United Healthcare®
Group Medicare Advantage

APWU HEALTH PLAN

Welcome, Everyone!

Thank you for joining us today to learn more about the 2024 enhanced benefits offered by APWU Health Plan in collaboration with UnitedHealthcare. We are the UnitedHealthcare Account Management Team for APWU Health Plan and their retirees.

Our presentation will begin at Time, EST



Michelle Hatmaker
Account Vice President



Rachel Wesley
Client Service Manager



Kevin Harris
Federal Health Plan Consultant

To hear this presentation, you need to connect to audio:

1. Dial: **877-336-4440**
2. Then enter access code: **1286990**
3. You will be in listen-only mode during this part of the presentation
4. After the presentation, we will give instructions on how to ask a question

UnitedHealthcare Website: **retiree.uhc.com/apwuhp**

UnitedHealthcare Customer Care Phone**: 855-383-8793**
TTY **711** , 8 a.m. – 8 p.m. local time, Monday - Friday

APWU Health Plan Phone: **1-800-222-APWU (2798)**
8:30 a.m. – 6:30 p.m. ET, Monday - Friday

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2024 Benefit Plan

UnitedHealthcare® Group Medicare Advantage (PPO) plan

APWU Health Plan MAPD PPO

Presentation by Kevin Harris

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United Healthcare | APWU HEALTH PLAN



Original Medicare basics



Plan benefits, programs and features



How to enroll



What to expect next

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Original Medicare basics

When are you eligible for Medicare?

- You're 65 years old OR you're under 65 and qualify on the basis of disability or another special situation

AND

- You're a U.S. citizen or a legal resident who has lived in the United States for at least 5 consecutive years

If you or your spouse have contributed payroll taxes to Medicare throughout your working life, you are eligible for Medicare when you reach age 65 — regardless of your income or health status

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Understanding your Medicare choices

Step 1

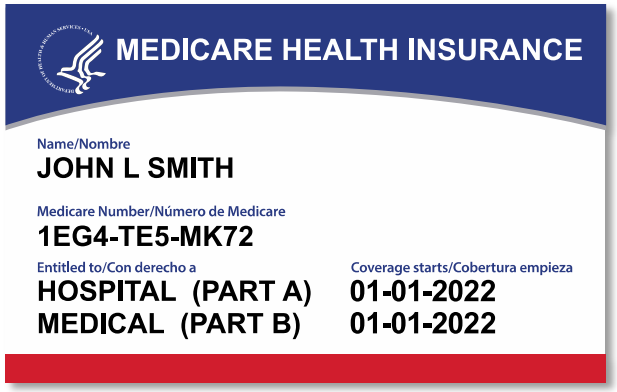
Enroll in Original Medicare – Parts A and B

Even though enrolling in Medicare Part B is not required in the Federal Employees Health Benefits (FEHB) Program, there are some advantages to having it, such as having an additional payer for outpatient medical expenses.

Original Medicare
Provided by the federal government

Part A
Helps pay for hospital stays and inpatient care

Part B
Helps pay for doctor visits and outpatient care



For most individuals, enrollment in Medicare Part A will be Automatic

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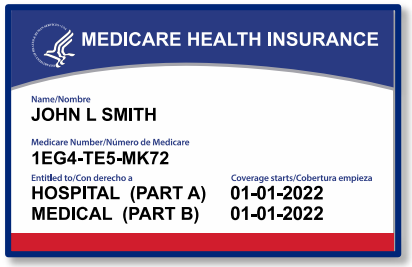
Understanding your Medicare choices

Option 1: Combine Original Medicare with the APWU Health Plan High Option

Option 1

Carry two ID cards to coordinate plans





APWU Health Plan High Option as Medicare Supplement

- Medicare will be billed as primary
- APWU Health Plan will be billed as secondary
- Prescription Drug coverage will continue to be provided under the APWU Health plan

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Understanding your Medicare choices

Option 2: Suspend FEHB program & enroll in an **Individual** MAPD plan

Option 2

Individual Medicare Advantage plan

Offered by other private companies

Part C
Combines Part A (hospital insurance) and Part B (medical insurance) in 1 plan

Not part of the FEHB program

Part D
May include prescription drug coverage

May require you to suspend your FEHB program status

May include benefits, services and programs not provided by Original Medicare

Are not customized for FEHB annuitants

If you cancel your FEHB plan, you will not be able to return if you need it in the future.

