Benefits designed with care

Explore your plan option(s) for:
• Health

Open Enrollment
2023 Benefits Guide
City of Orlando
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

800-382-5480
Choosing a plan — 4 good questions to ask

**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 and/or whyuhc.com/choiceplus
  > Search for a Provider

**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.

**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 and/or whyuhc.com/choiceplus
  > Your Plan Options > Pharmacy Benefits > Select Advantage 3-Tier to view PDL

**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](https://www.justplainclear.com)

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

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### 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.
## Review your health plan option(s)

<table>
<thead>
<tr>
<th>Health plan details</th>
<th>Choice Plan HMO</th>
<th>Choice Plus Plan POS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Network coverage only</strong></td>
<td>✅</td>
<td></td>
</tr>
<tr>
<td>You may save money when you receive care for covered benefits from network providers.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>In and out-of-network benefits</strong></td>
<td></td>
<td>✅</td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Referrals required</strong></td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>You’ll need referrals from your PCP before seeing a specialist or getting certain health care services.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Preventive care covered at 100%</strong></td>
<td>✅</td>
<td>✅</td>
</tr>
<tr>
<td>There’s no additional cost to you for seeing a network provider for preventive care.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Pharmacy benefits</strong></td>
<td>✅</td>
<td>✅</td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Freestanding centers benefit</strong></td>
<td>✅</td>
<td>✅</td>
</tr>
<tr>
<td>You may pay less when you use certain freestanding centers — health care facilities such as MRI or surgery centers — that do not bill for services as part of a hospital.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Review your plan coverage details

<table>
<thead>
<tr>
<th>Health plan coverage</th>
<th>Choice Plan HMO</th>
<th>Choice Plus Plan POS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Deductibles and out-of-pocket limits</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Deductible amounts</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual Medical/Individual Pharmacy</td>
<td>$250/$50 Not Covered</td>
<td>$500/$50 $1,000/$50</td>
</tr>
<tr>
<td>Family Medical/Family Pharmacy</td>
<td>$500/$100 Not Covered</td>
<td>$1,000/$100 $2,000/$100</td>
</tr>
<tr>
<td><strong>Out-of-pocket limits</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual</td>
<td>$6,350 Not Covered</td>
<td>$3,000 $6,000</td>
</tr>
<tr>
<td>Family</td>
<td>$12,700 Not Covered</td>
<td>$6,000 $12,000</td>
</tr>
<tr>
<td><strong>Medical copays and coinsurance</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Doctors and specialists</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preventive care visit</td>
<td>$0 Not Covered</td>
<td>$0 40%*</td>
</tr>
<tr>
<td>Primary care visit (illness or injury)</td>
<td>$15* Not Covered</td>
<td>$15* 40%*</td>
</tr>
<tr>
<td>Virtual Visit (online doctor)</td>
<td>$15* Not Covered</td>
<td>$15* Not Covered</td>
</tr>
<tr>
<td>Specialist visit</td>
<td>$35* Not Covered</td>
<td>$35* 40%*</td>
</tr>
<tr>
<td>Urgent care visit</td>
<td>$35* Not Covered</td>
<td>$35* 40%*</td>
</tr>
<tr>
<td>Lab and X-ray</td>
<td>$0 (Freestanding Facility) * / $100 (Hospital Facility) * Not Covered</td>
<td>20%* 40%*</td>
</tr>
<tr>
<td>Major diagnostic and imaging</td>
<td>$50 (Freestanding Facility) * / $250 (Hospital Facility) * Not Covered</td>
<td>20%* 40%*</td>
</tr>
<tr>
<td><strong>Emergency care</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency room</td>
<td>$200* $200*</td>
<td>$200* $200*</td>
</tr>
<tr>
<td>Emergency transportation</td>
<td>Covered 100%* Covered 100%*</td>
<td>20%* 20%*</td>
</tr>
<tr>
<td><strong>Other care</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental health visit (outpatient)</td>
<td>$15* Not Covered</td>
<td>$15* 40%*</td>
</tr>
<tr>
<td>Mental health visit (inpatient)</td>
<td>$600* Not Covered</td>
<td>20%* 40%*</td>
</tr>
<tr>
<td>Surgery — outpatient</td>
<td>$50 (Freestanding Facility) * / $350 (Hospital Facility) * Not Covered</td>
<td>20%* 40%*</td>
</tr>
<tr>
<td>Hospital — inpatient stay</td>
<td>$600* Not Covered</td>
<td>20%* 40%*</td>
</tr>
<tr>
<td><strong>Pharmacy copays</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Prescription type</strong></td>
<td>Retail up to 31-day supply</td>
<td>Out-of-network</td>
</tr>
<tr>
<td>Tier level 1</td>
<td>$10** Not Covered</td>
<td>$20**</td>
</tr>
<tr>
<td>Tier level 2</td>
<td>$35** Not Covered</td>
<td>$70**</td>
</tr>
<tr>
<td>Tier level 3</td>
<td>$70** Not Covered</td>
<td>$140**</td>
</tr>
</tbody>
</table>

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.

