



# Get to know your benefits.

---

City of Tampa  
2018 Benefits Guide



# Knowing your benefits helps you make more informed choices.

By understanding your benefits, you can select the coverage that best fits your needs. In this guide, you'll find information about your options and benefit extras to help make your choices easier.

UnitedHealthcare is committed to providing you a smooth and simple enrollment experience with all the support you need.

## Want more information?



Toll-free **800-918-8667**  
Habla Español? Podemos ayudar.

## Table of Contents

<b>BENEFITS</b>	<b>PAGE #</b>
Helpful Highlights	3
Helpful terms to know	4
Health Plan Details	5
Tier 1 Providers	6
Pharmacy Benefit	7
<b>HEALTH &amp; WELLNESS RESOURCES</b>	
Go Digital	8
<b>ENROLLMENT</b>	
Contact Information	10

# Helpful Highlights



## Member Resources

### Make using your plan easier.

Visit Member Resources to explore member resources and information even before your plan is active. Find tips and tools to help you choose a doctor, manage your costs, know your care options and more. Get started at [uhc.com/MemberResources](https://uhc.com/MemberResources).



## UnitedHealthcare Health4Me® Mobile Application

### Download Health4Me to your smartphone and you'll get quicker access to your health plan details. It also lets you:

- Search for a network doctor, clinic or hospital.
- Find options for quick care, such as a nearby clinic, Urgent Care or ER.
- Locate and share digital health plan ID cards.
- Compare costs and see provider reviews.
- View claims and account balances.
- Find pharmacies and fill prescriptions.



## Healthy Pregnancy Program

### Get support throughout your pregnancy.

The Healthy Pregnancy Program is a personalized maternity wellness program. Throughout your pregnancy, you can receive additional support, education and answers to questions about pregnancy. You can enroll by calling the number on your health plan ID card. Coming soon. You'll have access to the UnitedHealthcare Healthy Pregnancy app, a personalized, easy-to-use tool that integrates with our maternity management programs to help facilitate support and care during pregnancy.

**Manage your plan  
online and on the go.**

Your member website: [myuhc.com](https://myuhc.com)

# Helpful terms to know when choosing a plan.

## Coinsurance

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

## Copayment or Copay

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

## Covered Services

The portion of a medical 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.

## 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 percent of the allowed amount. The out-of-pocket limit includes all of your network payments.

## Prescriptions

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

## Preventive Care

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

**FIND INSURANCE TERMS CONFUSING?**

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

	Simple Wellness Plan	
	WHAT YOU PAY IN THE NETWORK	OUT OF THE NETWORK
<b>DEDUCTIBLE</b>		
EE	\$2,000	\$4,000
Family	\$4,000	\$8,000
<b>COVERED SERVICES</b>		
<b>Doctors and Specialists</b>		
PCP Visit (Illness or Injury)	\$30 Copay	30%*
Wellness Center	\$0 Copay	N/A
Specialist Visit Tier 1 / All Others	\$30 / \$50 Copay	30%*
<b>Preventive Care</b>		
Adult Annual Physical	\$0	30%*
Well-Child & Well-Woman Visits	\$0	30%*
<b>Emergency Care</b>		
Urgent Care Visit	\$50 Copay	30%*
Emergency Room	\$300*	30%*
<b>Hospital Care</b>		
Inpatient Services	\$400/day Copay (5 day Max)*	30%*
Outpatient Surgery- Hospital	\$250	30%*
Outpatient Services- Free Standing	\$100	30%*
<b>Additional Services</b>		
Allowance (Per Member)	\$500 PHA +\$500 Tobacco free	N/A
Allergy Injections	\$5	30%*
Vision Exam (every year)	\$0	30%*
Infertility Treatment	50%* up to \$5,000 max	50%* up to \$5,000
<b>OUT-OF-POCKET LIMIT</b>		
EE	\$4,000	\$8,000
Family	\$8,000	\$16,000
<b>PRESCRIPTIONS</b>		
<b>Retail (up to 31-day supply)</b>		
Tier 1	\$30	See below**
Tier 2	\$60	See below**
Tier 3	\$90	See below**
Tier 4	25%	See below**
<b>Home Delivery (90-day supply)</b>		
Tier 1	\$60	See below**
Tier 2	\$120	See below**
Tier 3	\$180	See below**
Tier 4	25%	See below**

\* After Annual Deductible has been met.

\*\* If you purchase a Prescription Drug from a Non-Network Pharmacy, you are responsible for any difference between what the Non-Network Pharmacy charges and the amount we would have paid for the same Prescription Drug dispensed by a Network Pharmacy. \$0 Copay at the Employee Wellness Center.

The City of Tampa's prescription drug plan (both retail and mail order) includes a generic program. Under the program, if the member requests a brand-name drug when a generic equivalent is available, the member will be responsible to pay the applicable generic copayment, plus the cost difference between the brand-name and generic drug.

This information does not replace your official health plan documents. Please see your official health plan documents for all coverage details, which includes limitations and exclusions. See back page for all legal statements.

# Tier 1 Providers

## Get a plan with access to a national network and help save with Tier 1 providers.



### You may pay less by using Tier 1 providers.

They have been recognized for providing the greatest value from your health care benefits.



### 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. If you don't use the network, you may have to pay for all of the costs.



### There's no need to choose 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 percent in our network.<sup>1</sup>

## Look for Tier 1 care first.

Where you go for care can make a difference. Tier 1 providers are doctors, hospitals and other health care facilities that are recognized for higher value in health care delivery. Your doctor's Tier 1 status may change at the end of the calendar year. Please check and verify your doctor's Tier 1 status before you schedule your next appointment.

