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Greetings from UMR!

Welcome to the National Seating & Mobility medical benefit guide! The purpose of this booklet is simple: To help you get the most out of your health care plan.

As your benefits administrator, we'll walk you through the plan to give you a better understanding of what it all means. Of course our main goal is to provide you and your family with timely, accurate and caring service.

It starts here, but you also have a whole team of UMR customer service and benefits experts behind you whenever a need or question arises.

To help you reach us, we've included this list of key contacts and information.

Stick it on your refrigerator or bulletin board if you wish, or place it in your wallet or purse, so it's there when you need it. You can also find this same information on your UMR ID card.

We're available for you:

24 hours a day, 7 days a week



A handy contact card for your fridge or wallet

My National Seating & Mobility benefits information

- UMR Customer Service..... 1-800-826-9781
- Need ID Cards 1-800-826-9781
- UMR Care Management..... 1-866-494-4502
- 24-Hour NurseLineSM 1-877-950-5083
- Enroll in Maternity Management..... 1-888-438-8105
- EPIC Hearing..... 1-866-956-5400
- Teladoc..... 1-800-Teladoc

Your Preferred Provider Network
UnitedHealthcare Choice Plus

Find it online at www.umar.com

Write us UMR
PO Box 30541
Salt Lake City, UT 84130-0541





Working with UMR

UMR provides benefits administration services to you and your employer.

Your employer has hired us to assist in managing your benefits plan. For example, we help new employees sign up to receive health benefits. We also process your health claims, making sure they are handled quickly and accurately.

UMR even has medical professionals on staff. They help coordinate your care if you are in the hospital or are dealing with a health condition.

Filing a claim

A claim is a request that your benefits plan pays for a health service. You now have an easier way to file claims with UMR. In fact, we call it EZ Claim.

We don't need any claim forms, except for prescription drug claims.

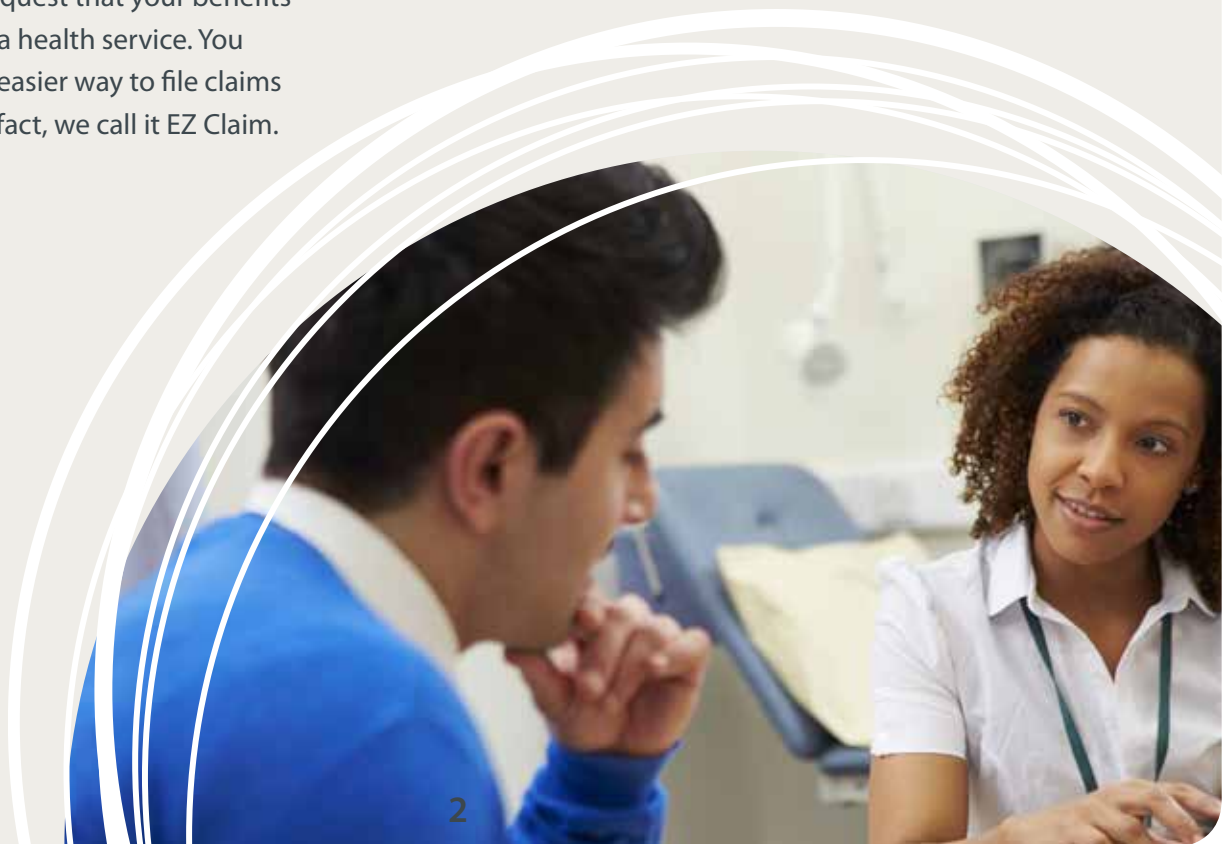
With EZ claim, your doctor submits your bills directly for processing. Your ID card has instructions on the reverse side for your doctor's office.

To file a claim, simply show your identification (ID) card at your doctor's office. If you're planning or scheduling a treatment or procedure, you can also write or call us beforehand to find out if it will be covered.

– more –

How do I contact UMR?

Simply call the toll-free number located on the back of your UMR ID card.



You will receive an explanation of benefits (EOB) form after your claim is processed. It will tell you:

- How much of your cost is covered
- Where checks will be sent
- What amount you are responsible for paying, if anything

Claim appeals

You may sometimes wish to have UMR review a claim decision. This is called an appeal. Appeals must be made within 180 days after you receive written notice of a denied claim. To file an appeal, send us a written request to the address on your ID card to have a claim reviewed.

After you have filed an appeal, UMR will notify you in writing of the final decision within the time limit listed in your employee benefit booklet.

Member services

UMR has assigned people to help you answer benefit and claim questions. They are trained on your specific benefit plan.

If you have any questions, you can reach a UMR Customer First Representative by calling the toll-free number on the back of your ID card.



Questions?

**Talk to your
UMR Customer First
Representative for
answers.**



Learn the language of health care

Let's face it. Understanding health and benefits terms is like learning a foreign language for most of us. Knowing the difference between co-insurance and co-payment can be confusing. And deciphering an EOB from COB shouldn't require a PhD.

Fortunately, you don't need a foreign language professor or CIA code-breaker to understand all of these terms. That's because our own UMR team of language experts has already defined them for you, along with a few others.

What is a deductible?

Definition: The amount you have to pay before your plan pays for specified services. Deductibles are usually an annual set amount. A deductible may apply to all services or just a portion of your benefits. It depends on your benefits plan.

What is a co-insurance?

Definition: A set percentage of costs that are covered by your plan after your deductible has been paid. Your plan pays a higher percentage. You pay a lower percentage.

Tip...think percentage

What is a co-payment?

Definition: A small set fee. It is paid each time you have an office visit, outpatient service or prescription refill. The fee is determined by your health plan. Co-payments don't vary with the cost of service.

Tip...think set fee

What is an out-of-pocket?

