

Welcome

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

United Healthcare®

We're glad you're here



Choosing a health plan is a big decision. Whether you've already enrolled or you're still comparing options, it helps to know there's a plan that's built to make things clearer – not more complicated.

This guide is meant to help you better understand UnitedHealthcare benefits, find care options, manage costs and get more out of your health plan.

Get connected

Scan this code to download the **UnitedHealthcare® app** or visit **myuhc.com®**

New to UnitedHealthcare?

If you have a qualifying condition, you may be able to temporarily continue care with an out-of-network provider while you transition to a network provider. This is called Transition of Care. Learn more and see if you qualify on the UnitedHealthcare app or at **uhc.com/transferringcare**.

Get to know your plan

UnitedHealthcare plans are built to support your health needs — big and small. With access to quality providers, helpful digital tools and opportunities to save along the way, your plan is designed to work with you.

The basics: How a typical health plan works

Here's an example of how a typical plan works when you receive care from a network provider. Your plan may be different than this example. To find your specific details, tap the **Benefits** icon on the **UnitedHealthcare app.**

Plan start	Deductible reached		Out-of-pocket limit met
$ You pay 100%*	You pay a percentage	Your plan pays a percentage	Your plan pays 100%

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

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

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

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

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



See a plan in action

Learn more about how copays and deductibles work

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

Understanding your plan

There are many different ways a plan can work to support your well-being while keeping costs as low as possible for you. Check the details of your plan to understand your specific benefits.

Some plans may require you to:

Select a primary care provider (PCP)

A PCP can play an important role in supporting your health goals and helping guide you to the care you need. Even if it's not required, it's a good idea to have a PCP.

Get prior authorization, or preauthorization, before you receive certain services

This may help avoid surprise bills—checking that care is covered and medically necessary before you receive care. To see if prior authorization is needed, tap **Cost Estimates** on the home screen of the **UnitedHealthcare app.**

Get a PCP referral to see a specialist or other network provider

Going through your PCP helps you receive the right care, at the right time. To see if your plan requires referrals, or to confirm that a referral has been made, sign in at **myuhc.com > Benefits & Costs.** Or check to see if your health plan ID card says "Referrals Required."

Most plans include benefits that are available at no additional cost to you, such as:

Preventive care that's 100% covered

Routine annual checkups and certain recommended screenings and immunizations are covered by most plans when you see network providers.

Health services and wellness programs

Your plan may include services, programs, tools and resources designed to support your physical and mental wellness.



See what a PCP can do for you

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

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

Simple ways to help you save

We know cost matters. That's why our plans include built-in ways to help you access quality care while keeping costs as affordable as possible.

Search for providers

Smart Choice — our provider search tool — helps you find cost-effective providers who match your personalized preferences, like location, language and gender. To get started, tap the **Find Care** icon on the **UnitedHealthcare app.** Then, use your Smart Choice search results to look for quality providers who may help you save money.

Cost-saving programs you may see include:

- **UnitedHealth Premium® Care Physicians**
  Providers in the UnitedHealth Premium program meet certain quality care criteria, including safe, timely, effective and efficient care.
- **Tier 1 providers**
  As part of some health plans, you may pay less when you see Tier 1 doctors and specialists.

Shop around

Whenever you need care — from minor procedures to major surgeries — it's a good idea to check approximate pricing first. Tap **Cost Estimates** on the homepage of the **UnitedHealthcare app.**

Stay in the network

Whether your plan's network is focused on local health systems or offers nationwide coverage, it's designed to help support easier access to care, when and where you need it. And you'll pay less when you use doctors and facilities in the network. Visiting an out-of-network provider could end up costing you more or may not be covered at all.

Keep up on preventive care

A preventive care visit may help you spot issues early, so you can treat them before they become more serious. Learn more at **uhc.com/preventivecare**.

Smart Choice is proprietary to UnitedHealthcare designed to provide members with greater personalization and choice with respect to the provider search experience that considers member preferences quality care, costs, accessibility and convenience. Smart Choice is intended as a guide when selecting care. Smart Choice may rely on personal data. We do not endorse any particular provider or guarantee quality. Scores are generated using artificial intelligence (AI). The AI may not always be error-free and could include incomplete or inaccurate information. Judgement should be used when selecting care.

