

Insurance Guide 2021

**What you need to know about your Senior Supplement[®]
Plan.**

SDCERA

UnitedHealthcare Senior Supplement

Group Number: 05408

Effective: January 1, 2021 through December 31, 2021



Introducing the Plan

UnitedHealthcare® Senior Supplement® and Prescription Drug plans

Dear Retiree,

Your former employer or plan sponsor has selected UnitedHealthcare to offer UnitedHealthcare® Senior Supplement®, UnitedHealthcare® MedicareRx for Groups (PDP) and UnitedHealthcare® RxSupplement® plans. We believe you should get more than a good plan, and that's why we have the people, tools and resources in place to help you live a healthier life.

Let us help you:

- Get tools and resources to help you be in more control of your health
- Find ways to save money on health care, so you can spend more on what matters to you

In this book you will find:

- A description of these plans and how they work
- Information on benefits, programs and services – and how much they cost
- What you can expect after your enrollment

How to enroll:


If you want to enroll in these plans, follow your plan sponsor's instructions. They will forward your enrollment information to UnitedHealthcare.

Something to note

You can only have one medical plan and one Medicare Part D Prescription Drug plan at a time. If you enroll in another medical plan or another Medicare Part D plan, you may be disenrolled from your current plan.

Questions? We're here to help.

 www.UHCRetiree.com/sdcera

 Toll-free **1-800-851-3802**, TTY **711**, 8 a.m. – 8 p.m. local time, 7 days a week
Prescription Drug plan: **1-888-556-6648**, TTY **711**, 8 a.m. – 8 p.m. local time, 7 days a week

Take advantage of healthy extras with UnitedHealthcare



NurseLine



Gym Membership



Over 67,000 Pharmacies

UnitedHealthcare Senior Supplement group retiree plans are underwritten by UnitedHealthcare Insurance Company, a private insurance company not connected with or endorsed by the U.S. Government or the federal Medicare program. UnitedHealthcare is part of the UnitedHealth Group family of companies. UnitedHealthcare Senior Supplement plans are not Medicare Supplement plans. They are employer group retiree plans and may provide coverage that is different from a Medicare Supplement plan. In New York, the plans are called UnitedHealthcare Retiree Benefit Plans and are underwritten by UnitedHealthcare Insurance Company of New York. Senior Supplement plans may not be available in all states.

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

The pharmacy network may change at any time. You will receive notice when necessary.

UnitedHealthcare RxSupplement is not a Medicare Part D prescription drug plan. This is an employer group retiree prescription drug plan. UnitedHealthcare RxSupplement group retiree prescription drug plans are underwritten by UnitedHealthcare Insurance Company or, in New York, UnitedHealthcare Insurance Company of New York. These are private insurance companies not connected with or endorsed by the U.S. Government or the federal Medicare program. RxSupplement plans may not be available in all states. UnitedHealthcare is part of the UnitedHealth Group family of companies.

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2020 Plan Summary

Plan F

UnitedHealthcare® Senior Supplement®

Underwritten by UnitedHealthcare Insurance Company

In New York, Underwritten by UnitedHealthcare Insurance Company of New York

All covered amounts will vary depending on Medicare benefits for any particular year. Amounts listed on this summary are for Year 2020 benefits. Amounts may change for the Year 2021.

This summary is intended only to show highlights of benefits and should not be relied upon to fully determine health care expenses. Once you are enrolled in the plan, you will receive a Welcome Kit which will include a Certificate and Schedule of Benefits. These documents will provide you with a listing of services, limitations, exclusions, and a description of the terms, conditions of coverage and any state mandated benefits. If this description conflicts in any way with the policy issued to the enrolling group, the policy prevails.

