

# Make the most of your health plan

# Getting Started Guide Essential Plan 1 Standard

For our Native American/ Alaska Native communities

### Look inside for:

- Getting help
- Benefits
- Extras
- Getting care



United Healthcare Community Plan



Thank you for joining the Essential Plan offered by UnitedHealthcare. We want to be sure you have all the information you need to make this the best health care experience possible. This guide will walk you through the important steps for getting started.

#### Do you have your member ID card?

You will need this card when you get health care services.



This is your UnitedHealthcare Community Plan member ID card. If you have not received this card, please call us at **1-866-265-1893**, TTY **711**, Monday–Friday, 8 a.m.–6 p.m.



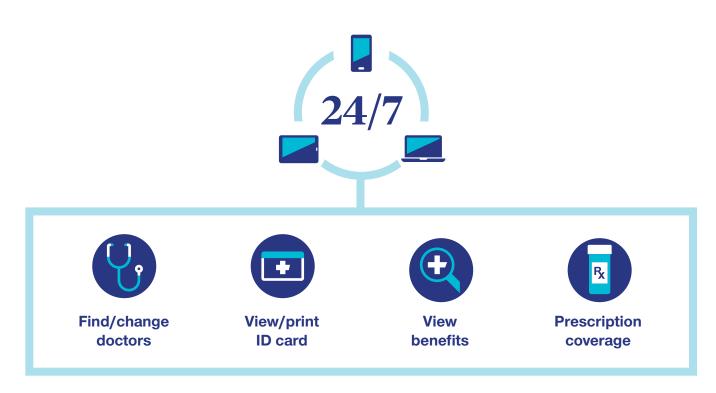
# Watch our Getting Started videos

They're less than 2 minutes long, and full of helpful information. Go to **uhcwelcomeNY.com.** 

## Get connected

We make it easy to get the information you want and need.

- Register at myuhc.com/CommunityPlan. This is your secure member website.
   See your covered benefits, search for providers, view your subscriber contract and much more.
- **Download the UnitedHealthcare mobile app.** It's designed for people on the go, and includes many of the same features as the member website. Find it at the App Store or Google Play.
- Follow us on Facebook at facebook.com/UnitedHealthcareCommunityPlan. Keep up on local events and health plan news.



**Need more help? Call 1-866-265-1893,** TTY **711,** 8 a.m.-6 p.m. EST, Monday-Friday.

Visit **UHCCommunityPlan.com/NY** to view/print a copy of the Subscriber Contract.









# **Your benefits**

There are no costs to you for covered benefits and services. A general overview of your benefits is provided below. For full details, please refer to the Schedule of Benefits section of your **subscriber contract** or visit **myuhc.com/CommunityPlan**.

Cost-sharing	Essential Plan 1 for our Native American communities	
Deductible • Individual	\$0	
Out-of-pocket limit	\$0	
Individual		
Deductibles, coinsurance and copayments that make up		
your out-of-pocket limit accumulate on a plan year basis		
Office visits		
Primary care office visits (or home visits)	\$0	
Specialist office visits (or home visits)	\$0	
Preventive care		
Adult annual physical examinations*	Covered in full	
Adult immunizations*	Covered in full	
Routine gynecological services/well woman exams*	Covered in full	
Mammograms, screening and diagnostic imaging	Covered in full	
for the detection of breast cancer		
Sterilization procedures for women*	Covered in full	
Vasectomy	See surgical services section	
Bone density testing*	Covered in full	
Screening for prostate cancer		
<ul> <li>Performed in PCP office</li> </ul>	\$0	
<ul> <li>Performed in specialist office</li> </ul>	\$0	
All other preventive services required by USPSTF and HRSA	Covered in full	
*See benefit description in contract for more details		
Emergency care		
Pre-hospital emergency medical services	\$0	
(ambulance services)		
Non-emergency ambulance services	\$0	
Emergency department	\$0	
Copayment/coinsurance waived if hospital admission		

Cost-sharing	Essential Plan 1 for our Native American communities		
Allergy testing and treatment			
Performed in a PCP office	\$0		
Performed in a specialist office	\$0		
Laboratory procedures			
Performed in a PCP office	\$0		
Performed in a freestanding laboratory facility or specialist office	\$0		
Performed as outpatient hospital services	\$0		
Maternity and newborn care			
Prenatal care	\$0		
Inpatient hospital services and birthing center	\$0		
Physician and midwife services for delivery	\$0		
Breast pump	\$0		
Postnatal care	Included in physician and midwife services for delivery cost-sharing		
Mental health and substance use disorder services			
Inpatient mental health care (for a continuous confinement when in a hospital)	\$0		
Outpatient mental health care (including partial hospitalization and intensive outpatient program services)	\$0		
Inpatient substance use services (for a continuous confinement when in a hospital)	\$0		
Outpatient substance use services	\$0		
Wellness benefits Gym reimbursement			
Scan to download the form	Up to \$400 per plan year, \$200 per 6-month period after attending 50 visits in a 6-month period		



#### See your subscriber contract

Some services may require preauthorization. You'll find more details about your covered benefits in your subscriber contract. You can always view it online at **myuhc.com/CommunityPlan**.







