



There's so much more

Plan on great coverage and exciting extras with your UnitedHealthcare® Group Medicare Advantage (PPO) plans



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SPRJ80020



Original Medicare basics



Plan benefits, programs and features



How to enroll



What to expect next





Original Medicare basics

When are you eligible for Medicare?



OR



AND



You're 65 years old

You qualify on the basis
of disability or other
special situation

You're a U.S. citizen or a legal
resident who has lived in the United
States for at least 5 consecutive years

If you (or your spouse) have contributed payroll taxes to Medicare throughout your working life, you are eligible for Medicare when you reach age 65 – regardless of your income or health status



Understanding your Medicare choices

Step 1

Enroll in Original Medicare

Original Medicare

Offered by the federal government



Part A

Helps pay for hospital stays and inpatient care



Part B

Helps pay for doctor visits and outpatient care

After you enroll in Original Medicare (Parts A and B), you may choose to enroll in additional Medicare coverage



Understanding your Medicare choices

Step 2

Decide if you need more coverage

Option 1: Add 1 or both of the following to Original Medicare

Medicare Supplement plan

Offered by private companies



Helps pay for some or all of the out-of-pocket costs that come with Original Medicare

Medicare Part D plan

Offered by private companies



Helps pay for prescription drugs

Option 2: Choose a Medicare Advantage (Part C) plan

Medicare Advantage plan

Offered by private companies



Part C

Combines Part A (hospital insurance) and Part B (medical insurance) in 1 plan



Part D

Usually includes prescription drug coverage



Provides additional benefits, services and programs not provided by Original Medicare



Understanding Original Medicare's rules

You must be entitled to Medicare Part A and/or enrolled in Medicare Part B and continue to pay your Medicare Part B premium.

You can only be in one Medicare Advantage plan at a time. Enrolling in another plan will automatically disenroll you from any other Medicare Advantage or prescription drug plan.

If you do not enroll in a Medicare Part D prescription drug plan or a Medicare Advantage plan that includes prescription drug coverage, or you do not have other creditable prescription drug coverage, you may have to pay Medicare's Late Enrollment Penalty.

You must inform us of any current prescription drug coverage or future enrollment that includes prescription drug coverage.

You are encouraged to read the plan's Evidence of Coverage (EOC), including appeals and grievance rights, which can be found by logging in at retiree.uhc.com/CalPERS.

The EOC also covers specific plan benefits, copays, exclusions, limitations and other terms.

Please review the full text of the Statement of Understanding in your 2024 enrollment plan guide.





Plan benefits, programs and features

**UnitedHealthcare® Group Medicare Advantage Prescription Drug
(PPO) plan**

UnitedHealthcare® Medicare Advantage Edge (PPO) plan

Plan highlights



All the benefits of Part A

- Hospital stays
- Skilled nursing
- Home health



All the benefits of Part B

- Doctor visits
- Outpatient care
- Screenings and shots
- Lab tests



Part D/prescription drug coverage

Included in this/
Medicare Advantage
plan



Additional benefits, programs and features

Bundled with this plan

Medicare Advantage (Part C) plans are provided through private insurers like UnitedHealthcare



Visit any doctor, specialist or hospital that accepts Medicare

Even though you are not required to see a network doctor, your doctor may already be part of our network.

To find out, search our online Provider Directory at retiree.uhc.com/CalPERS or call UnitedHealthcare Customer Service at 1-888-867-5581, TTY 711, 7 a.m.– 8 p.m. local time, 7 days per week.

If your doctor is in-network, they must accept this plan if you are an existing patient. If your doctor is out-of-network, they may choose not to treat you unless it is an emergency.