If you would like to receive the Certificate and Schedule of Benefits before you enroll in the plan, please call Customer Service at the number located on the back of this booklet. A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

Covered Service	Medicare Pays	Senior Supplement Pays	You Pay
Inpatient Hospital Services			
Medicare Part A Hospital — semi-private room and board, general nursing and miscellaneous services and supplies.			
Days 1 – 60	All but \$1,408	\$1,408 (Medicare Part A Deductible)	\$0
Days 61 – 90	All but \$352 per day	\$352 per day	\$0
Days 91 – 150 (While using 60 lifetime reserve days)	All but \$704 per day	\$704 per day	\$0
Days 151 – 365 — lifetime additional reserve days	\$0	100% of Medicare Eligible Expenses	\$0
Beyond 365 lifetime additional reserve days	\$0	\$0	All costs
Skilled Nursing Facility Care			
You must meet Medicare’s requirements, including having been in a Hospital for at least 3 days and entering the Medicare approved facility within 30 days of leaving the Hospital.			
Days 1 – 20	All approved amounts	\$0	\$0
Days 21 – 100	All but \$176 per day	Up to \$176 per day	\$0
Days 101 and after	\$0	\$0	All costs

Covered Service	Medicare Pays	Senior Supplement Pays	You Pay
Blood			
First 3 pints Medicare Part A	\$0	100%	\$0
Additional amounts under Medicare Part A	100%	\$0	\$0
First 3 pints Medicare Part B	\$0	100%	\$0
Next \$198 of Medicare Approved Amounts under Medicare Part B	\$0	\$198 (Medicare Part B Deductible) ¹	\$0
Remainder of Medicare Approved Amounts under Medicare Part B	80%	20%	\$0
Hospice Services			
Available as long as your doctor certifies you are terminally ill and you elect to receive these services	All but very limited coinsurance for outpatient drugs and inpatient respite care	100% of balance	\$0
Medical Services			
Includes services such as physician services, inpatient and outpatient medical and surgical services and supplies, physical and speech therapy and diagnostic tests.			
First \$198 of Medicare Approved Amounts	\$0	\$198 (Medicare Part B Deductible) ¹	\$0
Remainder of Medicare Approved Amounts	Generally 80%	Generally 20%	\$0
Outpatient Mental Illness – for most outpatient mental illness services	80%	20%	\$0
Medicare Part B Excess Charges (above Medicare Approved Amounts)	\$0	100%	\$0
Preventive Healthcare (Medicare Covered)			
Periodic Health Screenings (please refer to your certificate)	100%	Balance (if applicable)	\$0

Covered Service	Medicare Pays	Senior Supplement Pays	You Pay
Durable Medical Equipment			
First \$198 of Medicare Approved Amounts	\$0	\$198 (Medicare Part B Deductible) ¹	\$0
Remainder of Medicare Approved Amounts	80% of approved amounts	20% of approved amounts	\$0
Home Health Care			
Skilled Care Services and Medical Supplies	All approved amounts	Balance (if applicable)	\$0
Preventive Healthcare (not covered by Medicare)			
Annual Routine Physical Exam	\$0	100%	\$0
Foreign Travel			
Medically Necessary Emergency Care services beginning during the first six months of each trip outside the United States. First \$250 each calendar year	\$0	\$0	\$250 Deductible
Remainder of charges	\$0	80% up to a lifetime maximum benefit of \$50,000	20% and all amounts over the \$50,000 lifetime maximum

Exclusions and Limitations

No benefits will be provided for, or in connection with, the following treatments, services or supplies:

- Any expense or service that is not determined by the Company to be a Medicare Eligible Expense, unless coverage for the expense or service is specifically provided by a Rider to the Policy.
- Any treatment, service or supply paid for by Medicare or found to be medically unnecessary or unnecessary by Medicare.
- Any treatment, service or supply that is provided before the effective date of coverage or after coverage has terminated.
- Any injury or sickness due to any past or present employment, or that is covered under any Workers' Compensation law or similar law.
- Charges for self-inflicted injury or attempted suicide.
- Any treatment, confinement, services or supply provided by a government owned or operated facility.
- Any injury or sickness resulting from war or any act of war (declared or undeclared).
- Acts beyond the company's control such as any major disaster, epidemic, complete or partial destruction of facility, war, riot, or civil insurrection, which result in the unavailability of the facilities or personnel.
- Charges incurred as a result of participation in a riot, insurrection or the commission of a felony.
- Blood and plasma except as stated above.
- Experimental or investigational treatment, procedures and items.
- Hospital expenses for days 366 and beyond after the Medicare 60 lifetime reserve days have been used.

