

Annual notice of changes 2022

Medicare Advantage plan

UnitedHealthcare® Group Medicare Advantage (PPO)

Group Name (Plan Sponsor): University of Kentucky

Group Number: 13803



Toll-free **1-844-488-3956**, TTY **711**

8 a.m. - 8 p.m. local time, Monday - Friday



www.UHCRetiree.com/uky

Do we have the right address for you?

If not, please let us know so we can keep you informed about your plan.



Find updates to your plan for next year

This notice provides information about updates to your plan, but it doesn't include all of the details. Throughout this notice you will be directed to www.UHCRetiree.com/uky to review the details online, which are available anytime.

Provider Directory

Review the 2022 Provider Directory online to make sure your providers (primary care provider, specialists, hospitals, etc.) will be in the network next year.

Evidence of Coverage (EOC)

Review your 2022 EOC for details about plan costs and benefits. The EOC is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services. It also has information about the quality program, how medical coverage decisions are made and your Rights and Responsibilities as a member.

Would you rather get paper copies?

If you want a paper copy of what is listed above, please contact our Customer Service at 1-844-488-3956 (TTY users should call 711). Hours are 8 a.m. - 8 p.m. local time, Monday - Friday.

Would you rather get less paper?

Simplify your life with online delivery of plan materials. You can securely access your plan documents online anytime, anywhere. Register at www.UHCRetiree.com/uky to sign up for online delivery today.

Annual notice of changes for the 2022 plan year



You are currently enrolled as a member of UnitedHealthcare® Group Medicare Advantage (PPO).

Next plan year, there will be some changes to the plan's costs and benefits. **This booklet tells about the changes.**

Members enrolled in our plan through a former employer, union group or trust administrator (plan sponsor) can make plan changes at times designated by your plan sponsor.

What to do now

1. Ask: Which changes apply to you

- Check the changes to our benefits and costs to see if they affect you.
 - It's important to review your coverage now to make sure it will meet your needs next plan year.
 - Do the changes affect the services you use?
 - Look in Section 1 for information about benefit and cost changes for our plan.

- Check to see if your doctors and other providers will be in our network next plan year.
 - Are your doctors, including specialists you see regularly, in our network?
 - What about the hospitals or other providers you use?
 - Look in Section 1.3 for information about our Provider Directory.
 - Because you are a member of the UnitedHealthcare® Group Medicare Advantage (PPO) plan, you can see any provider (network or out-of-network) at the same cost share, as long as they accept the plan and have not opted out of or been excluded or precluded from the Medicare Program.

- Think about your overall health care costs.
 - How much will you spend out-of-pocket for the services you use regularly?
 - How much will you spend on your premium and deductibles (if applicable)?

- Think about whether you are happy with our plan.

2. **Choose: Decide whether** you want to change your plan

- If you want to **keep** UnitedHealthcare® Group Medicare Advantage (PPO), you don't need to do anything. You will stay in UnitedHealthcare® Group Medicare Advantage (PPO).
- Members enrolled in our plan through a plan sponsor can make plan changes at times designated by your plan sponsor.
- You should consult with your plan sponsor regarding the availability of other "employer-sponsored" coverage before you enroll in a plan not offered by your plan sponsor, or before ending your membership in our plan outside of your plan sponsor's open enrollment period. It is important to understand your plan sponsor's eligibility policies, and the possible impact to your retiree health care coverage options and other retirement benefits before submitting a request to enroll in a plan not offered by your plan sponsor, or a request to end your membership in our plan.

Additional Resources

- UnitedHealthcare does not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.
- UnitedHealthcare provides 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 our Customer Service number at 1-844-488-3956 for additional information (TTY users should call 711). Hours are 8 a.m. - 8 p.m. local time, Monday - Friday.
- UnitedHealthcare ofrece servicios gratuitos para ayudarle a que se comunice con nosotros. Por ejemplo, cartas en otros idiomas, braille, letra grande, audio o bien, usted puede pedir un intérprete. Comuníquese con nuestro número de Servicio al Cliente al 1-844-488-3956, para obtener información adicional (los usuarios de TTY deben comunicarse al 711). Los horarios de atención son de 8 a.m. a 8 p.m., hora local, de lunes a viernes.
- Coverage under this Plan qualifies as Qualifying Health Coverage (QHC)** and satisfies the Patient Protection and Affordable Care Act's (ACA) individual shared responsibility requirement. Please visit the Internal Revenue Service (IRS) website at www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information.