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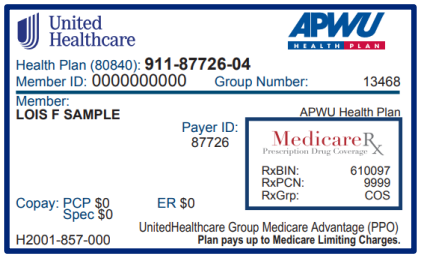
Understanding your Medicare choices

Option 3: Remain in the FEHB program and enroll in APWU Health Plan's Medicare Advantage enhanced level of benefits

Option 3

Carry one ID card for one plan



Select APWU Health Plan Medicare Advantage plan

Offered by UnitedHealthcare

Part C

Combines Part A (hospital insurance) and Part B (medical insurance) into a single plan with a single ID card

Part D

Include prescription drug coverage

Include benefits, services and programs not provided by Original Medicare, including a part B premium subsidy

Approved by OPM to be a part of the FEHB program

Retain your FEHB program status

Customized for APWU Health Plan retirees

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Difference between Individual and Group Medicare Advantage plans

The APWU Health Plan Medicare Advantage offers more savings and more benefits	Individual Medicare Advantage plans	APWUHP Group MAPD Plan
No copays on covered medical services		✓
National PPO with same cost share in or out of network		✓
Includes prescription drug coverage	✓	✓
Voluntary clinical and wellness programs	✓	✓
Worldwide emergency and urgent care coverage	✓	✓
Value-added benefits not included with Original Medicare	✓	✓
Dedicated customer service for APWU Health plan retirees		✓
Approved by OPM		✓
Part of the FEHB Program		✓

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Costs related to Medicare & Plan

Item	You pay
Medicare Part A	$0 (for most individuals)
Medicare Part B	***$174.70/month***
APWU Health Plan High Option Premium	Self: $269.79 or Self +1: $530.73 (2024 rates)
Medicare Advantage Enhanced Benefits	No additional premium
Medicare Part B Premium Subsidy	$85/month

You must continue to pay the Medicare part B premium and APWU Health Plan High Option premium when you enroll in the Medicare Advantage enhanced level of benefits

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Part B Premium Subsidy

It's automatic!

How you will receive your part B premium subsidy depends upon how you pay your Medicare Part B premium

If…	Then…
Deducted from Social Security benefit	Subsidy will be applied to social security benefit
Receive a quarterly bill from Social Security/Medicare	Bill will be reduced by 3 times the subsidy amount (Ex – subsidy of $85 per month will equate to $255 quarterly premium reduction)
Deducted from Annuity Check	Subsidy will be applied to annuity check



The subsidy will be applied in the form of a reduced part B premium, there will not be a line-item credit on your statement



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Potential Costs related to Medicare

Late Enrollment Penalty (LEP)	You pay
Part B – if you did not enroll when you were originally eligible	10% for each 12-month period you could've had Part B, but didn't sign up
Part D – if you had a gap in credible prescription drug coverage	1% of the "national base beneficiary premium" ($34.70 in 2024) x uncovered months you didn't have Part

Income Related Monthly Adjustment Amount (IRMAA)	You pay
Part B	$69.90+ monthly for individuals earning more than $103,000 upon Medicare's 2-year lookback
Part D	$12.90 + monthly for individuals earning more than $103,000 upon Medicare's 2-year lookback

