Personal Care Account (PCA)

A PCA is provided by the plan for each enrollment. Each year the Plan adds to your account:

- $1,200 per year for a Self Only enrollment or
- $2,400 per year for a Self and Family enrollment

The PCA covers eligible expenses at 100%. For example, if you are ill and go to a network doctor for a $60 visit, the doctor will submit your claim and the cost of the visit will be deducted automatically from your PCA; you pay nothing.

Balance in PCA or Self Only	**$1,200**
Less: Cost of visit	**-60**
Remaining Balance in PCA	**$1,140**

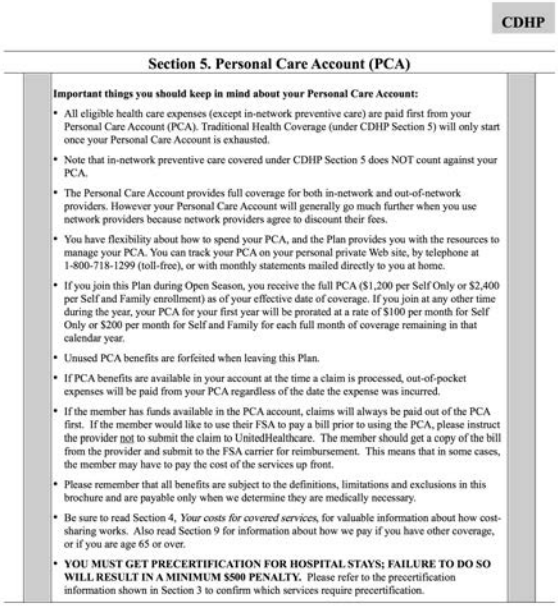
- Note that in-network preventive care covered under CDHP Section 5 does NOT count against your PCA.
- See pages 75 & 76 of the 2014 Federal Brochure

If you do not want your PCA to automatically pay your medical claims, please follow the steps below each year:

- Log onto **myuhc.com**
- Click on *Claims and Accounts*
- Click on *Health Reimbursement account*
- Click on *Automatic Payment*
- Click on *Change Automatic Payment Settings*

You can now make changes to your settings, such as having your FSAFEDS pay first (if you have an FSAFEDS).

Please not that your pharmacy claims will always be paid automatically by your PCA. If you have any questions, please call **(800) 718-1299**

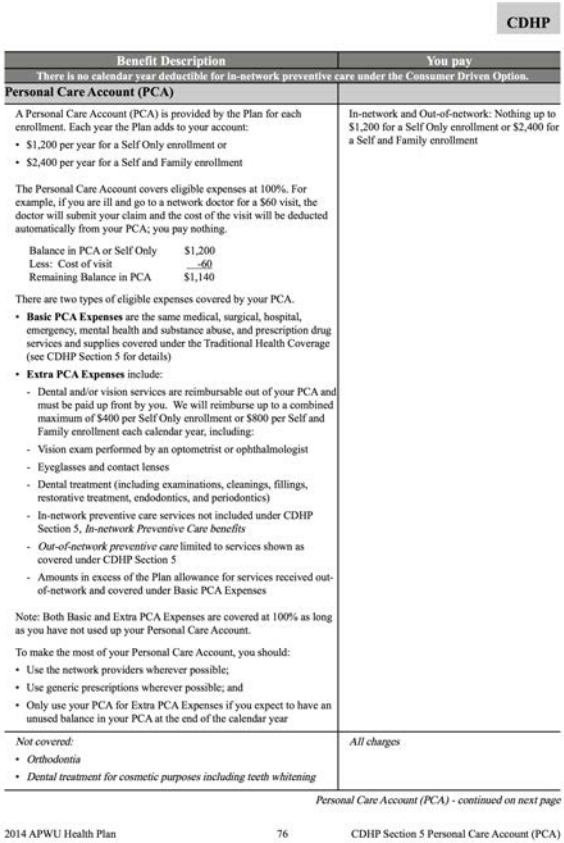


CDHP

Section 5. Personal Care Account (PCA)

Important things you should keep in mind about your Personal Care Account:

