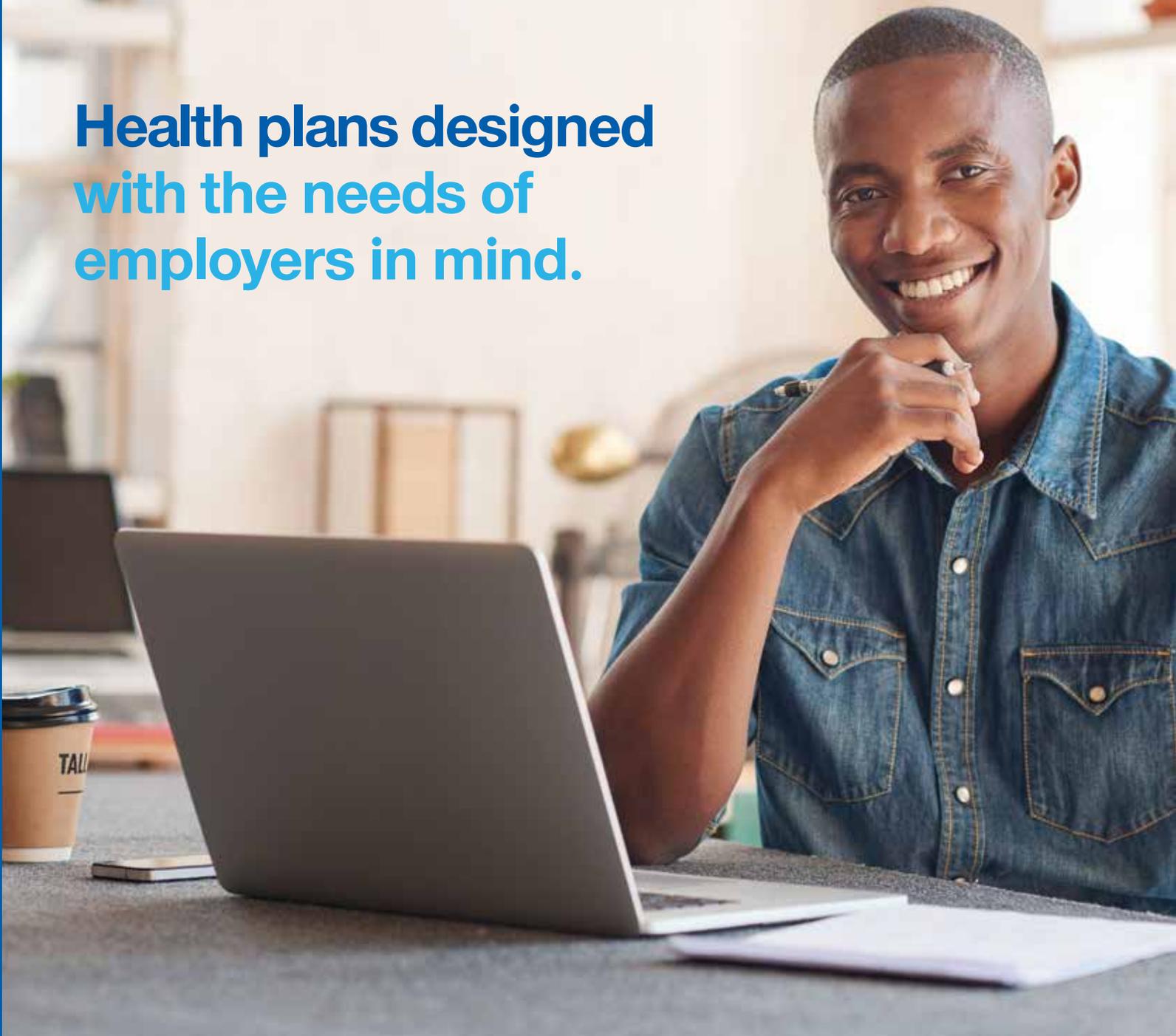


**Health plans designed
with the needs of
employers in mind.**



Product Catalog

California Small Business (1-100)
Effective April 1, 2019





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* Formal product name: UnitedHealthcare Multi-Choice®

**Formal product name: UnitedHealthcare Navigate®

† Formal HMO product names:

Signature = UnitedHealthcare SignatureValue®

Advantage = UnitedHealthcare SignatureValue Advantage

Alliance = UnitedHealthcare SignatureValue Alliance

Focus = UnitedHealthcare SignatureValue Focus

SignatureValue Harmony = UnitedHealthcare SignatureValue Harmony

Better information. Better decisions. Better health.

UnitedHealthcare is a division of UnitedHealth Group, a Fortune 50 company and one of the single largest health coverage carriers in the country. We offer a diverse range of health coverage plans and a national network of more than 960,790 physicians and health care professionals, 5,897 hospitals and 67,000 pharmacies. Serving 48 million members nationwide, we're committed to helping enhance the health care experience through:



Better information—We alert individuals and their doctors to potential health risks or opportunities to help take charge of their health. We give employers access to information to plan and implement worksite wellness programs to help boost productivity and morale.



Better decisions—When we give employers, individuals and doctors access to relevant information, they can be empowered to help make better-informed health care decisions.



Better health—Our mission is **helping people live healthier lives**, which contributes to a healthier and more productive, cost-efficient workplace.

Helping keep prices more affordable, and plans and processes simpler.

Affordability

Good health. We hear and read every day that one of the best ways to get control over health care costs is to get healthier. Unhealthy employees cost their employers—in lost productivity as well as health care costs. UnitedHealthcare plans include 100 percent coverage for preventive care and wellness benefits,* such as wellness coaching and biometric screenings. Built-in incentives to encourage healthier behaviors (like reimbursing a portion of an employee’s fitness membership if he or she meets the criteria) and other value-added programs at no additional premium cost. And we contact our members to get that preventive care or take action on personal health risks when the need arises.

Education. We’re helping make it easier for our members to understand and manage their health care costs with tools such as our easy-to-use Find Care & Costs and easily accessible health advisers, professionals who offer guidance as needed through the health care system.

