



2016

# Getting Started Guide

Look inside to learn about your plan.





# Welcome,

Thank you for being a UnitedHealthcare® plan member.

We want to give you the positive health care experience you deserve. So, we designed this guide to help you understand what you can do to make the most of your plan. And if you have questions, we're always here to help – just give us a call.

Sincerely,

UnitedHealthcare

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## Questions? We're here to help.



Toll-Free **1-800-457-8506**, TTY **711**, 8 a.m. – 8 p.m. local time, Monday – Friday



Learn more online at [www.UHCRetiree.com](http://www.UHCRetiree.com)

# 1

## We're in this together.

Good health takes team work. We'll work together throughout the plan year to help you live a healthier life.

### Our commitment.

We're dedicated to helping you live a healthier life with access to quality health care coverage. Throughout the year we'll reach out to help make sure you can take advantage of all the programs and services available.



### Your commitment.

During the plan year, we're going to ask you to do important things for your health and well-being. This booklet will help you understand what will happen next. We'll walk you through some things you can do now and what you should plan on doing soon.

### IMPORTANT:

#### We will ask you to complete a health survey.

Medicare requires us to ask these questions, but you don't have to complete the survey. Your answers will help us work better together. We'll use your answers to suggest programs and resources that may help meet your needs.

- ✓ We'll try to call you and ask you to complete the health survey over the phone. If we can't reach you, we'll mail the survey to you.

# 2

## Get a head start.

You can start scheduling important appointments and services. Try to schedule these visits early in your new plan year so you may stay healthier with preventive care.



### Schedule your annual physical and wellness visit.

Getting preventive care is vital to living a healthier life. It all starts with two yearly visits: your Annual Wellness Visit and routine physical exam. The Annual Wellness Visit is a great chance to meet with your doctor and create a plan for prevention. A routine physical exam includes a complete head-to-toe exam. A co-pay or co-insurance may apply if your doctor orders lab work or includes additional screenings or tests during your routine physical. You can schedule both visits together, each calendar year. You do not have to wait 365 days before scheduling these services.



### Enjoy the convenience of the HouseCalls program.

HouseCalls is a unique program where you'll meet with one of our licensed clinicians in the convenience of your home, at no additional cost to you. The appointment includes important health screenings, plus extra time to talk about any health-related concerns you may have. You will also have an opportunity to review your current medications, discuss your diet and get educational materials that may help you maintain your health. We'll give you a summary of the HouseCalls visit and share it with your doctor to help you remember to follow up with your doctor.



### Preventive care may help you stay healthier.

Preventive care is important for your health and may help catch health issues early. Your plan offers preventive care benefits like flu shots, screenings and immunizations, plus your doctor can recommend a personalized preventive care plan based on your age, health and medical history. Talk to your doctor about what is best for you.

#### REMINDER:



#### Find your doctor.

We encourage all of our members to have a strong relationship with a primary care provider (PCP) or doctor. If you need to find a doctor, specialist or facility, we can help. We'll even help schedule your first appointment after your coverage begins. Just give us a call at the number below.

### Questions about preventive care? Give us a call.



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# Your to-do list.

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GET A HEAD START

## ✓ Make sure we have your current contact information.

To update your address, phone number and email address, please call us toll-free at **1-800-457-8506**, TTY **711**, 8 a.m. to 8 p.m. local time, Monday through Friday.

## ✓ Tell us about your primary care provider (PCP) or doctor.

We encourage all our members to have a doctor or health care provider they see regularly. It is important for us to know who your doctor is so we may help your doctor provide you the care and attention that you deserve. You can tell us who your doctor is or get help finding a doctor by calling us at the customer service phone number in this booklet. This phone number can also be found on the back of your member ID card.

## ✓ You can choose an authorized representative.

By law, you are the only person who can access your account online or discuss it with us over the phone. You can choose a trusted person to have access to your account information. This person does not have the right to make plan decisions for you, but they can help you understand and manage your plan. Call customer service toll-free to add an authorized representative.

## ✓ Review your prescription drug coverage.



It is important to make sure your prescription drugs are covered by your plan and that you know how much they will cost. First, look for your drug in the Formulary (Drug List) in the Plan Details booklet. If you don't see your drug listed or have questions about your coverage, call the customer service phone number in this booklet. The Plan Details booklet also includes the Benefit Highlights, which shows how much you'll pay for prescriptions.

### IMPORTANT:

#### Watch the mail for your member ID card.

Bring your card with you when you get health care services or fill a prescription. When your card arrives, check the following:

- ✓ Is all of your information correct? If not, call us to update it.

