



Benefits designed with care

Explore your plan option(s) for:

- Health



2023 Benefits Guide

Tolleson Union High School District

United
Healthcare



Welcome to what care can do



Insurance: It's a good thing to have. It can help protect you from high costs for care and services—whether those costs are planned or unexpected. Another thing it's good for? Keeping you on track through a network of connected care. Use this guide to help you choose a plan that, at the heart of it, works every day to take good care of you.

We're here to help

Get even more info about your options

Health plans

www.whyuhc.com/choice

www.whyuhc.com/choiceplushsa

1-866-873-3903, TTY 711

Choosing a plan — 4 good questions to ask

1 Is your provider in the network?

A network is a group of providers and facilities who've been contracted to deliver health care services, often at a discount. Getting care from within the network may help you save money. If there's a provider you see regularly and want to keep seeing, it's a good idea to first make sure they're in the plan's network.



To find out if your preferred providers are included:

- Go to whyuhc.com/choice > Search for a Provider

2 What are your health needs?

Thinking about the care you or your family may need in the plan year ahead can help you decide the level of coverage you may need. For example, you may want a plan that offers more coverage if you:

- Have major health care needs
- See doctors or specialists often
- Are anticipating a change, like a growing family or upcoming surgery

If you see the doctor occasionally for things like an annual checkup or minor illnesses, a health plan that offers less coverage may work well for you.

3 Are your medications covered?

If you take any medications, you can check a plan's Prescription Drug List (PDL) to see your costs and possible deductibles.

To check the list:

- Go to whyuhc.com/choice > Search for a Prescription
- Select the appropriate PDL to see which medications are covered

4 How do you like to manage your costs?

Some people manage costs by keeping their monthly premium payments low. Others prefer paying higher monthly premiums because it tends to lower other costs, like copays or deductibles. Another good idea is to compare health plan deductible, coinsurance and out-of-pocket limit amounts. Knowing the differences can help you keep your costs in check—and know what to expect, too.



justplainclear.com

For thousands of health care terms defined simply and clearly, this is your site.

Common health care terms — good info to know

Coinsurance

The percentage of costs you pay for a covered health care service after your deductible is reached.

Copayment

Also called a copay, this is a fixed amount of money you may pay for certain covered health services, like a doctor's appointment.

Deductible

The amount you pay before your plan starts sharing costs for covered services.

Out-of-pocket limit

The most you could pay for covered services in a plan year.

Premium

A routine payment that's typically taken out of your paycheck and helps keep your plan active, so you can stay covered.

How health plans work — an example



*Your deductible and coinsurance may vary by plan or service. This example is for illustrative purposes only. Please refer to your official plan documents for coverage details.

Quick tips, good info — it's all here

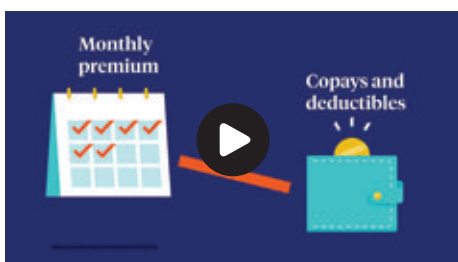
As you get ready to choose a plan for the year ahead, it's a good time to brush up on important info. Watch these short videos and you'll be well on your way to choosing the plan that best fits your needs.



Experience what care can do

Learn about our large network of providers and the programs and services included in the plans.

Watch video: Why UnitedHealthcare (1:13)



Get help choosing a plan

Use these 4 helpful tips as you explore your plan options and pick the one that's built to work better for you.

Watch video: Choosing a health plan (2:35)









See a plan in action

Take a closer look at how copays, deductibles and more work together throughout your plan year.