Definition: The amount you pay out of your pocket for particular health care services during a particular period of time. An out-of-pocket maximum limits the amount you have to pay during a particular period of time.

– more –



Still confused?

Go to [justplainclear.com](https://www.justplainclear.com) for a searchable glossary of health care terms.

What is coordination of benefits (COB)?

Definition: Many families are covered by more than one health plan. The coordination of benefits (COB) process determines which plan pays first. It also determines if the second plan will pay any remaining charges not covered by the first plan. The process makes sure your doctor doesn't get paid twice for the same service.

What is an explanation of benefits (EOB)?

Definition: An EOB is simply the statement explaining your benefits activity. It includes the services provided, the amount billed and the amount paid, if any. You should review your EOBs carefully. Call the customer service number on your ID card or visit www.umar.com if you have any questions about your EOB.





You deserve an explanation

An explanation of benefits (EOB) is not a bill. It simply tells you everything you might want to know about your claims.

Among the more important things included on your EOB are:

- The service you received
- How much the service cost
- How much you may owe, if anything
- A notes section that explains the meaning of any special codes

- A section that shows how close you are to meeting any plan maximums

There is a second page that includes contact numbers if you have questions. It also tells you how to file an appeal if you want a claim decision reviewed.

Page 1

PO Box 30541 Salt Lake City, UT 84130-0541
1-800-826-9781
www.umar.com

Employee	Joe Patient
Employee Address	1234 W SUNSHINE BLVD STE 100A BEST CITY US 12345-9876
Member ID	999999999
Patient	Joe Patient
Notice Date	02-15-19
Employer Name	Customer Inc.
Group Number	76-999999

EXPLANATION OF BENEFITS NOTICE – THIS IS NOT A BILL

Patient Account: 1234567890 Claim Control Number: 999999999

Provider: Physician, Joe, MD

Service Description	Dates of Service From: To:	Amount Billed	Amount Not Payable	See Note Section	Less Deductible	Co-Pay Amount	Allowable Amount	%	Plan Benefit Amount	Amount Paid	Provider May Bill You
Emergency Care	02-01-19 02-01-19	\$500.00	\$100.00	908	\$50.00	\$25.00	\$325.00	80	\$260.00	\$260.00	\$140.00
Totals		\$500.00			\$50.00	\$25.00	\$325.00		\$260.00	\$260.00	\$140.00

Note Section
908 Provider negotiated discount. You are not responsible for this amount.

Payment To: XYZ Clinic Payment Date: 02-15-19 Payment Amount: \$260.00

Benefit	Benefit Level	Applied To Date
01-01-19	\$200 Out Net Ind Cal Yr Deductible	\$200.00 Met
01-01-19	\$400 Out Net Fam Cal Yr Deductible	\$300.00
01-01-19	\$400 In Net Ind Cal Yr Deductible	\$205.00
01-01-19	\$800 In Net Fam Cal Yr Deductible	\$305.00

The type of service you received

How much the service cost

How much your benefits plan paid

How much you may owe (if anything)

Your code definition

Your plan maximums and how close you are to meeting them

10 ways to control health care costs

Everybody can play a role in controlling the rising cost of health care. In fact, there are many things you can do to reduce how much you spend on health care now and in the future.

1 See preferred doctors

Most health plans let you see any doctor you want. But you can save a bundle by seeing doctors that are part of your plan's preferred network of health care providers. Going to a preferred, in-network doctor usually saves you 20 percent to 30 percent or even more off your bill.

2 Go generic

Generic drugs are the same as other medications, just without the brand name. The biggest difference is the price. Generics usually cost you 30 percent to 70 percent less than brand names.

3 Practice prevention

Preventive care includes things like physical exams, vaccines, blood tests and cancer screenings. These services can prevent you from getting sick or detect a health issue before it gets serious. Check your health plan to see if preventive care is covered in full or at discounted rates.

4 Get online

It makes sense to find out everything you can to make informed, cost-saving health care choices. That's why we offer a number of web tools to help you review your health care options, pharmacy benefits and health coverage estimates using the Internet. Visit our website at umr.com.

5 Choose the right care

There is a time and place for everything. A trip to the emergency room may be needed if you are seriously injured or ill. Consider a cheaper option, like a walk-in clinic or urgent care, if you have a minor illness or issue, such as an ear infection. It may save you time as well as money.

– more –



Fast fact...

Generic drugs usually cost you 30 percent to 70 percent less than brand names.

6 Think long-term

Some people go to the doctor for minor reasons once they meet their yearly deductible. While that may not have an instant impact on health care costs, it is a major factor in driving up everyone's overall costs of care.

7 Eat right

A balanced diet can save you money. It keeps you healthier in the short-term and lessens the chances of developing more serious and costly medical conditions in the future.

8 Exercise

Just 30 minutes of walking or other regular exercise each day helps manage weight, stress and possibly your pocketbook. Exercise helps control and prevent high blood pressure and cholesterol, two of the major risk factors for heart disease.

9 Take care of yourself

The harmful effects of unhealthy habits, such as tobacco use and alcohol abuse, are well known in regard to health issues like cancer and heart disease. If you use tobacco products, seek help to try quitting. Practice moderation if you drink alcohol. Get help if stress or depression are an issue. You will feel better and also save a few dollars.

10 Review your EOB

Billing mistakes sometimes happen. Review your explanation of benefits (EOB) statement to make sure you are properly billed. Contact your doctor or other care provider if you suspect an incorrect charge.



Remember...

Review your explanation of benefits (EOB) statement to make sure you are properly billed.





A valuable connection

Congratulations! Your employer has given you access to a UnitedHealthcare Choice Plus preferred provider organization (PPO) network through UMR. Here are a few frequently asked questions to help you understand what your PPO network is all about and the benefits of using it.

What is a preferred provider?

Any doctor, hospital or other medical facility that is part of your UnitedHealthcare Choice Plus Network. They are sometimes referred to as in-network providers.

Why is a PPO important?

You will pay less for medical services if you see a preferred provider that is part of the UnitedHealthcare Choice Plus Network. Plus, there are usually no claim forms for you to worry about when you go to a PPO doctor or hospital.

Can I get medical services from a doctor or hospital that is not a part of my PPO network?

Yes, but you will pay more for their services and may need to submit a claim form.

How much will I save if I get services from a preferred provider?

You can compare cost savings by looking at your schedule of benefits, which is found in your summary plan description.

What if my normal doctor is not part of my PPO network?

We encourage you to have your doctor apply to join. Here's how:

- Go to **umr.com**
- Select **Find a provider**
- Click **Medical**
- Scroll down to **UnitedHealthcare Choice Plus Network** list
- The next page you will see has a link you can click to view and print application instructions for your doctor

– more –



What is a PPO network?

A group of doctors and hospitals that have agreed to reduce what they charge for their services.



Get the most from your benefit plan...

Use participating UnitedHealthcare Choice Plus Network health care providers whenever possible.

Where can I get information about my PPO network?

Your member ID card contains information about your plan's PPO.

How often can I see a preferred provider?

As often as needed.

How do I find a network doctor or hospital?

You can call the toll-free phone number on the back of your UMR ID card or go to umr.com and click **Find a provider**.

How do I make sure I get my PPO discount?

Just show your UMR ID card when you visit your UnitedHealthcare Choice Plus PPO Network doctor or medical facility. It includes all the important information and phone numbers that are needed.



Find what you need at umr.com

Getting your benefits information is easy using umr.com. You'll be able to find everything you're looking for in no time!