This Plan Summary is a highlight of benefits only and is not all inclusive of the Plan's benefits, services, or Exclusions and Limitations.

Visit us online anytime

Learn more at
www.UHCRetiree.com

Toll-free **1-800-698-0822**, TTY **711**
8 a.m. – 8 p.m. local time, 7 days a week

A UnitedHealthcare® Medicare Solution

¹Once \$198 of Medicare Approved Amounts for covered services have been paid, the Medicare Part B Deductible will have been met for the calendar year.

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Plan Details

UnitedHealthcare® Senior Supplement®

Let's start with a quick look at how your plan works. Medicare only covers about 80% of your expenses. Senior Supplement plans are medical insurance plans that help you pay for some or all of the costs Medicare Parts A and B don't cover — like copays and deductibles. Plus, your plan includes programs that go beyond Original Medicare Part A and Part B.



Make sure you know what parts of Medicare you have

You must be entitled to Medicare Part A and enrolled in Medicare Part B to enroll in this plan.

- If you're not sure if you are enrolled in Medicare Part B, check with the Social Security office. Visit www.ssa.gov/locator or call **1-800-772-1213**, TTY **1-800-325-0778**, between 7 a.m. – 7 p.m. local time, Monday – Friday.
- You must continue paying your Medicare Part B premium to be eligible for coverage under this group-sponsored plan. If you stop paying your Medicare Part B premium, you may be disenrolled from this plan.

There are multiple coverage options:



Medicare Part A
Hospital

+



Medicare Part B
Doctor and outpatient

+



Senior Supplement
Covers some or all of the costs not paid by Parts A and B

Senior Supplement plan basics

Choosing UnitedHealthcare means you're working with a national health care leader. We'll help you get the care you need and we'll be with you every step of the way. We can also help you with the following:



Stay within your budget

This Senior Supplement plan helps limit your out-of-pocket expenses by covering many costs that Original Medicare Parts A and B don't cover.



Visit the doctors you want

You have the freedom to choose any doctor, specialist or hospital anywhere in the country that accepts Medicare.



Additional support and programs

You get additional health and wellness programs at no additional cost.



Don't worry about paperwork

With this plan, you have virtually no claim forms to file.



Be covered by a trusted leader

UnitedHealthcare has the nation's largest network,¹ with top doctors and health care professionals. We make it easier for you to get the care, tests and treatment you need at the right time.

¹Network size varies by market

Additional support and programs



Annual Wellness Visit¹ and preventive services at \$0 copay

An Annual Wellness Visit with your doctor is one of the best ways to stay on top of your health. Take control by scheduling your annual physical and wellness visit early in the year to give you the most time to take action. You and your doctor can work as a team to create a preventive care plan, review medications and talk about any health concerns.



NurseLine

Receive access to nurse consultations and additional clinical resources at no additional cost to you.



Get active and have fun with a gym membership

SilverSneakers® is a fitness benefit included with your health plan at no additional cost.

SilverSneakers includes:

- Memberships to thousands of locations² nationwide
- Group exercise classes³ designed for all abilities
- Fun activities held outside the gym³



Hear the moments that matter most with custom-programmed hearing aids

Your hearing health is important to your overall well-being and can help you stay connected to those around you. With UnitedHealthcare Hearing, you'll get access to hundreds of name-brand and private-labeled hearing aids — available in-person at any of our 5,500 UnitedHealthcare Hearing providers nationwide⁴ or through home delivery — so you'll get the care you need to hear better and live life to the fullest.



Virtual Doctor Visits

See a doctor using your computer, tablet or smartphone. With Virtual Doctor Visits, you're able to live video chat with a doctor from your computer, tablet or smartphone — any time, day or night. You can ask questions, get a diagnosis, or even get medication prescribed and have it sent to your pharmacy. You will first need to register and then schedule an appointment. All you need is a strong internet connection.