Plan design. Plans such as Select Plus and Alliance feature flexibility in choice of benefits and financial responsibility, as well as give the member more control over managing health-related expenses. And the increasing availability of lower-cost generic drugs is making a significant dent in the high cost of prescription medication.

Simplicity

Simpler is better. We’ve improved our services, simplified administration and renewals, and made it easier to offer more health care coverage options to employers and their employees.

And our **Choice Simplified** option provides employers with the opportunity to mix and match any of our plans to help meet their needs. Plus, specialty plans, such as dental, vision or life, can be added at considerable savings, and administration services are part and parcel of the program.

*Learn more about Wellness Programs on Page 19.

The power of the network.

Our commitment to providing you with health coverage solutions for your clients includes offering a variety of networks, both nationally and locally, that are easier to use, fully integrated and stable.

Our California HMO network includes:

- **Signature plan:**¹ 77,600 physicians and health care professionals, and 211 hospitals.²
- **Advantage plan:**¹ 49,200 physicians and health care professionals, and 150 hospitals.²
- **Alliance plan:**^{1,3} 29,700 physicians and health care professionals, and 122 hospitals.²
- **Focus plan:**¹ 24,000 physicians and health care professionals, and 110 hospitals.²
- **SignatureValue Harmony:**⁴ 6,817 physicians and health care professionals, and 78 hospitals.

Our California Select Plus network includes:

- 97,497 physicians and health care professionals, and 320 hospitals.²

Our California Core network includes:

- 51,801 physicians and health care professionals, and 304 hospitals.²

Our Navigate network includes:

- 55,938 physicians and health care professionals, and 285 hospitals.²

Our national network includes:

- 960,790 physicians and health care professionals, and 5,897 hospitals.⁵
- 83 percent of all available U.S. hospital beds and 2 out of 3 available doctors and health care professionals are accessible for employees nationwide.

¹ Formal HMO product names:

Signature = UnitedHealthcare SignatureValue®

Advantage = UnitedHealthcare SignatureValue Advantage

Alliance = UnitedHealthcare SignatureValue Alliance

Focus = UnitedHealthcare SignatureValue Focus

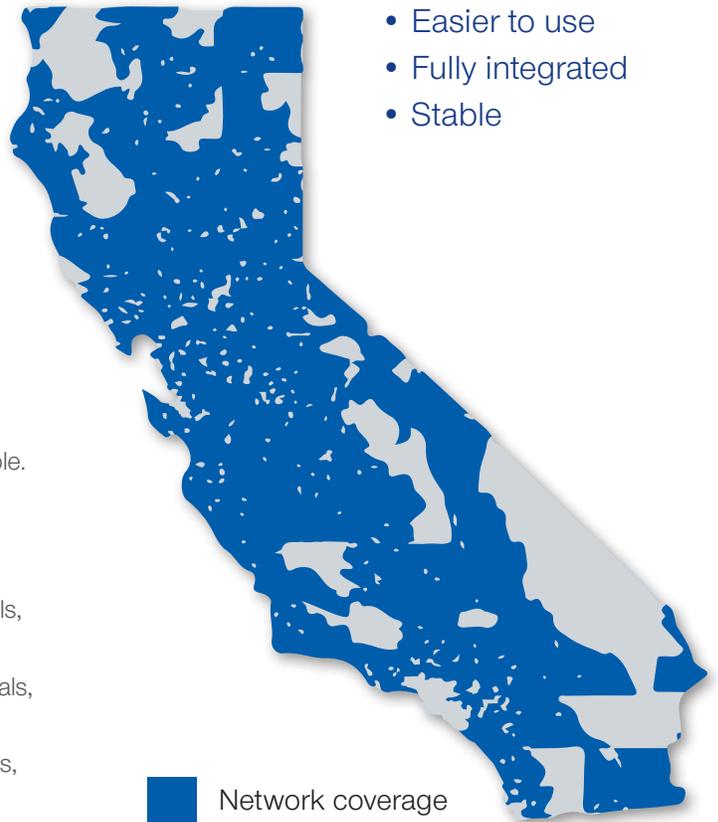
SignatureValue Harmony = UnitedHealthcare SignatureValue Harmony

² UnitedHealthcare internal analysis, November 2018.

³ Alliance product is available in select markets. Please contact your UnitedHealthcare representative for information.

⁴ As of October 2018.

⁵ As of January 2019.



UnitedHealthcare Product Continuum Chart

California Small Business (1–100 employees).

UnitedHealthcare offers a broad range of health plans that are designed to be affordable and flexible for employers of various sizes. To help determine the plans that best suit their employees' need for affordability, we've created a product continuum chart. The plans are arranged from lowest to highest premium and list key features.



Formal HMO product names:
 Signature = UnitedHealthcare SignatureValue®
 Advantage = UnitedHealthcare SignatureValue Advantage
 Alliance = UnitedHealthcare SignatureValue Alliance
 Focus = UnitedHealthcare SignatureValue Focus
 SignatureValue Harmony = UnitedHealthcare SignatureValue Harmony

Formal Insurance product names:
 Navigate = UnitedHealthcare Navigate®
 Core = UnitedHealthcare Core
 Choice Plus = UnitedHealthcare Choice Plus
 Select Plus = UnitedHealthcare Select Plus

Formal PPO product name:
 Non-Differential PPO = Non-Differential PPO

The Choice Simplified portfolio of plans.

Plans in our Choice Simplified portfolio allow small group employers with one or more enrolling employees to purchase one health plan package that includes multiple benefit design options. They can offer their employees an array of health care coverage options to help meet a variety of health care and financial needs. Plans include different product options, ranging from health maintenance organizations (HMOs) to consumer-driven health plans eligible for health savings accounts (HSAs).

