

DISCOVERY

starts here.





Let's talk about ...



How Medicare Works



Medical Plans



Prescription Drug Plans



Additional Benefits



Making a Choice

Choosing a new health plan.

Learn, compare, then decide.

You may currently be enrolled in a temporary health care plan provided by your employer. If you are turning 65, retiring or new to Medicare, UnitedHealthcare may have a lower cost Medicare health plan option.

We're here to help answer your questions, explain the differences between your options and help you enroll in a UnitedHealthcare plan of your choice.

This booklet will help you understand the basics of Medicare. If you have any questions along the way, give us a call. Now, let's explore what's important to think about when choosing a health plan.

Sincerely,

UnitedHealthcare

We're here to help.



Toll-Free **1-855-357-9462**, TTY **711**
8 a.m. – 6 p.m. CT, Monday – Friday



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Here's a quick look at how Medicare works.

Medicare is a federal health insurance program for people age 65 and older and people with certain disabilities under age 65. Medicare is made up of several parts. Here is a brief description of the parts and how they work.

Who is eligible?

Most people become eligible when they turn age 65. You can be under age 65 and be eligible for Medicare if you have certain disabilities. In addition, you must be a U.S. citizen or a legal resident who has lived in the U.S. for at least five consecutive years.

When can you enroll?

Your Initial Enrollment Period is the three months before the month you turn 65, the month of your birthday and three months after. If you're still working, it may be a good idea to check to see how Medicare works with your current coverage.

Choices for medical coverage.

Original Medicare only

Medicare Advantage plan

Original Medicare plus Medicare Part D

Original Medicare plus a Medicare supplement insurance plan

Most people find that Original Medicare does not give them all the coverage they want. They choose either a Medicare Advantage plan, or they add Medicare supplement insurance and Part D plans to Original Medicare to give them the extra coverage they want.



The basics.

Each part of Medicare offers something a little different. Some parts can be used together, but Medicare Part C puts it together for you.



Original Medicare (Parts A and B)

Original Medicare is made up of Medicare Part A, which helps pay for hospital stays. Part B helps pay for doctor visits and outpatient care. Original Medicare is provided by the government, does not include prescription drug coverage and doesn't have an out-of-pocket maximum.



Medicare Advantage plans (Part C)

Offered by private insurance companies like UnitedHealthcare, these plans combine Medicare Parts A and B into one plan. They also may include prescription drug coverage and additional benefits.



Medicare Prescription Drug plans (Part D)

Medicare Part D plans help pay the cost of prescription drugs and are offered by private companies. You can get Medicare Part D as a part of a Medicare Advantage plan, or as an added stand-alone plan. If you don't sign up when you first become eligible, you may pay a higher premium if you enroll later.



Medicare supplement insurance plans

These plans are not part of Medicare, but they work with Original Medicare to help cover some of the out-of-pocket costs not paid by Medicare Parts A and B. These are offered by private insurance companies like UnitedHealthcare.

You have options to choose from.

You have the flexibility to choose whichever plan that is a good fit for your needs. If you and your spouse are both Medicare eligible, you can each choose a plan that works for you. Not everyone's needs are the same — that's why UnitedHealthcare offers many plan types.



Note: Medicare eligibility rules may be different than your employer's eligibility rules.





Medical Plans



Combine your coverage into one plan.

Medicare Advantage plans combine the coverage of Medicare Parts A and B and sometimes prescription drug Part D coverage. Plus, some plans offer a variety of extra benefits and programs designed to help you live a healthier life. Bundle all of your coverage and additional benefits to help make your health care experience simpler.

Know the costs.

Lower monthly premium.

Medicare Advantage plans may have a lower monthly premium when compared to Medicare supplement insurance.

Pay for what you use.

With Medicare Advantage plans, you only pay for benefits and services you use through co-pays and co-insurance. Plus, you have an out-of-pocket maximum.



UnitedHealthcare Medicare Advantage Plans.

