

Welcome

- The Federal Reserve prides itself on offering a competitive and comprehensive benefits package to our retirees.
- The UnitedHealthcare® Group Medicare Advantage (PPO) plan benefit demonstrates the Fed's commitment to retirees.
- First introduced in 2017, 2025 will be the 9th year the MAPD plan option has been available to FRB retirees.
 - It delivers all of the benefits of Original Medicare (Parts A and B), includes prescription drug coverage (Part D) and offers additional features.
- For many, this means more benefits at lower costs! This is one of the many reasons over 10K FRB retirees have chosen the UHC MAPD plan to take care of their healthcare needs.



Time to get what you've earned



more benefits focused on you

Federal Reserve Banks



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1

Original Medicare basics

2

Plan benefits, programs and features

3

What to expect next

4

How to enroll



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.





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 your Medicare Advantage plan



Additional benefits, programs and features

Bundled with your plan

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



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/frb** or call UnitedHealthcare Customer Service at **1-866-860-7708**, TTY **711**, 8 a.m.–8 p.m. local time, Monday–Friday.

With this plan, you pay the same share of cost in and out-of-network as long as the provider is eligible to participate in the Medicare Program.

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

\$0

Annual deductible

\$1,000

Annual out-of-pocket maximum*

* 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-network	Out-of-network
Primary care provider (PCP) office visit	\$15 copay	\$15 copay
Specialist office visit	\$25 copay	\$25 copay
Urgent care (worldwide)	\$25 copay	\$25 copay
Emergency room (worldwide)	\$50 copay	\$50 copay
Inpatient hospitalization	\$100 copay (per stay)	\$100 copay (per stay)
Outpatient surgery	\$0 copay	\$0 copay
Medical virtual visits*	\$0 copay	\$0 copay

* Not all network providers offer virtual care. Virtual visits may require video-enabled smartphone or other device. Not for use in emergencies.



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

[*A copay or coinsurance may apply if you receive services that are not part of the annual physical/wellness visit.]

Additional benefits

Benefit coverage	In-network	Out-of-network
Medicare-covered podiatry	\$25 copay	\$25 copay
Medicare-covered chiropractic care	\$20 copay	\$20 copay
Medicare-covered vision services	\$25 copay	\$25 copay
Medicare-covered hearing services	\$25 copay	\$25 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 OneTouch and ACCU-CHEK blood glucose testing strips and meters*.

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



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Vision exam*

With the vision benefit, you will have access to a national network of providers with the freedom to see any participating vision provider. You will have access to an annual routine eye exam through a vision provider.

- ✓ A routine eye exam once every 12 months with a \$0 copay
- ✓ The network is UnitedHealthcare Medical Network



When scheduling your appointment, make sure your vision provider will bill the UnitedHealthcare medical plan before receiving routine vision services (routine eye exam)

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



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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/frb** or call Customer Service to see if your prescription drugs are covered



Changes to Medicare Part D coverage— Inflation Reduction Act

What is it?

The Inflation Reduction Act (IRA) was signed into law in 2022. All UnitedHealthcare Group Retiree Medicare Part D plans (MAPD and PDP) are impacted.

What does this mean?

Beginning January 1, 2025:

- The coverage gap stage (donut hole) is eliminated. The drug stages will be the initial coverage stage and catastrophic coverage stage.
- Your 2025 total out-of-pocket costs for Part D prescription drug costs will be limited to \$2,000.
That means that after you and others on your behalf have paid a combined total of \$2,000 for your Medicare Part D covered drugs, you will move from the initial coverage stage to the catastrophic coverage stage.
- All Medicare Part D enrollees will have the option to pay their out-of-pocket prescription drug costs in monthly installments over the course of the year. This is referred to as the Medicare Prescription Payment Plan.



Medicare Prescription Payment Plan

What is it?

The Medicare Prescription Payment Plan is a new program created under the Inflation Reduction Act that allows participants to spread their covered Part D out-of-pocket spending over the remainder of the calendar year.

Who can participate in the Medicare Prescription Payment Plan program?

All Part D enrollees in employer group plans are eligible to participate in the Medicare Prescription Payment Plan beginning on or after January 1, 2025. Information about the program is included in select plan materials.

While this program is available to anyone with Medicare Part D, enrollees with high cost-sharing earlier in the plan year are more likely to benefit from the program.

