able to work with a maternity nurse who's available to answer questions and provide educational information. It's best to enroll within the first 12 weeks of pregnancy, but you can start through week 34. The program is provided at no additional cost, as part of your health plan. To learn more or to enroll, call **1-800-842-1219**, TTY **711**. You can also download the **UnitedHealthcare Healthy Pregnancy®** app, which offers online support and resources to help support a healthier pregnancy. The app is available at no cost from your app store.

### Support for parents whose infants are admitted to the NICU.

**Neonatal Resource Services (NRS)** provides a dedicated team of experienced neonatologists, neonatal intensive care unit (NICU) nurse case managers and social workers who can provide support and assistance during your infant's admission to the NICU. The case manager will also provide discharge planning assistance and ongoing support post-discharge based on your infant's needs. To take part in the NRS program:

- Call the member phone number on your ID card or
- Call NRS at **1-866-534-7209**.

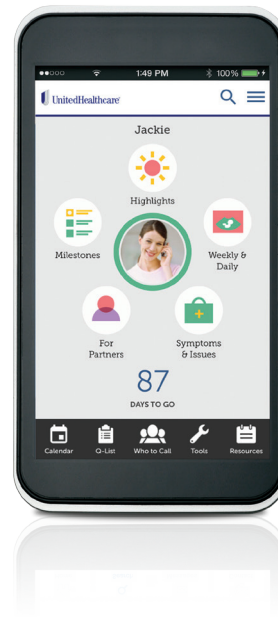
The plan pays benefits as described under the Covered Health Care Service Category in your plan documents.

### Mommy-friendly benefit.

This is a new benefit for U.S. employees that enables nursing mothers traveling for work the opportunity to ship expressed milk to their child from anywhere in the United States. It's as simple as logging onto the Milk Stork website, entering the name and address of the hotel where you're staying, and selecting the size/type of package you need. Milk Stork will have a cooler and materials waiting for you at your hotel when you arrive, ready for you to fill and ship to your baby overnight by FedEx. Just click, pack and ship. If you prefer to travel with your milk, you can order a travel tote from Milk Stork that can be checked or carried on to planes.

Visit the Milk Stork – CenturyLink Portal to learn more or contact the CenturyLink Service Center for Health and Welfare Benefits.

This benefit is administered by Milk Stork. It is not affiliated with UnitedHealthcare.



## 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](mailto: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 health plan ID card.

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

**Online:** [ocrportal.hhs.gov/ocr/portal/lobby.jsf](https://ocrportal.hhs.gov/ocr/portal/lobby.jsf)

Complaint forms are available at  
[hhs.gov/ocr/office/file/index.html](https://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 **(Russian)**. Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

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

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

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

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

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

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

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

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

DÍI BAA'ÁKONINÍZIN: **Diné (Navajo)** bizaad bee yánilti'go, saad bee ákaxanída»awo»ígíí, t'áá jíik'eh, bee ná'ahóót'i'. T'áá shoodi ninaaltsoos nítł'izi bee nééhozinígíí bine'dęę t'áá jíik'ehgo béésh bee hane'i biká'ígíí bee hodíilnih.



Visit [uhc.com/legal/required-state-notices](https://uhc.com/legal/required-state-notices) to view important state required notices.



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 or dollar amounts in this guide differ from what is in the official benefit coverage documents, the official benefits coverage documents prevail.

Member support 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 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. 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.

Nurse and coach 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 or coach services is not a substitute for your doctor's care.

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

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

The information provided under the Maternity Support Program is for general informational purposes only and is not intended to be nor should be construed as medical and/or nutritional advice. Participants should consult an appropriate health care professional to determine what may be right for them.

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

The Centers of Excellence (COE) program providers and medical centers are independent contractors who render care and treatment to health plan members. The COE program does not provide direct health care services or practice medicine, and the COE providers and medical centers are solely responsible for medical judgments and related treatments. The COE program is not liable for any act or omission, including negligence, committed by any independent contracted health care professional or medical center.

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.

Virtual Visits 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.

OptumRx is an affiliate of UnitedHealth Group.

Tier 1 providers may be subject to change, visit [myuhc.com](https://myuhc.com) for the most current information or call the number on your health plan ID card.

Twitter is a registered trademark of Twitter, Inc. Facebook is a registered trademark of Facebook, Inc. YouTube is a registered trademark of Google, Inc. Instagram is a registered trademark of Instagram, LLC.

The UnitedHealthcare® app is available for download for iPhone® or Android™.

Android is a registered trademark of Google LLC.

Google Play and the Google Play logo are registered trademarks of Google Inc.

Apple, App Store and the Apple logo are trademarks of Apple Inc., registered in the U.S. and other countries.

Administrative services provided by United HealthCare Services, Inc. or their affiliates.

[Facebook.com/UnitedHealthcare](https://Facebook.com/UnitedHealthcare) [Twitter.com/UHC](https://Twitter.com/UHC) [Instagram.com/UnitedHealthcare](https://Instagram.com/UnitedHealthcare) [YouTube.com/UnitedHealthcare](https://YouTube.com/UnitedHealthcare)