UnitedHealth Premium® is proprietary to UnitedHealthcare. UnitedHealth Premium evaluates physicians based on safe, timely, effective and efficient quality care criteria to help members make more informed choices for their health care. **It's intended only as a guide and should not be the sole factor considered when selecting a physician. Designations have a risk of error and members should discuss designations with a physician before choosing one. If a member already has a physician, they should also consult with them for advice on selecting other physicians.** The fact that a physician does not have a Premium Care Physician designation does not mean that the physician does not provide quality health care services. All physicians in the UnitedHealthcare network have met certain minimum credentialing requirements (separate from the UnitedHealth Premium criteria). Please visit the medical care directory specific to the member's benefit plan for physician designations and detailed information about UnitedHealth Premium and the evaluation methodology.

Tier 1 providers may be subject to change, visit myuhc.com® for the most current information or call the number on your health plan ID card.

Know where to go for care

It's good to start with your PCP whenever possible. They know your health history and can help point you in the right direction. If they're not available, understanding your other care options may help you find the right care and avoid unnecessary costs – potentially saving up to $1,500 compared to an emergency room (ER) visit.*

For serious or life-threatening conditions, call 911 or go to an emergency room.

	Your plan may include access to:	Good for:		Average cost*
	**Primary care provider** Office or virtual visit	• Checkups for ongoing conditions like asthma, diabetes and more	• Follow-up visits • Preventive care	$
	**24/7 Virtual Visits** A care provider over the phone, video or by chat	• Allergies • Cold, fevers and flu	• Migraine • Pinkeye	$
	**Convenience care clinic** Nurse practitioners and physician assistants at retail pharmacy clinics	• Earache • Flu shots	• Minor injuries • Skin rash	$$
	**Urgent care center** Physicians and care teams at walk-in clinics	• Infections • Pains and sprains	• Respiratory illnesses • Stomach illnesses	$$$
	**Emergency room (ER)** Physicians and care teams at hospital emergency departments	• Chest pain • Kidney stones • Major burns • Severe asthma attacks	• Severe injuries or symptoms • Shortness of breath	$$$$

To learn more, visit **uhc.com/quickcare**

*2023: Median allowed amounts charged by UnitedHealthcare Network Providers and not tied to a specific condition or treatment. Actual payments may vary depending upon benefit coverage. (Estimated $1,500 difference between the median emergency room visit, $1,700 and the median urgent care visit $165.) The information and estimates provided are for general informational and illustrative purposes only and are not intended to be nor should be construed as medical advice or a substitute for your doctor's care. You should consult with an appropriate health care professional to determine what may be right for you. In an emergency, call 911 or go to the nearest emergency room.

Virtual primary care are services available with a provider via video, chat, email, or audio-only where permitted under state law. Virtual primary care services are only available if the provider is licensed in the state that the member is located at the time of the appointment. Virtual primary care is not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times, or in all locations, or for all members. Certain prescriptions may not be available, and other restrictions may apply.

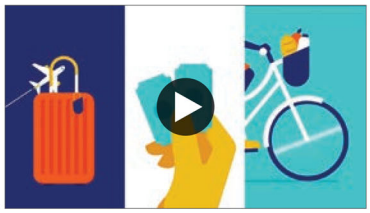
24/7 Virtual Visits is a service available with a Designated Virtual Network Provider via video, or audio-only where permitted under state law. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 24/7 Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times, or in all locations, or for all members. Check your benefit plan to determine if these services are available.

Get set up for a better health plan experience

Access digital tools to keep you connected

Your personalized digital tools – the UnitedHealthcare app and **myuhc.com** – give you access to resources integrated with Avery, an AI companion and digital resource for your health plan. Avery is an always-on intelligent assistant to help you maximize your benefits and provide quick answers – making it easier to find what you're looking for and take action. Designed to help you:

- Review plan documents, like Explanations of Benefits and Health Statements
- Find and schedule appointments with quality network providers through Smart Choice search results, which are personalized to your preferences
- View and pay claims, understand your account balances and deductibles
- Understand cost estimates and covered services before you get care
- Learn more about the programs and benefits that are available to you



Get on-the-go plan info

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

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

Check your health plan ID card

Once you receive your ID card, it's a good idea to make sure all of the information is correct and that you keep it in a secure place. You can also access a digital copy of your ID card on the UnitedHealthcare app.

Connect for support and answers

If you have questions about your health plan benefits, help is always available.