	
Health Plan (80840): 911-87726-04	
Member ID: 999999999-99	Group Number: 99999
Member:	
SUBSCRIBER BROWN	GROUP NAME
Payer ID: 87726	
Copay: PCP/ Spec/ ER 20%/ 20%/ \$65	RxBin: 610097 RxPCN: 9999 RxGrip: COS
UnitedHealthcare Group Medicare Advantage (PPO) Medicare limiting charges apply.	
Customer Service:	1-999-999-9999 TTY 711
NurseLine:	1-999-999-9999 TTY 711
Behavioral Health:	1-999-999-9999 TTY 711
For Providers <a href="http://www.unitedhealthcareonline.com">www.unitedhealthcareonline.com</a> 1-999-999-9999	
Medical Claim Address: PO Box 30995 Salt Lake City, UT 84130-0995	
Medicare Solutions UHC	
Pharmacy Claims OptumRx PO Box 29045, Hot Springs, AR 71903	
For Pharmacists 1-999-999-9999	

# 3

## Take advantage of extras.

As a member, you'll have an array of programs and services available. Start looking now to see which ones you'll want to use right away once your plan is active. Please review the Evidence of Coverage in the Plan Details booklet for complete details.



### Hearing Aids

With hi HealthInnovations™ you can get a discount on hearing aids.<sup>1</sup> Each hearing aid is custom programmed for your unique hearing needs. To learn more, call toll-free **1-855-523-9355**, TTY **711**, 9 a.m. to 5 p.m. CT, Monday through Friday. Or visit **[www.hiHealthInnovations.com/medicare](http://www.hiHealthInnovations.com/medicare)**.



### OptumRx® Mail Service Pharmacy

You may save money when you use home delivery from OptumRx®, our preferred mail service pharmacy. OptumRx can send up to 90-day supplies<sup>2</sup> of the maintenance medication(s) you take regularly to your mailbox with no cost for standard shipping.<sup>3</sup> Visit **[www.OptumRx.com](http://www.OptumRx.com)** to learn more about home delivery. For more information about the Preferred Mail Service Pharmacy, see your Pharmacy Directory. You can also use other mail service pharmacies to fill your prescriptions.



### Pharmacy Saver™ Program

You may be able to pay less than your plan co-pay for qualifying prescription drugs with the Pharmacy Saver program. There are hundreds of prescription drugs available, including many as low as \$1.50.<sup>4</sup> Visit **[www.UnitedPharmacySaver.com](http://www.UnitedPharmacySaver.com)** to look up your prescription drugs and find a Pharmacy Saver location near you.



### The importance of a living will.

By completing a living will or advance directive, you control how you want to be cared for when you are not able to make decisions for yourself. If you want to learn more, give us a call. Another good resource is Aging With Dignity. They have created a very simple easy to use document called 5 Wishes. To learn more, go to **[www.AgingWithDignity.org](http://www.AgingWithDignity.org)**.

<sup>1</sup> The products and services described above are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the UnitedHealthcare grievance process.



### SilverSneakers® Fitness Program

Work out when, where and how you want at no additional cost with SilverSneakers. As one of your benefits, you get a basic fitness membership, access to SilverSneakers group exercise classes and a SilverSneakers Steps® Kit for those who do not live close to a gym. There are more than 13,000 participating locations nationwide. Find a fitness location at [www.silversneakers.com](http://www.silversneakers.com) or call toll-free **1-888-423-4632**, TTY **711**, 8 a.m. to 8 p.m. ET, Monday through Friday.



### Solutions for Caregivers

Make caring for a family member, friend or neighbor a little easier with resources and support tailored to your needs. To learn more, visit [www.liveandworkwell.com](http://www.liveandworkwell.com) and use access code: **caregiver** or Call toll-free **1-866-896-1895**, TTY **711**, 24 hours a day, 7 days a week.

## Questions about your extras? Give us a call.



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## Questions? We have answers.



### We're just a call away.

If you have any questions or need help with your plan, we're here for you.  
We can help you:

- ✓ Find a doctor and schedule appointments
- ✓ Understand your coverage and costs
- ✓ Find ways you could save on prescription drug costs
- ✓ And much more

### We're here to help.



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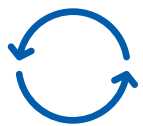


# Get support along the way.



## Speak to a nurse 24/7.

Whether you have questions about a medication or have a health concern in the middle of the night, with NurseLine<sup>SM</sup> a registered nurse is only a phone call away. Call toll-free **1-877-365-7949**, TTY **711**, 24 hours a day, 7 days a week.



## Chronic Conditions Programs

UnitedHealthcare has special programs designed to support members living with chronic conditions like diabetes or heart disease.



## We'll be in touch throughout the year

### Health Reminders and Information About Programs and Services

To help you make the most of your plan benefits, throughout the year we'll call you and mail information about programs and services.

### Explanation of Benefits Statements

Each month you use your plan, we'll send you a statement with your medical claim information and a separate one for your prescription claims.

### Annual Notice of Changes

Just before the 2016 plan year ends, we'll send you information on important plan changes for 2017.

## EXTRA RESOURCES

### Register at [www.UHCRetiree.com](http://www.UHCRetiree.com) as soon as your coverage begins.

By creating a secure personalized account, you'll have access to all of your health plan information in one easy-to-find place. You can view your plan details, personal health records, watch educational videos and more.



# 5

## What you need to know if you are new to Medicare.

Medicare works differently from other types of health coverage you may have had. As you transition to Medicare, here is some information that may help make the change easier.