Select **Login/ Register** to enter your username and password, or to register for a new account.

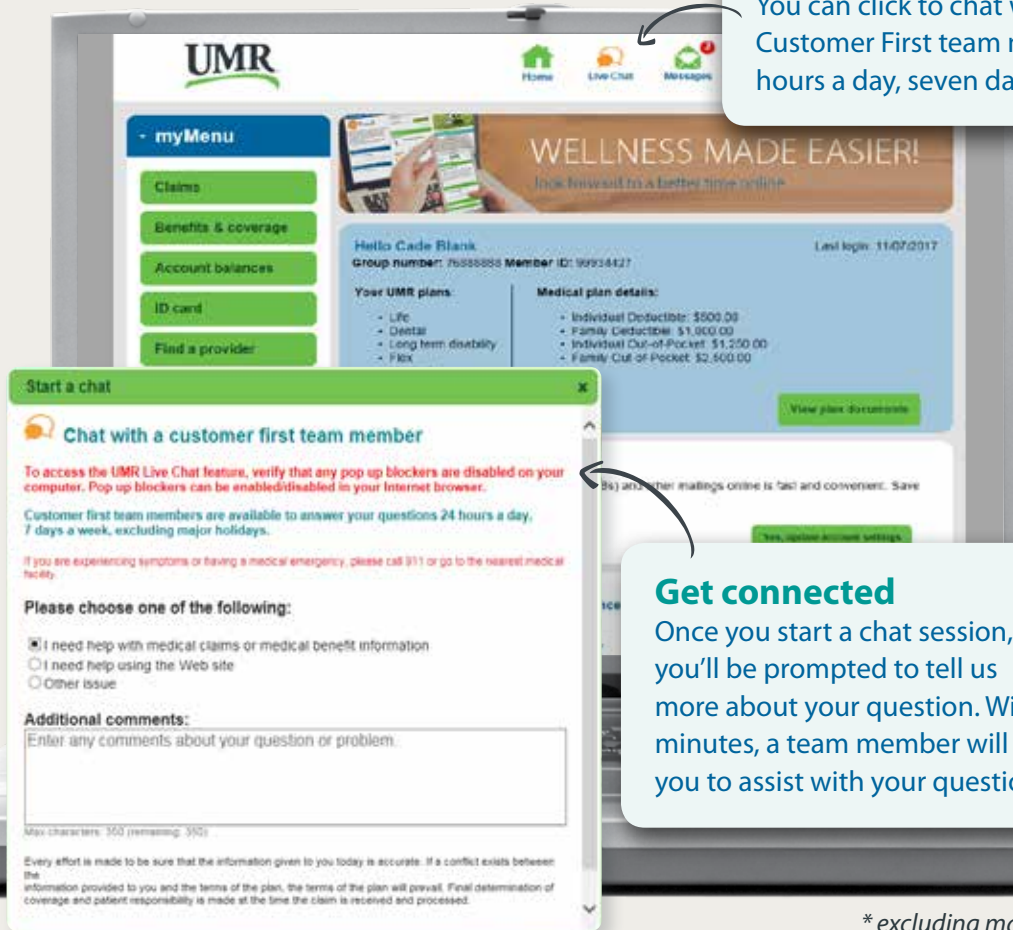


Your live connection to UMR customer service

Our team members are available online to answer your questions about your claims and benefits with just the click of your mouse. Once you've logged in to your umr.com account, just click the Live Chat icon in the top navigation bar on your member home page. It's that easy.

Click to chat

You can click to chat with a Customer First team member 24 hours a day, seven days a week.*



Get connected

Once you start a chat session, you'll be prompted to tell us more about your question. Within minutes, a team member will join you to assist with your question.

* excluding major holidays

A launch pad for all your health benefit needs

From your personalized home page, you can see a summary of your benefits, link to key areas of the site using myMenu, find out what tasks you need to complete to keep your benefits up to date, and chat with a UMR customer service team member.

myMenu

One-click access to claims, coverage and other resources.

My taskbar

Your personalized taskbar will prompt you to take action in three main areas:

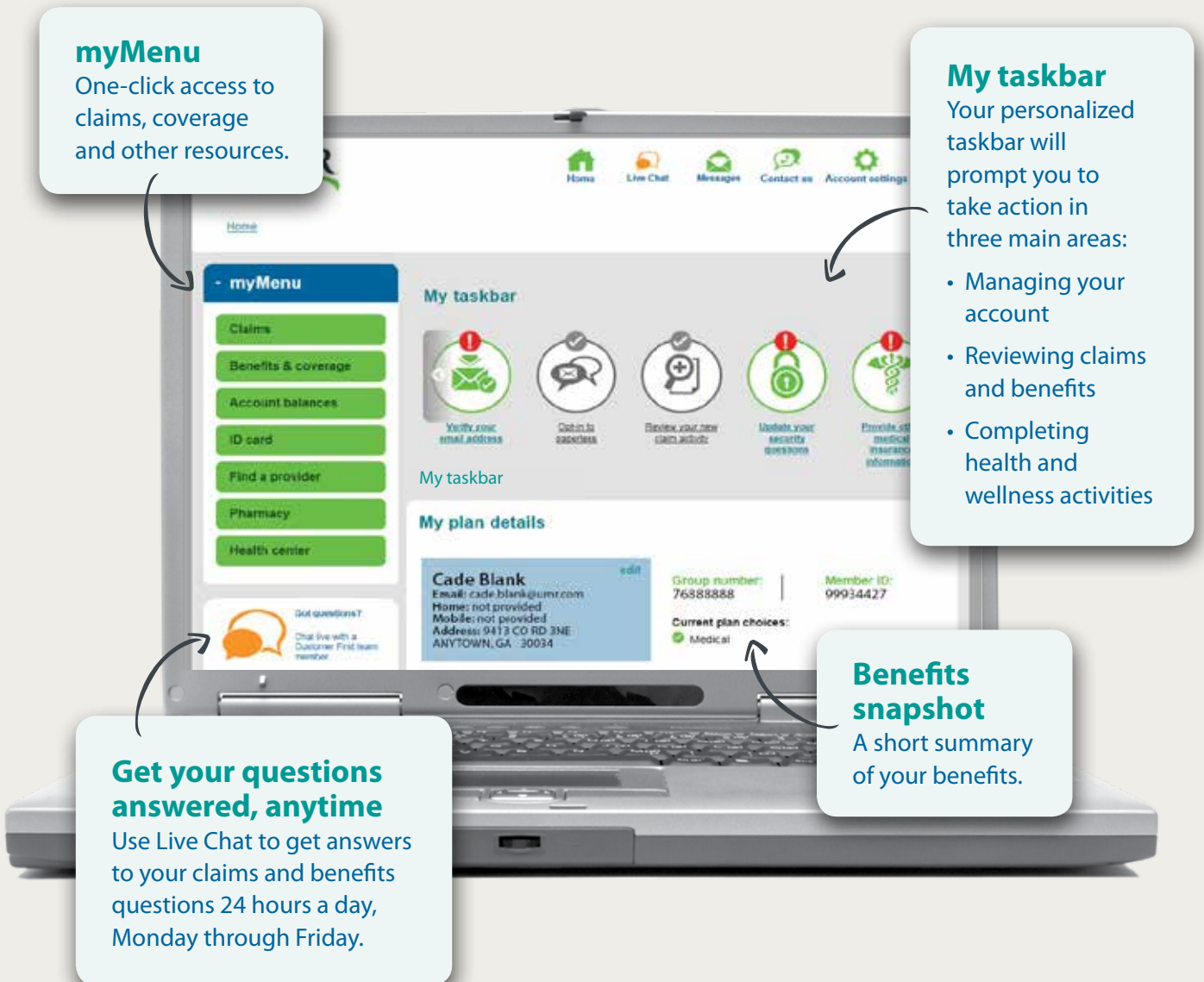
- Managing your account
- Reviewing claims and benefits
- Completing health and wellness activities

Benefits snapshot

A short summary of your benefits.