UnitedHealthcare Group Medicare Advantage (PPO) plans – Monthly Premium

Rates	Group MAPD PPO	MA Edge PPO
2023	\$299.68	\$357.70
2024	\$341.72	\$366.01



UnitedHealthcare Group Medicare Advantage (PPO) plans

	Group Medicare Advantage Prescription Drug (MAPD) PPO	Medicare Advantage Edge PPO
Annual deductible (medical)	\$0	\$0
Annual out-of-pocket maximum (medical)	\$1,500	\$500



UnitedHealthcare Group Medicare Advantage (PPO) plans

Benefits	Group Medicare Advantage Prescription Drug (MAPD) PPO		Medicare Advantage Edge PPO	
	In-network copay	Out-of-network copay	In-network copay	Out-of-network copay
Primary care provider (PCP) office visit	\$10	\$10	\$0	\$0
Specialist office visit	\$10	\$10	\$0	\$0
Urgent care	\$25	\$25	\$0	\$0
Emergency room	\$50	\$50	\$50	\$50
Inpatient hospitalization	\$0	\$0	\$0	\$0
Outpatient surgery	\$0	\$0	\$0	\$0



UnitedHealthcare Group Medicare Advantage (PPO) plans

Preventive services

Benefits	Group Medicare Advantage Prescription Drug (MAPD) PPO		Medicare Advantage Edge PPO	
	In-network copay	Out-of-network copay	In-network copay	Out-of-network copay
Annual physical	\$0	\$0	\$0	\$0
Annual wellness visit	\$0	\$0	\$0	\$0
Immunizations	\$0	\$0	\$0	\$0
Breast cancer screenings	\$0	\$0	\$0	\$0
Colon cancer screenings	\$0	\$0	\$0	\$0



UnitedHealthcare Group Medicare Advantage (PPO) plans

Benefits	Group Medicare Advantage Prescription Drug (MAPD) PPO		Medicare Advantage Edge PPO	
	In-network copay	Out-of-network copay	In-network copay	Out-of-network copay
Routine podiatry	\$10 6 visits per year	\$10 6 visits per year	\$0 6 visits per year	\$0 6 visits per year
Chiropractic care and acupuncture	\$15 Limited to 20 combined visits per year	\$15 Limited to 20 combined visits per year	\$15 Limited to 20 combined visits per year	\$15 Limited to 20 combined visits per year
Hearing aids*	The plan pays up to a \$1,000 allowance for hearing aid(s) every 3 years		The plan pays up to a \$2,000 allowance for hearing aid(s) every 2 years	

*Other hearing exam providers are available in the UnitedHealthcare network. The plan only covers hearing aids from a UnitedHealthcare Hearing network provider.



UnitedHealthcare Group Medicare Advantage (PPO) plans

	Group Medicare Advantage Prescription Drug (MAPD) PPO		Medicare Advantage Edge PPO	
Benefits	In-network	Out-of-network	In-network	Out-of-network
Routine vision services & eyewear*	<p>Eye exam \$0 every 12 months</p> <p><u>Public Agency retiree buy-up option -</u> \$70 allowance for eyeglasses every 12 months, or \$105 for contact lenses instead of eyeglasses every 12 months</p>	<p>Eye exam \$0 every 12 months</p> <p><u>Public Agency retiree buy-up option -</u> \$70 allowance for eyeglasses every 12 months, or \$105 for contact lenses instead of eyeglasses every 12 months</p>	<p>Eye exam \$0 every 12 months</p> <p>Plan pays \$130 for eyeglasses every 12 months. Or, \$100 for contact lenses instead of eyeglasses every 12 months</p>	<p>Eye exam \$0 every 12 months</p> <p>Plan pays \$130 for eyeglasses every 12 months. Or, \$100 for contact lenses instead of eyeglasses every 12 months</p>



Dental & Vision Option – Public Agency Retirees on Group MAPD PPO Plan

Dental coverage for your oral health needs

With UnitedHealthcare® Dental, you'll have access to a large national network with a combined 358,000 providers and locations.

- 100% coverage for exams, X-rays, cleanings and periodontal maintenance
- 80% coverage for minor services, including fillings, pulp protection and nitrous oxide*
- 20% coverage for major services, including crowns, root canals, dentures and more*
- Option of seeing out-of-network providers, if desired
- Dental contact information can be found on the back of your UnitedHealthcare member ID card

Vision coverage eye exams and eyewear benefits

- A routine eye exam once every 12 months with a \$10 copay*
- \$70 allowance toward eyeglasses (frames and lenses), every 12 months*
- \$105 allowance toward contact lenses instead of eyeglasses, every 12 months*

UnitedHealthcare will bill you \$27.04 per month for this optional coverage

*Please refer to your Summary of Benefits for details on your benefit coverage



Diabetes testing and monitoring supplies

When you use one of the approved meters and corresponding strips, your cost-share for diabetes testing and monitoring supplies is a \$0 copay.

