



Support at every step

Fairfax County Government

Get more of what matters with a UnitedHealthcare® Group Medicare Advantage (PPO) plan



Care

Whether it's an appointment with a provider online or taking care of a wellness visit from the comfort of your home, we can help make it easier to connect you with care so you can stay on top of your health — when, where and how you need it.



Support

At UnitedHealthcare, we provide much more than just customer service. It's 1-on-1 support to help answer your questions and take the extra steps to understand your needs. And we help you get the most from your plan so you can be at your best health.



Wellness

Our health and wellness experience helps you take charge of your well-being every day with a wide variety of resources and activities, including healthy recipes, fitness activities, education resources and more. All at no additional cost.



Extras

You and your health needs deserve personal attention and service. Our extra benefits, programs and services support your health so you can live a healthier life — it's all about you.



We're here to help explain:

- ✓ Original Medicare basics
- ✓ Plan benefits, programs and features
- ✓ What to expect next
- ✓ How to enroll





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 provider 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





**Plan
benefits,
programs
and
features**



Plan highlights



All the benefits of Part A

- Hospital stays
- Skilled nursing
- Home health



All the benefits of Part B

- Provider 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/your plan

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



Plan highlights



Prescription drug coverage



Vision, Hearing, Prescription, and Chiropractic coverage



No referral needed to see a specialist

Coverage for visiting providers, clinics and hospitals

Depending on where you live, you may see a provider outside the network for the same cost share as network providers as long as they participate in the Medicare Program .



If you move, your cost share may change



Freedom to see any provider who accepts Medicare

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

To find out, search our online Provider Directory at retiree.uhc.com/fairfax or call UnitedHealthcare Customer Service at **1-866-859-5402**, TTY **711**, 8 a.m.–8 p.m. local time, Monday–Friday.

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



Your annual costs

Annual deductible

\$0 Medical

\$100 Rx

Annual out-of-pocket maximum

\$1500 for Medical

\$2400 for Rx

* Limitations, exclusions and/or network restrictions may apply. Out-of-pocket maximum excludes premiums, prescription costs, and non-Medicare covered benefits.



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Plan benefits

Benefit coverage		In & Out of network
	Primary care provider (PCP) office visit	\$5 copay
	Specialist office visit	\$5 copay
	Urgent care	\$10 copay
	Emergency room	\$120 copay
	Inpatient hospitalization	\$0 copay
	Outpatient surgery	\$0 copay
	Medical virtual visits	\$0 copay using AmWell, Doctor on Demand or Teladoc \$5 using all others

Preventive services

Benefit coverage	In-network	Out-of-network
 Annual Physical	\$0 copay	\$0 copay
 Annual Wellness Visit	\$0 copay	\$0 copay
 Immunizations	\$0 copay	\$0 copay
 Breast cancer screenings	\$0 copay	\$0 copay
 Colon cancer screenings	\$0 copay	\$0 copay



Additional benefits

Benefit coverage	In-network	Out-of-network
 Medicare-covered podiatry	\$5 copay	\$5 copay
 Medicare-covered chiropractic care	\$10 copay	\$10 copay
 Medicare-covered vision services	\$0 copay	\$0 copay
 Medicare-covered hearing services	\$0 copay	\$0 copay

Testing and monitoring supplies to help manage diabetes

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:

- ✓ Lancet
- ✓ 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 provider. A temporary supply of your current brand can be requested.

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

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



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Getting vaccinated is important to your health



Vaccines work with your body's natural defenses to protect against infection and help reduce the risk of disease.

They do this by imitating an infection without causing the disease — and getting your immune system to respond the same way it would to a real infection. This prepares your body to recognize and fight the disease in the future.

Check with your provider to see if these common vaccines are right for you

Covered by Part B

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

Covered by Part D

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



Keep your health on track with a \$0 Annual Wellness Visit*



Combine visits

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



Schedule early

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



Follow recommendations

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

**Schedule anytime —
you don't have to wait 12 months**

What's the difference between your annual physical and wellness visit?

A **physical exam** includes a head-to-toe exam, blood sugar test and cholesterol test. This visit is a good time to review your medications and/or health concerns. Your plan covers this visit once per calendar year.