About UnitedHealthcare® Group Medicare Advantage (PPO)

- Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan's contract renewal with Medicare.
- When this booklet says "we," "us," or "our," it means UnitedHealthcare Insurance Company or one of its affiliates. When it says "plan" or "our plan," it means UnitedHealthcare® Group Medicare Advantage (PPO).

Summary of important costs for 2022

The table below compares the 2021 costs and 2022 costs for UnitedHealthcare® Group Medicare Advantage (PPO) in several important areas. **Please note this is only a summary of changes.** A copy of the Evidence of Coverage is located on our website at www.UHCRetiree.com/uky. You may also call Customer Service to ask us to mail you an Evidence of Coverage.

Cost	2021 (this plan year)	2022 (next plan year)
Deductible	\$185 combined in-network and out-of-network	\$185 combined in-network and out-of-network
Maximum out-of-pocket amounts This is the <u>most</u> you will pay out-of-pocket for your covered Part A and Part B services. (See Section 1.2 for details.)	From in-network and out-of-network providers combined: \$3,000	From in-network and out-of-network providers combined: \$3,000
Doctor office visits	<p>Primary care visits: You pay 4% coinsurance per visit (in-network).</p> <p>You pay 4% coinsurance per visit (out-of-network).</p> <p>Specialist visits: You pay 4% coinsurance per visit (in-network).</p> <p>You pay 4% coinsurance per visit (out-of-network).</p>	<p>Primary care visits: You pay 4% coinsurance per visit (in-network).</p> <p>You pay 4% coinsurance per visit (out-of-network).</p> <p>Specialist visits: You pay 4% coinsurance per visit (in-network).</p> <p>You pay 4% coinsurance per visit (out-of-network).</p>
Inpatient hospital stays Includes inpatient acute, inpatient rehabilitation, long-term care hospitals, and other types of inpatient hospital services. Inpatient hospital care starts the day you are formally admitted to the hospital with a doctor's order. The	<p>You pay 4% of the total cost for each Medicare-covered hospital stay for unlimited days (in-network).</p> <p>You pay 4% of the total cost for each Medicare-</p>	<p>You pay 4% of the total cost for each Medicare-covered hospital stay for unlimited days (in-network).</p> <p>You pay 4% of the total cost for each Medicare-</p>



Questions? Call our Customer Service Department at **1-844-488-3956**, TTY 711, 8 a.m. - 8 p.m. local time, Monday - Friday

Cost	2021 (this plan year)	2022 (next plan year)
day before you are discharged is your last inpatient day.	covered hospital stay for unlimited days (out-of-network).	covered hospital stay for unlimited days (out-of-network).



Questions? Call our Customer Service Department at **1-844-488-3956**, TTY **711**, 8 a.m. - 8 p.m. local time, Monday - Friday

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Section 1 Changes to Benefits and Costs for Next Plan Year

Section 1.1 Changes to the Monthly Premium

Your plan sponsor will notify you of any changes to your plan premium amount, if applicable.

Section 1.2 Changes to Your Maximum Out-of-Pocket Amounts

To protect you, Medicare requires all health plans to limit how much you pay “out-of-pocket” during the year. These limits are called the “maximum out-of-pocket amounts.” Once you reach this amount, you generally pay nothing for covered Part A and Part B services for the rest of the plan year.

Cost	2021 (this plan year)	2022 (next plan year)
Combined maximum out-of-pocket amount Your costs for covered medical services (such as copays and deductibles) from in-network and out-of-network providers count toward your combined maximum out-of-pocket amount.	\$3,000 Once you have paid \$3,000 out-of-pocket for covered services, you will pay nothing for your covered services from in-network or out-of-network providers for the rest of the plan year.	\$3,000 Once you have paid \$3,000 out-of-pocket for covered services, you will pay nothing for your covered services from in-network or out-of-network providers for the rest of the plan year.