Virtual Doctor Visits are good for minor health concerns like:

- Allergies, bronchitis, cold/cough
- Fever, seasonal flu, sore throat
- Migraines/headaches, sinus problems, stomachache
- Bladder/urinary tract infections, rashes

¹A copay or coinsurance may apply if you receive services that are not part of the annual physical/wellness visit.

²Participating 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.

³Membership includes SilverSneakers instructor-led group fitness classes. Some locations offer Members additional classes. Classes vary by location.

⁴Please refer to your Certificate of Coverage for details regarding your benefit coverage.

Tools and resources to put you in control



Get valuable plan information online

As a UnitedHealthcare member, you will have access to a safe, secure website where you'll be able to:

- Look up your latest claim information
- Review benefit information and plan materials
- Print a temporary member ID card and request a new one
- Learn more about health and wellness topics and sign up for healthy challenges based on your interests and goals

The NurseLine service 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 doctor's care. Your health information is kept confidential in accordance with the law. Access to this service is subject to terms of use.

This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments and restrictions may apply.

Premium and/or copayments/coinsurance may change each plan/benefit year.

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. © 2020 Tivity Health, Inc. All rights reserved.

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English

You may be entitled to the rights and services below. These rights apply only under California law. However, these rights do not apply to all California residents. These rights do not apply to all languages.

IMPORTANT: You can get an interpreter at no cost to talk to your doctor or health insurance company. To get an interpreter or to ask about written information in (your language), first call your insurance company's phone number at **1-800-698-0822**.

Someone who speaks (your language) can help you. If you need more help, call the Department of Insurance Hotline at 1-800-927-4357.

Español

Usted puede tener derecho a los derechos y servicios que se indican a continuación. Estos derechos se aplican sólo bajo la ley de California. No obstante, estos derechos no se aplican a todos los residentes de California. Estos derechos no se aplican a todos los idiomas.

IMPORTANTE: Puede obtener la ayuda de un intérprete sin costo alguno para hablar con su médico o compañía de seguros de salud. Para obtener la ayuda de un intérprete o preguntar sobre información escrita en español, primero llame al número de teléfono de su compañía de seguros de salud al **1-800-698-0822**.

Alguien que habla español puede ayudarle. Si necesita ayuda adicional, llame a la Línea Directa del Departamento de Seguros al 1-800-927-4357.
(Spanish)

中文

您可能有權擁有下列權利並取得下列服務。這些權利僅按加州法律規定而適用。然而這些權利並不適用於所有加州居民。這些權利並不適用於所有語言。

重要資訊：您可以免費取得口譯員服務，與您的醫師或醫療保險公司聯絡。欲取得口譯員服務，或索取以您的語言撰寫的書面資料，請先致電您的保險公司，電話為 **1-800-698-0822**

與您說同樣語言的服務人員會協助您。若您需要額外協助，請致電 1-800-927-4357 與加州保險局聯絡。
(Chinese)



قد تحقق لك الحقوق والخدمات المبينة أدناه. تطبق هذه الحقوق فقط بموجب قوانين ولاية كاليفورنيا. ولكن، لا تطبق هذه الحقوق على كافة سكان ولاية كاليفورنيا. كما لا تطبق هذه الحقوق على كافة اللغات.

هام: يمكنك الحصول على مترجم بدون تكلفة للتكلم مع طبيبك أو مزود خدماتك الطبية. للحصول على مترجم أو لطلب معلومات متوفرة باللغة العربية، رجاء أن تتصل أولاً برقم شركة تأمينك على الرقم **1-800-698-0822**

سيساعدك شخص يتكلم العربية. إذا احتجت لمساعدة إضافية، اتصل بالخط الساخن لإدارة شركات التأمين **1-800-927-4357**.
(Arabic)

Հայերեն

Հնարավոր է, որ դուք իրավասու լինեք ներքևի ծառայություններին: Այս իրավունքները կիրառելի են միայն Կալիֆորնիայի օրենքների ներքո: Բայց և այնպես, այս օրենքները կիրառելի չեն Կալիֆորնիայի բոլոր բնակիչների համար: Այս օրենքները չեն տարածվում բոլոր լեզուների վրա:

ԿԱՐԵՎՈՐ՝ Կարող եք անվճար թարգման ձեռք բերել ձեր բժշկի կամ առողջական ապահովագրության ընկերության հետ խոսելու համար: Թարգման ձեռք բերելու կամ հայերենով գրավոր տեղեկություն խնդրելու համար, նախ զանգահարեք ձեր ապահովագրական ընկերության հեռախոսահամարին՝ **1-800-698-0822**

Հայերեն խոսող մի անձ կարող է օգնել ձեզ: Եթե ձեզ լրացուցիչ օգնություն է հարկավոր, զանգահարեք Ապահովագրության Բաժանմունքի Հրատապ Գծին **1-800-927-4357** համարով:
(Armenian)

ភាសាខ្មែរ

អ្នកអាចនឹងមានសិទ្ធិ ចំពោះសិទ្ធិ និងសេវានៅខាងក្រោម ។ សិទ្ធិទាំងនេះពាក់ព័ន្ធនឹងនៅក្រោមច្បាប់នៃរដ្ឋកាលីហ្វ័រនីញ៉ាប៉ូណ្តុនេ ។ តែជាយ៉ាងណាមិញ សិទ្ធិទាំងនេះមិនពាក់ព័ន្ធដល់ប្រជាជនទាំងអស់នៃរដ្ឋកាលីហ្វ័រនីញ៉ា ។ សិទ្ធិទាំងនេះមិនពាក់ព័ន្ធចំពោះភាសា ទាំងអស់ឡើយ ។

សារៈសំខាន់ : អ្នកអាចទទួលជំនួយពីអ្នកបកប្រែ ដោយឥតគិតថ្លៃ ដើម្បីនិយាយទៅកាន់គ្រូពេទ្យ ឬក្រុមហ៊ុនធានារ៉ាប់រងសុខភាពរបស់អ្នក ។ ដើម្បីទទួលជំនួយពីអ្នកបកប្រែ ឬដើម្បីសាកសួរអំពីព័ត៌មានដែលបានសរសេរជាភាសាខ្មែរ ជាដំបូងអ្នកត្រូវទូរស័ព្ទទៅក្រុមហ៊ុនធានារ៉ាប់រងរបស់អ្នក តាមលេខ **1-800-698-0822**

គេមានមនុស្សដែលនិយាយភាសាខ្មែរ អាចជួយអ្នកបាន ។ បើសិនជាអ្នកត្រូវការជំនួយថែមទៀត សូមទូរស័ព្ទទៅលេខពិសេសក្រសួងការធានារ៉ាប់រង តាមលេខ **1-800-927-4357** ។

(Khmer)



فارسی

ممکن است استحقاق حقوق قانونی و خدمات زیر را داشته باشید. این حقوق قانونی صرفاً تحت قوانین کالیفرنیا موجودند. در عین حال، این حقوق قانونی به تمامی ساکنین کالیفرنیا اطلاق پذیر نیستند. این حقوق قانونی به تمامی زبانها اطلاق پذیر نیستند.

نکته مهم: میتوانید از خدمات یک مترجم شفاهی برای صحبت کردن با پزشک یا شرکت بیمه بهداشتی/درمانی خود بطور مجانی استفاده کنید. برای دریافت خدمات مترجم شفاهی و یا سئوالات راجع به اطلاعات کتبی به فارسی، ابتدا با شرکت بیمه خود با این شماره تماس بگیرید: **1-800-698-0822**

یک نفر که به زبان شما صحبت میکند به شما کمک خواهد کرد. برای دریافت کمک بیشتر، به خط کمکی اداره بیمه به شماره **1-800-927-4357** تلفن کنید.

(Farsi)

Hmoob

Tej zaum koj yuav muaj cov cai thiab yuav tau cov kev pab nram qab no. Cov cai no tsuas siv rau California txoj cai xwb. Tiam sis, cov cai no tsis yog siv rau tag nrho cov neeg nyob hauv California. Cov cai no tsis siv rau tag nrho txhua hom lus.

