

Plan Code	Coinsurance				Deductible				Out-Of-Pocket Maximum				Copay/Per Occurrence¹								Lab/Xray		MRI, Outpatient Surgery, Scopic procedures		Deductible Type⁸	
	Network	Network Physician Premium Designated Network	Network Physician	Out-of-Network	Network		Out of Network		Network		Out-of-Network		PCP²,³ Premium Designated Network	PCP²	Spec³ Prem Des	Spec⁴	Urgent Care	ER⁵	Inpatient Hospital⁵	IP Copay Max	IP Copay Type (Admit or Day)	Freestanding Outpatient Facility⁷	Hospital-Based Outpatient Facility⁶	Freestanding Outpatient Facility⁷		Hospital-Based Outpatient Facility⁶
					Single	Family	Single	Family	Single	Family	Single	Family														
AA-E6	100%	N/A	100%	N/A	\$500	\$1,000	N/A	N/A	\$3,000	\$6,000	N/A	N/A	N/A	\$30	N/A	\$50	\$100	\$200	100%	100%	N/A	100%	80%	100%	80%	Embedded
AA-EP	100%	N/A	100%	N/A	N/A	N/A	N/A	N/A	\$3,000	\$6,000	N/A	N/A	N/A	\$40	N/A	\$70	\$100	\$200	\$750	\$3,750	Day	100%	80%	\$750	\$1,000 \$850 for MRI	Embedded
AA-E5	100%	N/A	100%	N/A	\$1,000	\$2,000	N/A	N/A	\$3,000	\$6,000	N/A	N/A	N/A	\$25	N/A	\$50	\$100	\$200	100%	100%	N/A	100%	80%	100%	80%	Embedded
AB-OL	100%	60%	100%	N/A	\$2,000	\$4,000	N/A	N/A	\$5,000	\$10,000	N/A	N/A	\$30	\$60	\$60	\$90	\$100	\$300	\$500	\$2,500	Day	100%	60%	\$500	\$750	Embedded
AB-OK	100%	100%	80%	N/A	\$1,000	\$2,000	N/A	N/A	\$5,000	\$10,000	N/A	N/A	\$25	\$50	\$50	\$75	\$100	\$200	\$500	\$2,500	Day	100%	80%	\$500	\$750	Embedded
AA-E7	100%	N/A	100%	70%	N/A	N/A	\$2,000	\$4,000	\$3,000	\$6,000	\$10,000	\$20,000	N/A	\$20	N/A	\$40	\$100	\$200	\$300	\$1,500	Day	100%	80%	\$300	\$500	Embedded
AA-FA	100%	N/A	100%	70%	\$1,000	\$2,000	\$3,000	\$6,000	\$5,000	\$10,000	\$10,000	\$20,000	N/A	\$25	N/A	\$50	\$100	\$200	\$500	\$2,500	Day	100%	80%	\$500	\$750	Embedded
AA-FS	100%	N/A	100%	N/A	\$2,000	\$4,000	N/A	N/A	\$3,000	\$6,000	N/A	N/A	N/A	\$30	N/A	\$60	\$100	\$200	100%	100%	N/A	100%	80%	100%	80%	Embedded
AA-FU	100%	N/A	100%	N/A	\$5,000	\$10,000	N/A	N/A	\$6,250	\$12,500	N/A	N/A	N/A	\$30	N/A	\$60	\$100	\$200	100%	100%	N/A	100%	80%	100%	80%	Embedded
AA-FY	100%	100%	60%	50%	\$2,000	\$4,000	\$4,500	\$9,000	\$5,000	\$10,000	\$15,000	\$30,000	\$30	\$60	\$60	\$90	\$100	\$300	\$500	\$2,500	Day	100%	60%	\$500	\$750	Embedded
AA-F1	100%	100%	80%	70%	\$1,000	\$2,000	\$3,000	\$6,000	\$5,000	\$10,000	\$10,000	\$20,000	\$25	\$50	\$50	\$75	\$100	\$200	\$500	\$2,500	Day	100%	80%	\$500	\$750	Embedded
HRA Plans																										
AA-FN	100%	N/A	100%	N/A	\$1,000	\$2,000	N/A	N/A	\$5,000	\$10,000	N/A	N/A	N/A	\$25	N/A	\$50	\$100	\$200	\$500	\$500	Day	100%	80%	\$500	\$750	Embedded
AA-FP	100%	N/A	100%	70%	\$2,000	\$4,000	\$4,500	\$9,000	\$5,000	\$10,000	\$150,000	\$30,000	N/A	\$25	N/A	\$50	\$100	\$200	\$500	\$500	Day	100%	80%	\$500	\$750	Embedded
HSA Plans																										
AA-FI	100%	N/A	100%	70%	\$1,500	\$3,000	\$3,000	\$6,000	\$5,000	\$10,000	\$10,000	\$20,000	N/A	\$25	N/A	\$50	\$100	\$200	\$500	\$500	Day	100%	80%	\$500	\$750	Non-Embedded
AA-EU	100%	N/A	100%	N/A	\$2,000	\$4,000	N/A	N/A	\$5,000	\$10,000	N/A	N/A	N/A	\$25	N/A	\$50	\$100	\$200	\$500	\$500	Day	100%	80%	\$500	\$750	Non-Embedded
AA-ER	90%	N/A	90%	N/A	\$3,000	\$6,000	N/A	N/A	\$6,250	\$12,500	N/A	N/A	N/A	\$40	N/A	\$70	\$100	\$200	90%	90%	N/A	90%	70%	90%	70%	Non-Embedded
AA-FF	100%	N/A	100%	50%	\$3,000	\$6,000	\$6,000	\$12,000	\$6,250	\$12,500	\$15,000	\$30,000	N/A	\$40	N/A	\$70	\$100	\$200	100%	100%	N/A	100%	80%	100%	80%	Non-Embedded
AA-FH	100%	N/A	100%	50%	\$4,000	\$8,000	\$6,000	\$12,000	\$6,250	\$12,500	\$15,000	\$30,000	N/A	\$30	N/A	\$60	\$100	\$200	100%	100%	N/A	100%	80%	100%	80%	Non-Embedded
Catalyst Plans																										
PI-4	80%	N/A	80%	80%	\$3,000	\$9,000	N/A	N/A	\$5,500	\$11,000	N/A	N/A	N/A	\$30	N/A	\$60	\$75	\$200	80%	80%	N/A	80%	80%	80%	80%	Embedded
PI-6	80%	N/A	80%	80%	\$5,000	\$10,000	\$9,500	\$25,000	\$6,250	\$12,500	\$13,000	\$30,000	N/A	\$30	N/A	\$60	\$75	\$200	80%	80%	N/A	80%	80%	80%	80%	Embedded