- All eligible health care expenses (except in-network preventive care) are paid first from your Personal Care Account (PCA). Traditional Health Coverage (under CDHP Section 5) will only start once your Personal Care Account is exhausted.
- Note that in-network preventive care covered under CDHP Section 5 does NOT count against your PCA.
- The Personal Care Account provides full coverage for both in-network and out-of-network providers. However your Personal Care Account will generally go much further when you use network providers because network providers agree to discount their fees.
- You have flexibility about how to spend your PCA, and the Plan provides you with the resources to manage your PCA. You can track your PCA on your personal private Web site, by telephone at 1-800-718-1299 (toll-free), or with monthly statements mailed directly to you at home.
- If you join this Plan during Open Season, you receive the full PCA ($1,200 per Self Only or $2,400 per Self and Family enrollment) as of your effective date of coverage. If you join at any other time during the year, your PCA for your first year will be prorated at a rate of $100 per month for Self Only or $200 per month for Self and Family for each full month of coverage remaining in that calendar year.
- Unused PCA benefits are forfeited when leaving this Plan.
- If PCA benefits are available in your account at the time a claim is processed, out-of-pocket expenses will be paid from your PCA regardless of the date the expense was incurred.
- If the member has funds available in the PCA account, claims will always be paid out of the PCA first. If the member would like to use their FSA to pay a bill prior to using the PCA, please instruct the provider not to submit the claim to UnitedHealthcare. The member should get a copy of the bill from the provider and submit to the FSA carrier for reimbursement. This means that in some cases, the member may have to pay the cost of the services up front.
- Please remember that all benefits are subject to the definitions, limitations and exclusions in this brochure and are payable only when we determine they are medically necessary.
- Be sure to read Section 4, *Your costs for covered services*, for valuable information about how cost-sharing works. Also read Section 9 for information about how we pay if you have other coverage, or if you are age 65 or over.
- **YOU MUST GET PRECERTIFICATION FOR HOSPITAL STAYS; FAILURE TO DO SO WILL RESULT IN A MINIMUM $500 PENALTY.** Please refer to the precertification information shown in Section 3 to confirm which services require precertification.



CDHP

Benefit Description	You pay
There is no calendar year deductible for in-network preventive care under the Consumer Driven Option.	
Personal Care Account (PCA)	
A Personal Care Account (PCA) is provided by the Plan for each enrollment. Each year the Plan adds to your account: • $1,200 per year for a Self Only enrollment or • $2,400 per year for a Self and Family enrollment The Personal Care Account covers eligible expenses at 100%. For example, if you are ill and go to a network doctor for a $60 visit, the doctor will submit your claim and the cost of the visit will be deducted automatically from your PCA; you pay nothing. Balance in PCA or Self Only $1,200 Less: Cost of visit -60 Remaining Balance in PCA $1,140 There are two types of eligible expenses covered by your PCA. • **Basic PCA Expenses** are the same medical, surgical, hospital, emergency, mental health and substance abuse, and prescription drug services and supplies covered under the Traditional Health Coverage (see CDHP Section 5 for details) • **Extra PCA Expenses** include: - Dental and/or vision services are reimbursable out of your PCA and must be paid up front by you. We will reimburse up to a combined maximum of $400 per Self Only enrollment or $800 per Self and Family enrollment each calendar year, including: - Vision exam performed by an optometrist or ophthalmologist - Eyeglasses and contact lenses - Dental treatment (including examinations, cleanings, fillings, restorative treatment, endodontics, and periodontics) - In-network preventive care services not included under CDHP Section 5, *In-network Preventive Care benefits* - *Out-of-network preventive care* limited to services shown as covered under CDHP Section 5 - Amounts in excess of the Plan allowance for services received out-of-network and covered under Basic PCA Expenses Note: Both Basic and Extra PCA Expenses are covered at 100% as long as you have not used up your Personal Care Account. To make the most of your Personal Care Account, you should: • Use the network providers wherever possible; • Use generic prescriptions wherever possible; and • Only use your PCA for Extra PCA Expenses if you expect to have an unused balance in your PCA at the end of the calendar year	In-network and Out-of-network: Nothing up to $1,200 for a Self Only enrollment or $2,400 for a Self and Family enrollment
Not covered: • *Orthodontia* • *Dental treatment for cosmetic purposes including teeth whitening*	*All charges*

Personal Care Account (PCA) - continued on next page