Ready to enroll?

Complete the enrollment form provided by your employer. Be sure to include:



The first and last name and address for all physicians selected by you and your covered family members.



The entire physician identification number (including all leading zeros) for each physician listed on the form.





Getting the most out of your plan starts here.

UnitedHealthcare Navigate[®]

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates. MT-1176455.0 7/18 @2018 United HealthCare Services, Inc. 18-8443-C



UnitedHealthcare®

Understanding the Navigate plan.

The Navigate plan is an HMO (Health Maintenance Organization) available to members who live or work in Pennsylvania that covers network services provided byor ordered by-your primary care physician (PCP). You'll choose a PCP from a network of local providers who will refer you to network specialists or hospitals-when necessary. With the Navigate plan, any time you need care it will be coordinated through your PCP.

Three key steps to cost savings.



Pick your PCP.

- through the health care system.
- Your PCP's name will be printed on your health plan ID card.



Know when you need a referral.

- physician or specialist.
- on your ID card.

3

Visit your network locations providers and facilities.

You'll need to verify which providers and facilities are in the Navigate network when seeking care. You can verify the network status of a provider or facility by accessing myuhc.com® or calling the member phone number on your ID card.

Terms to know:

Network

A doctor, health care professional or other provider—like a hospital or laboratory—that we've contracted with to provide health care services.

Health Maintenance Organization (HMO)

A type of plan that requires members to choose a PCP from a network of local health care providers.

• When you enroll, select a PCP from the network to help guide you

• You'll need a referral from your PCP before seeing another network

 Your physician should seek prior authorization for things like surgeries and most lab and radiology services, even when performed in your doctor's office. If you have questions, call the member phone number

What you need to know about coverage.

Preventive care is covered at 100 percent.

Preventive care includes routine checkups, screenings and immunizations that may help you stay healthier and avoid serious health problems. Visit uhcpreventivecare.com for recommendations.

Emergencies and non-emergencies.

- Emergency care in an emergency room is covered anywhere in the world, including at non-network hospitals.
- Seeing an out-of-network provider for non-emergency services is not covered.



Picking a PCP.

Your PCP can be a doctor in general practice, family practice, internal medicine or pediatrics. Once you decide on your PCP, you may want to contact their office to be sure they're accepting new patients. If you don't pick a PCP, or if the PCP you select is not in the network, you will not have coverage.

Your PCP:



Should be located in a town or city near where you (the subscriber) live or work.



Can be selected for the entire family or each covered member can choose their own.

How to find and choose a PCP.

- **1** Go to **myuhc.com**[®]. (You don't need to log in.)
- right side of the screen.
- 3 Click Medical Directory then All UnitedHealthcare Plans.
- Balanced HMO/Navigate Plus HMO.
- the categories listed.
- See physician ID number and additional locations.
- and spaces) on your enrollment form.



2 Click Find Medical and Mental Health Providers and Facilities located on the

4 When asked "What plan are you looking for?" select **Navigate HMO/Navigate**

5 Enter your ZIP code, choose **People** then **Primary Care** then select from any of

6 Scroll through the search results, and once you have made your selection, choose

7 Find the **physician ID** and record the 14-digit number (including all leading zeros

You can switch your PCP any time.

Simply log in to myuhc.com or call the member phone number on your health plan ID card.

The Navigate health plan ID card.

Your PCP.

You'll want to make sure that it matches the name you select at enrollment.

Referrals. -

This is a reminder to you and your PCP that referrals are required for specialist care.



Receive better care at lower costs.

Research shows that people who use a PCP are more likely to get better care and have lower health care costs.¹ Your PCP will be a partner in managing your health. They will provide preventive care, routine services and treatment for minor injuries and short-term illnesses. And if you need special care, they can connect you to a specialist.

¹ Institute for Healthcare Improvement, www.IHI.org, 2013.

A big network with big benefits.

Your plan's network gives you access to more than 54,000 providers across Pennsylvania.² This makes it easier and more convenient for you to get access to care at a reasonable price. All health care providers, including physicians, specialists, pharmacies and hospitals, in your plan's network can help you save money.

² Local network counts based on internal analysis as of May 2018

Reminder:

Your PCP will need to refer you to a specialist for care. You should validate that a referral has been entered prior to seeing a network physician or specialist by checking on myuhc.com or calling the member phone number on your ID card.

