

A woman with dark hair tied back, smiling and looking to the right. She is holding a small, fluffy brown dog. The background is a blurred outdoor setting with trees and sunlight.

**feel your best —
mentally, physically
and financially**

these resources can help

benefits that can help you be healthier

Each year when you select your health plan, you have choices. And making the choice that's right for you is important for your physical, emotional and financial health. Use this guide to compare your options, to learn about programs included with the plan and to refer to when you need it.

Want more information?



benefits.petsmart.com

- Learn more about your health plan options.
- Discover online tools, resources and more!



UnitedHealthcare Benefits Specialists

1-866-501-3061, TTY 711

¿Habla español? Podemos ayudar.



Bind Benefits Specialists

1-833-997-1084



PetSmart Benefits App

Get quick access to important contact numbers and websites. Text "BENEFITS" to 67936 and click on the link in the text reply. Then tap the "Share" button and click "Add to Home Screen."

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Click the above for more information.



helpful terms to know when choosing a plan

Coinsurance

Your share of the costs of a covered health care service, calculated as a percentage.

Copayment or Copay

A fixed amount of money you'll pay for a covered doctor visit or prescription.

Covered Services

The portions of a medical or vision expense that the plan has agreed to pay for or reimburse. They include:

- Doctor's office visits
- Prescription drugs (pharmacy)
- Emergency services
- Hospital care
- Lab services
- Pregnancy care services
- Outpatient care services
- Wellness services

Deductible

The amount you'll need to pay before your plan will start to pay for covered services.

Health Reimbursement Account (HRA)

A health savings account funded by PetSmart to help you pay for eligible medical and prescription drug expenses like copays, deductibles and coinsurance.

Health Savings Account (HSA)

A personal savings account to help you save and pay for your health care. There's no "use it or lose it" rule. You get to keep the money even if you change plans, change employers or retire.

Network

A group of health care providers and facilities that have a contract with UnitedHealthcare. Using the network may help lower your costs because these providers and facilities have agreed to provide services at a discount. If you use out-of-network providers, your costs may be higher.

Out-of-Pocket Limit

The most you could pay during a coverage period (usually one year) for your share of the costs of covered services. After you meet this limit, the plan will usually pay 100% of the allowed amount. The out-of-pocket limit includes all of your network payments.

Preferred Provider Organization (PPO)

With a preferred provider organization, or PPO, a health insurance plan or network contracts with providers to offer services to covered persons at pre-negotiated fee levels. A covered person may have lower out-of-pocket costs when medical services are received from a network provider. A covered person may visit any provider but may receive a higher level of benefits when a network provider is seen.

Prescriptions

Medications and drugs prescribed by your doctor. You may save money by choosing prescriptions from the lower tiers and signing up for home delivery. Talk to your pharmacist or doctor to learn ways that may help you save.

Preventive Care

Routine health care, including screenings, checkups and patient counseling, to prevent or discover illness, disease or other health problems.

Find insurance terms confusing?

Visit [justplainclear.com](https://www.justplainclear.com).

snapshot of your medical plan options

Plan features	High-deductible health plan (HDHP) with HSA		PPO 1		PPO 2 with HRA		Bind	
	Network	Out-of-network	Network	Out-of-network	Network	Out-of-network	Network	Out-of-network
HRA or HSA (money from PetSmart to help you pay for eligible medical and prescription drug expenses like copays, deductibles and coinsurance)								
	PetSmart's contribution to your HSA*				PetSmart's contribution to your HRA			
Individual	\$390		\$0		\$250		\$0	
Family	\$780				\$500		\$0	
Annual deductible								
Individual	\$2,150	\$4,300	\$1,250	\$2,500	\$1,750	\$3,500	\$0	\$0
Family	\$4,250	\$8,500	\$2,500	\$5,000	\$3,500	\$7,000	\$0	\$0
HDHP with HSA: If you enroll in the HDHP with HSA and choose family coverage, ¹ you have one deductible for the entire family. For example, if you visit a network specialist and your visit costs \$2,125, and your child visits a network specialist and the appointment costs \$2,125, then you've reached your annual deductible of \$4,250.								
Annual out-of-pocket maximum (including mental health and substance abuse benefits)								
Individual	\$3,375	\$6,750	\$3,250	\$6,500	\$3,500	\$7,000	\$6,000 Medical / \$1,500 Rx	\$12,000
Family	\$6,750	\$13,500	\$6,500	\$13,000	\$7,000	\$14,000	\$12,000 Medical / \$3,000 Rx	\$24,000
Weekly employee cost								
Associate only	\$22.17		\$61.45		\$44.11		\$22.17	
Associate + Spouse	\$84.87		\$146.62		\$112.06		\$84.87	
Associate + Child(ren)	\$73.21		\$126.98		\$96.85		\$73.21	
Associate + Family	\$127.65		\$218.71		\$167.88		\$127.65	
Preventive care								
Includes annual wellness exams and screenings, labs, X-rays, gynecological exams, well-child care and immunizations if for preventive purposes only								
Network: Plan pays 100% (no copay or deductible) Out-of-network: Not covered (N/C)								
Physician services (office visits)								
Primary care physician	Plan pays 80%	Plan pays 60%	You pay \$25 copay	Plan pays 60% ²	You pay \$25 copay	Plan pays 60% ²	\$60 to \$240	\$480
Specialist (including mental health and substance abuse)			You pay \$50 copay		You pay \$50 copay			