### Medicare Part B Premiums

If you have Part B, you must continue to pay your Part B monthly premium to Social Security. If you do not pay your monthly Part B premium, you may be disenrolled from your plan, losing important coverage.

### Medicare Part B versus Medicare Part D

The way Medicare covers drugs is different. It depends on where and by whom the drug is administered. Medicare Parts A and B have limited drug coverage. Medicare Part A only covers drugs received as part of your hospital stay. Medicare Part B covers medical services and supplies like diabetic screenings and supplies such as blood sugar monitors, test strips and lancets. It also covers drugs used in an outpatient setting, such as chemotherapy and dialysis drugs.

A Medicare Part D plan covers drugs that are listed on your Formulary (Drug List). Most of these drugs are typically ordered by your doctor and received through a pharmacy. There are a few exceptions so give us a call if you have questions.

Certain medications, such as vaccines and immunizations can be covered under either Medicare Part B or Part D depending on how they are used. The process to figure out if the drug is covered under Part B or Part D is called a Prescription Drug Coverage Determination. Drugs that require this process are identified on your Drug List by B/D in the Restrictions & Limitations column. Talk with your doctor about medications that may require a coverage determination to ensure that your prescription is filled without delay.

### Co-insurance

Your share of the costs of a covered health care service, calculated as a percentage (for example, 20%) of the allowed amount for the service. The health insurance or plan pays the rest of the allowed amount.

### Co-payment (or co-pay)

A fixed amount (for example, \$15) you pay for a covered health care service, usually when you receive the service. The amount can vary by the type of covered health care service.

### Income Related Monthly Adjusted Amount (IRMAA)

Similar to Medicare Part B, people with higher incomes will pay more for their Medicare Part D coverage. This is a set amount and it is paid to the government (not the plan) in addition to and separate from the plan premium. If you are affected by IRMAA, based on your income, Social Security will contact you.

### Deductible

The amount of money you must pay each year before the plan starts to pay its share. Not all plans have deductibles.

### Late Enrollment Penalty (LEP)

You may pay a late enrollment penalty if, at any time after you first become eligible for Part D, there's a period of at least 63 days in a row when you don't have Part D or other creditable prescription drug coverage. Creditable coverage means that the prescription drug coverage you have had is at least as good as or better than what Medicare provides. The late enrollment penalty is an amount added to your monthly Medicare premium which you may have to pay. When you become a member, your plan sponsor will be asked to attest or validate that you have had continuous Part D plan coverage. If your plan sponsor asks for information about your prescription drug coverage history, please respond as quickly as possible to avoid the risk of paying a penalty in error. Once you become a member, more information will be available in your Evidence of Coverage (EOC).



Find more definitions in your Evidence of Coverage or online:

[www.glossary.justplainclear.com](http://www.glossary.justplainclear.com)

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<sup>2</sup> Your plan sponsor may provide coverage beyond 90 days. Please refer to the Benefit Highlights or Summary of Benefits for more information.

<sup>3</sup> Maintenance medications are typically those drugs you take on a regular basis for a chronic or long-term condition.

<sup>4</sup> Drugs and prices may vary between pharmacies and are subject to change during the plan year. Prices are based on quantity filled at the pharmacy. Quantities may be limited by pharmacy based on their dispensing policy or by the plan based on Quantity Limit requirements; if prescription is in excess of a limit, co-pay amounts may be higher. Other pharmacies are available in our network. Members may use any pharmacy in the network, but may not receive Pharmacy Saver pricing. Pharmacies participating in the Pharmacy Saver program may not be available in all areas.

This information is not a complete description of benefits. Contact the plan for more information. Limitations, co-payments, and restrictions may apply.

Benefits, premium and/or co-payments/co-insurance may change on January 1 of each year. The Formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

Consult a health care professional before beginning any exercise program. Availability of the SilverSneakers program varies by plan/market. Refer to your Evidence of Coverage for more details. Healthways and SilverSneakers are registered trademarks of Healthways, Inc. and/or its subsidiaries. © 2015 Healthways, Inc. All rights reserved.

Solutions for Caregivers assists in coordinating community and in-home resources. The final decision about your care arrangements must be made by you. In addition, the quality of a particular provider must be solely determined and monitored by you. Information provided to you about a particular provider does not imply and is in no way an endorsement of that particular provider by Solutions for Caregivers. The information on and the selection of a particular provider has been supplied by the provider and is subject to change without written consent of Solutions for Caregivers.

Nurseline 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 this service is for informational purposes only. The nurses cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. The service is not an insurance program and may be discontinued at any time.

You are not required to use OptumRx home delivery for a 90 day supply of your maintenance medication. If you have not used OptumRx home delivery, you must approve the first prescription order sent directly from your doctor to OptumRx before it can be filled. New prescriptions from OptumRx should arrive within ten business days from the date the completed order is received, and refill orders should arrive in about seven business days. Contact OptumRx anytime at 1-888-279-1828. OptumRx is an affiliate of UnitedHealthcare Insurance Company.

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



“ This kind of support and comfort is a huge factor in daily living. I really appreciate the fact that I have UnitedHealthcare.”

**– Eneida, UnitedHealthcare Medicare Advantage plan member**