Section 1.3 Changes to the Provider Network

There are changes to our network of providers for the next plan year. An updated Provider Directory is located on our website at www.UHCRetiree.com/uky. You may also call Customer Service for updated provider information or to ask us to mail you a Provider Directory. **Please review the 2022 Provider Directory to see if your providers (primary care provider, specialists, hospitals, etc.) are in our network.** Because you are a member of the UnitedHealthcare Group Medicare Advantage (PPO) plan, **you can see any provider (network or out-of-network) at the same cost share, as long as they accept the plan and have not opted out of or been excluded or precluded from the Medicare Program.**

It is important that you know that we may make changes to our network of hospitals, doctors, and specialists (providers) that are part of your plan during the plan year. There are a number of reasons why your network provider might leave your plan. If this happens, you may continue to see the provider as long as he/she continues to participate in Medicare and the care you receive is a

covered service and is medically necessary. Even though our network of providers may change during the plan year, we must furnish you with uninterrupted access to qualified doctors and specialists. When possible we will provide you with at least 30 days' notice that your network provider is leaving our plan. You may call Customer Service at the number listed on the Cover of this booklet if you have questions.

Section 1.4 Changes to Benefits and Costs for Medical Services

We are changing our coverage for certain medical services next year. The information below describes these changes. For details about the coverage and costs for these services, see Chapter 4, **Medical Benefits Chart (what is covered and what you pay)**, in your **2022 Evidence of Coverage**. A copy of the Evidence of Coverage is located on our website at www.UHCRetiree.com/uky. You may also call Customer Service to ask us to mail you an Evidence of Coverage.

Opioid treatment program services

Members of our plan with opioid use disorder (OUD) can receive coverage of services to treat OUD through an Opioid Treatment Program (OTP) which includes the following services:

- U.S. Food and Drug Administration (FDA)-approved opioid agonist and antagonist medication-assisted treatment (MAT) medications.
- Dispensing and administration of MAT medications (if applicable)
- Substance use counseling
- Individual and group therapy
- Toxicology testing
- Intake activities
- Periodic assessments

Cost	2021 (this plan year)	2022 (next plan year)
Plan Year Benefits	The plan's coverage begins January 1, 2021.	The plan's coverage begins January 1, 2022. Please see your Evidence of Coverage for information on Benefits and Costs for Medical Services.
Diabetes Self-Management Training, Diabetic Services and Supplies - Diabetes Monitoring Supplies	You pay a \$0 copayment (in-network).	You pay a \$0 copayment (in-network).

Cost	2021 (this plan year)	2022 (next plan year)
	<p>We only cover Accu-Chek® and OneTouch® brands.</p> <p>Covered glucose monitors include: OneTouch Verio Flex®, OneTouch Verio Reflect®, Accu-Chek® Guide Me, and Accu-Chek® Guide.</p> <p>Test strips: OneTouch Verio®, OneTouch Ultra®, Accu-Chek® Guide, Accu-Chek® Aviva Plus, and Accu-Chek® SmartView.</p> <p>Other brands are not covered by your plan. If you use a brand of supplies that is not covered by your plan, you should speak with your doctor to get a new prescription for a covered brand.</p>	<p>We only cover Accu-Chek® and OneTouch® brands.</p> <p>Covered glucose monitors include: OneTouch Verio Flex®, OneTouch Verio Reflect®, OneTouch® Verio, OneTouch® Ultra 2, Accu-Chek® Guide Me, and Accu-Chek® Guide.</p> <p>Test strips: OneTouch Verio®, OneTouch Ultra®, Accu-Chek® Guide, Accu-Chek® Aviva Plus, and Accu-Chek® SmartView.</p> <p>Other brands are not covered by your plan. If you use a brand of supplies that is not covered by your plan, you should speak with your doctor to get a new prescription for a covered brand.</p>
<p>Diabetes Self-Management Training, Diabetic Services and Supplies - Diabetes Monitoring Supplies</p>	<p>You pay a \$0 copayment (out-of-network).</p> <p>We only cover Accu-Chek® and OneTouch® brands.</p> <p>Covered glucose monitors include: OneTouch Verio Flex®, OneTouch Verio Reflect®, Accu-Chek® Guide Me, and Accu-Chek® Guide.</p>	<p>You pay a \$0 copayment (out-of-network).</p> <p>We only cover Accu-Chek® and OneTouch® brands.</p> <p>Covered glucose monitors include: OneTouch Verio Flex®, OneTouch Verio Reflect®, OneTouch® Verio, OneTouch® Ultra 2, Accu-</p>