Continued on next page →

¹ Family includes associate plus spouse, associate plus child(ren) and associate plus family coverage levels.

² After you meet your annual deductible.

*Prorated contribution based on plan start date.

snapshot of your medical plan options

Plan features	High-deductible health plan (HDHP) with HSA		PPO 1		PPO 2 with HRA		Bind	
	Network	Out-of-network	Network	Out-of-network	Network	Out-of-network	Network	Out-of-network
Prescriptions								
Retail generic	Deductible / Coins.*		\$7 copay		\$7 copay		\$7 copay	N/C
Retail brand formulary	Deductible / Coins.		\$25 min / \$150 max; 25% coins		\$25 min / \$150 max; 25% coins.		\$25 min / \$150 max; 25% coins.	N/C
Retail non-formulary	Deductible / Coins.		\$50 min / \$250 max; 40% coins		\$50 min / \$150 max; 40% coins.		\$50 min / \$150 max; 40% coins.	N/C
Mail generic (90-day supply)	Deductible / Coins.		\$18 copay		\$18 copay		\$18 copay	N/C
Mail brand formulary (90-day supply)	Deductible / Coins.		\$75 copay		\$75 copay		\$75 copay	N/C
Mail non-formulary (90-day supply)	Deductible / Coins.		\$400 copay		\$400 copay		\$400 copay	N/C
Specialty (30-day supply)	Deductible / Coins.		Network: \$0 / 30% coins** Out-of-network: Not covered (N/C)		\$0 / 30% coins.**		\$0 / 30% coins.**	N/C

*If you're enrolled in the HDHP, whether your deductible has been met or not, specific generic medications will bypass the deductible and you'll be responsible for the applicable coinsurance. These include drugs that treat chronic conditions such as high blood pressure, high cholesterol, diabetes, etc. To see which drugs are on the list, visit benefits.petsmart.com/us/health-benefits/medical-plans/.

**\$0 when enrolled in PrudentRx; otherwise 30%.



high-deductible health plan (HDHP) with a health savings account (HSA)

brought to you by UnitedHealthcare®

Get a plan with network freedom and an HSA



Save money by staying in our network.

A network is a group of health care providers and facilities that have a contract with UnitedHealthcare. You can receive care and services from anyone in our network.



There's coverage if you need to go out of network.

You can receive care and services from anyone in or out of our network. Out of network means that a provider does not have a contract with us. It's important to remember that out-of-network providers will likely charge you more than network providers.



There's no need to select a primary care physician (PCP) or get referrals to see a specialist.

However, consider choosing a PCP. Your PCP can be your partner in managing your care. They can help you avoid duplicating tests and services and connect you to a specialist.



Preventive care is covered 100% in our network.¹

DETAILED BENEFITS on pages 4 – 5 [→](#)

You can open an HSA

An HSA is a personal savings account through Optum Bank® that helps you save and pay for your health care. After you open your account, you'll receive an HSA debit card that you can use to help pay for qualified expenses.

It's your money. There's no "use it or lose it" rule. You get to keep it even if you change plans, change employers or retire.

Set a goal, even a small one. You can set up regular pretax deposits through payroll deduction.

PetSmart will also contribute to your HSA. PetSmart will make either weekly or biweekly contributions to your HSA, depending on your current pay schedule.