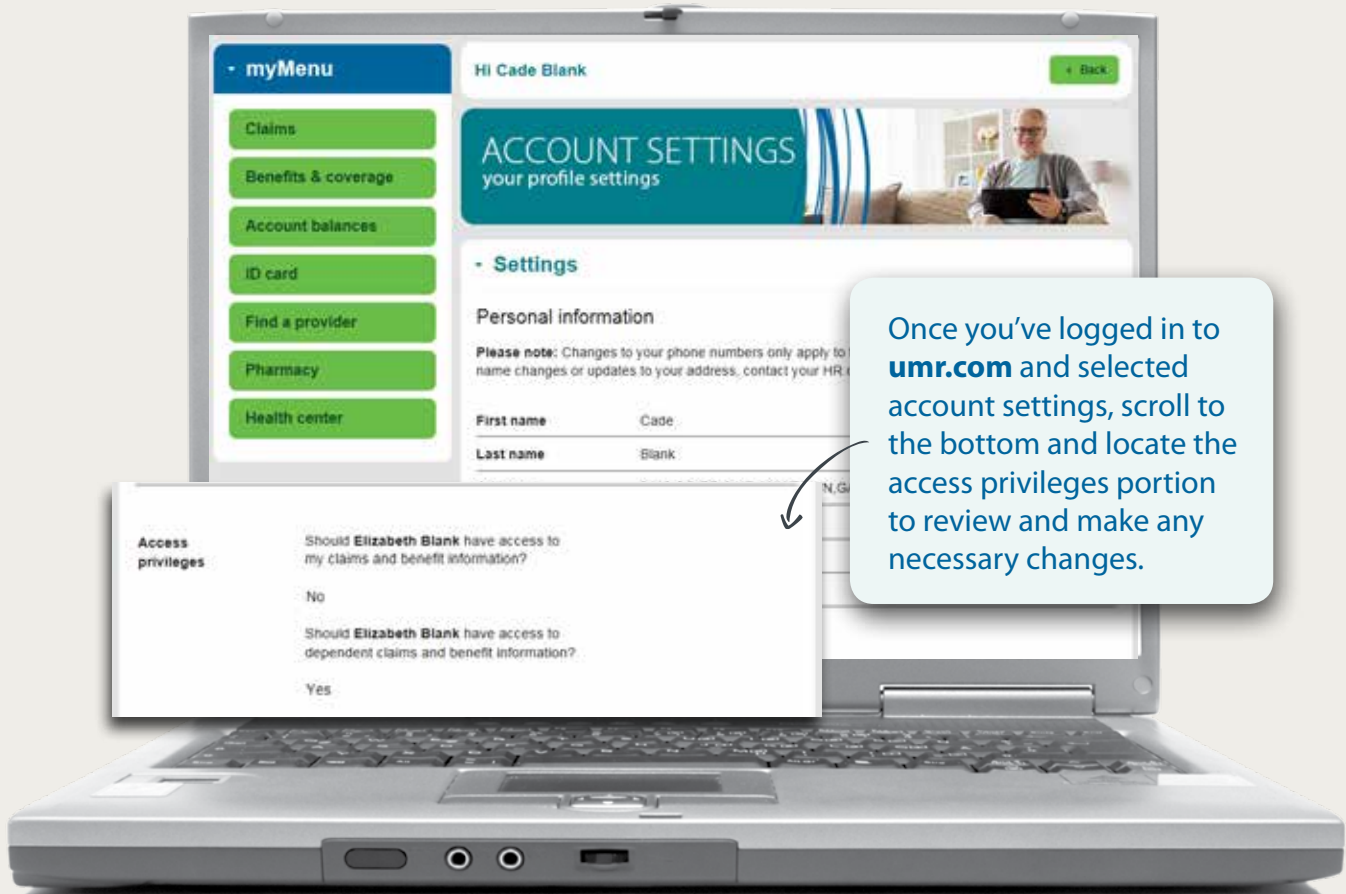
Get your questions answered, anytime

Use Live Chat to get answers to your claims and benefits questions 24 hours a day, Monday through Friday.



Protecting your health information

UMR follows strict rules and security procedures to ensure your information stays safe and is accessed only by you or authorized providers and/or representatives. If you, your spouse or a dependent age 18 or older wishes to allow online access to another covered family member, each member must grant access to view his or her information:



Not registered? Dependents will be asked during the registration process to select family members they will allow to view their personal health information. To register, have your covered family member visit **umr.com** and select **Login/Register**.

If your spouse or adult dependent has already registered for online services, your covered family member can log into **umr.com** to access their account settings.

View your claim activity

Claim search

Set up your search preferences by dependent(s), claim type, time period and status.

Take action

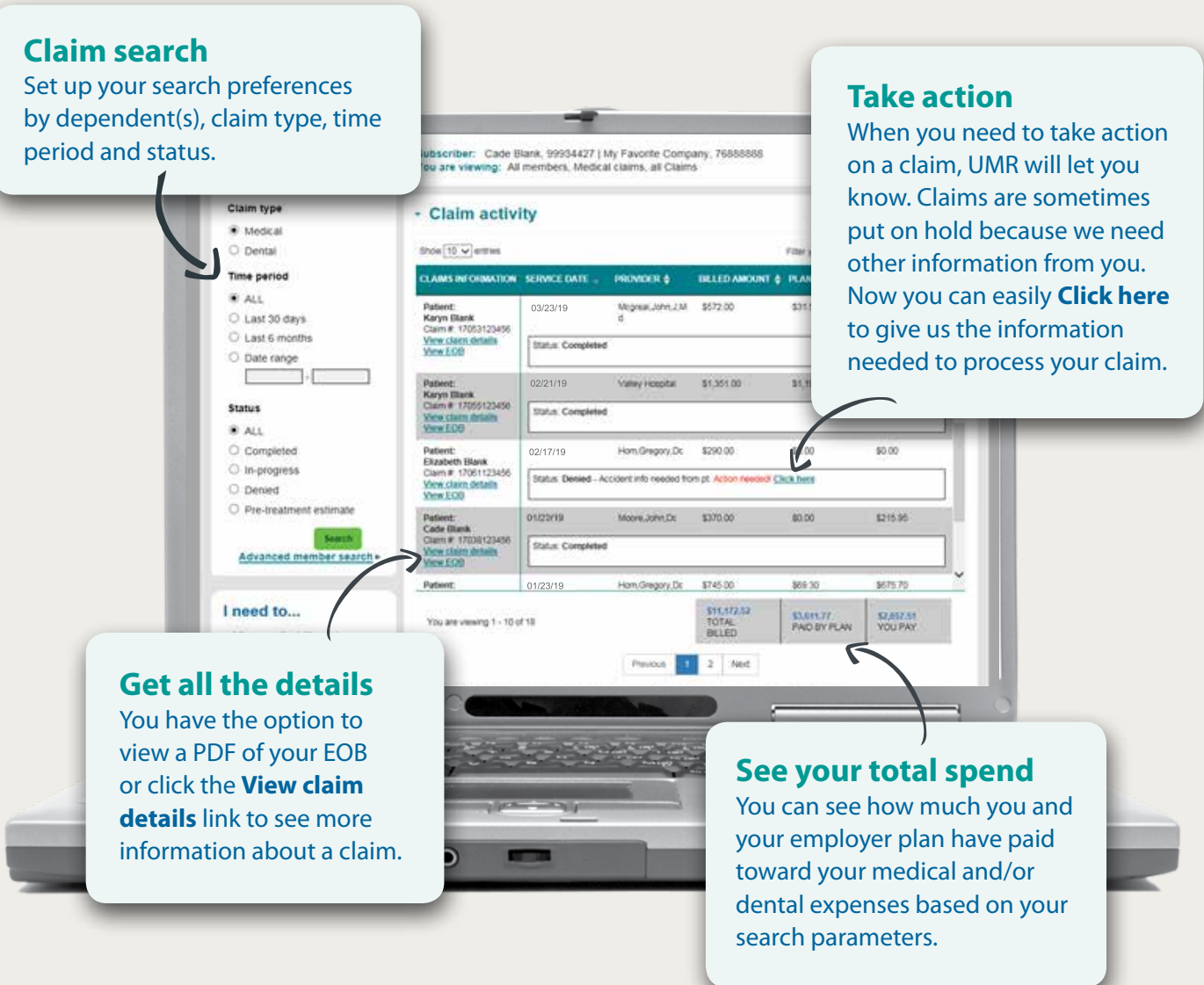
When you need to take action on a claim, UMR will let you know. Claims are sometimes put on hold because we need other information from you. Now you can easily **Click here** to give us the information needed to process your claim.