Cost	2021 (this plan year)	2022 (next plan year)
	<p>Test strips: OneTouch Verio®, OneTouch Ultra®, Accu-Chek® Guide, Accu-Chek® Aviva Plus, and Accu-Chek® SmartView.</p> <p>Other brands are not covered by your plan. If you use a brand of supplies that is not covered by your plan, you should speak with your doctor to get a new prescription for a covered brand.</p>	<p>Chek® Guide Me, and Accu-Chek® Guide.</p> <p>Test strips: OneTouch Verio®, OneTouch Ultra®, Accu-Chek® Guide, Accu-Chek® Aviva Plus, and Accu-Chek® SmartView.</p> <p>Other brands are not covered by your plan. If you use a brand of supplies that is not covered by your plan, you should speak with your doctor to get a new prescription for a covered brand.</p>

Cost	2021 (this plan year)	2022 (next plan year)
<p>Fitness Benefit</p>	<p>You have access to SilverSneakers®, a Medicare fitness program. SilverSneakers includes a \$0 membership fee for a standard, monthly membership at a participating fitness center.</p> <p>To get your SilverSneakers ID number or learn more about this benefit, visit SilverSneakers.com or call 1-888-423-4632, TTY 711, 7 a.m. to 7 p.m. CT, Monday through Friday.</p>	<p>You will have access to Renew Active® by UnitedHealthcare at no additional cost. Renew Active is the gold standard in Medicare fitness programs for body and mind. It includes a gym membership at a fitness location you select from our nationwide network.</p> <p>To learn more about Renew Active today visit UHCRenewActive.com. Once you become a member you will need a confirmation code. Sign in to your plan website, go to Health & Wellness and look for Renew Active to obtain your code or call the number on the back of your UnitedHealthcare member ID card.</p>
<p>UnitedHealthcare Healthy at Home post-discharge program</p>	<p>Not Covered.</p>	<p>\$0 copayment; With UnitedHealthcare Healthy at Home you are eligible for the following benefits up to 30 days following all inpatient and skilled nursing facility discharges:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 28 home-delivered meals through Mom's Meals when referred by a UnitedHealthcare Advocate

Cost	2021 (this plan year)	2022 (next plan year)
		<ul style="list-style-type: none"> <li data-bbox="1167 405 1486 657">☐ 12 one-way rides to medically related appointments and to the pharmacy when referred by a UnitedHealthcare Advocate <li data-bbox="1167 672 1486 1146">☐ 6 hours of in-home personal care provided through a CareLinx professional caregiver to perform tasks such as bathing, light housekeeping, medication reminders, and more. A referral is not required. <p data-bbox="1139 1164 1486 1304">*A new referral is required every discharge to access your meal and transportation benefit</p> <p data-bbox="1139 1347 1486 1487">Contact the number on the back of your ID card to access your meal and transportation benefits.</p> <p data-bbox="1139 1509 1486 1692">Contact ModivCare for additional details and to schedule your trip once you have been referred into the program:</p> <p data-bbox="1139 1703 1486 1918">1-833-219-1182, TTY 1-844-488-9724, 8 a.m. - 5 p.m. Local Time, Monday - Friday, or by visiting www.modivcare.com/BookNow</p>