A **wellness visit** includes a blood pressure check, height and weight measurement and body mass index (BMI) test. Your plan covers this visit once per 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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HouseCalls brings yearly check-in care to you

Get a yearly in-home visit from one of our licensed health care practitioners at no additional cost to you. The visit includes:

- ✓ Up to an hour of 1:1 time with the health care practitioner
- ✓ Health screenings tailored to you
- ✓ A medication review
- ✓ A chance to get advice and ask questions to help you manage your health
- ✓ A visit summary that is sent to you and your primary care provider



Prefer a video visit?

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.

*HouseCalls may not be available in all areas.



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Gym and fitness membership

SilverSneakers® is a fitness benefit that includes a standard monthly membership and access to group exercise classes* at a participating fitness location** — offered at no cost to you.



*Membership includes SilverSneakers instructor-led group fitness classes. Some locations offer members additional classes. Classes vary by location.

**Participating locations ("PL") are not owned or operated by Tivity Health, Inc. or its affiliates. Use of PL facilities and amenities are limited to terms and conditions of PL basic membership. Facilities and amenities vary by PL.

Availability of the SilverSneakers program varies by plan/market. Refer to your Evidence of Coverage for more details. Consult a health care professional before beginning any exercise program.

SilverSneakers is a registered trademark of Tivity Health, Inc.

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Let's Move by UnitedHealthcare, your plan's exclusive wellness program

At no additional cost to you, Let's Move by UnitedHealthcare helps you discover ways to feel great every day. Whether your goal is to be active, eat healthier, beat the blues or stress less, Let's Move has something for you. Explore fun events, exciting challenges, helpful resources and ways to connect with others.



Let's eat well

Treat yourself to tasty recipes, fun cooking events and nutrition education.



Let's keep moving

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



Let's beat the blues

Care for your mental health with support services, online tools and resources.



Let's make friends

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



Let's live well

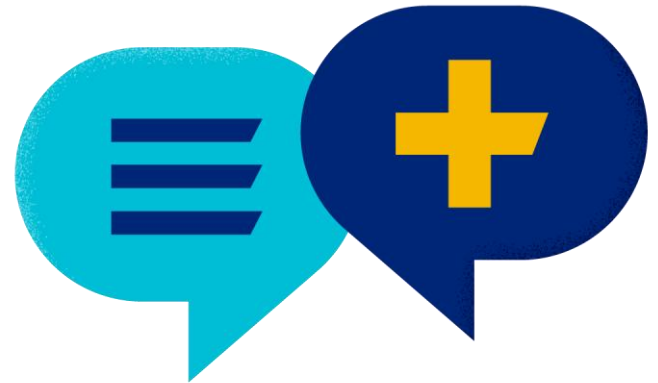
From helping to manage your financial well-being to supporting caregivers to helping stop tobacco use, we're here for your wellness.



Get answers to your health questions with 24/7 provider support

With 24/7 provider support:

- ✓ Providers can diagnose, treat a wide range of conditions and prescribe medication*
- ✓ Connect by phone, web or app from anywhere
- ✓ Results of the visit can be shared with your primary care provider**



Get help making health decisions — at no cost to you

*When medically necessary

**With member consent



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Well-tuned care for your 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 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

Save up to
50%

off standard industry prices^
with exclusive pricing

\$2800
Hearing Aid
Allowance!

*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.