Depending on where you live, you may be able to get these Medicare Advantage benefits and services.



Access to a local provider network.

- Broad, local network of doctors, clinics and hospitals
- No referral needed to see specialists
- Speak with a registered nurse 24/7 at no additional cost
- More than 65,000 network pharmacies nationwide



Extra benefits beyond Original Medicare.

- Prescription drug coverage for no additional premium
- Annual physical and flu shot for a \$0 co-pay
- Worldwide emergency coverage
- Preventive dental coverage
- Routine eye exam and eyewear benefits
- Routine hearing exam and hearing aid benefits
- Fitness program at no additional cost

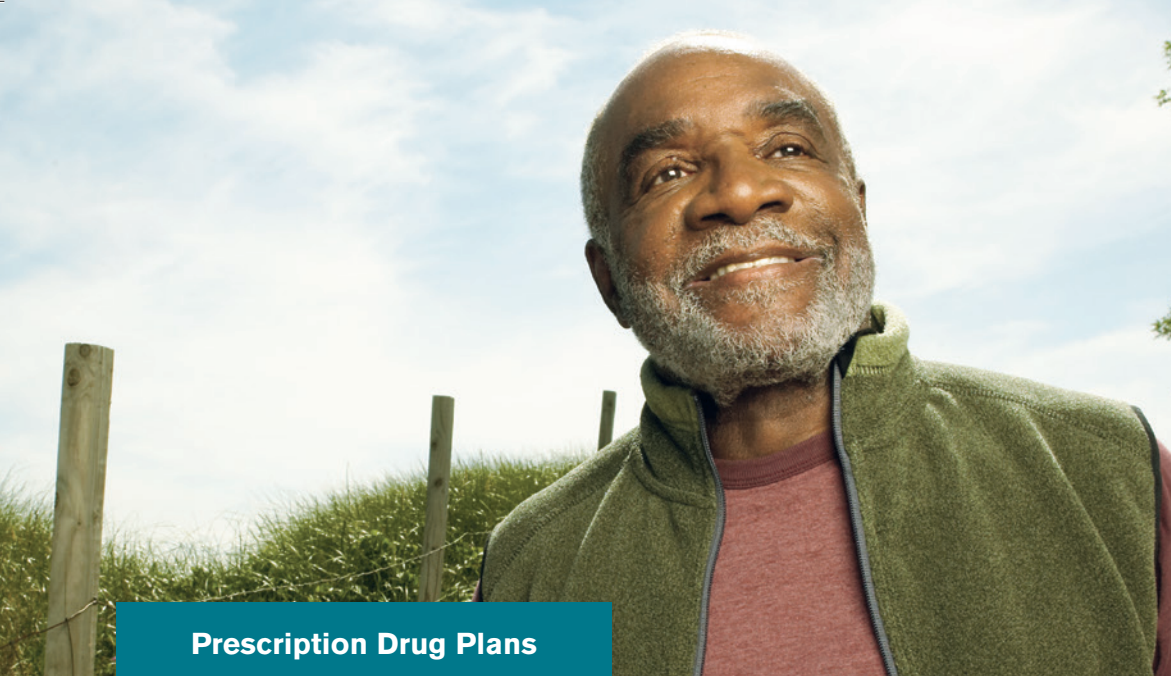
GOOD TO KNOW



Make sure your plan fits your needs.

Call or go online to see what Medicare Advantage plans are available in your area. You can check costs, confirm the prescription drugs you take are covered, and view available UnitedHealthcare Medicare plans in your area.





Prescription Drug Plans



Make prescriptions part of your plan.

Without coverage, prescription drug costs can add up quickly. You also may have to pay higher premiums if you don't sign up when you are first eligible. Whether you have some prescriptions now or choose to plan ahead for needing them in the future, UnitedHealthcare has a variety of Medicare Part D plans to offer the drug coverage you need.

Two ways to get covered.

Included.

Many Medicare Advantage plans include prescription drugs as a part of the standard plan coverage.



Added on.