How Choice works:

- Step 1:** Pick the plans that help fit the employees' needs. Employer can choose as many plans as they need to fit their program.
- Step 2:** Direct employees to choose the benefit design option that best meets their individual needs from the selected plans.
- Step 3:** The employer renews with UnitedHealthcare, and can keep or change their plan offerings within the package year after year, helping to ensure that the health plan benefits will evolve with the changing needs of the employer and their employees.





Plan information for Select Plus, Core, Navigate and Consumer-driven Health.

Select Plus

Flexible plans with network advantages.

UnitedHealthcare provides network and out-of-network benefits, plans for single-site, multi-site and multi-state businesses and variable options for deductibles, coinsurance and pharmacy plans that help meet employers' needs.

Our Select Plus plan designs include a per-occurrence deductible, which is applied to inpatient hospital and certain outpatient services, such as outpatient surgery, standard lab/X-ray and complex imaging (e.g., MRI, CT, PET). Members with these plans have the option to avoid the per-occurrence deductible when accessing these outpatient benefits by receiving services from a network independent, non-hospital-affiliated provider.

These benefit plan designs offer employers:

- **Affordability**—Lower-cost alternatives for premiums.
- **Choice**—Popular combinations of benefits and pricing.
- **Network***—Access to 933,159 physicians, 5,639 hospitals and 67,000 pharmacies across the country.

Select Plus plans help give members the freedom to see any doctor in or outside the Select Plus network without a referral.

Benefits of the Select Plus plan include:

- Members visit any participating network physician or facility (including specialist) without a referral.
- When members visit participating network physicians and hospitals, there aren't any claim forms or bills to worry about.
- Range of plan designs with different deductible levels, copayments, coinsurance and out-of-pocket amounts.

Core

An open-access product with a customized network designed to offer more affordable health care options.

UnitedHealthcare Core plan is designed to give members the freedom to choose from any health care professional in the UnitedHealthcare Core network, including specialists, without a referral or choosing a primary care physician (PCP). Since Core is an open-access product, members can seek care from any provider, but they may pay more out-of-pocket costs when they do not receive care from network providers or facilities.

Core has similar plan designs and shares many features with Select Plus, but uses a smaller, customized network designed to offer more affordable plan options. This flexible product provides simple-to-use coverage designs and integrated specialty services for employees. In addition, they will have access to tools and information on our member website, myuhc.com[®], and quality outreach, advocacy and wellness programs.

* As of September 28, 2018.

Why Core?

Value

- Lower price point allows employers and employees to benefit from lower premiums.

Flexibility

- Plan design options are flexible and have the ability to help support a range of benefit designs including HSA-compatible plans.
- Dual option is available with Core, or it can be sold as a standalone product.

Access

- Core national network allows members access to health care services nationwide.
- No gatekeeper gives members more flexible access to see a specialist.
- Out-of-network benefits allow members the option of seeing out-of-network providers with more limited coverage.
- No referrals are required.

Navigate

Promoting better health and lower costs.

The UnitedHealthcare Navigate[®] product is built on the fundamentals of patient-centered care, with the goal of enhancing the patient-doctor relationship and promoting better health and lower costs.

Upon enrollment in any Navigate plan, members must select a primary care physician (PCP) from the Navigate network. PCPs can be general practitioners, family practitioners, internists, OB/GYNs or pediatricians. Each family member can choose a different PCP to manage their health care needs.

A PCP is the key to helping members live healthier lives, guiding them through the health care system and helping them make informed health care decisions.

Our Navigate plan designs include a per-occurrence deductible, which is applied to inpatient hospital and certain outpatient services such as outpatient surgery, standard lab/X-ray and complex imaging (e.g., MRI, CT, PET). Members with these plans have the option to avoid the per-occurrence deductible when accessing these outpatient benefits by receiving services at a network independent, non-hospital-affiliated provider.

Why Navigate?

Value

- Plans offer patient-centered health care benefits.
- Members choose a primary care physician (PCP) as their trusted partner in health care who also grants referrals for specialists' services.

Access

- The Navigate national network allows members to access physicians and specialists nationwide once a referral from the PCP has been entered online. Out-of-network coverage is not available, except in the case of emergency care.

Consumer-driven health.

High deductible health plan.

Our Health Savings Account (HSA) plans offer a medical plan, coverage for preventive care and a health savings account that members control and access themselves to cover some of the costs of qualified medical expenses.

HSA features.

- Members can manage their medical claims and HSA together online or with a representative.
- Three account types offer balance of interest, account fees and spending. Non-proprietary mutual fund investing is available.
- For greater member convenience, HSAs include a debit card and online bill payment.
- Accounts are administered by Optum Bank®, Member FDIC. OptumHealth Financial ServicesSM provides educational tools that help both employers and individuals successfully engage in their financial health.





**Value-added programs for Select Plus,
Core, Consumer-driven health and
Non-Differential PPO.**

Our goal is to help employers and employees manage costs by helping people improve their total health and productivity. That's why we offer these additional health and wellness programs with all our Select Plus, Core, Consumer-driven Health and Non-Differential PPO plans at no additional charge.

Advocate4me®

Delivering a proactive, highly personalized experience. UnitedHealthcare makes it easier for individuals to make informed health care choices and get the most out of their benefits. And, for employers, we help you better manage costs. Our advocacy is built on a foundation of robust data and insights that:

- Offers proactive, personal guidance.
- Simplifies the benefits experience.
- Provides access to quality care.

Find Care & Costs

Makes it easier for members to view their claims and account balances, estimate out-of-pocket expenses, find physicians and compare treatment cost estimates, and more. When members are able to get information based on their plan, they can better understand their choices and take ownership of their personal health and health care spending.

Care Coordination

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

eSync Platform®

Takes a big-picture look at a member's health, and, using proprietary technology, alerts the member and his or her physician to a potentially serious condition so that intervention can occur at the diagnostic stage.

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 help improve quality of life and keep cost trends in check.

Complex Medical Conditions Program

Provides access to Centers of Excellence networks comprising medical centers identified as specialists in treating specific conditions and that meet strict evaluation requirements. The Complex Medical Conditions program also provides clinical consulting services to help manage treatment programs and costs to maximize employee benefits.