These supplies also include any brand of:

- Lancets
- Lancing device
- Glucose control solution (to test the accuracy of your meter)
- Replacement batteries for your meter

To switch to one of the preferred brands, you may be required to get a new prescription from your doctor. A temporary supply of your current brand can be requested.



Plus, your plan provides coverage for many of the OneTouch and ACCU-CHEK blood glucose testing strips and meters*



*Other suppliers/vendors/providers are available in our network.



Part D prescription drug coverage



UnitedHealthcare has thousands of national, regional, local chain and independent neighborhood pharmacies in our network



Thousands of covered brand-name and generic prescription drugs



Bonus drug coverage in addition to Medicare Part D drug coverage

Check your Group Medicare Advantage Prescription Drug PPO plan's drug list at retiree.uhc.com/CalPERS or call Customer Service to see if your prescription drugs are covered

Please note for Medicare Advantage Edge PPO plan, Part D prescription coverage is provided directly by Optum Rx (<http://www.optumrx.com/calpers>)



Full coverage in the gap

Drug payment stages:

Initial coverage

In this drug payment stage, you pay a copay or coinsurance (percentage of a drug's total cost) and the plan pays the rest.

You stay in this stage until your total drug costs reach \$5,030.

Coverage gap

Your plan provides additional coverage through the gap, and you continue to pay the same copay or coinsurance as you did in the initial coverage stage.

You stay in this stage until your out-of-pocket costs reach \$8,000.

Catastrophic coverage

After your out-of-pocket costs reach \$8,000, you pay \$0.

You stay in this stage for the rest of the plan year.



Part D (prescription drug) plan/benefits

Tier	Prescription drug type	Your costs	
		Retail (30-day supply)	Preferred Mail Order (90-day supply)
1	Preferred Generic All covered generic drugs	\$5 copay	\$10 copay
2	Preferred Brand Many common brand-name drugs, called preferred brands	\$20 copay	\$40 copay
3	Non-preferred Drug Non-preferred brand-name drugs. In addition, Part D-eligible compound medications are covered in Tier 3.	\$50 copay	\$100 copay
4	Specialty Tier Unique and/or very-high-cost brand-name drugs	\$20 copay	\$40 copay



Medicare Advantage Edge - Your Part D (prescription drug)

- Prescription drug benefits for the UnitedHealthcare MA Edge PPO plan will be offered directly by Optum Rx®
 - Preferred Pharmacy is Walgreens; other Pharmacies include CVS, Rite Aid and more.
 - For complete pharmacy coverage details, visit [OptumRx.com/CalPERS](https://www.OptumRx.com/CalPERS) or call **1-855-505-8106**, TTY **711**, 24 hours a day, 7 days a week.

Tier	Prescription drug type	Your costs				
		Preferred90 Saver Network Pharmacy (up to a 30-day supply)	NonPreferred Network Pharmacy (up to a 30-day supply)	Preferred90 Saver Network Pharmacy (up to a 90-day supply)	NonPreferred Network Pharmacy (up to a 90-day supply)	Home Delivery Pharmacy (up to a 90-day supply)
Tier 1	Mostly Generic	\$5 copay	\$5 copay	\$10 copay	\$15 copay	\$10 copay
Tier 2	Preferred Brand	\$20 copay	\$20 copay	\$40 copay	\$60 copay	\$40 copay
Tier 3	Non-preferred Brand	\$50 copay	\$50 copay	\$100 copay	\$150 copay	\$100 copay



Ordering with Optum[®] Home Delivery through Optum Rx[®] pharmacy¹

- 1 Order submitted**
After your account is set up, your Optum Home Delivery order enters the Optum Rx pharmacy system.
- 2 Pharmacist review**
A pharmacist reviews your information for drug interactions, allergies and dosage.
- 3 Safety review**
For your safety, another pharmacist reviews your medication for accuracy after it is dispensed.
- 4 Packaging**
Optum Rx pharmacy seals your medication in a tamper-evident package.
- 5 Shipping**
Optum Home Delivery mails your medication to you and notifies you when it has been shipped.