Watch video: How a health plan works (1:30)



Review your health plan option(s)

Health plan details	Choice PPO	Choice Plus HDHP
 <p>Network coverage only You may save money when you receive care for covered benefits from network providers.</p>	✓	
 <p>In and out-of-network benefits You can receive care and services from providers and facilities in and out of our network, but staying in network can help lower your costs.</p>		✓
 <p>Preventive care covered at 100% There's no additional cost to you for seeing a network provider for preventive care.</p>	✓	✓
 <p>Pharmacy benefits You'll be able to order up to a 3-month supply of medications you take regularly and have them delivered right to your home.</p>	✓	✓
 <p>Tier 1/designated network providers Using Tier 1 doctors, specialists, and facilities may offer you the greatest value for your health care benefits.</p>	✓	
 <p>Optum health savings account (HSA) included Your employer will open an Optum HSA for you, which has pretax savings advantages. You can use an HSA to help pay for qualified medical, dental and vision expenses.</p>		✓

Review your plan coverage details

Health plan coverage	Choice PPO			Choice Plus HDHP		
	Tier 1/designated network	Network		Network	Out-of-network	
Deductibles and out-of-pocket limits						
Deductible amounts						
Individual		\$750		\$3,000		\$10,000
Family		\$2,250		\$6,000		\$20,000
Out-of-pocket limits						
Individual		\$4,500		\$4,500		\$30,000
Family		\$9,000		\$9,000		\$60,000
Medical copays and coinsurance						
Doctors and specialists						
Preventive care visit		Covered in Full		Covered in Full		Not Covered
Primary care visit (illness or injury)	\$20	\$35		20%*		50%*
Specialist visit	\$40	\$55		20%*		50%*
Urgent care visit		\$50		20%*		50%*
Lab and X-ray		No Charge		20%*		50%*
Major diagnostic and imaging		20%*		20%*		50%*
Virtual Visit (online doctor)		Covered in Full		0%*		Not Covered
Emergency care						
Emergency room		\$500		20%*		20%*
Emergency transportation		20%*		20%*		20%*
Other care						
Mental health visit (outpatient)		\$35		20%*		50%*
Mental health visit (inpatient)		20%*		20%*		50%*
Surgery – outpatient		20%*		20%*		50%*
Hospital – inpatient stay		20%*		20%*		50%*
Physician fees for surgical and medical services		20%*		20%*		50%*
Pharmacy copays						
	Retail up to 31-day supply	Out-of-network	Home delivery up to 90-day supply	Retail up to 31-day supply	Out-of-network	Home delivery up to 90-day supply
Prescription type						
Tier level 1 (\$ – generic)	\$0	Not Covered	\$0	\$0**	Not Covered	\$0**
Tier level 2 (\$\$ – brand-name and generic)	\$30	Not Covered	\$75	\$30**	Not Covered	\$75**
Tier level 3 (\$\$\$ – brand-name and generic)	\$50	Not Covered	\$125	\$50**	Not Covered	\$125**

This information does not replace your official health plan documents. Please see your official health plan documents for all coverage details, including limitations and exclusions. Using Tier 1 doctors, specialists and facilities may offer you the greatest value for your health care benefits. These providers meet UnitedHealthcare criteria for quality and cost efficient care. * After the deductible.

** Medications subject to Plan Year Deductible however medications on the Expanded Preventive Drug Listed are exempt from the deductible.



For all things pharmacy, say hi to Optum Rx

Optum Rx® pharmacy services help make it easier for you to save on medications and keep track of them, too—whether you're online or on the go.

3 ways you may save on costs



Use home delivery

Order a 3-month supply through Optum Rx and you may pay less for medication, get standard shipping at no cost and save trips to the pharmacy.



Use network pharmacies

You can find out which pharmacies are in the network on myuhc.com® or the UnitedHealthcare® app—using them may cost you less out-of-pocket.



Use generic or lower tier drugs

Choosing medications from the lower tiers or generic drugs on the Prescription Drug List (PDL)—the list of medications that are commonly covered by your health plan option—may help you save money.

More ways to manage your meds

As a member, you'll be able to go to myuhc.com and use the UnitedHealthcare app to:

- Find and compare medication costs
- Locate a network pharmacy
- See if your medications have any requirements before filling them
- Search the PDL
- Manage your home delivery orders

Critical medications available for \$0 out-of-pocket

Designed to help make prescription drugs more affordable, the UnitedHealthcare Vital Medication Program eliminates out-of-pocket costs for certain preferred medications that are critical to maintaining health, including:

- Insulin—rapid, short and long-acting insulins to treat diabetes
- Epinephrine—to treat allergic reactions
- Glucagon—to treat hypoglycemia (low blood sugar)
- Naloxone—to treat opioid overuse
- Albuterol—to treat asthma



Save on qualified health and wellness with an HSA

One of the best ways to help save on certain health expenses is with a health savings account (HSA), which you can open when you enroll in certain high deductible health plans. Every dollar you contribute to, withdraw from and save in your HSA is tax-free—so it’s like getting a 25% discount* on qualified expenses. Plus, the money in your HSA stays there, even if you change jobs or retire.