LUS TSEEM CEEB: Yuav muaj ib tug neeg los txhais lus uas koj yuav tsis tau them nqi li los nrog koj tus kws kho mob los sis lub tuam txhab them nqi kho mob tham. Yog xav tau ib tug neeg txhais lus los sis xav nug txog cov lus qhia uas sau rau hauv ntawv ua lus Hmoob, hu rau koj lub tuam txhab tus xov tooj ntawm **1-800-698-0822**

Yuav muaj ib tug neeg uas hais lus Hmoob los pab koj. Yog hais tias koj xav tau kev pab, hu rau Lub Caj Meem Fai Muab Kev Tuav Pov Hwm Tus Xov Tooj Muab Kev Pab ntawm **1-800-927-4357**.

(Hmong)

한국어

귀하는 아래와 같은 권리 및 서비스를 누리실 수 있습니다. 다음의 권리들은 오직 캘리포니아 법에 의해서만 주어집니다. 그러나 모든 캘리포니아 거주자들이 다음의 권리들을 가지는 것은 아닙니다. 또한 다음의 권리가 모든 언어에 적용되는 것은 아닙니다.

중요 사항: 귀하가 의사나 의료보험회사와 대화시 무료 통역 서비스를 받으실 수 있습니다. 통역사 서비스 혹은 한국어로 번역된 서면 정보를 원하시는 분은 본인 보험회사의 다음 안내번호로 문의하십시오. **1-800-698-0822**

귀하가 원하는 언어로 도움을 받으실 수 있습니다. 도움이 더 필요하신 분은 보험 담당국 핫라인 **1-800-927-4357**번으로 전화하십시오.

(Korean)



ລາວ

ບາງທີທ່ານມີສິດຈະໄດ້ຮັບບໍລິການແລະສິດທິພິເສດດັ່ງລຸ່ມນີ້. ສິດເຫຼົ່ານີ້ອີງຕາມກົດໝາຍແຫ່ງລັດ ຄາລິຟໍເນຍ. ຢ່າງໃດກໍດີ ບໍ່ແມ່ນວ່າພົນລະເມືອງລັດຄາລິຟໍເນຍທຸກໆຄົນທີ່ມີສິດເຫຼົ່ານີ້. ບໍ່ແມ່ນວ່າ ສິດເຫຼົ່ານີ້ໃຊ້ໄດ້ກັບທຸກໆພາສາ.

ສໍາຄັນ: ທ່ານສາມາດໄດ້ຮັບບໍລິການແປພາສາໄດ້ໂດຍບໍ່ເສຍຄ່າເພື່ອປຶກສາກັບທ່ານໝໍຫລືບໍລິສັດ ປະກັນໄພສຸກຂະພາບຂອງທ່ານ. ເພື່ອຈະໄດ້ຮັບບໍລິການແປພາສາ ຫລືເພື່ອຖາມເຖິງຂໍ້ມູນພາສາລາວ ເປັນລາຍລັກອັກສອນ, ໃຫ້ໂທຫາບໍລິສັດປະກັນໄພສຸກຂະພາບຂອງທ່ານກ່ອນ ຕາມໝາຍເລກ **1-800-698-0822**

ຄົນນຶ່ງຄົນໃດທີ່ເວົ້າພາສາລາວສາມາດຊ່ວຍທ່ານໄດ້. ຫາກວ່າທ່ານຕ້ອງການຄວາມ ຊ່ວຍເຫລືອເພີ່ມຕື່ມ, ໃຫ້ໂທຫາສາຍດ່ວນແຫ່ງກົມປະກັນໄພຕາມ 1-800-927-4357.
(Laotian)

Русский

Возможно, вы можете претендовать на следующие права и услуги. Данные права применяются только в соответствии с законодательством штата Калифорния. Однако эти права применимы не ко всем жителям Калифорнии и не ко всем языкам.