Scan the code or sign in on the UnitedHealthcare app or at **myuhc.com**

Avery is an AI companion that uses generative artificial intelligence to provide general information and educational assistance. Avery's responses may be incomplete or inaccurate and should not be relied upon as error-free. Avery is provided for informational purposes only and does not constitute medical advice, professional advice, a benefit determination, a guarantee of coverage, a referral, or an authorization for health care services. Avery is not a substitute for the advice or judgment of your health care provider or other qualified professionals. Coverage and benefits are subject to the terms, conditions, limitations, and exclusions of your applicable health plan.

Take care, take note

Take care, take note



Here's the fine print

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

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

We share available contact information (e.g., name, address, phone number) with your assigned PCP office, and they may contact you with additional information on how they can help coordinate your care.

Where available, 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. Please refer to the Website or Mobile application terms of use under Benefits & Costs to access a cost estimate, and under Find Care to search for care. Level Funded and Neighborhood Health Partnership members can access average cost data online or on the mobile app. None of the average costs are intended to be a guarantee of your costs or benefits. Your actual costs may vary. Please refer to the Website or Mobile application terms of use under Benefits & Costs to access average cost data, and under Find Care to search for care.

Refer to your health plan coverage documents for information regarding your specific benefits. Specific information about network and out-of-network facility-based physicians can be found at myuhc.com or by calling the toll-free member phone number that appears on your health plan ID card.

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

If there is a difference between this communication and your plan documents, the terms of your plan documents will apply. Your health plan ID card is for identification only. Your provider will need to verify your eligibility for coverage. Please note that the following abbreviations may be used on your ID card:
Office = Office Visit; **PCP** = Primary Care Provider; **Spec** = Specialty Care; **UrgCare** = Urgent Care; **ER** = Emergency Room; **InPtHosp** = Inpatient Hospital; **Ded** = Deductible; **Coins** = Coinsurance; **OON** = Out of Network; **OOPM** = Out of Pocket Max; **Rx** = Pharmacy; **IND** = Individual; **FAM** = Family; **INN** = In Network; **OOPM - NoMax** = No Out of Pocket Maximum. Your ID card may show a subset of these terms due to state and federal regulations.

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 health plan 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
https://www.hhs.gov/ocr/complaints/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

ATTENTION: Free language assistance services and free communications in other formats, such as large print, are available to you. Call the toll-free number on your member identification card. (TTY 711).

ማሳሰቢያ፦ አማርኛ **(Amharic)** የሚናገሩ ከሆነ፣ ነፃ የቋንቋ እገዛ አገልግሎቶች እና ነፃ ተግባቦቶች እንደ ትልቅ እትም ባሉ ሌሎች ቅርፀቶች ለእርስዎ ይገኛሉ። በአባልነት መታወቂያ ካርድዎ ላይ ያለውን ነፃ የስልክ ቁጥር ይደውሉ።

ملاحظة: إذا كنت تتحدث اللغة العربية **(Arabic)**، ستتوفر لك خدمات المساعدة اللغوية المجانية والمراسلات المجانية بتنسيقات أخرى، مثل الطباعة بأحرف كبيرة. اتصل بالرقم المجاني المدون على بطاقة تعريف العضو خاصتك.

দেখুন: আপনি যদি বাংলায় **(Bengali-Bangla)** কথা বলেন, তাহলে বিনামূল্যে ভাষা সহায়তা পরিষেবা এবং বড় মুদ্রণসহ অন্যান্য ফরম্যাটে যে কোনও বিনামূল্যে উপলব্ধ। আপনার সদস্যদের পরিচয়পত্রের কার্ডের টোল-ফ্রি নম্বরে কল করুন

ចំណាំ៖ ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ **(Cambodian-Mon-Khmer)** សេវាជំនួយភាសា ឥតគិតថ្លៃ និងការទំនាក់ទំនងដឥតគិតថ្លៃកែទម្រង់ដូចជាឡើត ស្ទួចជា ព្រមទាំងសេវាជំនួយភាសាឥតគិតថ្លៃ។ ទូរស័ព្ទមកលេខឥតគិតថ្លៃនៅលើប័ណ្ណ សមាជិកសម្គាល់អ្នក។

請注意：如果您說中文 **(Chinese-Traditional)**，您可以獲得免費語言協助服務和大字體等其他格式的免費通訊。請致電您的會員身份卡上的免付費電話號碼。

ATTENTION: Si vous parlez français **(French)**, des services d'assistance linguistique et des communications dans d'autres formats, notamment en gros caractères, sont mis à votre disposition gratuitement. Appelez le numéro gratuit figurant sur votre carte de membre.