Individual \$390 annually
(\$7.50 per week, prorated annual contribution based on plan start date)

Family \$780 annually
(\$15 per week, prorated annual contribution based on plan start date)

If you go out of network, your costs may be higher. Out-of-network providers can even bill you for amounts higher than what your plan will cover. For all the coverage details, see your official health plan documents.

Look for care in our network first.

The doctors and facilities in our national network have agreed to provide you services at a discount. We have:

- **1,196,432** physicians and health care professionals
- **6,782** hospitals
- **67,000+** pharmacies

Search the network at [whyuhc.com/petsmart](https://www.whyuhc.com/petsmart).

¹ Age-appropriate preventive care services are covered 100% when received in the plan network. You may be required to receive approval for some services before they can be covered.

Save on taxes¹

You don't have to pay federal taxes or, in most cases, state income taxes when you deposit money into your HSA, let it collect interest or use it for qualified expenses. The 2022 IRS HSA deposit limits are:

Individual	\$3,650 ²
Family	\$7,300 ²

Paying for prescriptions

You will have to pay the full cost of your covered prescriptions until you've paid the combined medical and prescription deductible. One exception to consider is that the deductible does not apply to the generic preventive medications that are listed on the HDHP drug list. You can use your HSA to help pay for them. After the deductible, you will pay coinsurance. For more details, refer to the chart on [page 5](#) or visit benefits.petsmart.com.

You own the HSA. Use it to help save and pay.

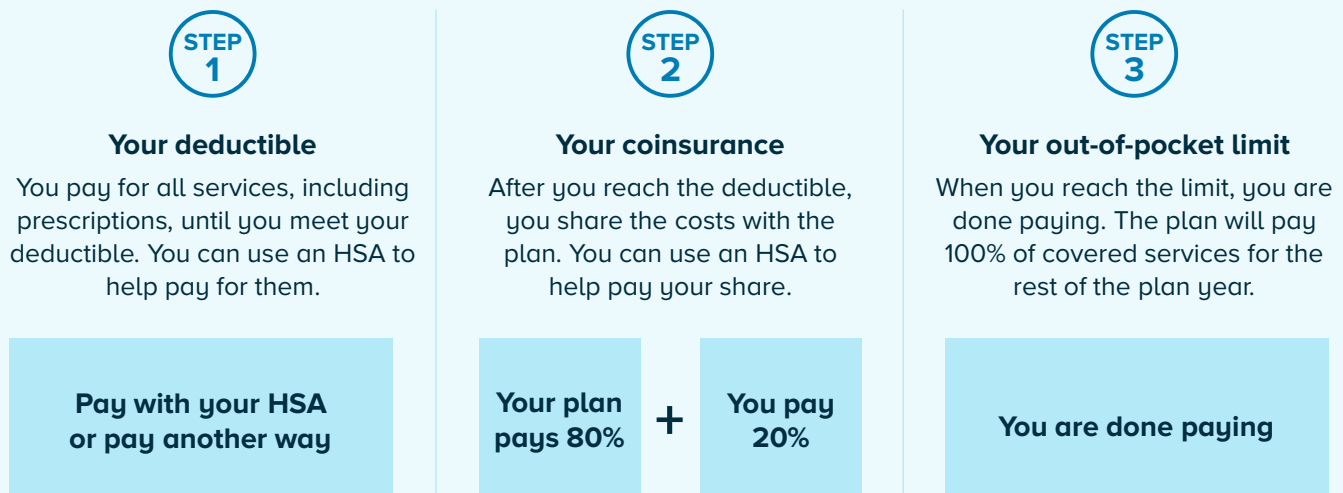
Qualified expenses:

- Doctor's office visits
- Prescriptions
- Eyeglasses and contacts
- Dental care and braces
- Chiropractic services and more

Open an account with Optum Bank, Member FDIC

Open an account with the preferred HSA bank of more than 1 million people. Visit optumbank.com.

How paying for network care works with an HSA:



Preventive care is covered 100% when you use a network doctor.³

DETAILED BENEFITS on pages 4 – 5 [➔](#)

¹Precise HSA tax effects depend on federal law. We recommend that you see your tax advisor for specific tax advice.

²This includes all deposits, including any contributions your employer makes.

³Age-appropriate preventive care services are covered 100% when received in the plan network. You may be required to receive approval for some services before they can be covered.



Choice Plus Plan

with a health reimbursement account (HRA)

brought to you by UnitedHealthcare

Get a plan with network freedom and an HRA



Save money by staying in our network.