Common vaccines covered under:



Part B

- ✓ Influenza (flu)
- ✓ Pneumococcal
- ✓ Hepatitis B for those at medium or high risk
- ✓ COVID-19*



Part D

- ✓ Shingles
- ✓ Tetanus, diphtheria, pertussis (Tdap)
- ✓ Hepatitis A
- ✓ Hepatitis B for those at low risk



*You will have \$0 cost-share (copayments, deductibles or coinsurance) on FDA-authorized COVID-19 vaccines at both network and out-of-network providers.



Schedule a \$0 Annual Wellness Visit and physical*



Save time by combining your wellness visit and physical into a single office visit



Schedule your appointment early in the year to get any other preventive care you may need



Make sure you follow through with your provider's recommendations for screenings, exams and other care

**You do not have to wait 12 months.
Schedule your Annual Wellness Visit
anytime during the calendar year.**



*A copay or coinsurance may apply if you receive services that are not part of the Annual Wellness Visit and physical.



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UnitedHealthcare[®] HouseCalls^{*}

Have a yearly in-home check-up to help stay on top of your health between regular doctors' visits.

- ✓ No extra costs
- ✓ A licensed health care practitioner will perform a head-to-toe exam, health screenings, review your health history and current medications, help identify health risks and provide health education
- ✓ The visit lasts up to an hour. You can talk about health concerns and ask questions that you haven't had time to ask before.
- ✓ You'll get a personalized checklist of topics to discuss at your next doctor's visit
- ✓ HouseCalls will send a summary of your visit to you and your regular doctor

*HouseCalls may not be available in all areas.



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Prefer a video visit instead?

HouseCalls offers a video visit using a computer, tablet or smartphone to connect plan members with a health care practitioner. They will review your health history and current medications, discuss important health screenings, identify health risks and provide health education.

Take an active role in your health with Renew by UnitedHealthcare®*

Explore our health and wellness experience that helps empower you to take charge of your well-being every day.

It provides a wide variety of useful resources and activities, including brain games, healthy recipes, learning courses, fitness activities and more. Renew can help you take a more active role in your health and wellness through:

Renew Active®

Brain games

Recipe library

Workout videos

Learning courses

Health articles and videos



*Renew by UnitedHealthcare is not available in all plans. Resources may vary.



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Renew Active^{®2} by UnitedHealthcare

Renew Active is the gold standard in Medicare fitness programs for the body and mind — and is available with your UnitedHealthcare[®] Group Medicare Advantage plan, at no additional cost.



Stay active with a free gym membership at a location you select from the largest national network of gyms and fitness locations. If you prefer to exercise at home, you can access thousands of on-demand workout videos and streaming fitness classes.



Stay active socially with local health and wellness classes, clubs and events. Also, connect socially by joining the online Fitbit[®] Community for Renew Active. No Fitbit device is needed.



Stay focused with an online program offering content about brain health with exclusive content for Renew Active members.



Let's Move

by UnitedHealthcare®

Join the healthy, happy movement

At no additional cost to you, Let's Move by UnitedHealthcare is here to help keep your mind, body and social life active. With simple resources, tools, fun events and personalized support, we'll help you explore ways to eat well, get fit, beat the blues and stay connected.



Let's eat well

Treat yourself to tasty recipes, fun cooking events and support.



Let's get fit

Get free access to at-home workouts, participating gyms and local fitness events through your fitness benefit.



Let's beat the blues

Take time to care for your mental health with support services and online tools and resources.



Let's make friends

Find ways to connect through local and online events, classes, volunteering and more.



Get care virtually anywhere

With Virtual Visits, you're able to live video chat* with a doctor [or behavioral health specialist] from your computer, tablet or smartphone anytime, day or night.³ You can ask questions, get a diagnosis or even get medication prescribed and have it sent to your pharmacy. All you need is a strong internet connection.



Virtual Doctor Visits may be good for minor health concerns including:

Allergies, bronchitis, cold/cough

Fever, seasonal flu, sore throat

Migraines/headaches, sinus problems, stomachaches



Virtual Behavioral Health Visits may be best for:

Initial evaluation

Depression

Behavioral health medication management

Trauma and loss

Stress or anxiety

Addiction

You can find a list of participating Virtual Visit providers by logging in to your member website

*The device you use must be webcam-enabled. Data rates may apply.

This service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room.

Providers cannot prescribe medications in all states.