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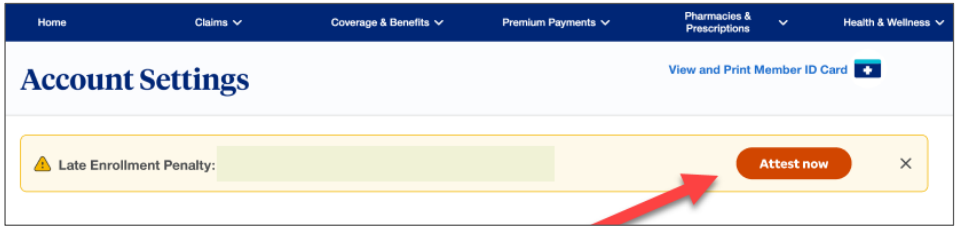
Late Enrollment Penalty (LEP) – Part D

How will I be notified?

If you are identified as having a gap in your Medicare Part D prescription coverage, CMS will notify UnitedHealthcare of the dates of the gap. UnitedHealthcare must then notify you via an Attestation Letter within 7 days of the CMS determination.

What do I need to do next?

This letter will provide instructions on how to self-attest to your prior creditable coverage, if applicable. You will be able to attest online or directly over the phone with UnitedHealthcare (toll-free number will be provided in the letter). You will also have an option to attest in writing. **You have 30 days from the date of notification to attest.**



If you've had coverage in the FEHB program since you became Medicare eligible, then you've had creditable coverage. You simply need to notify UnitedHealthcare by calling or attesting online.

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UnitedHealthcare® Group Medicare Advantage (PPO) plan

Plan benefits, programs and features

Monthly and annual costs

$0

Additional monthly plan premium for Medicare Advantage

$0

Annual deductible

$0

Annual out-of-pocket maximum*

$0

Copay's on covered medical expenses

* Limitations, exclusions and/or network restrictions may apply. Out-of-pocket maximum excludes premiums, prescription costs, and non-Medicare covered benefits.

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Plan benefits

Benefit coverage	In-network	Out-of-network
Primary care provider (PCP) office visit / Specialist office visit	$0 copay	$0 copay
Urgent care / Emergency room	$0 copay	$0 copay
Inpatient hospitalization / Outpatient surgery	$0 copay	$0 copay
Medical virtual visits	$0 copay	$0 copay
Preventative services	$0 copay	$0 copay
Diabetic Supplies	$0 copay	$0 copay
Physical, Speech & Occupational Therapies *unlimited visits per year	$0 copay	$0 copay

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Visit any doctor, specialist or hospital that accepts Medicare

Even though you are not required to see a network doctor, your doctor may already be part of our network.

To find out, search our online Provider Directory at **retiree.uhc.com/apwuhp** or call UnitedHealthcare Customer Service at **1-855-383-8793** TTY **711,** 8 a.m.–8 p.m. local time, Monday–Friday.

If your doctor is in-network, they must accept this plan if you are an existing patient. If your doctor is out-of-network, they may choose not to treat you unless it is an emergency.



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Part D (prescription drug) benefits

Tier	Prescription drug type	Your costs	
		Retail (30-day supply)	Preferred Mail Order (90-day supply)
1	**Preferred Generic** All covered generic drugs	$10 copay	$20 copay
2	**Preferred Brand** Many common brand-name drugs, called preferred brands	$30 copay	$60 copay
3	**Non-preferred Drug** Non-preferred brand-name drugs. In addition, Part D-eligible compound medications are covered in Tier 3.	$45 copay	$90 copay
4	**Specialty Tier** Unique and/or very-high-cost brand-name drugs	$60 copay	$120 copay

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Part D prescription drug coverage

- UnitedHealthcare has thousands of national, regional, local chain and independent neighborhood pharmacies in our network
- Thousands of covered brand-name and generic prescription drugs
- Bonus drug coverage in addition to Medicare Part D drug coverage
- Your plan provides additional coverage through the gap, and you continue to pay the same copay or coinsurance as you did in the initial coverage stage