Cost	2021 (this plan year)	2022 (next plan year)
		<p>Contact Mom's Meals for additional details and to place your meal orders if you have been referred into the program.</p> <p>1-866-204-6111, 7 a.m. - 6 p.m. CT, Monday – Friday</p> <p>To access your in-home personal care benefit, contact CareLinx at 1-844-383-0411 8 a.m. - 7 p.m. CT, Monday - Friday & 10 a.m. - 6 p.m. CT, Saturday and Sunday, or by visiting www.carelinx.com/UHC-retiree-post-discharge. A referral is not required.</p>
<p>Opioid treatment program services</p>	<p>You pay a \$0 copayment for the following Medicare-covered services from programs that treat opioid use disorder (OUD):</p> <ul style="list-style-type: none"> <input type="checkbox"/> FDA-approved medications to treat OUD, and the dispensing and administration of these medications <input type="checkbox"/> Substance use counseling <input type="checkbox"/> Individual and group therapy <input type="checkbox"/> Drug tests 	<p>You pay a \$0 copayment for the following Medicare-covered services from programs that treat opioid use disorder (OUD):</p> <ul style="list-style-type: none"> <input type="checkbox"/> FDA-approved medications to treat OUD, and the dispensing and administration of these medications <input type="checkbox"/> Substance use counseling <input type="checkbox"/> Individual and group therapy <input type="checkbox"/> Drug tests <input type="checkbox"/> Intake activities <input type="checkbox"/> Assessments to review your progress and treatment plan

Cost	2021 (this plan year)	2022 (next plan year)
<p>Physician/Practitioner Services, Medicare-covered Remote Patient Monitoring Services</p>	<p>Your cost share depends on the service you receive. You may pay the amount for non-radiological diagnostic services, primary care services, or specialist physician services.</p>	<p>You pay 4% of the total cost (in-network).</p> <p>You pay 4% of the total cost (out-of-network).</p>
<p>Rally Coach Programs</p>	<p>Not Covered.</p>	<p>\$0 copayment; Start living a healthier and happier life with help from the Rally Coach programs:</p> <p>Real Appeal Weight Loss and Real Appeal Diabetes Prevention- online weight loss programs, Wellness Coaching- online and live coaching support program on topics that promote whole person health and the Quit for Life Tobacco cessation program.</p> <p>Get started today at rallyhealth.com/retiree or by calling one of the following:</p> <p>For Real Appeal call 1-844-924-7325, TTY 711, Monday - Friday, 6 a.m.- 10 p.m. CT.</p> <p>For Rally Wellness Coaching call 1-800-478-1057, TTY 711, 7 a.m. - 10 p.m. CT, Monday - Thursday, 7 a.m. - 7 p.m. CT, Fridays,</p>

Cost	2021 (this plan year)	2022 (next plan year)
		8 a.m. - 4:30 p.m. CT Saturdays. For Quit for Life call 1-866-QUIT-4-LIFE, TTY 711, 24 hours a day 7 days a week.
Urgently Needed Services - Worldwide	You pay a \$65 copayment for each visit in an Urgent Care Center.	You pay a \$45 copayment for each visit in an Urgent Care Center.
Urgently Needed Services		You pay a \$45 copayment for each visit in an Urgent Care Center.
Virtual Doctor Visits	You pay \$0 copayment using AmWell, Doctor on Demand and Teladoc. You pay 4% of the total cost (in and out-of-network)	You pay \$0 copayment (in and out-of-network)

Section 2 Deciding Which Plan to Choose

Section 2.1 If You Want to Stay in UnitedHealthcare® Group Medicare Advantage (PPO)

To stay in our plan you don’t need to do anything. If you do not sign up for a different plan or change to Original Medicare, you will automatically be enrolled in our UnitedHealthcare® Group Medicare Advantage (PPO).

Section 2.2 If You Want to Change Plans

You should consult with your plan sponsor regarding the availability of other “employer-sponsored” coverage before you enroll in a plan not offered by your plan sponsor, or before ending your membership in our plan outside of your plan sponsor’s open enrollment period. It is important to understand your plan sponsor’s eligibility policies, and the possible impact to your retiree health care coverage options and other retirement benefits before submitting a request to enroll in a plan not offered by your plan sponsor, or a request to end your membership in our plan.