*Tax savings may vary by individual income.
**For more information, visit irs.gov.

HSA annual contribution limits

The IRS limits how much you can put into your HSA each year. For 2023,** the maximum limits are:

\$3,850

for individual coverage

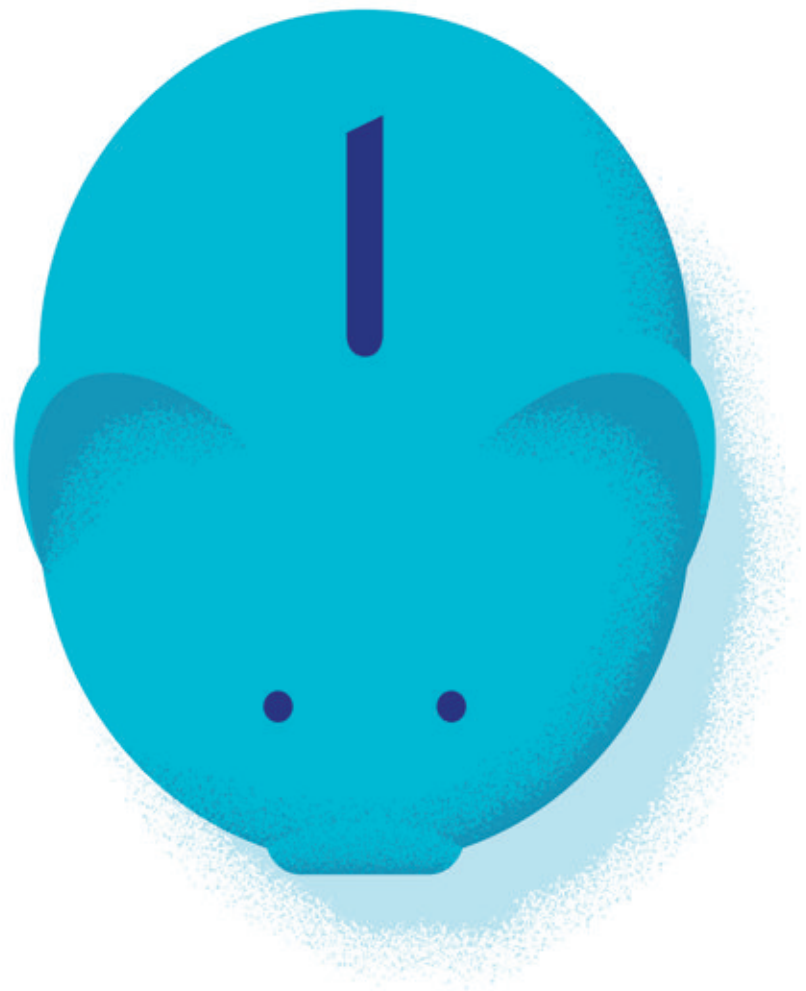
\$7,750

for family coverage

Are you 55 or older? You can put in an extra \$1,000.



Make the most of your health care dollars



It's so easy to connect to your plan

You'll get personalized digital tools that help you check in on your plan whenever you want—which makes it easier to stay on top of your benefit details.



myuhc.com

Your personalized member website

Built to help you manage your plan 24/7, **myuhc.com**[®] gives you access to all your plan info in one place, so you can:

- Find and estimate the cost of care
- See what's covered
- View claim details
- Check your plan balances
- Find network doctors and pharmacies
- Order prescriptions