Check the plan's drug list at **retiree.uhc.com/apwuhp** or call Customer Service to see if your prescription drugs are covered

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Ordering with Optum® Home Delivery through Optum Rx® pharmacy[2]

1	**Transfer existing prescriptions from previous carrier to Optum Rx** Once your application has been approved, contact your previous mail order carrier to request prescriptions are transferred to Optum Home Delivery.
2	**Order submitted** After your account is set up, your Optum Home Delivery order enters the Optum Rx pharmacy system
3	**Pharmacist review** A pharmacist reviews your information for drug interactions, allergies and dosage
4	**Safety review** For your safety, another pharmacist reviews your medication for accuracy after it is dispensed
5	**Packaging** Optum Rx seals your medication in a tamper-evident package
6	**Shipping** Optum Home Delivery mails your medication via USPS* to you and notifies you when it has been shipped

If you need help transferring your existing mail order prescriptions to Optum, please call UnitedHealthcare Customer Service at 1-855-383-8793.

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*medications are shipped via USPS unless they are temperature or time sensitive

Diabetes testing and monitoring supplies

When you use one of the approved meters and corresponding strips, your cost-share for diabetes testing and monitoring supplies is a $0 copay.

These supplies also include any brand of:

- Lancets
- Lancing device
- Glucose control solution (to test the accuracy of your meter)
- Replacement batteries for your meter

To switch to one of the preferred brands, you may be required to get a new prescription from your doctor. A temporary supply of your current brand can be requested.



Plus, the plan provides coverage for many of the OneTouch and ACCU-CHEK blood glucose testing strips and meters*

*Other suppliers/vendors/providers are available in our network.

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Dental coverage for your oral health needs

With UnitedHealthcare® Dental, you'll have access to the largest national Medicare network in the industry with more than 103,000 providers.*

100%

coverage for exams, X-rays, cleanings and periodontal maintenance when you see a network dental provider

80%

coverage for minor services, including fillings, pulp protection and nitrous oxide**

50%

coverage for major services, including crowns, root canals, dentures and more**

You can see any dentist who accepts the plan. You may get greater savings from a network dentist.

If you have a dental plan through FEDVIP, the UnitedHealthcare Dental benefits will be primary, and your FEDVIP dental plan will be secondary

*Please refer to your Summary of Benefits for details on your benefit coverage.
**Provider network may vary in local market.

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UnitedHealthcare Hearing

With UnitedHealthcare Hearing, you can receive a hearing exam and access to one of the widest selections of prescription and non-prescription hearing aids at significant savings. Plus, you'll receive personalized care and follow-up support from experienced hearing providers, helping you to hear better and live life to the fullest.

- Receive friendly, expert advice through our national network of 7,000+ hearing providers* — or try virtual appointments**
- Get personalized support to help you adjust to your new hearing aids
- Choose from the latest technology from popular brands, including Phonak, Starkey®, Oticon, Signia, ReSound, Widex® and Unitron™



Up to 50%

To get started and save up to 50% off standard industry prices^ with exclusive pricing, go online or call UnitedHealthcare Hearing.

*Please refer to your Summary of Benefits for details on your benefit coverage.
**Select products and providers.
^Based on suggested manufacturer pricing.

Benefits, features and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply. Other hearing exam providers are available in the UnitedHealthcare network. The plan only covers hearing aids from a UnitedHealthcare Hearing network provider. Provider network size may vary by local market.

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UnitedHealthcare® HouseCalls*



Have a yearly in-home check-up to help stay on top of your health between regular doctors' visits.