Mental and behavioral health

Nothing is more important than your health, which includes your mental health. You have access to many resources to help improve your emotional and mental health, including:

- ✓ Ongoing mental health support with Optum® Behavioral Health
- ✓ Health and wellness resources with Renew by UnitedHealthcare

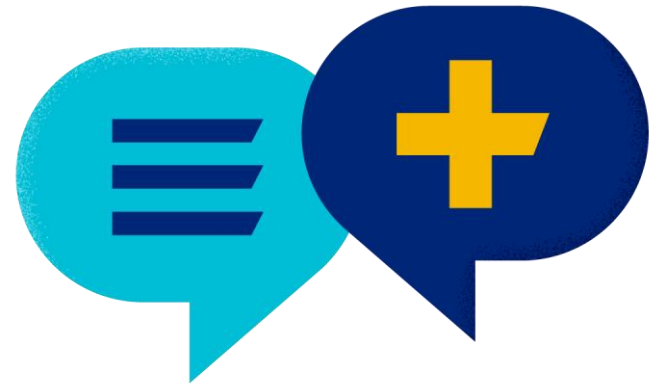


24/7 Nurse Support⁴

24/7 Nurse Support was designed specifically to help make your health decisions simple and convenient by providing answers to your health questions anytime, anywhere at no additional cost.

When you call, a registered nurse can help you:

- ✓ Choose where to go for care — whether that's self-care, a doctor visit or urgent care
- ✓ Find a doctor or hospital that meets your needs and preferences
- ✓ Understand your diagnosis and explore treatment options



Personal Emergency Response System (PERS)

With the Personal Emergency Response System, provided by Lifeline, help is a button push away.*

- ✓ In-home medical alert monitoring system
- ✓ Quick access in any situation, whether an emergency or you just need a helping hand
- ✓ Provides safety, independence and peace of mind



*Benefits, features and/or devices vary by plan/area. Limitations and exclusions apply. You must have a working landline and/or cellular phone coverage to use PERS.



UnitedHealthcare Healthy at Home

You are eligible for the following benefits up to 30 days following all inpatient and skilled nursing facility discharges*:



28 home-delivered meals when referred by a UnitedHealthcare Engagement Specialist



12 one-way rides to medically related appointments and to the pharmacy when referred by a UnitedHealthcare Engagement Specialist⁵



6 hours of non-medical personal care provided through a CareLinx professional caregiver to perform tasks such as preparing meals, bathing, medication reminders and more. A referral is not required.⁶

*A new referral is required after every discharge to access your meal and transportation benefit.



Trusted care at home when you need it

You are eligible for non-medical personal care through our national provider CareLinx*⁶, which may include:



Grocery shopping



Meal preparation



Transportation



Personal care



Medication reminders



And more

*Please refer to your Summary of Benefits for details on your benefit coverage.



Rally Coach™ programs

Rally Coach can help you start living a healthier and happier life. They are available to you at no additional cost and include the following:



Real Appeal®7, an online weight management program proven to help you achieve lifelong results. Includes a diabetes prevention program for those who qualify.



Rally Wellness Coaching, which helps you get healthy your way by providing 24/7 access to digital health and wellness courses as well as personalized coaching support via online chat or phone calls



A tobacco cessation program, which gives you the support you need to quit all types of tobacco use



UnitedHealthcare Hearing

With UnitedHealthcare Hearing, you can receive a hearing exam and access to one of the widest selections of prescription and non-prescription hearing aids at significant savings. Plus, you'll receive personalized care and follow-up support from experienced hearing providers, helping you to hear better and live life to the fullest.

- ✓ Receive friendly, expert advice through our national network of 7,000+ hearing providers* — or try virtual appointments**
- ✓ Get personalized support to help you adjust to your new hearing aids
- ✓ Choose from the latest technology from popular brands, including Phonak, Starkey®, Oticon, Signia, ReSound, Widex® and Unitron™



Up to **50%**

To get started and save up to 50% off standard industry prices^ with exclusive pricing, go online or call UnitedHealthcare Hearing.

*Please refer to your Summary of Benefits for details on your benefit coverage.

**Select products and providers.

^Based on suggested manufacturer pricing.