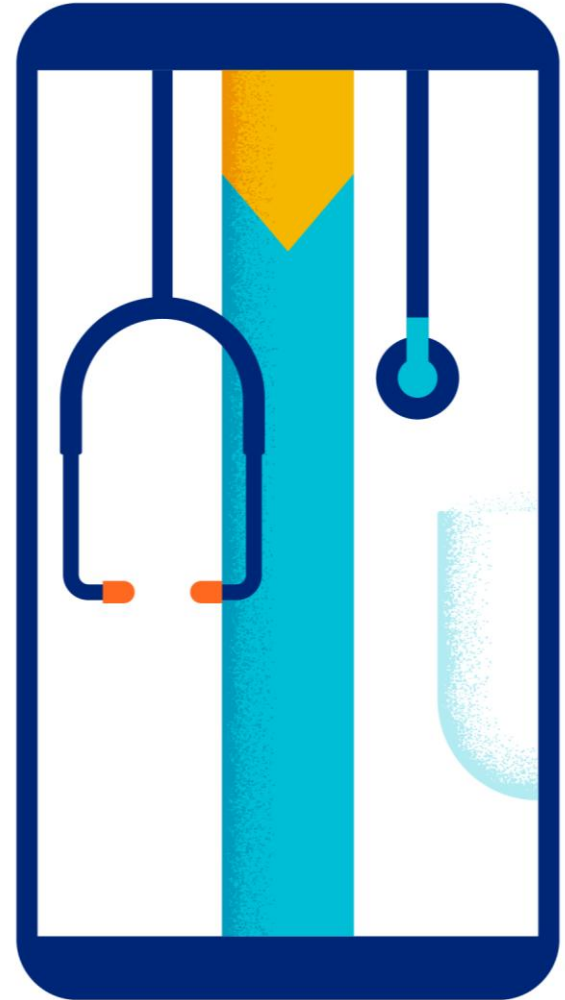
Care anywhere with 24/7 Medical Virtual Visits

With Medical Virtual Visits, you can live video chat* with a medical provider from your computer, tablet or smartphone anytime, day or night.**

Ask questions, get a diagnosis, and get medication prescribed*** and sent to your pharmacy. All you need is a strong internet connection.

These visits may be best for:

- ✓ Allergies, bronchitis, cold/cough
- ✓ Fever, seasonal flu, sore throat
- ✓ Migraines/headaches, sinus problems, stomachaches



Find participating Virtual Visit providers by logging in to your member site

*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.

**Benefits and availability may vary by plan and location.

***Providers cannot prescribe medications in all states.



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Behavioral Health Virtual Visits

With Behavioral Health Virtual Visits, you can live video chat* with a behavioral health specialist from your computer, tablet or smartphone. All you need is a strong internet connection.**

These visits may be best for:

- ✓ Initial evaluation
- ✓ Behavioral health medication management
- ✓ Addiction
- ✓ Depression
- ✓ Trauma and loss
- ✓ Stress or anxiety



Find participating Virtual Visit providers by logging in to your member site



*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.
**Benefits and availability may vary by plan and location.



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Extra help recovering with UnitedHealthcare Healthy at Home

With 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 Specialist



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

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



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Part D prescription drug coverage



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



Thousands of covered brand-name and generic prescription drugs



Bonus drug coverage in addition to Medicare Part D drug coverage



Check your plan's drug list at **retiree.uhc.com/fairfax** or call Customer Service to see if your prescription drugs are covered



Part D (prescription drug) plan/benefits

Tier	Prescription drug type	Your costs	
		Retail (30 -day supply)	Preferred Mail Order (30/90 -day supply)
1	Preferred Generic Most generic drugs	\$10 copay	\$20 copay
2	Preferred Brand Many common brand-name drugs (preferred brands) and some higher-cost generic drugs	\$25 copay	\$50 copay
3	Non-preferred Drug Non-preferred generic and non-preferred brand-name drugs. In addition, Part D-eligible compound medications are covered in Tier 3.	\$90 copay	\$180 copay
4	Specialty Tier Unique and/or very-high-cost brand-name and generic drugs	\$100 copay	\$100 (limited to 30 day supply)



Your plan's drug coverage stages and costs

Drug payment stages:

Annual deductible

Since your plan has a deductible, you pay the total cost of your drugs until you reach your deductible.

Initial coverage

You pay a copay for covered drugs.

Catastrophic coverage

After you have reached the maximum of \$2,400 for your prescription drugs, you will pay \$0 for Medicare Part D covered drugs for the rest of the plan year.



Ways to save on your prescriptions



Review your medications

Discuss all your prescription drugs with your provider at least once a year.



Use your UnitedHealthcare member ID card

Show your UnitedHealthcare member ID card at the pharmacy to get the plan's discounted rates.



Use participating network pharmacies

You may save on the medication you take regularly.



Take advantage of lower cost-sharing amounts

Use our Preferred Retail Pharmacy Network.



Consider using Optum® Home Delivery Pharmacy

You could save time and trips to the pharmacy.