Get all the details

You have the option to view a PDF of your EOB or click the **View claim details** link to see more information about a claim.

See your total spend

You can see how much you and your employer plan have paid toward your medical and/or dental expenses based on your search parameters.



Benefits and coverage summary at-a-glance

Know how much you've contributed to your deductibles and out-of-pocket expenses using this easy-to-read summary.

Benefit summary

Shows helpful benefit information, including co-pays, coverages and how much you have paid toward deductibles and out-of-pocket maximums.

Benefit search

Set up your search preferences by dependent(s), coverage type, network level and coverage period.

Get more details

Sometimes you need to know about a specific benefit or procedure and what is covered in your plan. Select from the drop down of **Additional benefits** information to get more details. Or, click on the **Summary plan description** button if you still can't find what you are looking for.

Coverage Type
 Medical
 Dental

Network Level
 In network
 Out of network

Benefit Period
 Current (01/01/2019)
 Previous (01/01/2009)
 Previous (01/01/2000)

Search

- Benefits

Copays

Office visit	\$20.00	Specialist	\$25.00	Urgent care	\$50.00	Emergency room	\$150.00
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Benefit percentage

Plan pays	80%	You pay	20%
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Accumulator period: 01/01 - 12/31

Individual deductible \$500.00 to go
\$0.00 out of \$500.00

Family deductible \$1,000.00 to go
\$0.00 out of \$1,000.00

Individual out-of-pocket \$1,250.00 to go
\$0.00 out of \$1,250.00

Individual integrated out-of-pocket \$7,350.19 to go
\$0.00 out of \$7,350.00
*Applies amount includes \$218.01 for prescriptions

Family out-of-pocket

- Additional benefits

to know more about?

- Mental, Alcohol and Drug
- Routine Wellness Adult
- Routine Care for Children
- Chiropractic**
- Therapy
- Prior Authorization Requirements

Chiropractic

Chiropractic All:
major medical benefits apply
Dollar amount maximum: \$500.00 per calendar year

Office Visits Copay:

\$25 copay per visit/major medical benefits apply

Not sure what you are looking for?

View/download a PDF of your plan summary information using the buttons below

Summary plan description

Health information all in one place

Online health information: up-to-date and ad-free

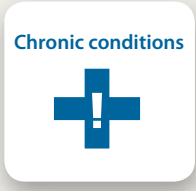
- Search your health symptoms
- Understand your treatment options
- Learn about drug interactions
- Find first aid information

Free tools, apps and calculators

- Calculate your body-mass index (BMI)
- Download apps to help you stay healthy
- Track your nutrition and fitness goals

Our top picks for healthy eating and exercise

- Get the essentials on men's, women's and kids' health
- Watch step-by-step recipe videos
- Log your exercise and activity



Always have your ID card handy

With a couple of clicks, you can have a copy of your ID card pulled up on your smart phone or get a new card mailed to your home.

I want to

Allows you to easily order an ID card or fax a copy of your ID card.

View your ID card

Shows all the details of everything that is included on the front and back of your ID card, including your member ID, group number and customer service number (located on the back).



On-the-go with umr.com

Just use the same username and password that you use on our full site.

What's even better — there's no app to download, nothing to install, no waiting.

What's new

Find out about new tools and information to help you live a healthier life.

Log in

Log in here to get instant access to all our mobile inquiry tools.

Find a provider

Find an in-network provider while you are "on the go".

View, scan or fax your ID card

View your ID card, allow your provider to scan the on-screen bar code for instant access to your benefit information and/or fax a copy to a provider.

Estimate health care costs

See what you can expect to pay before receiving care.

Simplified navigation

- Home – Return to the main menu.
- Menu – Display the menu.
- Gear – Log out or learn more about UMR and our mobile site.

Look up claims

Look up a claim for yourself or an authorized dependent.

Check your benefits

View medical and/or dental benefits, as well as persons covered.

Access account balances

Look up balances for your special accounts.