Evidence-based Medicine

Helps improve consistent clinical outcomes and reduces inefficient delivery of care. We offer Clinical Evidence (a compilation of thousands of recent research studies); facilitate peer-to-peer data-sharing consultations; and provide physicians and hospitals with relevant data regarding their performance compared to nationally accepted, evidence-based practices.

SimplyEngaged®

A turnkey wellness and customer engagement incentive program designed to improve the health of employees by rewarding them with financial incentives as they participate in health and wellness actions. The more engaged employees are in their health care, the healthier they may be and that may result in health care savings for employers.*

United Behavioral Health

Provides behavioral health and substance use disorder services, ranging from counseling to acute inpatient care, that are delivered by our affiliate, United Behavioral Health (UBH).

Features

- Support and treatment for mental health and substance use disorder issues.
- Integration with medical benefits for streamlined administration.
- Indirect and direct cost-savings.

Care24®

Helps employees with health, personal or family-related concerns 24 hours a day, 7 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. 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 employers access to audio messages on more than 1,100 health and well-being topics. Most audio tapes are available in English and Spanish, and we provide translation services for more than 140 languages.

myuhc.com® Member Website

Gives Select Plus, Core, Consumer-driven Health and Non-Differential PPO members a single site that has just about all they need to get the most out of their plan benefits. myuhc.com provides free, 24/7 access to online tools members use to:

- Check current and past claim status.
- Review benefits and coverage.
- Find network doctors and hospitals.

myuhc.com also provides customized information and articles on hundreds of health-related topics.

Virtual Visits

Lets employees and their covered family members see and speak to a doctor 24 hours a day, 7 days a week using a mobile device** or computer, wherever they are. If needed, a prescription*** can be sent to their local pharmacy. No appointment is necessary—and usually takes less than 20 minutes.¹ Costs are similar to a typical copay and much less than the usual cost of urgent care. Virtual Visits are fully integrated with the benefit plan administered by UnitedHealthcare and provided at no additional administrative cost to the employer.

* See Page 19 for more details.

**Data rates may apply.

***Prescription services may not be available in all states.

¹ Average times based on monthly data reports from Virtual Visits providers.



**HMO plan offerings for Signature,
Advantage, Alliance, Focus and
SignatureValue Harmony.**

Signature

The Signature plan includes our full network of contracted providers. With this HMO plan, members simply choose a primary care physician (PCP) from our full network of contracted providers to coordinate all their medical care. They can then visit their PCP for routine checkups, and when they need to see a specialist, their PCP provides a referral. Members are charged only a copayment for each doctor's visit. Preventive care, including checkups, is covered.

Advantage

The Advantage plan offers the same level of benefit coverage as a traditional HMO plan at a lower premium. The difference is in the network. The Advantage plan offers a narrower network of contracted providers. Members must choose a PCP from the Advantage network to coordinate all their medical care.

Alliance

Designed with affordability and quality in mind, the Alliance plan puts members at the center of a "patient-centered care" experience to promote better outcomes and lower costs. Upon enrollment, members select a PCP to coordinate their care throughout a network of well-recognized physicians and facilities selected based on a track record of practicing evidence-based medicine and keeping costs in check. Alliance physicians are committed to using and sharing de-identified health data to advance best practices and help deliver better care, every step of the way.

Focus

Introducing Focus, an HMO plan that provides the same level of coverage as our traditional HMO plan, but at a lower price. A refined local, narrower network is designed to help improve cost controls. Members must select a PCP from the Focus network who coordinates care with other physicians and specialists in the network. The plan includes preventive care checkups and wellness programs at no additional cost. Focus offers employers a number of favorable premium and benefit design options, and provides members with the health coverage they want and need at a more predictable and lower cost.

UnitedHealthcare SignatureValue[®] Harmony

Introducing SignatureValue Harmony, a new HMO plan uniting care and coverage. Bringing together doctors and patients, designed to help lower costs and improve quality. UnitedHealthcare, OptumCare and HealthCare Partners are partnering to offer access to this plan focused on the physician-patient relationship, and designed to be affordable. With SignatureValue Harmony, members have access to care and information 24/7, concierge service from a cross-trained team of advocates to help align care and coverage, and tools designed to help support better health through myuhc.com. When enrolling, members choose a primary care physician (PCP) from the SignatureValue Harmony network who guides them through the health care system and coordinates additional care. The difference: A personalized, convenient and simplified care experience.



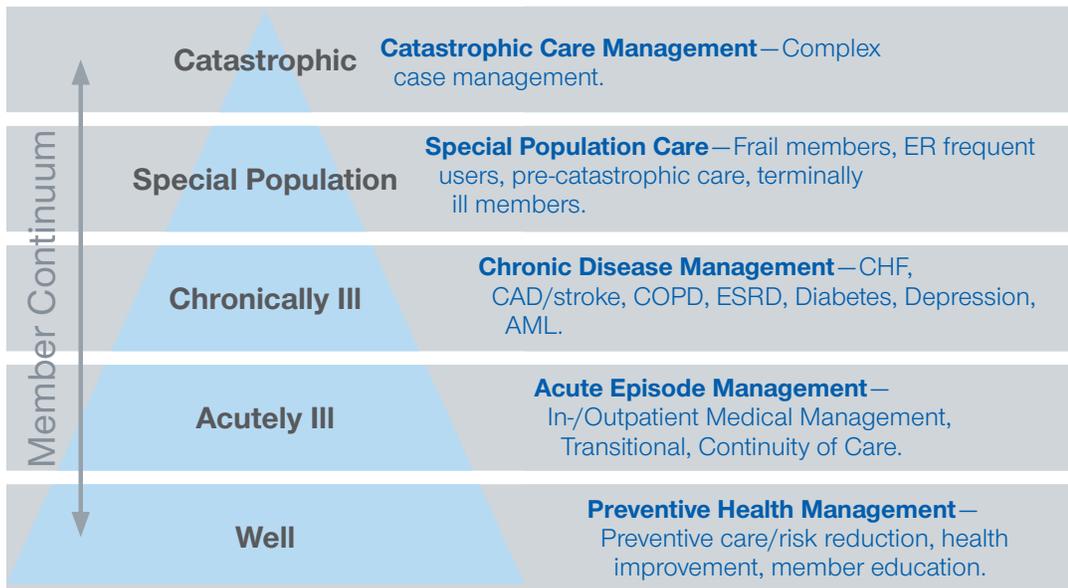
SignatureValue Harmony and Alliance are flexible enough to meet the needs of employers and their employees, they can be paired with either an **HSA** or an **High Deductible Health Plan (HDHP)**. These options each provide a unique set of features, benefits and requirements. For example, the employee is the "owner" of the HSA, while HDHPs give the employer much more control over which expenses to cover. With both types of account, funds can "roll over" from year to year to allow members to save for bigger expenses, and significant tax benefits can be realized, with proper use.