Benefits, features and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply. Other hearing exam providers are available in the UnitedHealthcare network. The plan only covers hearing aids from a UnitedHealthcare Hearing network provider. Provider network size may vary by local market.





How to enroll

How to enroll – my|CalPERS

Enrollment Process

- You may enroll in a health plan, change health plans, or add/delete eligible dependents during Open Enrollment, online through myCalPERS at my.calpers.ca.gov. Plan changes you make during Open Enrollment take effect January 1 of the following year.
- Apply for Medicare Parts A and B three months before you turn 65 by contacting the SSA toll free at (800) 772-1213 or TTY (800) 325-0778. Be prepared to provide your and your spouse's Social Security numbers.
- If you are retired and qualify for Medicare Part A at no cost, you must enroll in Part B when first eligible.
- Your CalPERS Medicare health plan will become effective on your Medicare effective date or the first day of the month following CalPERS receipt of your Medicare information, whichever is later.
- Enrollment by you or your family members in a CalPERS Medicare health plan will not affect other family members who are enrolled in a CalPERS Basic health plan. Unless they are Medicare-eligible, they will continue their enrollment in a CalPERS Basic health plan as part of a Combination Plan.
 - A Combination Plan means that at least one family member is enrolled in a Medicare health plan and at least one family member is enrolled in a Basic health plan through the same health carrier. CalPERS requires all family members to have the same health carrier.





What to expect next

What to expect after enrollment

- 1 Get your UnitedHealthcare member ID card and read your Quick Start Guide**
The Quick Start Guide gives you more information on how your benefits work and how to get the most out of your plan. Your member ID card will be attached to the front cover of your guide.
- 2 Register online to access your plan information**
After you receive your member ID card, you can register online at retiree.uhc.com/CalPERS
- 3 Start using your card**
You can start using your member ID card as soon as your plan is effective
- 4 Help us understand your unique health needs**
Soon after your effective date, we will contact you to complete a short health survey. Throughout the year, we'll also provide reminders about preventive care as well as offer programs and resources to help you live a healthier life.



Visit the Virtual Education Center to explore and learn more

- ✓ Learn more about the custom programs offered to plan members
- ✓ Watch videos about the plan benefits
- ✓ Print additional plan program information
- ✓ Access via any tablet, computer or smartphone



uhcvirtualretiree.com/CalPERS



How to use your new UnitedHealthcare member ID card

Sometime in the month of December 2023, you and any Medicare-eligible dependent covered by the plan will each be receiving a UnitedHealthcare Quick Start Guide and member ID card, which is your confirmation of enrollment.*

- ✓ Beginning January 1, 2024, simply use your UnitedHealthcare member ID card each time you go to the doctor or hospital or get a prescription filled at the pharmacy
- ✓ The back of your member ID card lists important phone numbers you may need throughout the year
- ✓ Store this card in a safe place
- ✓ Don't discard your red, white and blue Medicare card

*Retirees in the same household may receive these on different days, which is a normal part of the mail stream.



Register for your secure personal online account at retiree.uhc.com/CalPERS

Follow these easy steps to register for your secure and personal online account:

- ✓ Visit the website and click on the **Sign In or register** button and then click **Register Now**
- ✓ Enter your information (first and last name, date of birth, ZIP code, UnitedHealthcare member ID number) and click **Continue**
- ✓ Create your username and password, enter your email address, and click **Create my ID**
- ✓ For security purposes, you will need to verify your account by email, call or text



After you sign up, you can:

- **Look up** your latest claim information
- **Review** benefit information and plan materials
- **Print** a temporary member ID card and request a new one
- **Look up** drugs and how much they cost under your plan
- **Search** for network doctors
- **Sign up** to get your Explanation of Benefits online





Have Questions?

- ✓ Learn more at: retiree.uhc.com/CalPERS
- ✓ Medicare Retirees Call: **1-888-867-5581**, TTY **711**
7 a.m.–8 p.m. local time, 7 days a week.
 - ✓ For Medicare Advantage Edge Plan prescription benefits, call Optum Rx at **1-855-505-8106**, TTY **711**, 24 hours a day, 7 days a week; or at optumrx.com/calpers
- ✓ Basic Members Call: **1-877-359-3714**, TTY **711**
7 a.m.–8 p.m. local time, Monday through Friday.



