



# Need to see a doctor or health care provider?



With the UnitedHealthcare® Group Medicare Advantage (PPO) plan, you can see doctors and other health care providers that are in and out of our network at the same cost share as long as they participate in Medicare and accept the plan.

## Seeing a network provider

### What is a network doctor?

A network doctor or health care provider is one who contracts with UnitedHealthcare to provide services to Medicare-eligible members.

### Can a network doctor refuse to see me?

If you are an existing patient, the doctor or health care provider must continue to see you. A network doctor may choose not to see you if they have not seen you before and if they are not accepting any new Medicare patients.

### What do I pay?

You pay your copay or coinsurance according to your plan benefits. Your doctor or health care provider will bill UnitedHealthcare for the rest of the cost of your service(s).

### How is the doctor paid?

The doctor or health care provider is paid according to their contract with UnitedHealthcare.

## Going out of the network

### What is an out-of-network doctor?

An out-of-network doctor or health care provider does not have a contract with UnitedHealthcare.

### Can I see any out-of-network doctor?

You can see any out-of-network doctor or health care provider that participates in Medicare and accepts the plan. Accepting the plan means the doctor is willing to treat you and bill UnitedHealthcare.

### What if my doctor says they will not accept the plan?

We will be happy to contact your doctor on your behalf to explain how the plan works. Usually, that is all that is needed.

### What do I pay if the provider submits the bill to UnitedHealthcare?

You pay your plan's copay or coinsurance. UnitedHealthcare will pay for the rest of the cost of your covered service(s) including any excess charges up to the limit set by Medicare.

### What if the out-of-network provider does not bill UnitedHealthcare?

If you receive a covered service from an out-of-network provider who is unwilling to bill the plan, that provider may require you to pay the entire amount yourself at the time you receive the care. You can ask us for reimbursement as described in Chapter 7 of the Evidence of Coverage, *"Asking us to pay our share of a bill you have received for covered medical services or drugs"*. We will reimburse our share of the cost. You may be responsible for the difference after your cost share has been applied to the provider's total billed charges.

To access the Evidence of Coverage please visit [retiree.uhc.com/ibm/coverage-and-benefits](https://retiree.uhc.com/ibm/coverage-and-benefits).



### Have questions or need help finding a doctor?

We're here to help. Please give us a call toll-free at **1-877-852-0641**, TTY **711**, 8 a.m.–8 p.m. local time, Monday–Friday.

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

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