To learn more about Original Medicare and the different types of Medicare plans, read **Medicare & You 2022 handbook**, call your State Health Insurance Assistance Program (see Section 4), or call Medicare (see Section 5.2).

Section 3 Deadline for Changing Plans

Because you are enrolled in our plan through your plan sponsor, you are only allowed to make plan changes at times designated by your plan sponsor.

Important Note: You may join or leave a plan only at certain times designated by your plan sponsor. If you choose to enroll in a Medicare health plan or Medicare prescription drug plan that is not offered by your plan sponsor, you may lose the option to enroll in a plan offered by your plan sponsor in the future. You could also lose coverage for other retirement benefits you may currently have through your plan sponsor. Once enrolled in our plan, if you choose to end your membership outside of your plan sponsor's open enrollment period, re-enrollment in any plan your plan sponsor offers may not be permitted, or you may have to wait until their next open enrollment period.

You should consult with your plan sponsor regarding the availability of other “employer-sponsored” coverage before you enroll in a plan not offered by your plan sponsor, or before ending your membership in our plan outside of your plan sponsor’s open enrollment period. It is important to understand your plan sponsor’s eligibility policies, and the possible impact to your retiree health care coverage options and other retirement benefits before submitting a request to enroll in a plan not offered by your plan sponsor, or a request to end your membership in our plan.

Section 4 Programs That Offer Free Counseling about Medicare

The State Health Insurance Assistance Program (SHIP) is a government program with trained counselors in every state.

State Health Insurance Assistance Program is independent (not connected with any insurance company or health plan). It is a state program that gets money from the Federal government to give **free** local health insurance counseling to people with Medicare. State Health Insurance Assistance Program counselors can help you with your Medicare questions or problems. They can help you understand your Medicare plan choices and answer questions about switching plans. You can find your SHIP number and address in Chapter 2, Section 3 of the **Evidence of Coverage**.

Section 5 Questions?

Section 5.1 Getting Help from UnitedHealthcare® Group Medicare Advantage (PPO)

Questions? We're here to help. Please call Customer Service at 1-844-488-3956. (TTY only, call 711.) We are available for phone calls 8 a.m. - 8 p.m. local time, Monday - Friday. Calls to these numbers are free.

Read your 2022 Evidence of Coverage (it has details about next plan year's benefits and costs)

This **Annual Notice of Changes** gives you a summary of changes in your benefits and costs for 2022. For details, look in the 2022 **Evidence of Coverage** for UnitedHealthcare® Group Medicare Advantage (PPO). The **Evidence of Coverage** is the legal, detailed description of your plan benefits. It explains your rights and the rules you need to follow to get covered services. A copy of the Evidence of Coverage is located on our website at www.UHCRetiree.com/uky. You may also call Customer Service to ask us to mail you an Evidence of Coverage.

Visit our Website

You can also visit our website at www.UHCRetiree.com/uky. As a reminder, our website has the most up-to-date information about our provider network (Provider Directory).

Section 5.2 Getting Help from Medicare

To get information directly from Medicare:

Call 1-800-MEDICARE (1-800-633-4227)

You can call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Visit the Medicare Website

You can visit the Medicare website (www.medicare.gov). It has information about cost, coverage, and quality ratings to help you compare Medicare health plans. You can find information about plans available in your area by using the Medicare Plan Finder on the Medicare website. (To view the information about plans, go to www.medicare.gov/plan-compare).

Read Medicare & You 2022

You can read the **Medicare & You 2022** Handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. If you don't have a copy of this booklet,

you can get it at the Medicare website (www.medicare.gov) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

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PO Box 31385
Salt Lake City, UT 84131

**2022 Annual notice
of changes enclosed.**

Time-sensitive material
Important plan information

13803ANOC2022_002



PO Box 31385
Salt Lake City, UT 84131

**2022 Annual
notice of
changes
enclosed.**

Time-sensitive material

Important plan
information

13803ANOC2022_002