Thank you

We look forward to welcoming you to our Medicare family

Benefits, features and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply.

Formularies and/or provider/pharmacy networks

The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

You must continue to pay your Medicare Part B premium.

Out-of-network/non-contracted providers are under no obligation to treat CalPERS members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information.

This document is available in alternative formats.

If you receive full or partial subsidy for your premium from a plan sponsor (former employer, union group or trust), the amount you owe may be different than what is listed in this document. For information about the actual premium you will pay, please contact your plan sponsor's benefit administrator directly.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor. Enrollment in the plan depends on the plan's contract renewal with Medicare.

¹Optum Home Delivery is a service of Optum Rx pharmacy. Optum Rx is an affiliate of UnitedHealthcare Insurance Company. You are not required to use Optum Home Delivery for a supply of your maintenance medication. If you have not used Optum Home Delivery, you must approve the first prescription order sent directly from your doctor to the pharmacy before it can be filled. Prescriptions from the pharmacy should arrive within 5 business days after we receive the complete order. Contact Optum Rx anytime at 1-888-279-1828, TTY 711.

Other pharmacies are available in our network.

Members may use any pharmacy in the network but may not receive preferred retail pharmacy pricing. Copays apply after deductible.

Renew by UnitedHealthcare is not available in all plans. Resources may vary.

²The Renew Active® Program varies by plan/area and may not be available on all plans. Participation in the Renew Active program is voluntary. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine. Renew Active includes standard fitness membership and other offerings. Fitness membership equipment, classes, personalized fitness plans, caregiver access and events may vary by location. Certain services, discounts, classes, events, and online fitness offerings are provided by affiliates of UnitedHealthcare Insurance Company or other third parties not affiliated with UnitedHealthcare. Participation in these third-party services are subject to your acceptance of their respective terms and policies. UnitedHealthcare is not responsible for the services or information provided by third parties. The information provided through these services is for informational purposes only and is not a substitute for the advice of a doctor. Gym network may vary in local market and plan. Gym network size is based on comparison of competitor's website data as of May 2023.

³Benefits and availability may vary by plan and location.

⁴24/7 Nurse Support 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 this service is for informational purposes only. The nurses cannot diagnose problems or recommend treatment and are not a substitute for your provider's care. Your health information is kept confidential in accordance with the law. Access to this service is subject to terms of use.

⁵ModivCare may subcontract to other vendors or individuals. Subcontracting is at the discretion of ModivCare. ModivCare does not guarantee urgent requests will be met when scheduled less than 2 days in advance for standard services. ModivCare supports any language the member requires, through a third-party translator service.



⁶The CareLinx services are made available to you from a third party through your UnitedHealthcare® Group Medicare Advantage insurance plan. CareLinx is not a UnitedHealthcare company. UnitedHealthcare and your Plan are not responsible for any services you receive from this third party. This is not an insurance program and may be discontinued at any time. Benefits and features may vary by plan/area. Limitations and exclusions apply. UnitedHealthcare does not make any representations regarding the content or accuracy of the materials on such sites. CareLinx will share only non-identifiable, aggregate information with UnitedHealthcare that is collected through the use of the CareLinx platform. This information may be used by UnitedHealthcare to potentially help develop future programs and services for its insured members. CareLinx is the network administrator of this in-home care service offer. CareLinx does not employ or recommend any care provider or individual seeking services nor is it responsible for the conduct of any care provider or care seeker. The CareLinx website is a venue that provides tools to help care seekers and care providers connect online. Each individual is solely responsible for selecting a care provider or care seeker for themselves or their families and for complying with all laws in connection with any employment relationship they establish. All decisions about medications and care are between you and your health care provider.

⁷Real Appeal® Weight Loss is available to those with a BMI of 19 and higher. Real Appeal Diabetes Prevention is available to you if you have a BMI ≥ 25 (BMI ≥ 23 for Asian Americans), have Prediabetes, and no previous diagnosis of Type 1 or Type 2 Diabetes. If you are pregnant, please speak with your primary care provider before joining the program. Real Appeal is offered at no additional cost to you as part of your UnitedHealthcare Medicare Advantage plan coverage, subject to eligibility requirements.

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OTC benefits have expiration timeframes. Call the plan or refer to your Evidence of Coverage (EOC) for more information.