Traditional HSA and HRA Pharmacy Plan

Plan Code		Deductible (Copay applies after the network medical deductible has been met.)		Member Copay			Mail Service
		Individual	Family	Tier 1	Tier 2	Tier 3	
NN	Non-specialty	N/A	N/A	\$10	\$30	\$50	2.5x retail
	Specialty copay	N/A	N/A	\$10	\$100	\$300	N/A

Catalyst Pharmacy Plan

Plan Code	Deductible		Member Copay			Mail Service
	Individual	Family	Tier 1	Tier 2	Tier 3	
AU	\$250	\$750	\$10	\$35	\$70	2.5x retail

Products

UnitedHealthcare Multi-Choice® allows employers to purchase one health plan package with multiple benefit design options to meet a variety of health care and financial needs. Employees can choose the option that meets their individual needs, whether it's saving money on essential coverage or paying additional dollars for more comprehensive coverage.

How it works:

Step 1: Employees choose the benefit design option that best meets their individual needs.

Step 2: As an employer renews, they can keep or change the plan offerings year after year, ensuring that health plan benefits evolve with their business.

The Multi-Choice package includes familiar plans such as **Choice** and **Choice Plus** and our innovative consumer-driven health plans (**HSAs** and **HRAs**). It also includes **CatalystSM** plans. Multi-Choice is available to employers with 51-300 enrolling employees.

Packaged Savings®

Employers can combine our innovative, affordable medical plans with comprehensive specialty benefits - dental, life, disability and vision. When they bundle benefits, they can expect proven knowledge and service from a leading specialty carrier plus the simplicity and convenience of just one team to administer benefits. The savings your clients realize through Packaged Savings are based upon medical enrollment and the number of active lines of specialty coverage they have with UnitedHealthcare. The more they bundle, the more they save. Participation requirements apply. Contact your local sales team for further details.

Wellness Programs

The majority of UnitedHealthcare medical plans incorporate several programs designed to address the overall health and well-being of your clients. Members who have access to information and easy-to-use services may be more apt to be healthy and productive employees. From our UnitedHealth Wellness® portfolio, which helps members stay healthy, to our disease management programs that offer resources in the event of a serious illness, UnitedHealthcare makes it easy to access information and services.

myHealthcare Cost Estimator available on myuhc.com®

Introducing myHealthcare Cost Estimator, an online tool which gives members access to transparent cost and quality information. The information is also personalized to calculate estimated out-of-pocket expenses based on a member's plan and current benefit status. Plus, it's fully integrated with customer service and clinical support for easy access to a wide range of resources. And myuhc.com gives members online, self-service access to benefit and network information. As well as provides customized information and articles on hundreds of health-related topics.