Get Optum[®] Home Delivery through Optum Rx[®] Pharmacy¹ in 5 simple steps

1

Order submitted

After your account is set up, your Optum Home Delivery order enters the 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 Home Delivery 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.



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.

Medicare allows you to have different plans for medical (Medicare Advantage) and prescription drug coverage (Part D), but they both must be group-sponsored retiree health coverage. If you are enrolled in a group Medicare Advantage plan without prescription drug coverage and need Part D coverage, you cannot enroll in an individual Part D plan. You must enroll in a group-sponsored Part D prescription drug plan.

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

When you are a member, 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/fairfax.

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 2026 enrollment plan guide.





**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/fairfax

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.

If you are currently enrolled, you will receive your new 2026 UnitedHealthcare® member ID card as well as the Annual Notice of Change (ANOC) before the beginning of the new year.

If you opted to receive your Annual Notice of Change electronically you will receive an email when the ANOC is available on retiree.uhc.com/fairfax



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



How to use your new UnitedHealthcare member ID card

After your enrollment, 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.*

- ✓ Simply use your UnitedHealthcare member ID card each time you go to the doctor or hospital
- ✓ 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/fairfax

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, UnitedHealthcare member ID number or Medicare 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 providers
- **Sign up** to get your Explanation of Benefits online



Secure personal online account

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

- 1 Download the UnitedHealthcare® app or visit retiree.uhc.com/fairfax and click on **Sign in or register**.
- 2 Click **Register Now**.
- 3 Enter your information (first and last name, date of birth, email) and click **Continue**.
- 4 Check the email you entered (in step 2) for a 6-digit code from HealthSafe ID. Enter the code and click **Continue**.
- 5 For your security, you will be asked to enter your phone number. Choose text or call to receive your code over the phone.
- 6 Enter the 6-digit code and click **Continue**.
- 7 Enter your identification number (Member ID or Medicare Number) and click **Continue**.
- 8 Create a password and click **Continue**.
- 9 Account created will show email and phone number for successful registration.

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 providers
- **Sign up** to get your Explanation of Benefits online



24/7 access to your benefits with the UnitedHealthcare app

Find care

- ✓ Find network care options for providers, clinics and hospitals in your area
- ✓ Talk to a provider 24/7 (Virtual Visits)

Stay on top of costs

- ✓ View your copay, annual deductible and out-of-pocket expenses

Manage your health plan details

- ✓ Generate and share digital health plan ID cards
- ✓ View claims and rewards

Stay fit

- ✓ Find a gym location



To download the app, scan the QR code with the camera on your mobile device

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How to enroll



Enrolling for Fairfax County Government retirees



Ready to enroll in United Healthcare Group Medicare Advantage PPO plan?

Fairfax County Government is offering the United Healthcare Group Medicare Advantage PPO plan for its Medicare-eligible retirees, spouses, and dependents. Fairfax County Government retirees and their dependents interested in enrolling in the plan must complete and return the 2027 Fairfax County Government Open Enrollment form to DHRBenefitsDivision@fairfaxcounty.gov by **11/21/2026**.

If you are already enrolled in this plan and you wish to continue, you do not need to take any action.

You can opt out

You have the opportunity to opt out of this plan if you don't wish to be enrolled. You can opt out by contacting the Department of Human Resources, Benefits Division by email DHRBenefitsDivision@fairfaxcounty.gov no later than **November 21, 2026**.





Questions and answers





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.

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, if not otherwise paid for under Medicaid or by another third party.

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.

¹ Optum Home Delivery Pharmacy and Optum Rx are affiliates of UnitedHealthcare Insurance Company. You are not required to use Optum Home Delivery Pharmacy for a 90-day supply of your maintenance medication. If you have not used Optum Home Delivery Pharmacy, 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 Home Delivery Pharmacy anytime at 1-888-279-1828, TTY 711.

Other pharmacies are available in our network.

Out-of-network/non-contracted providers are under no obligation to treat plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services .

The company does not discriminate on the basis of race, color, national origin, sex, age or disability in health programs and activities. We provide free services to help you communicate with us such as letters in other languages, Braille, large print, audio, or you can ask for an interpreter. Please contact Customer Service at 1-844-808-4553, TTY: 711, 8 a.m.–8 p.m. local time, 7 days a week, for additional information.

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.