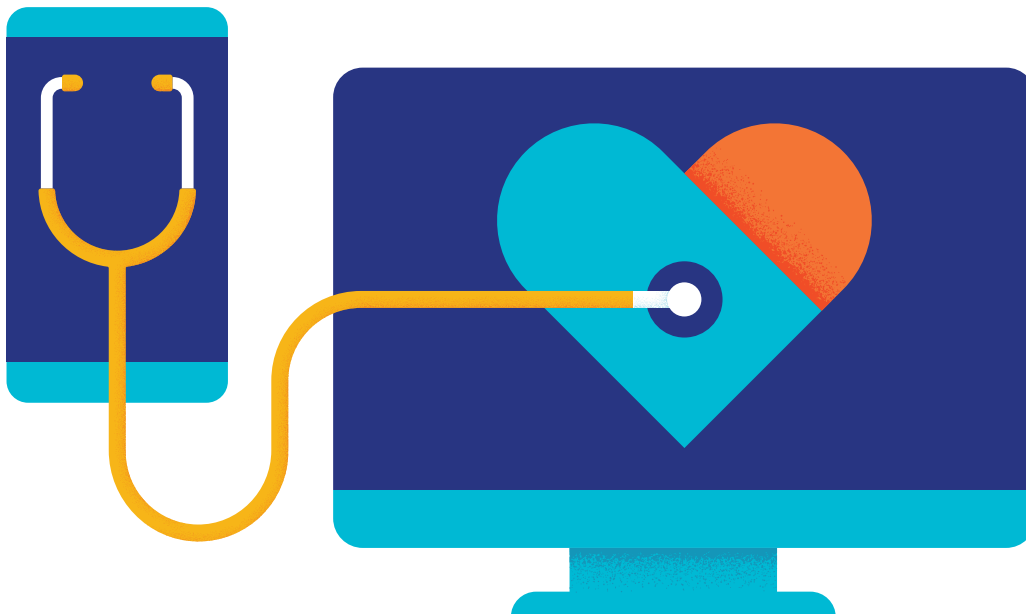


UnitedHealthcare app

Your app for on-the-go access

When your health plan's right at your fingertips, you can manage your benefits anytime, anywhere. Download the UnitedHealthcare[®] app to:

- Find nearby care options in your network
- See your claim details and view progress toward your deductible
- View and share your health plan ID card
- Video chat with a doctor 24/7



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Health and wellness benefits powered by care

Once your health plan becomes active, you can sign up for wellness programs and take advantage of health support services—all at no additional cost to you.



24/7 Virtual Visits

Get care, virtually anywhere

With 24/7 Virtual Visits, you can connect to a care provider by phone or video* through myuhc.com or the UnitedHealthcare app. Providers can treat a wide range of nonemergency health conditions — from flu and pinkeye to migraines and more — and may even prescribe medication as needed.**

*Data rates may apply.

** Certain prescriptions may not be available, and other restrictions may apply.



Employee Assistance Program

It helps to have someone to talk to

When life gets stressful, the Employee Assistance Program (EAP) is just a phone call away. EAP coordinators are available 24/7 for confidential conversations and referrals to expert care and services.



Preventive care

Make sure everything checks out

Preventive care—such as routine annual checkups and certain recommended screenings and immunizations—is covered by most of our plans for \$0 out-of-pocket when you see network providers. A preventive care visit may be a good time to help establish your relationship with your primary care provider and create a connection for future medical services.



Advocates

Support with a personal touch

Connect with an Advocate by phone or on the UnitedHealthcare app to get the information you need, when you need it. Specially trained Advocates are here to help you understand your benefits, make more informed health care decisions and access the care that fits your needs.

Here's the fine print

We do not treat members differently because of sex, age, race, color, disability or national origin.

If you think you weren't treated fairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator:

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

Online: UHC_Civil_Rights@uhc.com

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 member phone number listed on your ID card.

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, DC 20201

We provide free services to help you communicate with us such as letters in other languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free member phone number listed on your health plan ID card.

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.

تويوغللا تدعاسملا تامدخ ناف، (**Arabic**) تويبرعلا تدحتت تنك اذا: هي بننت
ىلع جردملا يناعملا فتاهلا مقرب لاصتالا يجرى. لكل ةحاتم ةيناعملا
كعب فصاخلا فيرعتهلا ةقاطب

ATANSYON: Si w pale Kreyòl ayisyen (**Haitian Creole**), ou kapab benefisyè 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**), udostępniłmy 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.