A network is a group of health care providers and facilities that have a contract with UnitedHealthcare. You can receive care and services from anyone in our network.



There's coverage if you need to go out of network.

You can receive care and services from anyone in or out of our network. Out of network means that a provider does not have a contract with us. It's important to remember that out-of-network providers will likely charge you more than network providers.



There's no need to select a primary care physician (PCP) or get referrals to see a specialist.

However, consider choosing a PCP. Your PCP can be your partner in managing your care. They can help you avoid duplicating tests and services and connect you to a specialist.



Preventive care is covered 100% in our network.¹

DETAILED BENEFITS on pages 4 – 5 [→](#)

If you enroll in the PPO 2 plan, you can enjoy the benefits of an HRA

An HRA is an account funded by PetSmart to help you pay for covered health care services. Funds for your medical claims are automatically paid by your HRA for covered services first, and you won't pay as long as you have money in your HRA.

An HRA saves you money

When you have money in your HRA, you'll pay less out of pocket for covered services. PetSmart contributes annually to the HRA.

Individual	\$250
Family	\$500

If you go out of network, your costs may be higher. Out-of-network providers can even bill you for amounts higher than what your plan will cover. For all of the coverage details, see your official health plan documents.

Look for care in our network first.

The doctors and facilities in our national network have agreed to provide you services at a discount. We have:

- **1,196,432** physicians and health care professionals
- **6,782** hospitals
- **67,000+** pharmacies

Search the network at whyuhc.com/petsmart.

¹ Age-appropriate preventive care services are covered 100% when received in the plan network. You may be required to receive approval for some services before they can be covered.

Your funds roll over each year

If you don't spend all of your HRA funds during the plan year, they will roll over to the next year.

Visit [whyuhc.com/petsmart](https://www.whyuhc.com/petsmart).

Misplaced your HRA card?

Call the Debit Card Service Center at **1-866-755-2648** to report that your card is missing and request a new one.

Use an HRA to help save and pay.

Ways to pay with your HRA:

- Set up automatic payments.
- Use the Health Care Spending Mastercard®.
- Submit claims on [myuhc.com](https://www.myuhc.com)® to get reimbursed.

Eligible expenses:

- Doctor's office visits
- Prescriptions
- Non-preventive tests (lab work, X-rays, etc.)

How paying for network care works with an HRA:

STEP
1

Your deductible

Your HRA automatically pays for covered services first. If you spend all of your HRA funds, you'll have to pay until you reach your deductible.

Your HRA
pays first

+

You pay

STEP
2

Your coinsurance

After you reach the deductible, you share the costs with the plan. If you have money in your HRA, it will automatically pay for your share.

Your plan
pays 80%

+

You pay
20%

STEP
3

Your out-of-pocket limit

When you reach the limit, you are done paying. The plan will pay 100% of covered services for the rest of the plan year.

You are done paying

Preventive care is covered 100% when you use a network doctor.¹

DETAILED BENEFITS on pages 4 – 5 [→](#)

¹ Age-appropriate preventive care services are covered 100% when received in the plan network. You may be required to receive approval for some services before they can be covered.



For UnitedHealthcare® Plan Members

quick access to knowledge and care

UnitedHealthcare knows that managing your health plan benefits and your health isn't always easy. So we have a team available to help with questions, including:

- Is this treatment covered?
- How much will I have to pay for a test my doctor wants me to get?
- What does this charge mean on my bill? And why is it this amount?
- Can you help explain my benefits and what I need to do?
- If I need to find a new doctor, can you help me?

UnitedHealthcare members enrolled in PPO 1, PPO 2 or the HDHP can contact us anytime at 1-866-501-3061, TTY 711.



On the go?

Download the **UnitedHealthcare® app** and take your plan with you. The app offers cost comparisons, your plan ID card and a provider/clinic search tool.

UnitedHealth Premium® program

The UnitedHealth Premium program uses national standardized measures to identify doctors who provide quality and cost-efficient care. To find a Premium Care Physician, log on to myuhc.com and click "Find a Doctor." Look for the blue hearts. By choosing a physician with two blue hearts, you may experience better cost controls and a better overall health care experience.

Get care online with 24/7 Virtual Visits

A 24/7 Virtual Visit lets you see and talk to a doctor from your mobile device or computer without an appointment. The doctor can provide a diagnosis and, if appropriate, send a prescription¹ to your local pharmacy, all in 30 minutes or less. You'll pay your portion of the service costs according to your medical plan.