Health4Me™ Mobile App

Having your family's health plan information on your phone means you can conveniently view and share your health plan ID card, check the balance of your HSA account or even look up the status of the claim from your son's earache. Additionally, members can connect with a Health Advisor or use their smartphone's GPS to find a doctor or facility.

Care24® Resources

Our Care24 resources assist members with health, personal or family-related concerns via a toll-free phone number 24 hours a day, seven days a week. One toll-free number puts them in touch with nurses, counselors, financial consultants and attorneys. For situations where in-person resources are needed, Care24 contracts with more than 9,000 professionals nationwide who provide local, in-person support. In addition, our database of more than 60,000 unique community resources, representing 400,000 points of expertise, adds to Care24's depth of service. Care24 also offers your clients access to audio messages on more than 1,100 health and well-being topics. Most audio tapes are available in Spanish, and we provide translation services for more than 140 languages.

Care CoordinationSM

Coordinates and customizes services where gaps in care may exist. Education and prevention programs include pre-admission counseling, inpatient care advocacy and readmission prevention.

Disease Management

Identifies high-risk individuals with chronic conditions, such as asthma, diabetes and coronary artery disease, who may benefit from a focused intervention program. Individuals are placed on one of three levels of intervention to improve quality of life and keep cost trends in check.

NurseLineSM Services

Efficient use of health care resources can help contain your clients' medical costs. NurseLine nurses provide health information, discuss treatment options and assist individuals in finding an appropriate level of care. Maintaining good health starts with asking questions and understanding the answers. NurseLine services empower people with information, support and guidance. From helping prepare questions for an upcoming doctor visit to determining the appropriate use of medical resources, NurseLine helps individuals make educated decisions about their personal health. NurseLine provides immediate access to experienced registered nurses for nearly any health or medical concern – 24 hours a day, seven days a week.

The HRA portfolio plans are the only plans available for HRA or gap funding programs. HRA funding must be less than or equal to 50% of deductible.

For all plans listed, deductible applies toward out-of-pocket maximum. Plans require a determination of medical necessity as a requirement of benefit coverage. Certain health care services referenced in the Certificate of Coverage require prior authorization.

Please note: The information in this grid is provided for informational purposes only and is not intended for use as a contract. For a complete listing of coverage and exclusions please refer to the Certificate of Coverage or talk to your UnitedHealthcare representative for additional details that could impact the benefits.

- All Plans have an Unlimited Lifetime Maximum
- All Plans cover in network Preventive care at 100%

For Qualified HSA Plans: Combined medical and pharmacy deductible and out-of-pocket maximum. After deductible is met, coinsurance, medical copayments and pharmacy copayments apply. Plan has nonembedded family deductible and out-of-pocket maximum, meaning no individual in the family has satisfied the deductible or out-of-pocket maximum until the entire family amount has been met. Contact your broker or UnitedHealthcare representative for more information. The UnitedHealthcare Health Savings Account (HSA) high deductible health plan (HDHP) is designed to comply with IRS require HSA product, which includes a HDHP, although at times "HSA" may refer only and specifically to the UnitedHealthcare Health Savings Account, provided in conjunction with Optum Bank and not to the associated HDHP.

¹ For Choice, Choice Plus, and HRA plans, services with a copay are not subject to the deductible. For HSA plans, copays apply after the network deductible has been met. For Catalyst plans, copays apply to pre-deductible allowance services.

² Primary Care Physicians include Family Practice, Internal Medicine, Obstetrics-Gynecology, and Pediatrics

³ This tier of benefits applies to UnitedHealth Premium quality and efficiency designated physicians. Please visit myuhc.com for details.

⁴ This tier of benefits applies to physicians in specialties where there is no UnitedHealth Premium designation program and for specialty physicians that are not quality and efficiency designated

⁵ ER NOTES (e.g. "Plan deductible is waived for Emergency Room visits. Copay or copay plus plan coinsurance will be required, depending on plan design.")

⁶ Facility and hospital copayments are in addition any plan deductible and coinsurance. Facility and hospital copayments do not apply to the deductible and continue to be required after the deductible is satisfied. These copayments may also be referred to in plan documents as "per-occurrence copayments" or "per-occurrence deductibles."

⁷ Freestanding facilities are any of the following: outpatient facility, diagnostic or ambulatory center or independent laboratory. At a freestanding facility, deductible and coinsurance still apply. See plan benefit information for further details.

⁸ Plans with non-embedded reflect family deductible and out-of-pocket maximum meaning no single in the family has satisfied the deductible or out-of-pocket maximum until the entire family amount has been met. Embedded deductibles mean all individual deductible amounts will count toward the family deductible, but an individual will not have to pay more than the individual deductible amount.