A Medicare Part D plan can be added onto Original Medicare or to a Medicare supplement insurance plan.



UnitedHealthcare Prescription Drug Plans.

Medicare Parts A and B don't include prescription drug coverage, so you may want to choose a Medicare Part D plan or a Medicare Advantage plan that includes prescription drug coverage. Prescription drug coverage is offered through private insurance companies like UnitedHealthcare. Plans vary by location, cost and the prescription drugs they cover.



Get connected.

- Local pharmacies from our nationwide network
- Extensive drug lists that cover thousands of brand name and generic prescription drugs
- Local pharmacists who can help you manage and understand your prescriptions



Find ways to save.

- Co-pays as low as \$1 with the Preferred Retail Pharmacy Network¹
- Preferred retail network savings
- Coverage on thousands of brand name and generic drugs



Take control.

- A choice of plans, so you can pick the one with the right coverage for you
- Convenient 24/7 online access
- Online resources to help you live a healthier life





Coverage you can smile about.

Dental Plan Insurance Plans² (In and Out of Network*)

Golden Rule Insurance Company or UnitedHealthcare Life Insurance Company is the underwriter of these plans.

From dental cleanings to root canals, it can be difficult to predict how much money you're going to spend for your dental care. Our dental plans can provide the coverage you may need to help promote good dental health.

Our large network can mean savings.

More dentists in our network means you are more likely to keep the same dentist you use today and also have coverage available when traveling. Our network provides access to many dental providers.

Using a non-network dentist? Our Dental PremierSM and Dental Premier EliteSM plans offer coverage.**

BENEFIT SUMMARY

We offer a variety of dental plans aimed to meet your needs and budget.

Preventive Care

All plans — No waiting periods. No deductibles.

Basic Services (like simple fillings and extractions)

All plans have a \$50 per person, per calendar year deductible (maximum 3 individual deductibles per family, per calendar year).*

Depending on the plan you choose:

- We pay either 70% or 80%.
- Waiting periods vary from 4 to 6 months.

Major Services (like root canals and extractions of impacted teeth)

All plans have a \$50 per person, per calendar year deductible (maximum 3 individual deductibles per family, per calendar year).*

Depending on the plan you choose:

- We pay 50% after a 12-month waiting period.
- For lower premium, some plans do not cover Major Services.





Keep your vision clear.

Vision Benefit Rider

Vision coverage is optional and may be added to your dental plan for additional premium. We'll help keep you seeing clearly, so you can focus on more important things.

Vision network³

Our vision network offers care from professionals in private and retail settings across the country. You may use a non-network provider, but you are eligible to receive better discounts using network providers.

VISION BENEFIT SUMMARY

Service or Material	In-network Co-pay	Out-of-network Benefits
Eye exam (1 every 12 months)	\$10	Up to \$40
Frames⁴ (1 every 24 months)	\$25	Up to \$45
Lenses		
Single	\$25	Up to \$40
Bifocal	\$25	Up to \$60
Trifocal	\$25	Up to \$80
Lenticular	\$25	Up to \$80
Contacts every 12 months⁵ (Instead of glasses once)	\$25	Up to \$105

Note: If you buy frames and lenses at the same time from a Preferred Provider, you only pay one \$25 co-pay.



We're here to help.



For costs, benefits, exclusions, limitations, eligibility, waiting periods and renewal terms, contact us at **1-800-338-9248**.

Monday – Tuesday: 8 a.m. – 9 p.m. EST,
Wednesday – Thursday: 8 a.m. – 8 p.m. EST,
Friday: 8 a.m. – 7 p.m. EST,
Saturday: 10 a.m. – 4 p.m. EST,
Sunday: Closed

Note: Outside hours of operation, voicemail messaging is in place.



*Some plans offer a combined \$50 deductible per person for Basic and Major Services.

**Premier Plan benefits based on reasonable and customary charge. Non-network dentists can bill a patient for any remaining amount up to the billed charge.