24/7 Virtual Visits are a great choice for:

- Bladder infections/urinary tract infections
- Bronchitis
- Colds
- Fevers
- Flu
- Pinkeye
- Rashes
- Sinus problems
- Sore throats
- Stomachaches

To get started, visit uhc.com/virtualvisits.

¹Prescription services may not be available in all states.

For UnitedHealthcare® Plan Members



wellness programs designed to help you reach your goals

If you choose a UnitedHealthcare plan — for yourself or your family — you'll have access to the following programs designed to help you live your healthiest life.



Stork Support Maternity Support Program

If you're pregnant, a maternity nurse can support you along the way by answering questions about how your body's changing, how to make healthy choices for yourself and baby, and what to expect on the big day. The nurse can also help you choose a doctor or nurse midwife and understand your health benefits and costs.

Get support throughout your pregnancy

Stork Support provides information and resources before, during and after pregnancy. With access to content and online video courses at myuhc.com/maternity, you'll learn steps that may help lead to a healthier pregnancy and birth — all at no additional cost as part of your health plan benefits.



Fertility Solutions

If you're dealing with fertility issues, you're not alone. In fact, 1 in 8 women ages 15 – 44 in the U.S. have trouble getting pregnant or sustaining pregnancy.¹ The Fertility Solutions program can help you learn how to navigate the health care system and get the most out of your benefits.



Neonatal Resources

If your baby needs to spend time in the NICU, we'll work with the hospital to ensure your baby gets the right care. A nurse can help you get ready for life at home, arrange for home services and equipment, and review your benefits to ensure you're using all the services available to you.

For more information or to enroll in any of these programs, call **1-866-501-3061**, TTY **711**.

¹ Centers for Disease Control and Prevention. Infertility FAQs. Available at: cdc.gov/reproductivehealth/infertility/index.htm. Accessed August 25, 2020.



For UnitedHealthcare® Plan Members



Real Appeal®

Lose weight and keep it off with Real Appeal, an online weight-loss program. Work with a Transformation Coach who leads weekly group sessions on nutrition, exercise and how to break through barriers. You'll also receive a Success Kit with recipes, food and body scales, workout DVDs and more. To sign up, visit petsmart.realappeal.com.



Wellness Coaching

Wellness Coaching helps you work toward, and achieve, your health goals at your own pace. Work one-on-one with a coach who can make recommendations and create a personalized plan for you. Or use online tools and resources, and connect with your coach when you need more support. Get started today at myuhc.wellnesscoachingnow.com.



Quit For Life®

If you're ready to quit smoking, Quit For Life can help. You'll get support from a Quit Coach®, a quit guide, access to a members-only website and, if you qualify, nicotine-replacement therapy such as patches or gum. To enroll, visit myuhc.com.