However, there are some instances when you do not need a referral for certain services.

Referrals are not needed to see the following providers as long as they are in the Navigate network:

- Obstetricians/gynecologists (OB/GYNs).
- Behavioral health or substance use disorder clinicians.
- Convenience care clinics.
- Urgent care clinics.
- Designated network Virtual Visit provider.

Remember: Emergencies are covered anywhere in the world, including out-of-network hospitals, without a referral.

Paying for network care.

Copayment (copay)³

You'll pay a fixed amount of money for each covered doctor visit or prescription.

Deductible³

This is the amount you will need to pay before your plan will start to pay for covered services.

Coinsurance³

After you've reached your deductible, you'll only pay a percentage of each covered service.

Out-of-pocket limit

You'll never pay more than your out-of-pocket limit during the plan year. The out-of-pocket limit includes all of your network payments.

Convenient pharmacy benefits.

The Navigate plan offers members our Essential Prescription Drug List (PDL) for their prescription drug coverage. This PDL combines a unique benefit design that has four tiers and is a closed formulary, which means medications not on tiers 1 through 4 are excluded from coverage. Members using an excluded medication do have the capability to meet criteria for review and approval for coverage.

Exclusions, are in place to help significantly reduce costs. In most therapeutic classes, there are multiple medication options that all work the same or similar way. By covering only those drugs that offer both unique clinical value as well as competitive prices, we provide coverage for treatment options our members need while achieving lower total pharmacy costs.

In addition, Navigate members receive:



Access to our Value Pharmacy Network with more than 35,000 network pharmacies across the country including Walgreens, Rite Aid, Walmart, Giant Eagle and Wegmans. Please note that CVS and Target are not part of the Navigate pharmacy network.



24/7 phone support, refill reminders and other help.



No-cost home delivery of long-term medications.



Download the Health4Me[®] app.

You have easy-to-use tools so you can see what a treatment or procedure typically costs, estimate the price of prescriptions and see what your share of expenses may be.

Sign up for our health and wellness program powered by Rally[®] to become more active and help reach health goals.

Find quality doctors.

Access your plan online at myuhc.com.

Easily estimate health care costs.

Join health and wellness missions.

We make it easier to find doctors and other health care providers who have met criteria for providing guality and cost-efficient care in the UnitedHealth Premium[®] program. Just look for the blue hearts.

• Find network providers, care centers and pharmacies.

• Manage your claims, track expenses and pay your medical bills.

• View benefit cost details for your covered family members.

• Find and compare covered medications.

• Refill, renew and transfer home delivery prescriptions.

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

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: 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. BH/IMAH/IE: бесплатные услуги перевода доступны для людей, чей родной язык является **русском (Russian)**. Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

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, D.C. 20201

We provide free services to help you communicate with us such as letters in others 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.

The fine print.

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.

The information is 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.

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

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

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.

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.

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

n, 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.

ATTENZIONE: in caso la lingua parlata sia l'**italiano (Italian)**, sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

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.

注意事項:日本語(Japanese)を話される場合、無料の言語支援サ ービスをご利用いただけます。健康保険証に記載されているフリ ーダイヤルにお電話ください。

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

ध्यान दें: यद आिप **हविौ (Hindi)** बोलते है, आपको भाषा सहायता सेबाएं, नशि्शुलुक उपलब्धु है। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर काल करें।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារមមណ៍: បីស៊ិនម៉នកូនិយាយ**កាស់ខ្ទមរំ (Khmer)** សពាជំនួយកាសាដាយក្នុងគឺតុចល គឺមានសាបមនក។ សូមទូរស័ពទទាលខេតតគិតចល ដលៃមាននាល់អតុដសញ្ញញាណប័ណ្ណណរ បសអ៊នក។

PAKDAAR: Nu saritaem ti **llocano (llocano)**, ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyam. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

DÍÍ BAA'ÁKONÍNÍZIN: **Diné (Navajo)** bizaad bee yániłti'go, saad bee áka>anída>awo>ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shǫǫdí ninaaltsoos nitł'izí bee nééhozinígíí bine'dée> t'áá jíík'ehgo béésh bee hane'í biká'ígíí bee hodíilnih.

OGOW: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.