ВАЖНО: Вы можете бесплатно воспользоваться услугами переводчика, чтобы поговорить с врачом или компанией, предоставляющей вам медицинскую страховку. Чтобы воспользоваться услугами переводчика или получить письменную информацию на русском языке, сначала позвоните в вашу страховую компанию по тел.:

1-800-698-0822

Вам может помочь сотрудник, говорящий на русском языке. Если вам нужна дополнительная помощь, позвоните в Департамент страхования (Department of Insurance) по телефону горячей линии: 1-800-927-4357.
(Russian)

Tagalog

Maaaring karapat-dapat ka sa mga karapatan at mga serbisyo sa ibabâ. Ang mga karapatang ito ay umaaplay lamang sa ilalim ng batas ng California. Gayunman, ang mga karapatang ito ay hindi umaaplay sa lahat ng mga naninirahan sa California. Ang mga karapatang ito ay hindi umaaplay sa lahat ng mga wika.

MAHALAGA: Maaari kang kumuha ng interpreter (tagasalin) nang libre upang makausap ang iyong doktor o kompanya ng health insurance. Upang makakuha ng isang interpreter o magtanong tungkol sa nakasulat na impormasyon sa Tagalog, tawagan muna ang telepono ng iyong insurance sa **1-800-698-0822**

May makakatulong sa iyo na nagsasalita ng Tagalog. Kung kailangan mo ng karagdagang tulong, tawagan ang Department of Insurance Hotline sa 1-800-927-4357.
(Tagalog)



Tiếng Việt

Quý vị có thể hội đủ điều kiện hưởng các quyền và dịch vụ dưới đây. Các quyền này chỉ áp dụng theo luật tiểu bang California. Tuy nhiên, các quyền này không áp dụng cho tất cả các cư dân California. Các quyền này không áp dụng cho mọi ngôn ngữ.

QUAN TRỌNG: Quý vị có thể được một thông dịch viên trợ giúp miễn phí để nói chuyện với bác sĩ hay hãng bảo hiểm sức khỏe của quý vị. Để có dịch vụ thông dịch hoặc để hỏi về văn bản tài liệu bằng tiếng Việt, trước hết xin gọi hãng bảo hiểm của quý vị tại số **1-800-698-0822**

Sẽ có nhân viên biết nói tiếng Việt giúp đỡ quý vị. Nếu quý vị cần giúp đỡ thêm, xin gọi Đường Dây Khẩn của Ban Bảo Hiểm tại số 1-800-927-4357.
(Vietnamese)



Here's What You Can Expect Next

UnitedHealthcare® will process your enrollment

This chart shows you how we will be contacting you after your enrollment.

UnitedHealthcare Member ID Cards	Watch for your UnitedHealthcare member ID cards in the mail. Your Senior Supplement® and prescription drug cards will arrive separately.
Getting Started Guide and Quick Start Guide	Once you're enrolled, you will get a Senior Supplement Getting Started Guide and a prescription drug Quick Start Guide in the mail to help you start using your new plan(s).
Website Access	After you receive your UnitedHealthcare member ID cards, you can register online at the website listed below to get access to plan information.

Start using your plan on your effective date. Remember to use your UnitedHealthcare member ID cards.

We're here for you

When you call, be sure to let the Customer Service Advocate know that you're calling about a group-sponsored plan. In addition, it will be helpful to have:

- ✓ **Medicare number and Medicare effective date — you can find this information on your red, white and blue Medicare card**
- ✓ **Names and addresses for doctors, hospitals and specialists**
- ✓ **Name and address of your pharmacy**
- ✓ **List of current health conditions and treatments**

Questions? We're here to help.



www.UHCRetiree.com/sdcera



Call toll-free **1-800-851-3802**, TTY **711**,
8 a.m. – 8 p.m. local time, 7 days a week

UnitedHealthcare Senior Supplement group retiree plans are underwritten by UnitedHealthcare Insurance Company, a private insurance company not connected with or endorsed by the U.S. Government or the federal Medicare program. UnitedHealthcare is part of the UnitedHealth Group family of companies. UnitedHealthcare Senior Supplement plans are not Medicare Supplement plans. They are employer group retiree plans and may provide coverage that is different from a Medicare Supplement plan. In New York, the plans are called UnitedHealthcare Retiree Benefit Plans and are underwritten by UnitedHealthcare Insurance Company of New York. Senior Supplement plans may not be available in all states.



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8 a.m. - 8 p.m. local time, 7 days a week



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