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.

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 हैं, आपको भाषा सहायता सेवाएं, नःशुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

DÍÍ BAA'ÁKONÍNÍZIN: Diné (**Navajo**) bizaad bee yáníliti'go, saad bee áka'anída'awo'ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shqódi ninaaltsoos nit'izi bee nééhozinígíí bine'déé' t'áá jíík'ehgo béésh bee hane'í biká'ígíí bee hodíilnih.

Administrative services provided by United HealthCare Services, Inc. or their affiliates.

Optum Rx® is an affiliate of United HealthCare Insurance Company.

If you are not currently enrolled with UnitedHealthcare pharmacy benefit coverage, you may access your health plan's member website for additional information during your open enrollment period or you may contact your employer or health plan for additional information. Medications are categorized by common therapeutic conditions in this reference guide for ease of reference only. These categories do not determine coverage for the medication for your condition. Your benefit plan determines how these medications may be covered for you. Where differences are noted between this reference guide and your benefit plan documents, the benefit plan documents will govern. This document applies to commercial group members of UnitedHealthcare plans.

Disclaimer for UnitedHealthcare, Oxford, UHC Level Funded, All Savers Alternate Funding and USP platform members only:

Members can access a cost estimate online or on the mobile app. None of the cost estimates are intended to be a guarantee of your costs or benefits. Your actual costs may vary. When accessing a cost estimate, please refer to the Website or Mobile application terms of use under Find Care & Costs section.

Disclaimer for NHP, UHCWest, NICE platform:

Members can access average cost data online or on the mobile app. None of the average costs are intended to be a guarantee of your costs or benefits. Your actual costs may vary. When accessing average cost data, please refer to the Website or Mobile application terms of use under Find Care & Costs section.

The UnitedHealthcare® app is available for download for iPhone® or Android®. Android is a registered trademark of Google LLC. iPhone is a registered trademark of Apple, Inc.

Apple, App Store and the Apple logo are trademarks of Apple Inc., registered in the U.S. and other countries. Google Play and the Google Play logo are registered trademarks of Google Inc.

Tier 1 providers may be subject to change, visit myuhc.com® for the most current information or call the number on your health plan ID card.

The UnitedHealthcare plan with Health Savings Account (HSA) is a qualifying 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.

Health savings accounts (HSAs) are individual accounts offered by Optum Bank, and are subject to eligibility and restrictions, including but not limited to restrictions on distributions for qualified medical expenses set forth in section 213(d) of the Internal Revenue Code. State taxes may apply. Fees may reduce earnings on account. This communication 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.

24/7 Virtual Visits is a service available with a Designated Virtual Network Provider via video, or audio-only where permitted under state law. 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, or for all members. Check your benefit plan to determine if these services are available.

Advocate4Me® should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through the program is for informational purposes only and provided as part of your health plan. Wellness nurses, coaches and other representatives cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. The program is not an insurance program and may be discontinued at any time. Additionally, if there is any difference between this information and your coverage documents (Summary Plan Description, Schedule of Benefits, and any attached Riders and/or Amendments) your coverage documents govern. The UnitedHealthcare® app is available for download for iPhone® or Android®. iPhone is a registered trademark of Apple, Inc. Android is a registered trademark of Google LLC.

The material provided through the Employee Assistance Program (EAP) is for informational purposes only. EAP staff cannot diagnose problems or suggest treatment. EAP is not a substitute for your doctor's care. Employees are encouraged to discuss with their doctor how the information provided may be right for them. Your health information is kept confidential in accordance with the law. EAP is not an insurance program and may be discontinued at any time. Due to the potential for a conflict of interest, legal consultation will not be provided on issues that may involve legal action against UnitedHealthcare or its affiliates, or any entity through which the caller is receiving these services directly or indirectly (e.g., employer or health plan). This program and its components may not be available in all states or for all group sizes and is subject to change. Coverage exclusions and limitations may apply.

Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. Other routine services may be covered under your plan, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. Other routine services may be covered under your plan, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

