live your healthiest life

with these benefits.





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, learn about programs included with the plan and refer back to it 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."

Table of contents

Health Plan Details

Health & Wellness Resources
Bind Health Plan
Choice Plus Plan with HRA8 >
High-Deductible Health Plan with HSA
Medical Plan Snapshot4 >
Terms to Know



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.



snapshot of your medical plan

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										
		contribution ır HSA*			PetSmart's contribution to your HRA			IRA		
Individual	\$3	90	\$0		40		\$250		\$0	
Family	\$7	'80			\$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, you have one deductible for the entire family. For example, if you visit a network specialist and your visit costs \$2,000, and your child visits a network specialist and the appointment costs \$2,000, then you've reached your annual deductible of \$4,000.

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	Diamagna	Diamaga	You pay \$25 copay	Diama	You pay \$25 copay	Diama		
Specialist (including mental health and substance abuse)	Plan pays 80%	Plan pays 60%	You pay \$50 copay	Plan pays 60%²	You pay \$50 copay	Plan pays 60%²	\$60 to \$240	\$480

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.



snapshot of your medical plan

Plan features		ctible health P) with HSA	PPO 1		PPO 2		Bi	nd		
	Network	Out-of-network	Network	Out-of-network	Network	Out-of-network	Network	Out-of-network		
Prescriptions										
Retail generic	Deductil	ble/Coins*		\$7 c	opay		\$7 copay	N/C		
Retail brand formulary	Deducti	ble/Coins	\$25 min/\$150 max; 25% coins				\$25 min/ \$150 max; 25% coins	N/C		
Retail non-formulary	Deducti	ble/Coins	\$50 min/\$150 max; 40% coins				\$50 min/ \$150 max; 40% coins	N/C		
Mail generic (90-day supply)	Deducti	Deductible/Coins		\$18 copay			\$18 copay	N/C		
Mail brand formulary (90-day supply)	Deducti	Deductible/Coins		\$75 copay			\$75 copay		\$75 copay	N/C
Mail non-formulary (90-day supply)	Deducti	ble/Coins	\$400 copay			\$400 copay	N/C			
Specialty (30-day supply)	Deducti	ble/Coins	Network: \$0/30% coins**; Out-of-network: N/C		\$0/30% coins**	N/C				

[&]quot;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_prescription.shtml.



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.

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



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 (\$10 per week, prorated annual contribution based on plan start date)
Family	\$780 annually (\$20 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:

- 900,000+ physicians and health care professionals
- **5,500+** hospitals
- **67,000+** pharmacies

Search the network at welcometouhc.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 2021 IRS HSA deposit limits are:

Individual	\$3,600 ²
Family	\$7,200 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.

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.

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

How paying for network care works with an HSA:



Your deductible

You pay for all services, including prescriptions, until you meet your deductible. You can use an HSA to help pay for them.

> Pay with your HSA or pay another way



Your coinsurance

After you reach the deductible, you share the costs with the plan. You can use an HSA to help pay your share.

Your plan **pays 80%** You pay 20%



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.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.

³ 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.

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.

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:

- 900,000+ physicians and health care professionals
- **5,500+** hospitals
- **67,000+** pharmacies

Search the network at welcometouhc.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 welcometouhc.com/petsmart.

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® 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:



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 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 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



Bind Health Plan



Bind offers simple, straightforward prices that vary by provider. That means you can know what a doctor visit or treatment is going to cost before you get it — and Bind will even recommend lower-cost alternatives.



There's no deductible or coinsurance.

Unlike most plans, you get the benefit of the plan right away.



The plan is tailored to your needs.

Bind automatically covers common conditions and health events.



It includes additional programs.

Programs such as diabetes management and maternity health are designed to help you get support and live your healthiest life. To learn more, visit **benefits.petsmart.com**.



Preventive care is covered 100%.

There's no cost for preventive or prenatal care.



Cost comparisons help you save.

Prices for cost-effective treatments, doctors and clinics are typically lower. Compare provider quality ratings for many providers and view prices of lower-cost pharmacies across the street or across town.

Compare costs at ChooseBind.com/PetSmart

Access code: petsmart2021



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.



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 <u>myuhc.com</u> 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 Virtual Visits

A 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.

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.



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.



Maternity Support

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.



Download the UnitedHealthcare Healthy Pregnancy® app

Get nurse support and resources for a healthier pregnancy, and track personalized milestones, appointments with alerts and your baby's movements.



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**.

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.





For all associates, including those who are part-time

buster'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 — free phone consultations with a credentialed finance professional to discuss financial planning, debt, investments and other financial topics

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

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





<u>liveandworkwell.com</u> 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 русском (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 المجانى 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. لطفا با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप हिंदी (Hindi) बोलते है, आपको भाषा सहायता सेबाएं, नि:शुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सचीबदध टोल-फरी 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.

ចំណាប់អារម្មណ៍ៈ បើសិនអ្នកនិយាយភាសាខ្មែរ (Khmer) សេវាជំនួយ ភាសាដោយឥតគិតថ្លៃ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃ ដែលមាននៅលើអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

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 yániłti'go, saad bee áka'anída'awo'ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shoodí ninaaltsoos nitl'izí bee nééhozinígíí bine'déé' t'áá jíík'ehgo béésh bee hane'í biká'ígíí bee hodíilnih.

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.

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. 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 charge of the part of the pa

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.

Disease Management programs and services may vary on a location-by-location basis and are subject to change with written notice. UnitedHealthcare does not guarantee availability of programs in all service areas and provider participation may vary. Certain items may be excluded from coverage and other requirements or restrictions may apply. If you select a new provider or are assigned to a provider who does not participate in the Disease Management program, your participation in the program will be terminated.

Mastercard is a registered trademark of Mastercard Worldwide.

App Store is a registered trademark of Apple, Inc. Android and Google Play are trademarks of Google, Inc.

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.

©2020 United HealthCare Services, Inc. (ES 20-3167)