- No extra costs
- A licensed health care practitioner will perform a head-to-toe exam, health screenings, review your health history and current medications, help identify health risks and provide health education
- The visit lasts up to an hour. You can talk about health concerns and ask questions that you haven't had time to ask before.
- You'll get a personalized checklist of topics to discuss at your next doctor's visit
- HouseCalls will send a summary of your visit to you and your regular doctor

Prefer a video visit instead?

HouseCalls offers a video visit using a computer, tablet or smartphone to connect plan members with a health care practitioner. They will review your health history and current medications, discuss important health screenings, identify health risks and provide health education.

*HouseCalls may not be available in all areas.

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Renew Active®[3] by UnitedHealthcare

Renew Active is the gold standard in Medicare fitness programs for the body and mind — and is available with the UnitedHealthcare® Group Medicare Advantage plan, at no additional cost.



Stay active with a free gym membership at a location you select from the largest national network of gyms and fitness locations. If you prefer to exercise at home, you can access thousands of on-demand workout videos and streaming fitness classes.



Stay active socially with local health and wellness classes, clubs and events. Also, connect socially by joining the online Fitbit® Community for Renew Active. No Fitbit device is needed.



Stay focused with an online program offering content about brain health with exclusive content for Renew Active members.

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Mental and behavioral health

Nothing is more important than your health, which includes your mental health. You have access to many resources to help improve your emotional and mental health, including:

- ✔ Ongoing mental health support with Optum® Behavioral Health
- ✔ Health and wellness resources with Renew by UnitedHealthcare



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Expanded Foreign Travel

The APWU health plan Medicare Advantage program covers you even when you're traveling outside the United States just as if you were in the United States.

UnitedHealthcare will reimburse you for any covered services or prescriptions you may need while traveling minus any copays that may apply.

- Doctors' office visits
- Prescription drugs
- Surgical procedures
- Mental health/ Substance use care
- Emergency room services



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Healthy Benefits Plus

With the Healthy Benefits Plus program, you are provided with a quarterly credit to spend on over-the-counter (OTC) items from network retail locations, the OTC catalog, website or mobile app. The credit is automatically loaded to a prepaid card every quarter.

Choose how to shop for products

- Catalog – Will arrive 4-6 weeks after enrollment
- Online – Use your digital account on the Health Benefits website.
- Pre-paid card – Make purchase from a network retail location
- All credits will expire quarterly



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UnitedHealthcare Healthy at Home Post Discharge Benefit

You are eligible for the following benefits up to 30 days following all inpatient and skilled nursing facility discharges*:



28 home-delivered meals when referred by a UnitedHealthcare Engagement Specialist



12 one-way rides to medically related appointments and to the pharmacy when referred by a UnitedHealthcare Engagement Specialist[6]



6 hours of non-medical personal care provided through a CareLinx professional caregiver to perform tasks such as preparing meals, bathing, medication reminders and more. A referral is not required.[7]

*A new referral is required after every discharge to access your meal and transportation benefit.

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UnitedHealthcare Healthy at Home Annual Benefit

This is our comprehensive bundle of routine benefits accessible to members once per year with no medical requirements. With UnitedHealthcare Healthy at Home Premium, you are eligible for the following benefits* at no cost to you:



28 home-delivered meals



24 one-way rides to medically related appointments and to the pharmacy[6]



8 hours of non-medical personal care provided through a CareLinx professional caregiver to perform tasks such as preparing meals, bathing, medication reminders and more[7]

*Members do not need to use all 3 benefits. Restrictions and limitations apply.

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How to enroll

Enrolling for APWU Health Plan retirees

If you are already enrolled in the APWU Health Plan High Option

Call UnitedHealthcare to enroll at

1-855-383-8793

TTY: **711** - 8:00 a.m. to 8:00 p.m. local time, Monday-Friday

You will remain a member of the APWU Health Plan in the FEHB program if you elect to enroll in the UnitedHealthcare Medicare Advantage (PPO) plan enhanced benefits.