**Value-added programs for Signature,
Advantage, Alliance, Focus and
SignatureValue Harmony.**

Disease Management and Health Management Programs

Managing a disease is never easy. But with support and information, it can be made more tolerable.



We offer case-based disease management programs for:

- Acute Myelogenous Leukemia (AML)
- Asthma
- Cancer
- Chronic Obstructive Pulmonary Disease (COPD)
- Congestive Heart Failure (CHF)
- Coronary Artery Disease/Stroke (CAD)
- Depression
- Diabetes
- End-Stage Renal Disease (ESRD)
- Maternity Support Program
- Neonatal Care Management

We also offer health management programs that help provide education and self-care information that can help our members live healthier lives:

- Stop Smoking
- Taking Charge of Asthma®
- Taking Charge of Diabetes
- Taking Charge of Your Heart Health

myuhc.com (member website)

At myuhc.com, HMO members may order health plan ID cards and change their provider, plus get access to interactive health information, health benefits, doctor directories, information on the Mail Service Pharmacy, health tips, resource links and more.

*These discounts apply only on services that are not covered by the member's plan or are above plan limits.

Maternity Support Program

This program helps families from the time they consider starting or expanding their family through the first few weeks of the new baby's life. It also allows members to have one-to-one access to an experienced maternity nurse, medical director and social worker throughout their pregnancy, regardless of risk level.

Some of the highlights include:

- Pre-conception care, early preparation and guidance toward a healthier pregnancy.
- Early identification of risk triggers, monitoring and management.
- One-to-one access to a specialized OB nurse.
- Postpartum educational support and parenting coaching.

UnitedHealthcare Healthy Pregnancy™ app¹ delivers personalized content/tools and real-time access to a nurse 24/7. For more information, please visit myuhc.phs.com/maternitysupport or call **1-877-201-5328**, TTY **711**.

Advocate4me®

Delivering a proactive, highly personalized experience. UnitedHealthcare makes it easier for individuals to make informed health care choices and get the most out of their benefits. And, for employers, we help you better manage costs. Our advocacy is built on a foundation of robust data and insights that:

- Offers proactive, personal guidance.
- Simplifies the benefits experience.
- Provides access to quality care.

Virtual Visits

Let employees and their covered family members see and speak to a doctor 24 hours a day, 7 days a week using a mobile device* or computer, wherever they are. If needed, a prescription** can be sent to their local pharmacy. No appointment is necessary—and usually takes less than 20 minutes.² Costs are similar to a typical copay and much less than the usual cost of urgent care.

Virtual Visits are fully integrated with the benefit plan administered by UnitedHealthcare and provided at no additional administrative cost to the employer.

SimplyEngaged

A turnkey wellness and customer engagement incentive program designed to improve the health of employees by rewarding them with financial incentives as they participate in health and wellness actions. The more engaged employees are in their health care, the healthier they may be and that may result in health care savings for employers.***

OptumRx®

OptumRx is committed to offering quality pharmacy benefits at a reasonable price. Through a partnership approach, we work to:

- Deliver a simple, high-touch service model.
- Drive prescriber collaboration.
- Improve quality and safety through formulary and clinical program management.
- Maximize savings through better trend and cost management.

Members can fill prescriptions through mail service and enjoy convenient door-to-door delivery. Or, they can choose one of our 67,000 network retail pharmacies.

For more information about OptumRx, visit optumrx.com.

* Data rates may apply.

**Prescription services may not be available in all states.

***See Page 19 for more details.

¹ Registration is required to access the UnitedHealthcare Healthy Pregnancy app.

² Average times based on monthly data reports from Virtual Visits providers.

Employer eServices®

Available to Select Plus, Core, Navigate, Consumer-driven Health and Non-Differential PPO plans. Programs subject to change.

Streamlined administration for employers.

Employer eServices is UnitedHealthcare's secure website that provides immediate and secure self-service access to health benefits information. Self-service efficiency helps lead to:

- Increased employee satisfaction—employees have access to their benefits quickly and experience less hassle at the time of service with updated eligibility information.
- Increased accuracy—customers benefit from accuracy through real-time processing and more accurate billing statements.

From eligibility maintenance to customer reporting and billing solutions, Employer eServices is a gateway to tools that help make health benefits administration more efficient.

Online eligibility maintenance.

- Add new employees.
- Verify and change eligibility.
- Request medical health plan ID cards.
- Verify or change status of employees and dependents.

Electronic eligibility management.

- Submit data electronically from an HR system—no manual entry.
- Spend less time reconciling full population files.
- Download error reports into an easy spreadsheet.
- Receive email notifications with updated eligibility statistics.

Online billing.

- Check claims status (self-funded customers only).
- View invoices online.
- Authorize payment online.
- Download invoices into spreadsheets.
- View, sort and search current and prior month's invoices.
- Request adjusted invoices after changing/adding eligibility information.