This program may not be a good fit for members who have low yearly drug costs, who are not likely to reach the \$2,000 annual out-of-pocket maximum, or who have Extra Help or another government program to help save on their prescription drug costs.

How does it work?

- A member can opt in to the program through the plan online, over the phone or by mail
- The member pays \$0 up front for their Part D medication, and the plan pays the pharmacy for the member's cost share
- The plan sends monthly bills to the member, which can be paid online, over the phone or by opting in to autopay
- Future payments increase as the member continues to fill prescriptions throughout the year
- The member won't pay interest or fees on the amount owed even if the payment is late



Your plan's drug coverage stages and costs

Drug payment stages:

Initial coverage

You pay a coinsurance (percentage of a drug's total cost) for covered drugs.

Catastrophic coverage

After you and others on your behalf have paid a combined total of \$2,000 for your prescription drugs, you will pay \$0 for Medicare Part D covered drugs for the rest of the plan year.



Part D (prescription drug) benefits

Tier	Prescription drug type	Your costs	
		Retail 30-day supply	Preferred Mail Order 90-day supply
1	Preferred Generic	\$7 copay	\$14 copay
2	Preferred Brand	30% coinsurance, with a \$45 copay maximum	25% coinsurance, with a \$100 copay maximum
3	Non-preferred Drug	30% coinsurance, with a \$50 copay maximum	25% coinsurance, with a \$100 copay maximum
4	Specialty Tier	30% coinsurance, with a \$50 copay maximum	25% coinsurance, with a \$100 copay maximum



The value of Medicare Advantage for retirees

	Group Medicare Advantage	Traditional Medicare & Med Supp
Clinical & Wellness engagement*	✓	X
Care coordination*	✓	X
In-home health assessments*	✓	X
Reminders and rewards	✓	X
24/7 access to doctor visits	✓	X
Fitness memberships	✓	X
Reduced premiums	✓	X
One medical ID card and plan	✓	X
Retiree dedicated customer service	✓	X
Easier to understand benefit design	✓	X

*Voluntary retiree participation



Medicare Part D IRMAA

(Income-Related Monthly Adjustment Amount)

- Members who pay a higher Medicare Part B premium because their modified Adjusted Gross Income is above the threshold (i.e., more than \$103,000 for individual; \$206,000 for married couple) will **ALSO** have to pay a slightly higher portion of their Medicare Part D plan premium.
- Adjustment amount is calculated and based on a percentage of the Part D National Base Beneficiary Premium (not on a % of plan premium).
- Social Security Administration (SSA) will notify those beneficiaries via a letter, if it applies to them.
- Members who receive Social Security (SS) benefits, the Part D adjusted premium amount will automatically be taken out of their SS check.



Income Related Monthly Adjustment Amount (IRMAA) – 2024 Additional Amount

Individuals who file 'Individual Tax Return' with income:	Individuals who file 'Married but Separate Tax Return' with income:	Individuals who file a 'Joint Tax Return' with income:	Additional Part D monthly premium:
Up to \$103,000	Up to \$103,000	Up to \$206,000	\$0.00
\$103,001 - \$129,000	N/A	\$206,001 - \$258,000	\$12.90
\$129,001 - \$161,000	N/A	\$258,001 - \$322,000	\$33.30
\$161,001 - \$193,000	N/A	\$322,001 - \$386,000	\$53.80
\$193,001 - \$499,999	\$103,001 - \$396,999	\$386,001 - \$749,999	\$74.20
\$500,000 or more	\$397,000 or more	\$750,000 or more	\$81.00



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 Network¹.



Consider using Optum[®] Home Delivery Pharmacy²

You could save time and trips to the pharmacy.



Get Optum[®] Home Delivery² 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.



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

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



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.

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.

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

*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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Renew Active^{®3}

Renew Active is the gold standard in Medicare fitness programs and available at no additional cost to you.

- ✓ Provides you the chance to stay physically fit with a free gym membership and access to our nationwide network of fitness centers
- ✓ Access to on-demand workout videos and livestreaming fitness classes if you want access to the benefit from your home
- ✓ Social activities at local health and wellness classes and events



Participation in the fitness program is voluntary. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine. The fitness program includes standard fitness membership and other offerings. Fitness membership equipment, classes, activities and events may vary by location. Certain services, discounts, classes, activities, 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 is 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.



Get care anywhere with Virtual Visits

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

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



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

Virtual Provider Visits may be best for:

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

Virtual Behavioral Health Visits may be best for:

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

*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.