Eligible Plan Codes:

High Option Plan: 471, 472, or 473

If you cancel or suspend your High Option plan with OPM it will automatically cancel your enrollment in the Medicare Advantage plan.

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Not enrolled in the APWU Health Plan High Option?

Two-Steps to enroll

Step 1

Enroll in the APWU Health Plan High Option (plan code 471, 472, or 473)

Enroll during Open Season with the Office of Personnel Management (OPM) at **1-888-767-6738** TTY **711,** Monday-Friday, 7:40 a.m.-5 p.m. ET or online at **retireefehb.opm.gov**.

Step 2

Enroll in the UnitedHealthcare Medicare Advantage (PPO) plan

Once your initial enrollment has been processed and confirmed by OPM, you can call UnitedHealthcare to enroll toll-free at **1-855-383-8793**, TTY **711**, 8 a.m. – 8 p.m. local time, Monday-Friday.

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What to expect next

What to expect after enrollment

1 **Get your UnitedHealthcare member ID card and read your Quick Start Guide**
The Quick Start Guide gives you more information on how your benefits work and how to get the most out of your plan. Your member ID card will be attached to the front cover of your guide.

2 **Register online to access your plan information**
After you receive your member ID card, you can register online at **retiree.uhc.com/apwuhp**

3 **Start using your card**
You can start using your member ID card as soon as your plan is effective

4 **Help us understand your unique health needs**
Soon after your effective date, we will contact you to complete a short health survey. Throughout the year, we'll also provide reminders about preventive care as well as offer programs and resources to help you live a healthier life.

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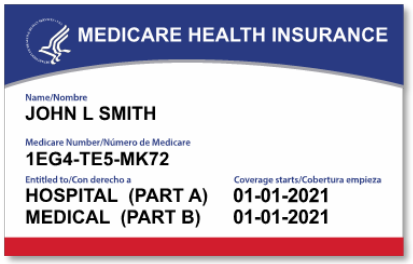
How to use your new UnitedHealthcare member ID card

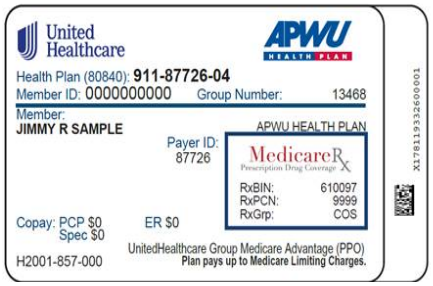
You and any Medicare-eligible dependent covered by the plan will each be receiving a UnitedHealthcare Quick Start Guide and member ID card, which is your confirmation of enrollment.*

- You will only use your UHC member ID card for all medical and pharmacy needs.
- Put your red, white, and blue Medicare card along with your APWU Health Plan High Option ID card in a safe place.
- Important phone numbers listed on the back of your UHC member ID card

Store this card in a safe place



Use your new MAPD card beginning 1/1/2024





*Retirees in the same household may receive these on different days, which is a normal part of the mail stream.