ATANSYON: Si w pale Kreyòl Ayisyen **(French Creole-Haitian Creole)**, gen sèvis lang gratis ak kominikasyon nan lòt fòma lo disponib, tankou sa ki enprime ak gwo lèt. Rele nimewo gratis ki sou kat idantifikasyon manm ou an.

ACHTUNG: Falls Sie Deutsch **(German)** sprechen, stehen Ihnen kostenlose Sprachassistenzdienste und kostenlose Kommunikation in anderen Formaten, wie zum Beispiel große Schrift, zur Verfügung. Rufen Sie die gebührenfreie Nummer auf Ihrer Mitgliedskarte an.

ΠΡΟΣΟΧΗ: Εάν μιλάτε ελληνικά **(Greek)**, υπάρχουν διαθέσιμες δωρεάν υπηρεσίες γλωσσικής βοήθειας και δωρεάν επικοινωνία σε άλλες μορφοποιήσεις, όπως μεγάλα γράμματα. Καλέστε τον αριθμό χωρίς χρέωση στην κάρτα μέλους σας.

ધ્યાન આપો: જો તમે ગુજરાતી **(Gujarati)** બોલતા હો તો વિના મૂલ્યે ભાષાકીય મદદરૂપ સેવાઓ અને અન્ય ફોર્મેટમાં વિના મૂલ્યે સંચાર, જેમ કે મોટી પ્રિન્ટ, તમારા માટે ઉપલબ્ધ છે. તમારા સભ્ય ઓળખ કાર્ડ પરના ટોલ-ફ્રી નંબર પર કૉલ કરો.

ध्यान दें: यदि आप हिंदी **(Hindi)** बोलते हैं, तो आपके लिए मुफ़्त भाषा सहायता सेवाएँ और अन्य प्रारूपों में मुफ़्त संचार, जैसे कि बड़े प्रिंट, उपलब्ध हैं। अपने सदस्य पहचान पत्र पर दिए गए टोल-फ्री नंबर पर कॉल करें।

LUS TSEEM CEEB: Yog tias koj hais lus Hmoob **(Hmong)**, muaj cov kev pab cuam txhais lus thiab muaj kev sib txuas lus pab dawb ua lwm hom ntawv, xws li luam ua ntawv loj rau koj. Thov hu rau tus xov tooj hu dawb ntawm koj daim npav ID.

PANANGIKASO: No agsasaoka iti Ilocano **(Ilocano)**, magun-odmo dagiti libre a serbisio ti tulong iti pagsasao ken libre a komunikasion iti dadduma a pormat, kas iti dadakkel a letra. Tawagan ti awan-bayadna a numero a masarakan iti kard a pakabigbigam kas miembro.

ATTENZIONE: Se parla italiano **(Italian)**, può usufruire di servizi di assistenza linguistica gratuiti e comunicazioni gratuite in altri formati, come ad esempio la stampa a caratteri grandi. Chiami il numero verde riportato sul Suo tesserino identificativo.

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や、拡大文字など他の形式での無料のコミュニケーションをご利用いただけます。 会員証に記載されているフリーダイアル にお電話ください。

알림사항 : 한국어 **(Korean)** 를 사용하시는 경우 무료 언어 지원 서비스와 대형 활자체 등 다른 형식으로 된 의사 소통 매체를 이용하실 수 있습니다 . 회원 ID 카드에 나와 있는 무료 전화번호로 전화해 주십시오 .

ໝາຍເຫດ: ຖ້າ[illegible] **(Lao)**, ທ່ານສາມາດ[illegible]ການຊ່ວຍເຫຼືອດ້ານພາສາຟຣີ ແລະ ການ[illegible]ຮູບແບບ[illegible]ໃຫຍ່. ໃຫ້ໂທ[illegible]ໃນ[illegible]ທ່ານ.