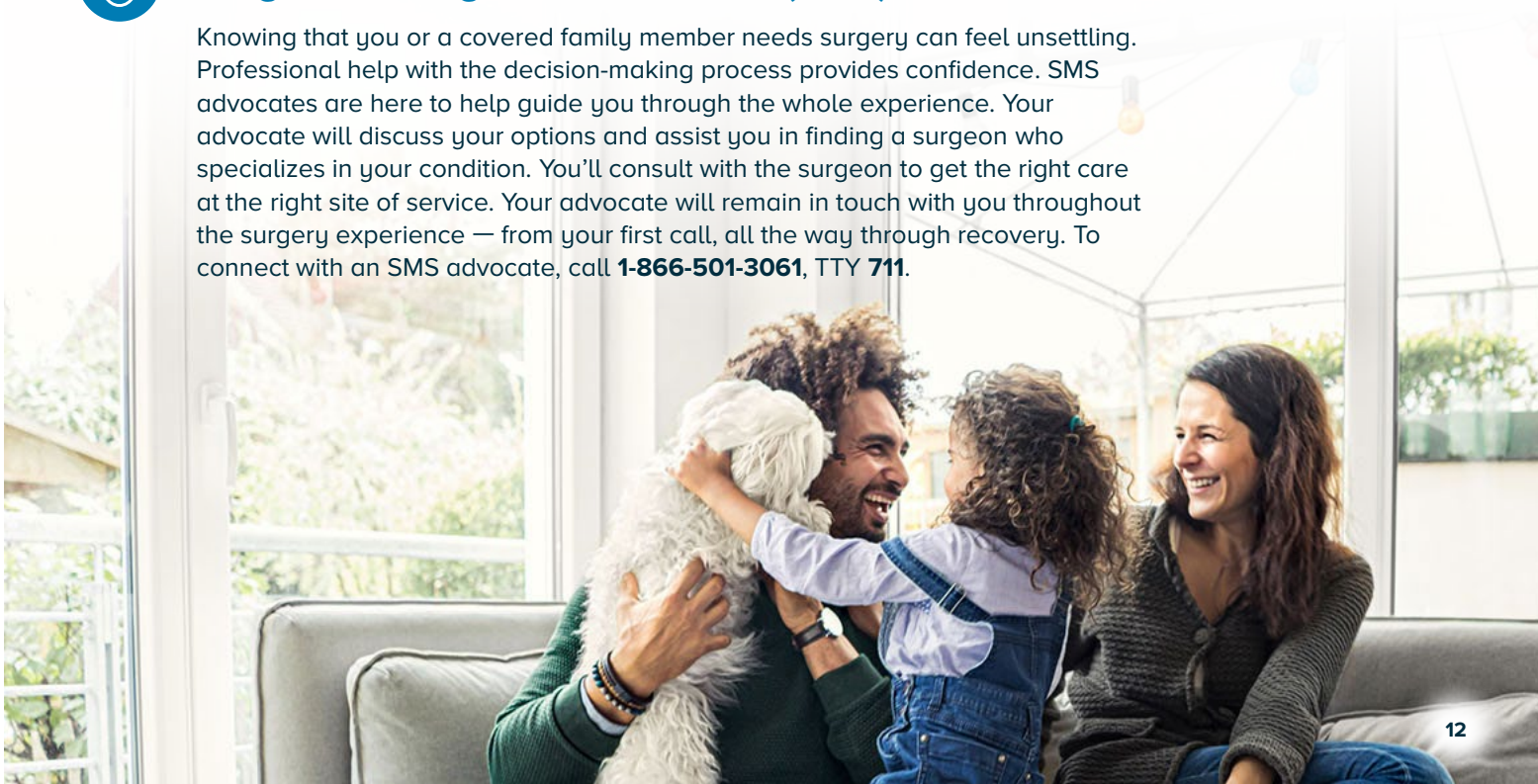
Rally®

Get moving more, eating better and feeling great with Rally. Start with a quick Health Survey and get personalized recommendations. Then complete activities and earn Rally Coins, which can be used for a chance to win rewards, support charities or bid in auctions. Visit myuhc.com or download the Rally app.



Surgical Management Solutions (SMS)

Knowing that you or a covered family member needs surgery can feel unsettling. Professional help with the decision-making process provides confidence. SMS advocates are here to help guide you through the whole experience. Your advocate will discuss your options and assist you in finding a surgeon who specializes in your condition. You'll consult with the surgeon to get the right care at the right site of service. Your advocate will remain in touch with you throughout the surgery experience — from your first call, all the way through recovery. To connect with an SMS advocate, call **1-866-501-3061**, TTY **711**.



Bind health plan

bind

Instant coverage answers. Clear costs in advance.

The Bind personalized health plan was designed to give you clarity and peace of mind, so you can focus on your life — not your health insurance. Choices and costs are clear — designed to be easy to understand. And you have more control over how your benefits work for you.

Preventive

Annual physical	\$0
Vaccinations	\$0
Prenatal care	\$0

Office Visits

Virtual Visit	\$30
Office visit	\$60 to \$240

Maternity

Prenatal	\$0
Ultrasounds	\$0
Labor & delivery	\$3,000 to \$5,000

Mental Health & Substance Use Disorder

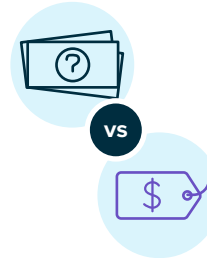
Office visit	\$60
Inpatient setting	\$4,000

Urgent & Emergency Care

Urgent care visit	\$100
Emergency room visit	\$1,500
Emergency hospitalization	\$4,000

Therapies & Rehab

Physical therapy	\$20 to \$50
Occupational therapy	\$20 to \$50
Speech therapy	\$20 to \$50
Chiropractic	\$35



One-Price Clarity

With traditional plans, you may receive multiple bills and charges for single trips to the doctor or hospital. Bind makes it easier with single, clear price tags you can see in advance.