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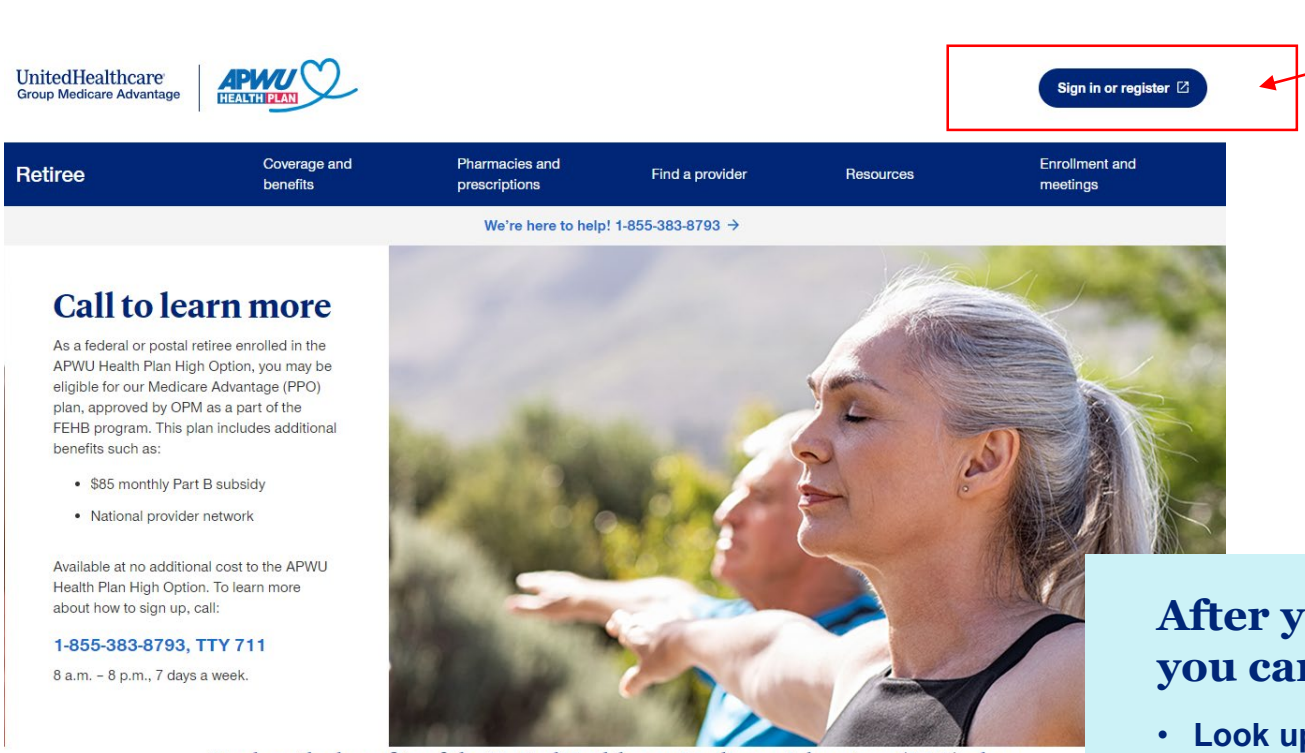
Register for your online account



Explore the benefits of the UnitedHealthcare Medicare Advantage (PPO) plan

retiree.uhc.com/apwuhp

After you sign up, you can:

- **Look up** your latest claim information
- **Review** benefit information and plan materials
- **Print** a temporary member ID card and request a new one
- **Look up** drugs and how much they cost under your plan

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Questions & Answers

How to Learn More:



Call UnitedHealthcare at **1-855-383-8793**, TTY **711**, 8 a.m. – 8 p.m. local time, Monday-Friday to speak with our knowledgeable agents



Go online to **retiree.uhc.com/apwuhp** for plan information

Thank You!

We look forward to welcoming you to our Medicare family

Understanding Original Medicare's rules

You must be entitled to Medicare Part A and/or enrolled in Medicare Part B and continue to pay your Medicare Part B premium.

You can only be in one Medicare Advantage plan at a time. Enrolling in another plan will automatically disenroll you from any other Medicare Advantage or prescription drug plan.

If you do not enroll in a Medicare Part D prescription drug plan or a Medicare Advantage plan that includes prescription drug coverage, or you do not have other creditable prescription drug coverage, you may have to pay Medicare's Late Enrollment Penalty.

You must inform us of any current prescription drug coverage or future enrollment that includes prescription drug coverage.

When you are a member, **you are encouraged to read the plan's Evidence of Coverage (EOC),** including appeals and grievance rights, which can be found by logging in at **[retiree.uhc.com/xxxxx]**.

The EOC also covers specific plan benefits, copays, exclusions, limitations and other terms.

Please review the full text of the Statement of Understanding in your 2024 enrollment plan guide.