Take care of your mental health with behavioral health resources

You have access to many resources to help improve your emotional and mental health, including:

- ✓ Ongoing mental health support with Optum® Behavioral Health
- ✓ Resources through our Health and Wellness experience



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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More peace-of-mind with a Personal Emergency Response System (PERS)*

With the Personal Emergency Response System (PERS), 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



**Help is just a push
button away**

*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.



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Extra support with UnitedHealthcare Healthy at Home

A comprehensive bundle of routine benefits accessible to members anytime throughout the year with no medical requirements.

With UnitedHealthcare Healthy at Home, you are eligible for the following benefits* at no cost to you:



21 home-delivered meals



24 one-way rides to medically related appointments and to the pharmacy



8 hours of non-medical personal care provided through a CareLinx professional caregiver to perform tasks such as preparing meals, bathing, medication reminders and more

*Members do not need to use all 3 benefits. Restrictions and limitations apply.



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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 6,500+ 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®, Signia, ReSound, Widex® and Unitron™

**Save 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.



Important Retiree Resources

Resource	What they can help with
UnitedHealthcare Customer Service 1-866-860-7708, TTY 711 8 a.m. – 8 p.m. Local time Monday - Friday	<ul style="list-style-type: none"> • Plan questions • Benefits • Doctor/provider look-up • Pharmacy look-up • Claims • Wellness Programs • Prior Authorizations
Federal Reserve Benefits Center 1-877-FRS-CALL (877-377-2255) 8 a.m. – 6 p.m. Eastern time Monday- Friday	<ul style="list-style-type: none"> • Eligibility issues • Premiums
UnitedHealthcare Website for Federal Reserve Bank retiree.uhc.com/frb	<ul style="list-style-type: none"> • Plan information • Doctor/provider look-up • Pharmacy look-up • Wellness Programs (once a member) • Claims (once a member)
24/7 Nurse Support 1-877-365-7949	<ul style="list-style-type: none"> • Available 24/7, 365 days a week • Nurses available to answer member's health related questions or concerns
Participant Advocacy 1-877-FRS-CALL (877-377-2255) 8 a.m. – 6 p.m. Eastern time Monday- Friday	<ul style="list-style-type: none"> • Escalated eligibility and claims support





What to expect next

What to expect after enrollment

- 1 Get your UnitedHealthcare member ID card and read your Welcome Letter**
The Welcome Letter gives you more information on how your benefits work and how to get the most from your plan. Your UnitedHealthcare member ID card will be attached to the card carrier you get in a separate mailing.
- 2 Register online to access your plan information**
After you get your member ID card, you can register online at retiree.uhc.com/frb.
- 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 provide reminders about preventive care as well as offer programs and resources to help you live a healthier life.



How to use your new UnitedHealthcare member ID card

After you're enrolled, you and any Medicare-eligible dependents covered by the plan will each get a Welcome Letter and UnitedHealthcare member ID card, which is your confirmation of enrollment.*

- ✓ After you're enrolled, simply use your UnitedHealthcare member ID card each time you go to a provider 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.

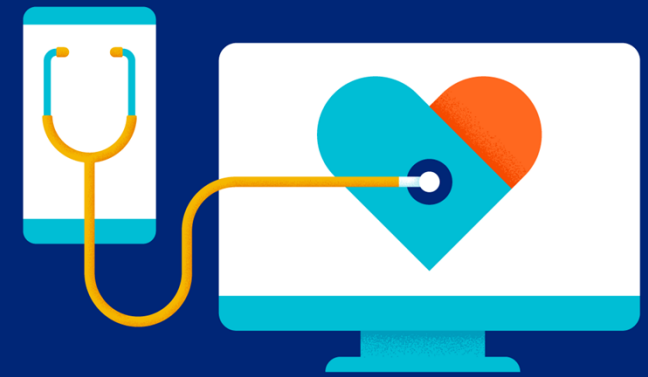


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Register for your secure personal online account at retiree.uhc.com/frb

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



UnitedHealthcare mobile app

With the UnitedHealthcare mobile app, you can stay on top of your benefits 24/7 anywhere you go.

Find care

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

Manage your health plan details

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

Stay on top of costs

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

Fitness

- Find a gym location



To download the app, scan the QR code with the camera on a smartphone or tablet



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Thank you

We look forward to welcoming you to our Medicare family