Real-time reporting.*

- View benefit plan cost and use information.
- Access free standard reports and optional customized reports.

Communication Resource Center.

The Communication Resource Center on employereservices.com or uhc.com/crc makes it easier for employers to communicate with their employees and help them get the most from their benefit plan.

- Access fliers, posters, brochures and articles that employers can email, print and use in company newsletters or any other form of employee communication.
- Build a customized newsletter with articles provided.
- Use communication tools that help employers plan a workplace wellness campaign.

*Availability based on group size and funding arrangements.

United eServices® for brokers.

Available to Select Plus, Core, Navigate, Consumer-driven Health and Non-Differential PPO plans. Programs subject to change.

Streamlined administration for brokers.

We developed the United eServices website to help appointed brokers and consultants streamline their administrative tasks and provide better service to employers. Brokers can access an array of online tools and information, including:

- Network information.
- Online commission statements and bonus schedules.
- Sales support materials.
- Reward program information.
- Forms.

United eServices also provides a gateway to the Employer eServices site for those brokers who manage benefits administration on behalf of their clients.

Register with United eServices online. Visit unitedeservices.com and click on the registration button.

uhctogether.com/casb

We provide the most current Small Business plan information and tools right at your fingertips at uhctogether.com/casb.

With our new expanded small business product portfolio that includes plans, you can view and download PDFs by a click of a button. This includes:

- Product catalogs.
- Small business forms.
- Wellness tools.
- Brochures and fliers for specialty plans, such as dental and vision, no-fee administrative services and more.

Brokers can send a request for a quote within 24 hours or run quotes for all major health plan carriers in California and receive just one census and proposal. Visit uhctogether.com/casb today.

Sales Automation Management (SAM) quoting and online enrollment.

SAM is an online tool on unitedeservices.com designed to help make every part of the quoting, selling and installation process simpler and faster — allowing you to sell more, serve more and satisfy more clients, in less time.

With SAM, you can:

- Input minimal group data and plan requirements.
- Filter and compare multiple plan options for your client.
- Quote, generate and email medical and specialty proposals in minutes.
- Continue the process using online enrollment when your client is ready to move forward.



**Additional value-added programs
available with every plan and
other additional services.**

myuhc.com member website.

A one-stop resource designed to help members understand their health care choices and get the most out of their coverage. Members have 24/7 access to online tools that let them check claim status, review their personalized benefits information, estimate out-of-pocket expenses, find network doctors and hospitals and more.

Rally® Health & Wellness.

This online health and wellness tool on myuhc.com uses a fun, interactive experience to help engage and energize members about getting and staying healthier. Every time members visit Rally, they'll earn Rally Coins, which can be used for a chance to win great things. They can also use the tool to track their personal health record and connect with others online that have similar goals.

SimplyEngaged® incentive program.

SimplyEngaged involves 5 simple components:

- 1 Offer employees and covered spouses a UnitedHealthcare medical plan.**
SimplyEngaged can be paired with any UnitedHealthcare medical plan options.
- 2 Establish a simple “workplace wellness program.”**
 - **Send out an announcement letter** to all employees from the company owner or a senior executive.
 - **Designate a “Wellness Champion”** to serve as an ambassador to promote wellness events and activities.
 - **Sponsor at least one health fair/wellness event (including a biometric screening) within the first 120 days of the policy year.** UnitedHealthcare will cover the cost of biometric screenings for covered employees at locations with 20 or more participating employees.
 - **Send out a quarterly communication** (newsletter, article or flier) on a health and wellness topic to employees.
- 3 Offer and promote the SimplyEngaged reward program.**
Use tools to help motivate employees and their covered spouses to complete the wellness and health improvement activities. Additionally, UnitedHealthcare will distribute SimplyEngaged specific promotions, reminders, and messaging to encourage action.
- 4 Reward employees for completing health actions or for specific health outcomes.**
Members may benefit from these enhanced features of **Gym Check-In** app at no additional cost to them:
 - **Increased choice:** Members will have access to even more participating facilities, including yoga, Pilates, and CrossFit.
 - **Enhanced experience:** Members will be able to report their gym visits through their smartphone via the Rally app with direct visibility to track their rewards in the digital solution.
 - **Faster rewards:** Members will be able to receive their incentive amount in near real-time after completing their 12 gym visits a month.
- 5 Meet 2 times a year with a broker and UnitedHealthcare representative.**
Meetings should be with the company owner or a senior executive. The first meeting should be early in the policy year to cover the details of implementing the SimplyEngaged components in the workplace. The second meeting should occur about 60 days prior to renewal.

eNewsletters.

Benefit Awareness News and *Healthy Mind Healthy Body*® monthly eNewsletters help members take full advantage of their health benefits and make more informed health care decisions for themselves and their families. Throughout the year, members get tips and strategies on topics like parenting and care giving, eating well, stress and emotional health, and more.

Latino health solutions.

Latinos have specific health care and cultural preferences. We understand these cultural preferences and have designed a broad range of services to assist employers' needs within the Latino community, including:

- A Spanish-language website, uhclatino.com, offers interactive, easy-to-use, Web-based health and educational resources.
- Schedules of benefits and enrollment materials in Spanish.
- Online provider directory of Spanish-speaking physicians.
- Customer service in Spanish, with bilingual customer care professionals.

Specialty Plans

Our **Dental, Vision, Life and Disability** plans feature simplified underwriting guidelines, a variety of benefits, and business rules designed for easy administration, which makes them an easy addition to any medical plan.

UnitedHealthcare offers a broad portfolio of specialty plans that help make it easier to offer a complete benefit program:

- Can be purchased standalone or bundled together for additional convenience.
- Designed to improve health and help reduce health care costs.
- Most specialty plans are available on an employer-sponsored or voluntary basis so employers can choose how much or how little to contribute.

Convenience

- One account management team.
- One eligibility and enrollment process.
- One consolidated bill to pay.
- One dedicated customer service line and member website.