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Benefits, features and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply.

Formularies and/or provider/pharmacy networks
The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

You must continue to pay your Medicare Part B premium, if not otherwise paid for under Medicaid or by another third party.

Out-of-network/non-contracted providers are under no obligation to treat UnitedHealthcare Group Medicare Advantage (PPO) plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information.

This document is available in alternative formats.

If you receive full or partial subsidy for your premium from a plan sponsor (former employer, union group or trust), the amount you owe may be different than what is listed in this document. For information about the actual premium you will pay, please contact your plan sponsor's benefit administrator directly.

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.

[2]Optum Home Delivery is a service of Optum Rx pharmacy. Optum Rx is an affiliate of UnitedHealthcare Insurance Company. You are not required to use Optum Home Delivery for a 90- day supply of your maintenance medication. If you have not used Optum Home Delivery, you must approve the first prescription order sent directly from your doctor to the pharmacy before it can be filled. Prescriptions from the pharmacy should arrive within 5 business days after we receive the complete order. Contact Optum Rx anytime at 1-888-279-1828, TTY 711.

Other pharmacies are available in our network.

Members may use any pharmacy in the network but may not receive preferred retail pharmacy pricing.

Renew by UnitedHealthcare is not available in all plans. Resources may vary.

[3]The Renew Active® Program varies by plan/area and may not be available on all plans. Participation in the Renew Active program is voluntary. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine. Renew Active includes standard fitness membership and other offerings. Fitness membership equipment, classes, personalized fitness plans, caregiver access and events may vary by location. Certain services, discounts, classes, events, and online fitness offerings are provided by affiliates of UnitedHealthcare Insurance Company or other third parties not affiliated with UnitedHealthcare. Participation in these third-party services are subject to your acceptance of their respective terms and policies. UnitedHealthcare is not responsible for the services or information provided by third parties. The information provided through these services is for informational purposes only and is not a substitute for the advice of a doctor. Gym network may vary in local market and plan. Gym network size is based on comparison of competitor's website data as of May 2023.

[6]ModivCare may subcontract to other vendors or individuals. Subcontracting is at the discretion of ModivCare. ModivCare does not guarantee urgent requests will be met when scheduled less than 2 days in advance for standard services. ModivCare supports any language the member requires, through a third-party translator service.

[7]The CareLinx services are made available to you from a third party through your UnitedHealthcare® Group Medicare Advantage insurance plan. CareLinx is not a UnitedHealthcare company. UnitedHealthcare and your Plan are not responsible for any services you receive from this third party. This is not an insurance program and may be discontinued at any time. Benefits and features may vary by plan/area. Limitations and exclusions apply. UnitedHealthcare does not make any representations regarding the content or accuracy of the materials on such sites. CareLinx will share only non-identifiable, aggregate information with UnitedHealthcare that is collected through the use of the CareLinx platform. This information may be used by UnitedHealthcare to potentially help develop future programs and services for its insured members. CareLinx is the network administrator of this in-home care service offer. CareLinx does not employ or recommend any care provider or individual seeking services nor is it responsible for the conduct of any care provider or care seeker. The CareLinx website is a venue that provides tools to help care seekers and care providers connect online. Each individual is solely responsible for selecting a care provider or care seeker for themselves or their families and for complying with all laws in connection with any employment relationship they establish. All decisions about medications and care are between you and your health care provider.

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The company does not discriminate on the basis of race, color, national origin, sex, age or disability in health programs and activities. We provide free services to help you communicate with us such as letters in other languages, Braille, large print, audio, or you can ask for an interpreter. Please contact Customer Service at 1-XXX-XXX-XXXX, TTY: 711, 8 a.m.–8 p.m. local time, Monday - Friday, for additional information.

OTC benefits have expiration timeframes. Call the plan or refer to your Evidence of Coverage (EOC) for more information.

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