²Plans are available from UnitedHealthOne,SM underwriting by Golden Rule Insurance Company or UnitedHealthcare Life Insurance Company and administered by Dental Benefit Providers, Inc. (Spectera, Inc. administrators the vision benefits). Product availability varies by state.

³Spectera, Inc.'s Network availability may vary by state, and specific vision care provider's contract status can change at any time. Therefore, before you receive care, it is recommended that you verify with the vision care provider that he or she is still contracted with the network.

⁴You will receive a \$130 retail frame allowance towards the purchase of any frame at an in-network provider.

⁵You are eligible to select either eyeglasses (eyeglass lenses and/or eyeglass frames) or contact lenses, not both. Contacts chosen from the Covered Contact Lens Selection at a Preferred Provider. Non-selection lenses will receive an allowance. No co-pay for non-selection Contact Lenses.

Policy form number SA-S-1710-UHL or SA-S-1384, UHL-DEN2-PB and UHL-DEN2-PBM, and other state variations.

UnitedHealthOneSM is a brand representing a portfolio of insurance products offered to individuals and families through the UnitedHealthcare family of companies. Golden Rule Insurance Company or UnitedHealthcare Life Insurance Company is the underwriter of these plans.



Notes.

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Making a choice



Feel confident about your choice.

We want to help you be sure you're making a good Medicare choice for your needs. We are here to help you every step of the way. Call UnitedHealthcare to talk about your options and ask any questions you may have.

We're here to help.



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Things to consider.

When thinking about costs and how to get the most value for your money, it's helpful to look at the big picture. Here are a few things to do and keep in mind:



Total costs.

Knowing your current costs and comparing them to how much a new plan may cost will help you decide if a new plan fits your budget.

- 1 Figure out how much you currently spend on health insurance, medical services and prescription drugs.
- 2 How often do you see your doctors or get your prescriptions filled?
- 3 Add it all up to get your current total costs.
- 4 Compare that to the total estimated cost for a new plan.

The new plan's total estimated costs should include premiums, deductibles, co-pays and co-insurance.



Doctors and prescriptions.

If you are considering a Medicare Advantage plan, check to see if your doctors are in the network so you can maximize your benefits. If you need prescription drug coverage, make sure the drugs you take are covered, find out how much they'll cost and see which pharmacies you can use.



Additional Coverage.

Ask yourself what benefits are really important to you. Do you want any special coverage, like more vision coverage or dental coverage?



Extras.

What programs or services do you want that go beyond Original Medicare coverage, like access to a fitness program or a hearing aid benefit.



Before you call.

To help you find the UnitedHealthcare plan that is a good fit for your needs, we'll ask you a few questions when you call. It is good to be prepared and write down some information before calling. Here are some things to have ready.

- ☐ Your medications
- ☐ Your Medicare ID card
- ☐ Your health care contact information

YOUR MEDICATIONS		
Medication Name	Dose	Frequency

YOUR HEALTH CARE CONTACTS	
Doctor:	Phone:
Address:	
Specialist:	Phone:
Address:	
Pharmacy:	Phone:
Address:	
Other:	Phone:
Address:	

List of current health conditions:



¹Member may use any pharmacy in the network but may not receive preferred retail pharmacy pricing. Pharmacies in the Preferred Retail Pharmacy Network may not be available in all areas. Co-pays apply after deductible.

The benefit information provided is a brief summary, not a complete description of benefits. For more information, contact the plan. Limitations, co-payments and restrictions may apply. Benefits, formulary, pharmacy network, provider network, premium and/or co-payments/co-insurance may change on January 1 of each year.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor. Enrollment in the plan depends on the plan's contract renewal with Medicare.

You must continue to pay your Medicare Part B premium.

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UnitedHealthcare
P.O. Box 29300
Hot Springs, AR 71903-9300



Mail_Full Name
Mail_Address_1
Mail_Address_2
Mail_City, Mail_State Mail_Zip

CHOICE starts here.

Y0066_150224_102045 Accepted

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