Better Health

To help members make informed health care decisions, they receive actionable health and wellness education. When employers purchase medical and specialty plans together, we leverage member claims data to provide personalized recommendations. We call that approach Bridge2Health®.

- For members with specific chronic illnesses, our targeted outreach encourages them to receive care that can improve their health and help reduce costs.
- For members who file disability claims, case managers help manage their recovery so they can return to health and return to work. Bridge2Health is available to groups with medical coverage and one or more specialty plans.

Contact your UnitedHealthcare representative for more information.



Bridge2Health is included for employers who purchase a fully insured UnitedHealthcare health plan and one or more of the following UnitedHealthcare plans: Dental (groups 101+), Vision (groups 101+), Disability (groups 2+), Critical Illness Protection (groups 51+), Accident Protection (groups 51+), Hospital Indemnity Protection (groups 51+). Employers who purchase a UnitedHealthcare ASO health plan may be eligible for Bridge2Health, subject to review of medical care and behavioral management services. For additional details, contact your UnitedHealthcare representative.

Dental

Overview.

- Dental coverage adds value to a standalone medical plan, which helps retain employers.
- DHMO and DPPO and Indemnity dental plans are available as voluntary or contributory.
- Dual choice plans available, combining DHMO or Direct Compensation with either DHMO/PPO or DPPO/PPO or Dental Indemnity.
- Dental HMO and Direct Compensation are enhancements to medical coverage.
- Dental PPO and Indemnity offer the expanded dental coverage desired by many employers.

HMO Dental.

- Offered by Dental Benefit Providers of California, Inc. with one of the largest DHMO networks in California.
- Employers can offer their members dental coverage at a competitive price.
- No waiting periods; no deductibles; no claim forms.
- All plans include orthodontics.

Dental PPO and Dental Indemnity.

- Provided by UnitedHealthcare.
- Over 440,000 dentist access points in our national PPO network¹.
- Over 100,000 clients and over 11 million plan participants worldwide².

UnitedHealthcare Dental Metrics.

- High first call resolution rate: Nearly 92 percent first call resolution³.
- Fast claims service: 99 percent of claims paid within 10 days; 99.85 percent within 15³.
- 99.96 percent financial and clerical accuracy³.
- 76 percent of claims are automatically adjudicated².

¹ As of May 2018.

² As of August 2017.

³ Based on 2016 Internal Book of Business Report.

Vision

- Backed by UnitedHealthcare, with a rapidly growing presence in California.
- Highly competitive benefits with generous material allowances.
- Plans available to employers on a voluntary basis with one enrolled member.
- All plans available as Voluntary and Contributory.
- Over 85,000 providers nationwide, including private practices.¹
- Serves over 43,000 groups and administers vision benefits to more than 19 million members nationwide.¹

Frame Allowance:

Retail/out-of-network: \$130/\$45

Members receive a \$130 retail price frame allowance at both retail chain providers (e.g., Walmart) and private practice providers. If a member chooses an out-of-network provider, they will be reimbursed up to \$45 for frames.

Product	Options	Key Features
Dental 	<ul style="list-style-type: none"> • PPO and Indemnity plans for maximum flexibility • Network Only and DHMO plans in select markets for maximum savings • Dual offerings available • Voluntary plans offered 	<ul style="list-style-type: none"> • Large national PPO network with 342,979 locations • State-wide DHMO with 2,551 locations • Average PPO network discounts of 30% • Enhanced benefits during pregnancy • Oral cancer screenings included for adults • Online Treatment Cost Calculator • Consumer MaxMultiplier® feature allows rollover of unused annual limits² • Option to exclude preventive care costs from annual limits³ • Optional enhanced coverage for dental implants³
Vision 	<ul style="list-style-type: none"> • Comprehensive plan⁴ (covers eye exam, frames/lenses and contacts, plus discounts on overages) • Voluntary plans offered 	<ul style="list-style-type: none"> • Annual eye exams • Complete set of eyeglasses or contacts (refer to the benefit materials) • Discounts on laser vision correction, popular lens options and on extra pairs of eyewear • Nationwide provider network with more than 35,000 private practice and retail locations • Coverage for popular options like progressive lenses • Online contact lens ordering • Access to discounts on laser vision correction
Disability 	<ul style="list-style-type: none"> • Long-term Disability • Voluntary plans available 	<ul style="list-style-type: none"> • Staff members have an average of 15 years of experience working with disability claims • Services and support include vocational and physical rehabilitation, career planning and transitional work return
Life Insurance 	<ul style="list-style-type: none"> • Basic Life /Accidental Death and Dismemberment (AD&D) • Supplemental Life • Dependent Life • Supplemental/Voluntary Life 	<ul style="list-style-type: none"> • Flat coverage amounts or multiples of salary • Will and trust preparation services included • Travel assistance included • Beneficiary services included

UnitedHealthcare Life and Disability products are provided by UnitedHealthcare Insurance Company; Unimerica Insurance Company; and certain products in California by Unimerica Life Insurance Company; and in New York by Unimerica Life Insurance Company of New York. UnitedHealthcare Insurance Company is located in Hartford, CT; Unimerica Insurance Company and Unimerica Life Insurance Company in Milwaukee, WI; and Unimerica Life Insurance Company of New York in New York, NY.

¹ As of May 2018.

² Rollover plans available for groups with two or more when there are waiting periods and 10 or more without waiting periods. Ask your UnitedHealthcare representative for details.

³ These optional dental benefit enhancements require 10 or more members.

⁴ Vision benefits only require two eligible and one enrollee to qualify.

Packaged Savings[®]

Employers can combine our medical plans with specialty benefits—dental, life, disability and vision. When they bundle the 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.

Packaged savings means:

- Bundled UnitedHealthcare medical and specialty benefits for administrative credit.
- Savings based on medical enrollment and the number of eligible employer paid or contributory specialty coverages chosen.
- One account team from UnitedHealthcare to serve all of your and your clients' benefits needs.
- Streamlined administration.
- Innovative online tools.