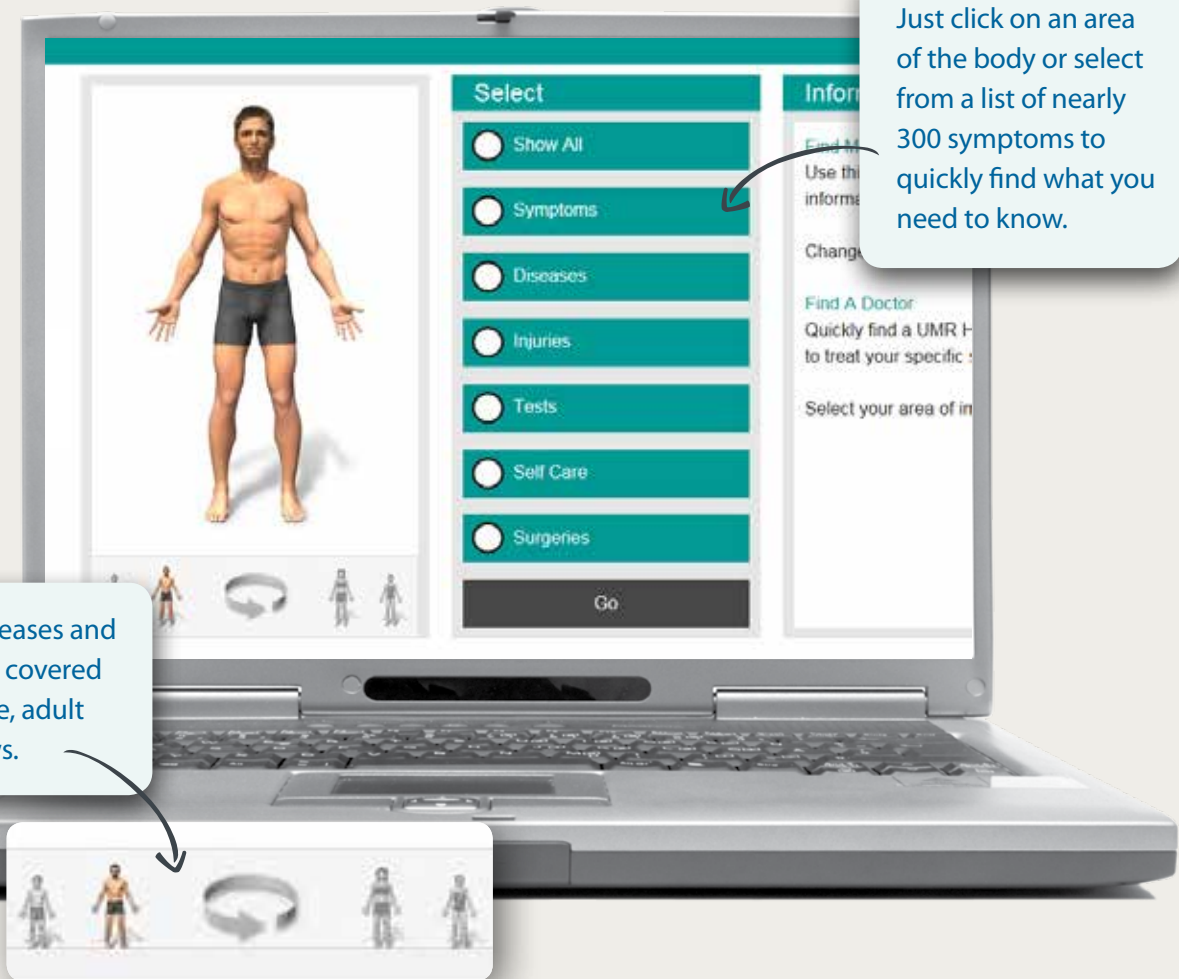
A trusted source for health information

There are articles, images, videos and other visuals on diseases, conditions, symptoms, medications, injuries, surgeries, procedures and preventive health tips. This wealth of health knowledge comes in a variety of forms, including:

- A.D.A.M. Health Multimedia Encyclopedia
- Care Guides
- DrugNotes
- Drug Interactions
- Health Navigator

Just click on an area of the body or select from a list of nearly 300 symptoms to quickly find what you need to know.

Over 1,600 diseases and conditions are covered in male, female, adult and child views.



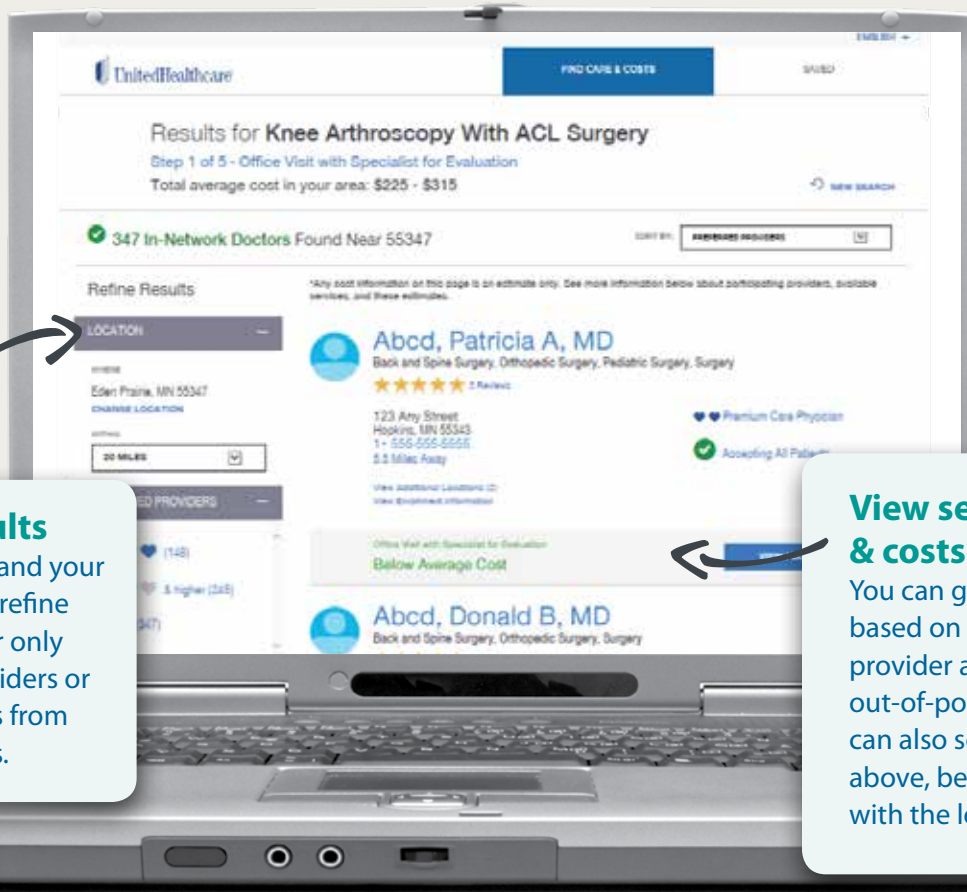
Health education library



It's easy to get started. Just look for the **Health education library** tile on your personal home page.


Know what you'll pay before getting care

The health cost estimator allows you to research treatment options and learn about the recommended care and estimated costs associated with your selected treatment option. You can even access quality and efficiency measurements for participating providers.



Refine results
Narrow or expand your search area or refine your search for only preferred providers or by star reviews from actual patients.

View services & costs
You can get an estimate based on your location, provider and remaining out-of-pocket cost. You can also see if a provider is above, below or in line with the local average cost.

 It's easy to get started. Just look for the **Health cost estimator** tile on your personal home page.

A valuable part of your medical benefits

Few things in life are more important than the health of you and your family. Fortunately, you have UMR Care Management on your side to help you understand all your medical care options.

UMR Care Management is a staff of experienced, caring nurses (RNs) who help you get the most out of your health plan benefits. They work with you, your doctors and other medical advisors to get the services that best meet your needs.

Our expert nurses can guide you before, during and after your medical care. They will listen to your concerns, answer questions and explain your options.

Helpful support in any situation

Whether you're having a baby, have an emergency hospitalization or need non-emergency care, our nurses are there for you.

For example, we can assist you during a hospital stay, after you are released and with your home care. You can concentrate on getting well, knowing your care management nurse will review your progress with your doctor.

As an added bonus, our services can save you money and prevent delays in your medical claim processing.

You will also learn about quality medical services and become a more informed health care consumer.

– more –



BONUS!

Our services can save you money and prevent delays in your medical claim processing.

Here for you in times of crisis

Hopefully, you or a family member never experience a serious injury or long-term illness. But if you do, we will have UMR nurses on the case at no cost to you.

In fact, we call them nurse case managers. They will assist with your medical care and treatment by:

- Helping negotiate treatment from the beginning of your care to recovery
- Helping you look at treatment needs and options under the direction of your doctor

- Serving as your advocate with your benefits administrator
- Providing an understanding of any complex issues to your claims payer
- Helping you better understand your health benefits

Important note...