Prescription Drugs

	30-day	90-day
Preventive drugs	\$0	\$0
Retail generic	\$7	\$18
Retail preferred brand	\$25 min / \$150 max	\$75
Retail non-preferred brand	\$50 min / \$250 max	\$400

Testing & Diagnostics

Basic lab tests, X-rays and ultrasounds	\$0
Sleep study	\$140 to \$400
MRI / CT scan	\$500 to \$1,500

Out-of-Pocket Max

Individual	\$6,000
Family	\$12,000

Procedures

Hernia repair	\$1,100 to \$2,250
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See how Bind works for you!

Visit: ChooseBind.com/PetSmart

Access code: **petsmart2022**

Questions? Call Bind Help at **1-833-997-1084**

bind

more personalized health support

In addition to our broad network of doctors, Bind partners with leading digital health and wellness programs designed to help you achieve your health goals. As a Bind member, you have access to these valuable online resources.



Doctor On Demand

Doctor On Demand is a fully virtual network of licensed physicians and behavioral health specialists available 24/7 on demand or by appointment. Doctor On Demand meets patients where they are — no waiting rooms, no commute time, less effort to address many care needs. They can help with issues like colds, allergies, urinary tract infections, prescription refills, anxiety and stress from the comfort of home. **Your cost: \$30.**



Pacify Healthy Pregnancy

Pacify offers expectant and new mothers access to unlimited live video chats with maternal and pediatric experts to answer questions whenever they pop up. Video chats in English or Spanish with lactation consultants, dietitians and other pregnancy management clinicians are available 24/7. **Your cost: \$0.**



Progyny

Progyny is a fertility and family-building benefits solution aimed at helping anyone who wants to have a child, no matter the path to parenthood. The Progyny benefit includes comprehensive treatment, access to high-quality care through a premier network of specialists and personalized support.



2nd.MD

2nd.MD provides access to top medical experts for second opinions, treatment reviews and guidance on making complex medical decisions. Not sure you need that knee surgery or have questions on a treatment path? 2nd.MD lets you get a second opinion. **Your cost: \$0.**



Pivot

Pivot's fresh, multi-pronged approach lets you use your smartphone to help quit smoking. With personalized coaching, a carbon monoxide breath sensor and limited nicotine replacement, Pivot supports any tobacco user with their goals — whether that's just learning about the health risks of tobacco, cutting back a bit or actually trying to kick the habit. **Your cost: \$0.**

For all associates, including those who are part-time

arlo's right beside you. so is Ally.

Keeping up with our to-do lists isn't always easy — especially when we're also working through relationship challenges, trying to find child care or dealing with any of the other challenges life can throw our way. Ally is here 24/7 to make the journey easier.

Ally can help with:

Family topics — parenting challenges, finding day care, caring for aging parents, adoption support, marriage and relationship issues, pet services and more

Legal support — including a 30-minute consultation with an attorney on topics such as landlord/tenant disputes, personal injury and bankruptcy

Financial assistance — phone consultations with a credentialed finance professional to discuss financial planning, debt, investments and other financial topics at no additional cost

Health and wellness support — talk with a specialist via phone anytime or visit liveandworkwell.com to access helpful articles and tools

Counseling — get up to three face-to-face counseling visits covered 100%



Call anytime, 24/7.
1-800-788-5614



liveandworkwell.com
access code: 12347



We do not treat members differently because of sex, age, race, color, disability or national origin. If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator.

Online: UHC_Civil_Rights@uhc.com

Mail: Civil Rights Coordinator, UnitedHealthcare Civil Rights Grievance, P.O. Box 30608, Salt Lake City, UT 84130

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again.

If you need help with your complaint, please call the toll-free phone number listed on your ID card, TTY 711, Monday through Friday, 8 a.m. to 8 p.m.

You can also file a complaint with the U.S. Dept. of Health and Human Services.

Online: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Phone: Toll-free 1-800-368-1019, 1-800-537-7697 (TDD)

Mail: U.S. Dept. of Health and Human Services, 200 Independence Avenue, SW Room 509F, HHH Building, Washington, D.C. 20201

We provide free services to help you communicate with us, such as letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the toll-free phone number listed on your ID card, TTY 711, Monday through Friday, 8 a.m. to 8 p.m.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

ATENCIÓN: Si habla español (Spanish), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文 (Chinese)，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

XIN LƯU Ý: Nếu quý vị nói tiếng Việt (Vietnamese), quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: 한국어(Korean)를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

PAALALA: Kung nagsasalita ka ng Tagalog (Tagalog), may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является русским (Russian). Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

تنبيه: إذا كنت تتحدث العربية (Arabic)، فإن خدمات المساعدة اللغوية المجانية متاحة لك. يُرجى الاتصال برقم الهاتف المجاني المدرج على بطاقة التعريف الخاصة بك.