When your group purchases medical and:	Your client receives the following potential savings calculated per employee per month:
Dental	\$3.00
Vision	\$2.00
Life ¹	\$1.00
Short-term disability ²	\$1.00
Life ¹ and short-term disability ²	\$2.00
Life ¹ and long-term disability ²	\$2.00
Dental and vision	\$5.00
Dental and life ¹	\$4.00
Vision and life ¹	\$3.00
Dental, vision and life ¹	\$6.00
Dental, vision, life ¹ and short-term disability ²	\$7.00

¹ Any combination of life products counts as one product for the purpose of the program.

² Any combination of disability products counts as one product for the purpose of the program.

Long-term disability must be bundled in conjunction with life or short-term disability coverage to qualify for the program and be eligible for credit.

Per-employee per-month savings is given as a monthly credit based on the number of enrolled UnitedHealthcare medical subscribers.

Enhanced Member Service

When employees call UnitedHealthcare with a benefits, program or claims question, employers and their employees should expect first-class service and quick and complete resolution to the issue. We strive to provide that and more. Experience customer service the way it is supposed to be with our Enhanced Member Service. Members can get help to:

- Understand a bill or resolve a claim.
- Find a network health care provider.
- Schedule an appointment.
- Better understand their health plan benefits.
- Resolve their issues with service professionals who will perform outbound or 3-way calls.
- Follow through when additional research or assistance is needed.
- Understand their responsibility and how to coordinate across medical and financial accounts.

We are dedicated to providing members with the best possible experience. Members can call the number on their health plan ID card for questions.

Benefit Services

UnitedHealthcare Benefit Services comes at no additional cost when employers purchase medical coverage through UnitedHealthcare, to help employers and their employees save both time and money.

- **Pretax Premium Plans.** These plans allow employers and their employees to pay their premiums on a pretax basis, which lowers their taxable income under Section 125. Employees can reduce their payroll-related taxes, and they can decrease their taxable income and increase their take-home pay.
- **COBRA Administration.** We offer streamlined administration and efficient record-keeping, so employers can focus on managing and growing their business, not on the administrative responsibilities required by COBRA.
- **Flexible Spending Accounts (FSAs).** Our FSA services include planning, implementation, communication, administration, compliance and maintenance.



Sales support:

Concord
2300 Clayton Rd., Suite 1000
Concord, CA 94520
1-866-288-4993

Orange County
5995 Plaza Drive
Cypress, CA 90630
1-866-288-4993



Not For Consumer Use

Virtual Visits: Virtual Visits are not an insurance product, health care provider or a 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. • **HSA:** 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 a Health Savings Account (HSA) with a bank of their choice or through Optum Bank®, Member of FDIC. The HSA refers only and specifically to the Health Savings Account that is provided in conjunction with a particular bank, such as Optum Bank, and not to the associated HDHP. • **Find Care & Costs:** All UnitedHealthcare members can access a cost estimator tool online or on the mobile app. None of the cost estimate tools are intended to be a guarantee of your costs or benefits. Your actual costs may vary. When accessing the tool, please refer to the website or mobile application terms of use under Find Care & Costs section. • **Online Health and Wellness:** Your personal information will be used only by UnitedHealthcare and its wellness program affiliates to provide individualized health information to you to improve your health practices. The Health Assessment is protected by one of the most advanced technologies for Internet information processing and complies with the federal and state security and privacy statutes mandated by HIPAA legislation. Participation in the Health Assessment is strictly confidential. Any health information collected as part of the assessment will be kept confidential in accordance with the Notice of Privacy Practices; information will be used only for health and wellness recommendations, or for payments, treatment, or health care operations; and will be shared with your health plan, but not with your employer. • **Maternity Support Program:** The information provided under the Maternity Support 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. Employers are responsible for ensuring that any wellness programs they offer to their employees comply with applicable state and/or federal law, including, but not limited to, GINA, ADA and HIPAA wellness regulations, which in many circumstances contain maximum incentive threshold limits for all wellness programs combined that are generally limited to 30 percent of the cost of self-only coverage of the lowest-cost plan, as well as obligations for employers to provide certain notices to their employees. Employers should discuss these issues with their own legal counsel. • **Disease Management Programs:** Disease Management programs and services may vary by 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. Self-Funded or Self-Insured Plans (ASO) covered persons may have an additional premium cost. Please check with your employer. • **Packaged Savings®:** Minimum participation requirements may apply. Packaged savings program is not available for all group sizes. Please consult your UnitedHealthcare representative for more details. • **SimplyEngaged®** is a voluntary program. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. You should consult with an appropriate health care professional to determine what may be right for you. Rewards may be taxable. You should consult with an appropriate tax professional to determine if you have any tax obligations from receiving rewards under this program. If you are unable to meet a standard related to a health factor to obtain a reward under this program, you might qualify for an opportunity to earn the same reward by different means. Contact us at 1-855-215-0230 and we will work with you (and, if necessary, your doctor) to find another way for you to earn the same reward. • **Rally®:** 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. • This Product Catalog is intended only to highlight your benefits and should not be relied upon to fully determine your coverage. If this Product Catalog conflicts in any way with the plan documents, i.e., the Combined Evidence of Coverage and Disclosure Form (EOC/DF) or Certificate of Coverage (COC) including the Schedule of Benefits and any amendment(s), the plan document shall prevail. Your plan document provides the terms and conditions of your coverage with UHC of California and UnitedHealthcare and all applicants have a right to review this document prior to enrollment. Upon request, a copy of the plan document will be provided to all potential enrollees prior to enrollment. Components subject to change. These programs provide information and support as part of your health plan. It is not a substitute for a doctor's or professional's care.

Health plan coverage provided by or through UnitedHealthcare Insurance Company, UHC of California and UnitedHealthcare Benefits Plan of California. Administrative services provided by United Healthcare Services, Inc., OptumRx or OptumHealth Care Solutions, Inc. Behavioral health products are provided by U.S. Behavioral Health Plan, California (USBHP).

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