## **Extras from UnitedHealthcare**

Be sure to make use of all the extras you get as a UnitedHealthcare member.

# Mental health/chemical dependence (including alcohol and substance use)

We have trained professionals who are experienced in understanding substance use disorder and able to help you get treatment or give you information that will help you make decisions about your health care. "Addiction can happen to anyone, any family, at any time," according to the New York State Office of Alcoholism and Substance Abuse Services (OASAS). UnitedHealthcare is here to assist you in all your health care needs. You can call Member Services for help at 1-866-265-1893, TTY 711, Monday-Friday, 8 a.m.-6 p.m.

#### **Prescriptions**

You are covered for prescription drugs, with some copays. See your subscriber contract for copay information. When you have a prescription filled, be sure to check that:

- It's included on the Preferred Drug List (PDL)
- It's written by a network provider
- It's filled at a network pharmacy
- You show your member ID card when you have it filled

Cost-sharing	Essential Plan 1 for our Native American communities	
Prescription drugs Retail pharmacy 30-day supply		
Tier 1	\$0	
Tier 2	\$0	
Tier 3	\$0	
Mail order pharmacy up to a 90-day supply		
Tier 1	\$0	
Tier 2	\$0	
Tier 3	\$0	
Enteral formulas		
Tier 1	\$0	
Tier 2	\$0	
Tier 3	\$0	

# Getting care



#### Your primary care provider

We call the main doctor you see a primary care provider, or PCP. When you see the same PCP over time, it's easier to develop a relationship with them. Each family member can have his or her own PCP, or you may all choose to see the same person. Your PCP is available to assist you 24 hours a day, 7 days a week for:

- Routine care, including yearly checkups
- Coordinating your care with a specialist
- Treatment for colds and flu
- Referrals for non-emergency services
- Information for accessing medical services
- Managing medical problems
- Other health concerns



#### Change your PCP at any time

It's important to have a PCP you like and trust. You can change your PCP at any time simply by calling us. If you like, we can recommend someone for you.



#### Schedule a wellness exam soon

A yearly wellness exam with your PCP is important for good health. These visits are fully covered. Schedule your visit within the first 30 days of joining your health plan.





#### Need help finding a PCP?

Call us at **1-866-265-1893**, TTY **711**, Monday–Friday, 8 a.m.–6 p.m.









# Guide to getting care

#### Your primary care provider (PCP)

This is the person you should see for most of your care. This includes checkups, treatments, vaccinations, minor injuries and other health concerns.

#### **Urgent care clinics**

Network urgent care clinics are a good option if your primary care provider is not available, and you have an illness or injury that needs quick attention. This could include sprains or strains, minor cuts needing stitches, sore throat, minor burns, rash, fever or infection of any kind.

#### **Emergency care**

This level of care is for chest pain, bleeding that won't stop, trouble breathing, severe allergic rashes or the feeling that you might hurt someone or yourself. If it's an emergency, call 911 or go to the nearest emergency room.

#### We speak your language

If you speak a language other than English, we can provide translated printed materials. Or we can provide a telephonic or video interpreter to help translate materials sent to you. You can also get materials in other formats, such as Braille, large print or audio CD. Call Member Services at **1-866-265-1893**, TTY **711**, Monday–Friday, 8 a.m.–6 p.m.

#### **Suicide prevention**

National Suicide Prevention Lifeline (NSPL) – **988** 

To access **988** via chat, visit **988lifeline.org/chat** 





UnitedHealthcare 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 or large print. Or, you can ask for an interpreter. To ask for help, please call Member Services at **1-866-265-1893**, TTY **711**, 8 a.m. – 6 p.m., Monday – Friday.

ATTENTION: Language assistance services, free of charge, are available to you. Call **1-866-265-1893**, TTY **711**.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-866-265-1893**, TTY **711**.

注意: 您可以免費獲得語言援助服務。請致電 1-866-265-1893, TTY 711

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-866-265-1893** (телетайп: TTY **711**).