ATANSYON: Si w pale Kreyòl ayisyen (Haitian Creole), ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

ATTENTION : Si vous parlez français (French), des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

UWAGA: Jeżeli mówisz po polsku (Polish), udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala português (Portuguese), contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ATTENZIONE: in caso la lingua parlata sia l'italiano (Italian), sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

ACHTUNG: Falls Sie Deutsch (German) sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

注意事項：日本語 (Japanese) を話される場合、無料の言語支援サービスをご利用いただけます。健康保険証に記載されているフリーダイヤルにお電話ください。

توجه: اگر زبان شما فارسی (Farsi) است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفاً با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप हिंदी (Hindi) बोलते हैं, आपको भाषा सहायता सेवाएं, नःशुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

CEEB TOOM: Yog koj hais Lus Hmoob (Hmong), muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយភាសាខ្មែរ (Khmer) សេវាជំនួយភាសាដោយឥតគិតថ្លៃ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃដែលមាននៅលើអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

PAKDAAR: Nu saritaem ti Ilocano (Ilocano), ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyam. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

DÍÍ BAA'ÁKONÍNÍZIN: Diné (Navajo) bizaad bee yánilti'go, saad bee áka'anída'awo'ígíí, t'áá jíik'eh, bee ná'ahót'i'. T'áá shqódi ninaaltsoos nítł'izi bee nééhozinígíí bine'déé' t'áá jíik'ehgo béésh bee hane'í biká'ígíí bee hodiilnih.

OGOW: Haddii aad ku hadasho Soomaali (Somali), adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.

This information is not intended as legal or tax advice. Please contact a competent legal or tax professional for personal advice on eligibility, tax treatment and restrictions. Federal and state laws and regulations are subject to change.

The UnitedHealthcare plan with health savings account (HSA) is a high-deductible health plan (HDHP) that is designed to comply with IRS requirements so eligible enrollees may open an HSA with a bank of their choice or through Optum Bank, Member of FDIC. The HSA refers only and specifically to the HSA that is provided in conjunction with a particular bank, such as Optum Bank, and not to the associated HDHP.

Real Appeal® is a voluntary weight-loss program that is offered to eligible participants as part of their benefit plan. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical and/or nutritional advice. Participants should consult an appropriate health care professional to determine what may be right for them. Any items/tools that are provided may be taxable and participants should consult an appropriate tax professional to determine any tax obligations they may have from receiving items/tools under the program.

24/7 Virtual Visits are not an insurance product, health care provider or health plan. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 24/7 Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times or in all locations. Payment for Virtual Visit services does not cover pharmacy charges; members must pay for prescriptions (if any) separately. The Designated Virtual Visit Provider's reduced rate for a Virtual Visit is subject to change at any time.

The UnitedHealth Premium® program is a resource for informational purposes only. Designations are displayed in UnitedHealthcare online physician directories at myuhc.com®. You should always consult myuhc.com for the most current information. Premium designations are a guide to choosing a physician and may be used as one of many factors you consider when choosing a physician. If you already have a physician, you may also wish to confer with him or her for advice on selecting other physicians. Physician evaluations have a risk of error and should not be the sole basis for selecting a physician. Please see myuhc.com for detailed program information and methodologies.

Rally Health provides health and well-being information and support as part of your health plan. It does not provide medical advice or other health services, and is not a substitute for your doctor's care. If you have specific health care needs, consult an appropriate health care professional. Participation in the Health Survey is voluntary. Your responses will be kept confidential in accordance with the law and will only be used to provide health and wellness recommendations or conduct other plan activities.

The Maternity Support Program follows national practice standards from the Institute for Clinical Systems Improvement. Nurses cannot diagnose problems or recommend specific treatment. The information provided is not a substitute for your doctor's care. Please discuss with your doctor how the program information provided is right for you.

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The information in this guide is a general description of your coverage. It is not a contract and does not replace the official benefit coverage documents, which may include a Summary of Benefits and Coverage and Certificate of Coverage/Summary Plan Description. If descriptions, percentages and dollar amounts in this guide differ from what is in the official benefit coverage documents, the official benefits coverage documents prevail.

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