Your doctor remains solely responsible for decisions concerning your medical treatment and care.



The information provided by this program is for general educational purposes only. It is not intended as medical advice and cannot replace or substitute for individualized medical care and advice from a personal physician. Individuals should always consult with their physicians regarding any health questions or concerns.



Get a healthy start to motherhood

If you're thinking about having a baby, are pregnant for the first time, or are adding a new little brother or sister to your family, UMR can help support you throughout your pregnancy.

What the *expecting* can expect

UMR offers one-on-one guidance and support to help you reduce your risk of complications and prepare to have a successful pregnancy and a healthy baby.

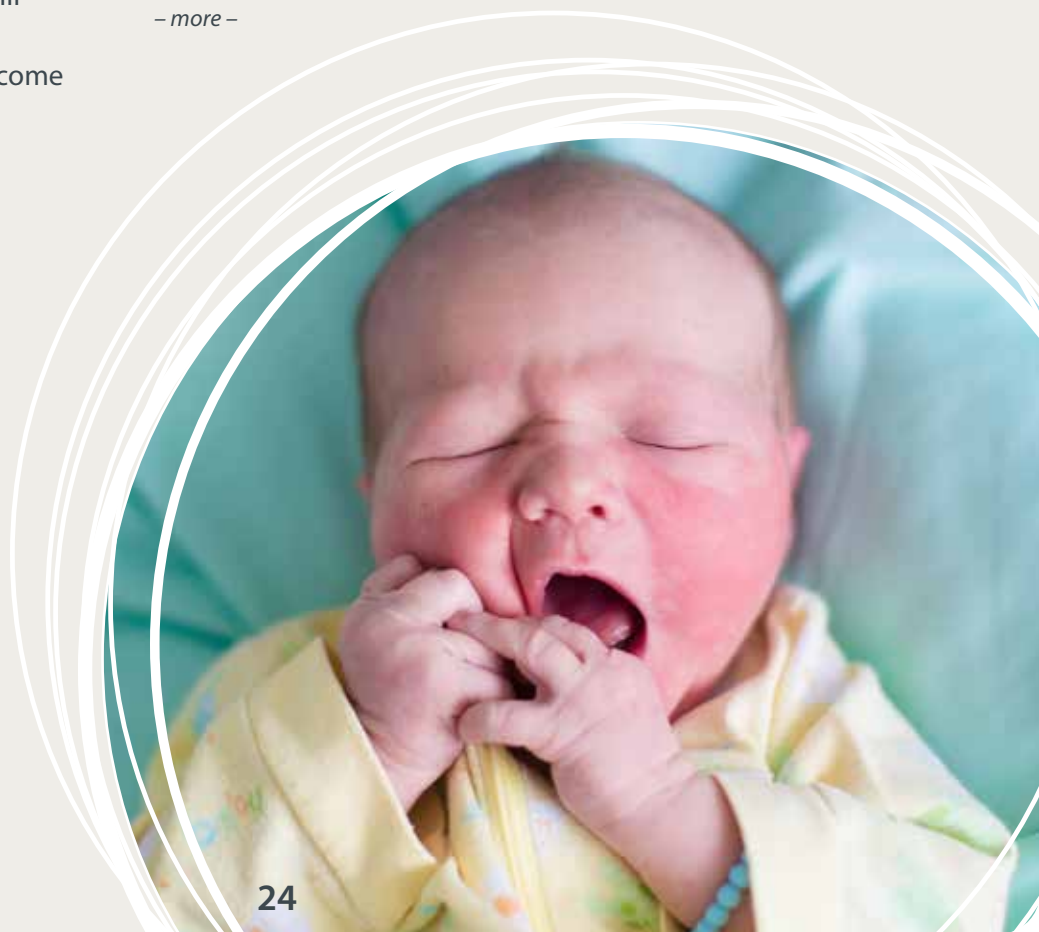
- Our experienced nurses will help you understand your health risks before you become pregnant

- When the time arrives, our registered nurses will provide timely prenatal education and follow-up calls. They will also refer you to case management if a serious condition arises
- Your nurse coach will call you each trimester and then one time after your baby is born
- If you are identified as high-risk, a nurse case manager will monitor your condition. The nurse will also work to reduce your claims costs throughout your pregnancy and after delivery

– more –

JOIN TODAY!

You can enroll yourself by calling the number on the back of your member ID card. You can also go to **umr.com**.



Maternity Management

If you are thinking of having a baby or already expecting, this is the program for you.

What you will get

Moms to be enjoy ongoing conversations with a personal coach who:

- Provides complete pre-pregnancy and pre-birth assessments
- Answers your questions
- Shares information before and during your pregnancy
- Encourages you to call when you have questions or concerns
- Calls after delivery to see how you and your baby are doing

Another important part is free educational mailings. They include a choice of high-quality books and materials. The materials contain helpful information about pregnancy, early labor, childbirth, breast-feeding and infant care.

Talk to a nurse and earn a reward

If you sign up during your first or second trimester and actively participate throughout your pregnancy, you'll receive an incentive reward, sent to you after your delivery.



The information provided by this program is for general educational purposes only. It is not intended as medical advice and cannot replace or substitute for individualized medical care and advice from a personal physician. Individuals should always consult with their physicians regarding any health questions or concerns.



Expert help for your chronic condition

When you face a new or existing medical challenge, it's nice to have a team of experts on your side. That's why UMR offers personalized guidance and support for those living with certain health conditions.

The goal is to help you set reachable goals for managing your symptoms and addressing any unhealthy habits that might be holding you back.

Free coaching

If you or a eligible family member has one or more of the managed conditions, you may be contacted and invited to participate in a series of one-on-one calls with a health coach.

Your nurse coach will help you better understand your condition and follow your prescribed treatment plan.

Selected conditions

UMR's registered nurses help individuals overcome the physical, mental and emotional hurdles that may affect those with the following illnesses:

- Asthma
- Congestive heart failure
- Diabetes
- Heart disease
- Hypertension (high blood pressure)
- Chronic obstructive lung disease (COPD)
- Depression (when occurring with one of the other listed conditions)

Web support

We provide helpful online tools to help you reach your health goals. You can set goals, track your progress, keep a personal health record and more.



Putting a focus on health and wellness

The best way to treat a chronic medical condition is to prevent it from happening in the first place. That's why UMR offers wellness resources to help you make the most of the healthy choices around you, so you can reduce your risk for serious illness in the future.

Assessing your health

A clinical health risk assessment (CHRA) helps judge your risk for getting a chronic disease so you can take action to reduce the chances. It includes questions about your medical history and lifestyle habits.

Report card

Your CHRA results help produce a personal report that shows your areas of strength and areas for improvement.

If the report shows you are at high risk for a chronic condition – such as diabetes or heart disease – you may want to share it with your doctor. Together, you can discuss ways to reduce your risks and avoid or delay developing a chronic disease.

– more –

Fast fact...

Your participation is voluntary, and **all resources are available at no cost to you.**



BONUS!

You have access to helpful online tools to set goals, track your progress, and keep a personal health record.

Free coaching

Your plan may include access to a personal health coach.

If so, your health coach will help you better understand your areas of risk. The coach will also suggest realistic actions to help you reach your personal health goals.

Web support

We provide helpful online tools to help you reach your health goals. You can set goals, track your progress, keep a personal health record and more.