Tier 1 (lowest cost option)	\$
Network	\$\$
Out-of-network (highest cost option)	\$\$\$

## Look for the Tier 1 symbol when doing a network search

Refine Results

LOCATION

ZIP CODE

WITHIN

PREFERRED PROVIDER

YOUR PRIMARY CARE PHYSICIAN (PCP)

**Smith, John, MD**  
 Internist | ASSIGN AS PCP  
 ★★★★★ 12 Reviews

1234 Any Street  
 Any City, State 12345  
 123-123-4567  
 2.6 Miles Away

View Additional Locations (21)  
 View Physician ID Number

Tier 1 Provider

Accepting New Patients

### The network can help lower your costs.

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

- **884,689** physicians and health care professionals.\*
- **5,634** hospitals.\*
- **67,000+** pharmacies.\*

\*As of 3/31/17.

# Pharmacy Benefit

## Your covered medications.

OptumRx® is your UnitedHealthcare plan's pharmacy care services manager. OptumRx is committed to helping provide you with safer, easier and lower cost ways to get the medication you need.

The UnitedHealthcare Prescription Drug List (PDL) is the list of medications that are covered by the plan. The PDL is organized by cost levels, known as tiers. Choosing medications in the lower tiers may save you money.



**Tier 1**  
Lower-cost  
Medications



**Tier 2 + 3**  
Midrange-cost  
Medications



**Tier 4**  
Higher-cost  
Medications

## Fill your prescriptions two ways.

1. Choose from thousands of network retail pharmacies.
2. Take advantage of the convenience of OptumRx home delivery.

## Save on your medications.

- Use home delivery. Up to a three-month supply of your medications will ship free to your home, often at a lower cost than retail. You also get 24/7 phone support, medication refill reminders and more. And it saves you trips to the pharmacy.
- Use network pharmacies. Pharmacies in our network have agreed to charge lower prices. Our network includes thousands of pharmacies across the country.
- Use lower tier medications, such as generics. Use the PDL to help you or ask your doctor. If you have a medication that is placed in a higher tier (Tier 3, for example), check to see if a Tier 1 option is available. The higher cost brand medications are usually placed in higher tiers.



## Manage your pharmacy benefits on the go.

With [myuhc.com](https://myuhc.com) and the Health4Me app<sup>1</sup>, you can:

- Enroll in home delivery.
- Find network pharmacies.
- Refill prescriptions and set up refill reminders.
- Estimate and compare medication costs.
- Search your plan's PDL.

<sup>1</sup>The HEALTH4ME APP can also help determine how a medication is covered and whether or not there are other options to help save you money.

# Get the most out of your benefits when you go digital.

- Find network providers and provider locations.
- Manage your claims, track expenses and pay your medical bills.
- View benefit cost details.
- Find and compare covered medications.
- Refill, renew and transfer home delivery prescriptions.



## Estimate health care costs.

You have easy-to-use tools so you can see what a treatment or procedure typically costs, estimate costs of prescriptions and see what your share of expenses may be.



## Get access to the nation's leading health care facilities.

Our Centers of Excellence network provides access to leading health care facilities, physicians and services to support safe, specialized and cost-effective care.



## Manage your medications and get refill reminders.

You can view your medications, find lower cost options and sign up for text reminders so you don't forget to take or refill your medication.



## Find quality doctors.

We make it easy to find doctors and other health care providers who are recognized for meeting national quality or cost-efficiency care in the UnitedHealthcare Premium® program. Look for the blue hearts. 



On the go? Download the free UnitedHealthcare Health4Me® mobile app and take your plan with you.



Download at the App Store.



Android available at Google Play.

# Questions? We can help.



**Toll-free 800-918-8667**  
**Habla Español? Podemos ayudar.**



**myuhc.com<sup>®</sup>**



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 libheng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

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

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

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

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

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

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

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

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

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

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

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

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

**ចំណាប់អារម្មណ៍:** បើសិនអ្នកនិយាយភាសាខ្មែរ (Khmer) សេវាជំនួយភាសាដោយឥតគិតថ្លៃ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃដែលមាននៅលើអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

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

**DÍÍ BAA'ÁKONÍNÍZIN:** Diné (Navajo) bizaad bee yánití'go, saad bee áka'anída'awo'ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shqóqdí ninaaltsoos nítł'izí bee nééhozinígíí bine'déé' t'áá jíík'ehgo béésh bee hane'í biká'ígíí bee hodiilnih.

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

Network Access Plan information is available for UnitedHealthcare plans in Colorado. UnitedHealthcare has prepared and maintains a network access that describes how the plan monitors the network of providers to ensure that you have access to network providers. The access also has information on the referral processes, compliant procedures, quality programs and emergency services coverage provisions. The network access plan is available at the plan's office: 6465 Greenwood Plaza Blvd, Suite 300, Centennial, CO, 80111 or call (800)842-4509.

For a complete description of the UnitedHealth Premium® designation program, including details on the methodology used, geographic availability, program limitations and medical specialties participating, please see myuhc.com.

The Healthy Pregnancy Program follows national practice standards from the Institute for Clinical Systems Improvement. The Healthy Pregnancy Program 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. Self-Funded or Self-Insured Plans (ASO) covered persons may have an additional premium cost. Please check with your employer.

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.

Healthy Mind Healthy Body eNewsletters contain general health information only and are not intended to provide medical advice. Consult an appropriate health care professional for your specific needs.

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.