ध्यान दिनुहोस्: यदि तपाईले नेपाली **(Nepali)** बोल्नुहुन्छ भने, निःशुल्क भाषा सहायता सेवाहरू र अन्य ढाँचाहरूमा निःशुल्क संचारहरू, जस्तै ठूलो छाप, तपाईका लागि उपलब्ध छन्। आफ्नो सदस्य पहचान कार्डमा रहेको टोल फ्री नम्बरमा कल गर्नुहोस्।

توجه: اگر به زبان فارسی **(Persian-Farsi)** صحبت می‌کنید، خدمات رایگان کمک زبانی و ارتباطات رایگان در قالب‌های دیگر، مانند چاپ بزرگ، در دسترس شما هستند. با شماره رایگان مندرج روی کارت شناسایی عضویت‌تان تماس بگیرید.

UWAGA: Dla osób mówiących po polsku **(Polish)** dostępne są bezpłatne usługi pomocy językowej i bezpłatne komunikaty w innych formatach, takich jak duży druk. Prosimy zadzwonić pod bezpłatny numer podany na karcie identyfikacyjnej.

ATENÇÃO: se você fala português **(Portuguese)**, tem à sua disposição serviços gratuitos de assistência linguística e comunicações gratuitas em outros formatos, como caracteres grandes. Ligue para o número gratuito que se encontra no seu cartão de identificação de membro.

ਧਿਆਨ ਦਿਉ: ਜੇ ਤੁਸੀ ਪੰਜਾਬੀ, **(Punjabi)** ਬੋਲਦੇ ਹੋ, ਤਾਂ ਮੁਫ਼ਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਅਤੇ ਹੋਰ ਫ਼ਾਰਮੈਟਾਂ ਵਿੱਚ ਮੁਫ਼ਤ ਸੰਚਾਰ, ਜਿਵੇਂ ਕਿ ਵੱਡੇ ਅੱਖਰ, ਤੁਹਾਡੇ ਵਾਸਤੇ ਉਪਲਬਧ ਹਨ। ਤੁਹਾਡੇ ਮੈਂਬਰ ਪਹਚਿਾਣ ਕਾਰਡ 'ਤੇ ਦੱਤੇ ਟੋਲ-ਫ਼ਰੀ ਨੰਬਰ 'ਤੇ ਕਾਲ ਕਰੋ।

ВНИМАНИЕ! Если вы говорите на русском языке **(Russian)**, вам доступны бесплатные услуги языковой поддержки и бесплатные материалы в других форматах, например, напечатанные крупным шрифтом. Звоните по бесплатному номеру телефона, указанному на вашей идентификационной карте участника.

ATENCIÓN: Si habla español **(Spanish)**, hay servicios de asistencia de idiomas y comunicaciones en otros formatos como letra grande, sin cargo, a su disposición. Llame al número gratuito que figura en su tarjeta de identificación de miembro.

PAUNAWA: Kung nagsasalita ka ng Tagalog **(Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika at libreng komunikasyon sa ibang mga format, tulad ng malalaking print. Tawagan ang walang bayad na numero na nasa iyong ID card ng miyembro.

โปรดทราบ หากคุณพูดภาษาไทย **(Thai)** ได้ คุณสามารถใช้บริการช่วยเหลือด้านภาษาฟรีและการสื่อสารในรูปแบบอื่น ๆ ฟรี เช่น การพิมพ์ด้วยตัวอักษรขนาดใหญ่ โทรไปยังหมายเลขโทรฟรีสำหรับสมาชิกตามบัตรประจำตัวของคุณ

УВАГА: Якщо ви розмовляєте українською **(Ukrainian)**, вам надаються безкоштовні мовні послуги та безкоштовні повідомлення в інших форматах, наприклад, крупним шрифтом. Зателефонуйте за безкоштовним номером телефону, позначеним на Вашій ідентифікаційній картці.

توجہ دیں: اگر آپ اردو **(Urdu)** زبان بولتے ہیں تو آپ کے لیے زبان کی معاون خدمات اور دیگر فارمیٹ میں مفت مواصلات، جیسے بڑے پرنٹ، آپ کے لیے دستیاب ہیں۔ اپنے ممبر شناختی کارڈ پر دیئے گئے ٹول فری نمبر پر کال کریں۔

LƯU Ý: Nếu quý vị nói Tiếng Việt **(Vietnamese)**, quý vị sẽ được cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí và các phương tiện trao đổi liên lạc miễn phí ở các định dạng khác, chẳng hạn như bản in chữ lớn. Gọi đến số điện thoại miễn phí có trên thẻ định danh thành viên của quý vị.





Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates.

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

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.

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

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

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