Action plans

By enrolling in an online action plan, you can participate in programs specific to your health needs. Examples include heart disease prevention, how to stop smoking, managing stress and weight management.

Personal health record

This online tool gives you a secure location to record your medical history, medications and emergency contacts. You can print the information and give it to your doctors.

Something for everybody

Regardless of your risk level, we encourage you to take part in managing your health. By simply taking screening tests and immunizations and making healthy lifestyle changes, you could add years to your life and life to your years!



Get help living a tobacco-free life

If you are ready to live a life without tobacco, give us a call. No matter how many times you have tried to quit, we can help make it stick.

How it works

Our team of certified tobacco and nicotine cessation specialists will work with you to develop a plan to quit and offer strategies and support to help you reach your goal.

After you set your quit date, your assigned health coach will be available for a series of one-on-one phone sessions at times that are convenient to you.

In addition, your coach will send you helpful educational materials with facts and tips on quitting tobacco.

With **umr.com**, you also have access to an online action plan for quitting tobacco use. The interactive online lesson plan is personalized for you to help you overcome your barriers and achieve your goals.

All conversations between you and your coach are completely confidential.

JOIN TODAY!

**Call us at
1-800-207-7680**
to enroll in tobacco
and nicotine
cessation coaching



The information provided by this program is for general educational purposes only. It is not intended as medical advice and cannot replace or substitute for individualized medical care and advice from a personal physician. Individuals should always consult with their physicians regarding any health questions or concerns.



Talk to a nurse before elective surgery

Nobody looks forward to the idea of going in for surgery. And unless surgery is needed to treat a life-threatening condition, it can be hard to decide whether surgery is the right choice.

About Treatment Decision Support (TDS)

Your medical benefits include access to specially trained registered nurses who can help you review your options when the choice isn't clear. Their job is to give you the information you need to feel comfortable working with your doctor to pick a plan that fits your personal treatment needs.

How it works

If you need treatment for one of several conditions that could involve surgery, a TDS nurse will contact you and answer questions such as:



What are the different treatment options? What are the risks and benefits?



What can I expect to pay in out-of-pocket costs?



What is the recovery time? Will it be difficult?



Which health care providers or facilities rate high in quality?

Eligible conditions

We picked these conditions because there may be more than one way to treat them effectively, including surgical options, and they can have significant costs.

- Back pain, hip replacement or knee replacement
- Breast cancer or benign uterine conditions, including hysterectomy
- Benign prostate disease or prostate cancer
- Coronary artery disease (bypass graft or angioplasty)
- Bariatric weight-loss surgery

We can help!

Patients who work with a TDS nurse typically receive more cost-effective care, have better outcomes and are more confident they've made the right decision.



24-hour NurseLineSM

You have questions, our nurses have answers

Nobody likes to feel alone when it comes to their health. When we have questions about a medical issue, we want answers fast - even if it's not an emergency.

So if you find yourself up late with a sick child, or worrying about a recent diagnosis or upcoming surgery, we're here for you.

Let's talk!

A call to UMR's NurseLine service will connect you to a team of registered nurses who can answer your questions and provide advice.

Our nurses are standing by to help any time of day, seven days a week. We even have nurses available to chat live with you online at **umr.com**.

Best of all, it's part of your health benefits, so there is no cost to you.

Reach out by phone

Calling NurseLine is easy. Simply dial the toll-free phone number on the back of your member ID card, and your call will be answered in 36 seconds, on average.

Your nurse can help you choose the right health care setting for an illness or injury, or offer information about common health issues or symptoms.

We can assist callers in more than 140 languages, as well as those who need hearing assistance.

Plus, we have an audio library of health information on more than 1,100 topics.

Chat online

Our Nurse Chat feature gives you convenient access to nurses who can answer questions and provide information about common conditions, treatments and preventive care.

Chat live online

- > Log in to **umr.com**
- > Select **Health center** from myMenu
- > Look for the link in the **"I need to..."** section

Call
NurseLine
today!

Use the number
on the back of
your ID card.



24/7 doctor visits via phone or mobile app

Teladoc gives you access 24 hours, 7 days a week to a U.S. board-certified doctor through the convenience of phone, video or mobile app visits. It's an affordable option for quality medical care.



Talk to a doctor anytime, anywhere you happen to be



Receive quality care via phone, video or mobile app



Prompt treatment, median call back, in 10 minutes



A network of doctors that can treat every member of the family



Prescriptions sent to pharmacy of choice if medically necessary



Teladoc is less expensive than the ER or urgent care

Talk to a doctor anytime!
visit **Teladoc.com**
or call
1-800-Teladoc



Get the care you need

Teladoc doctors can treat many medical conditions, including:

- Cold & flu symptoms
- Allergies
- Pink eye
- Respiratory infection
- Sinus problems
- Skin problems
- And more

With your consent, Teladoc is happy to provide information about your Teladoc visit to your primary care physician.



Save on hearing aids and hear life to the fullest.



Through UnitedHealthcare Hearing, you have access to hundreds of name-brand and private-label hearing aids, plus convenient ordering options and personalized care to help you improve your hearing.

Hearing health care made easier.

Treating your hearing loss may allow you to reconnect with the world around you and make it easier to engage with family and friends. UnitedHealthcare Hearing gives you options, care and convenience so you can start hearing the sounds you've been missing.



Name-brand and private-label hearing aids at significant savings.

Choose from hundreds of name-brand and private-label hearing aids from major manufacturers, including Beltone™, Oticon, Phonak, ReSound, Signia, Starkey®, Unitron™ and Widex® and more at savings of up to 80% off industry prices.¹



More than 5,000 credentialed hearing provider locations.

Access the largest nationwide network² of credentialed hearing professionals that provide hearing tests, hearing aid evaluations and follow-up support.



Convenient ordering.

Order hearing aids in person through a hearing provider or have them delivered right to your home in 5–10 business days.



Personal support, every step of the way.

You'll receive access to professional, nationwide support, online tutorials, hearing health tips and more, so you can stay connected and get the most out of your hearing aids.

CONTINUED

* Source: National Institutes of Health

Custom-programmed hearing aids for your unique hearing loss.

With a large selection of private-label and name-brand hearing aids and convenient home delivery and in-person care options, you can choose what works best for your needs.

	Basic	Reserve	Entry	Essential	Standard	Advanced	Premium
Hearing Aids	Private-label	Private-label	Name-brand	Name-brand	Name-brand	Name-brand	Name-brand
Cost	\$	\$+	\$\$	\$\$\$	\$\$\$\$	\$\$\$\$\$	\$\$\$\$\$\$
Styles*	BTE	RIC, ITE, Ultra Power BTE, CIC	All styles				
Batteries	1-year supply						5-year supply
Follow-up Care	Additional cost per follow-up visit.	Hearing aid fitting and 3 free follow-up visits included within the first year, after the 45-day trial period					
Trial Period	70 days	45 days					
Warranty	3-year extended warranty (covers repair and a 1-time loss/damage replacement).**						

* BTE = behind-the-ear; RIC = receiver-in-canal; ITE = in-the-ear; CIC = completely-in-canal

** One-time replacement cost may apply.



Contact UnitedHealthcare Hearing today to start using your hearing benefit.

Call: 1-855-523-9355, TTY 711 | Visit: uhchearing.com

¹ Compared to industry average on a pair of hearing aids. Consumer Reports, 2017.

² 2019 UnitedHealthcare Internal Data.

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