* After the medical deductible has been met.

** After the pharmacy deductible has been met.

* Walgreens Pharmacy is excluded.

NOTE: Specialty Prescription Drugs are covered in network for both plans, subject to the pharmacy deductible. Tier 1 $50/Tier 2 $75/Tier 3 $100 for up to a 31-day supply.

Included in your Choice HMO and Choice Plus POS plans you have an eye exam every other year for $15 copay. You are required to use a Routine Vision Provider listed in the Vision Provider Directory available on www.myuhc.com.
With a PCP, there’s a doctor in your corner

Your primary care provider (PCP) is your health guide—someone who can help connect you to the care you need and help you avoid cost surprises. Although your health plan option may not require you and each covered family member to select a PCP,* it can be a good idea to have one.

More good reasons to have a PCP

- They know your health history and health goals
- They provide routine care, such as annual checkups, which may help identify potential health issues earlier
- They advise you when to see a specialist and provide referrals if needed**

Look for the blue hearts

To help you find quality and cost-efficient doctors, the UnitedHealth Premium® program uses national, evidence-based, standardized measures to evaluate physicians in various specialties.

Keep up on preventive care

Preventive care—such as routine wellness exams and certain recommended screenings and immunizations—is covered by most of our plans at no additional cost when you see network providers. A preventive care visit may be a good time to help establish your relationship with your PCP and create a connection for future medical services.

*Some health plans may allow you to choose a facility rather than a doctor as your PCP. Some states allow you to choose a specialist, like an OB/GYN, as your PCP.

**Some health plans may require a referral prior to seeing another network physician or specialist.
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
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

Digital Tools | 9
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.

Health and wellness benefits powered by care

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.

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.

Rally

Healthier starts here
Have fun and get healthier with Rally®, a digital experience that’s designed to help you achieve your health goals. Get personalized support, join missions and complete activities to earn Rally Coins that you can use for a chance to win rewards.

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.
More health and wellness benefits to explore

Behavioral Health

Support for emotional well-being
Whether you’re in a time of greater need or want to work on personal growth, you can get connected to self-help digital tools, in-person or virtual behavioral health providers and more. These resources and programs are designed to help with a variety of concerns, from depression and anxiety to mental health and substance disorder services.

Sanvello app

A self-help app to help manage stress
Sanvello™ is an app that offers clinically tested techniques, coping tools and community support to help dial down possible symptoms of stress, anxiety and depression—anytime. You’ll have premium access to the app, which includes daily mood tracking, meditation tools and guided journeys.

Maternity Support

Caring support for precious deliveries
Maternity support is designed for all parents, no matter what the pregnancy journey looks like. It includes 24/7 access to online courses covering trimester benchmarks, nutrition and exercise during pregnancy, breastfeeding and postpartum care.

Cancer Support Program

Guidance for coping with cancer
The Cancer Support Program helps connect you and your family with dedicated cancer nurses and personal advocates. They’ll help you understand your diagnosis, share information that may help you make more informed decisions about your care and find emotional support for you and your family members.
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](https://ocrportal.hhs.gov/ocr/portal/lobby.jsf)

**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.

Here’s the fine print
Administrative services provided by United HealthCare Services, Inc. or their affiliates.

OptumRx® is an affiliate of United HealthCare Insurance Company.

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

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.

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.

24/7 Virtual Visits is a service available with a provider via video, or audio-only where permitted under state law. It is not an insurance product or a health plan. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 24/7 Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times, or in all locations, 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.

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.

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.

The information provided under Maternity Support is for general informational purposes only and is not intended to be nor should be construed as medical and/or nutritional advice. UnitedHealthcare makes no representation or warrant with regard to the accuracy of the information presented. If you believe that you may have any emergency medical condition you should immediately call 9-1-1. Participants should consult an appropriate health care professional to determine what may be right for them. If you have questions about the information presented or questions about health care services, supplies, or treatments, you should consult your health care provider before making any health care decisions. 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% 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.

The Sanvello Mobile Application should not be used for urgent care needs. If you are experiencing a crisis or need emergency care, call 911 or go to the nearest emergency room. The information contained in the Sanvello Mobile Application is for educational purposes only; it is not intended to diagnose problems or provide treatment and should not be used as a substitute for your provider’s care. Please discuss with your doctor how the information provided may be right for you. Premium access is available for members at no additional cost as part of their benefit plan. Sanvello premium is not available for all groups in New York and is subject to change. Refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on your health plan ID card. Participation in the program is voluntary and subject to the terms of use contained in the Application.

Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act and applicable state laws and regulations. Certain preventive care items and services may vary.
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.
Take care, take note