Thank you for enrolling in an Oxford plan from UnitedHealthcare.
Here's your health plan ID card.

We're glad you're here.

We value your participation in our Oxford health benefits plans.
We have enclosed some information to help you get started using your benefits.
Follow these 3 easy steps:

1   **Get to know your health plan ID card.**

2   **Register for myuhc.com®, your new health plan member website.**

3   **Download the Oxford Member Welcome Guide.**

Remember to destroy your old health plan ID card upon your new policy effective date and replace it with this new health plan ID card. You can also access your ID card through the Health4Me® app, or call the toll-free member phone number on the back of your ID card if you need help.
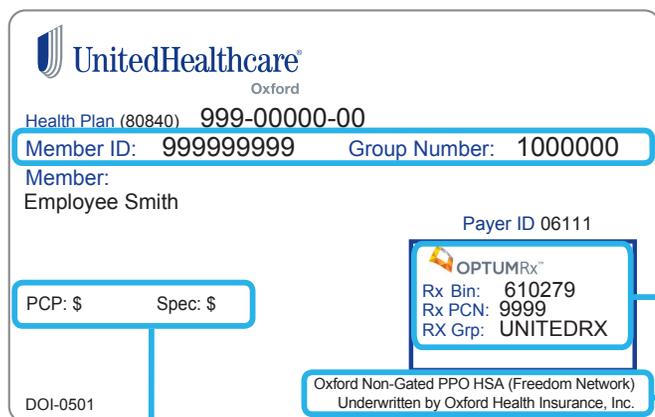
We hope this guide helps make your health care experience easier.

Get started.

1 Get to know your health plan ID card.

It has information about you and your coverage. Carry it with you wherever you go. **When you visit your provider or pharmacy, show your new card so they know how to bill for their services.** You can also access a digital version through the mobile app. (See the next page for more information.) Remember to destroy your old health plan ID card.

UnitedHealthcare®
Oxford

Health Plan (80840)   999-00000-00
Member ID: 999999999   Group Number: 1000000
Member:
Employee Smith

Payer ID 06111

OPTUMRx™
Rx Bin: 610279
Rx PCN: 9999
RX Grp: UNITEDRX

PCP: $ Spec: $

Oxford Non-Gated PPO HSA (Freedom Network)
Underwritten by Oxford Health Insurance, Inc.

DOI-0501

Member ID and group number
Use these when registering on **myuhc.com** or calling with questions. Also, **your providers will need this new information from you.**

Your prescription coverage
Your pharmacist will use this to determine which medications are covered.

Your network

Your copayment amounts (if applicable)
Your cost for a covered service (usually due at your appointment).

Example only. Your card and costs may vary.

How to find your complete plan details.

Log in to **myuhc.com,** your health plan member website, to see health plan documents like your policy, riders, amendments, required notices and welcome materials. You can also ask for printed copies at no extra charge by calling the toll-free member phone number on your health plan ID card.

(2) Register for myuhc.com, your new health plan member website.

Get 24 hours a day, seven days a week online access to your health plan.*

Set up your new **myuhc.com** account today. This is your personalized member website that helps you access and manage your Oxford health benefits plan and health information. All you need is your new health plan ID card to get started. Use **myuhc.com** to:

- ○ View and download your Explanation of Benefits (EOB).
- ○ Find network doctors, hospitals and facilities.
- ○ Check your coverage.
- ○ Get a list of covered prescription drugs.
- ○ Estimate your costs for common procedures and conditions.
- ○ Check your claim status after your provider has submitted your claim.
- ○ Review preventive care services like regular checkups and recommended screenings.
- ○ Print a temporary health plan ID card or access it through the Health4Me app.
- ○ See a doctor with a virtual visit without leaving your home.*
- ○ Register and stay on track with Rally® health and wellness programs.

*Services may not be available at all times or in all locations.

Get on-the-go access.

The Health4Me® app puts your health plan at your fingertips. Download it today to use the **myuhc.com** features listed on this page. Plus, view your digital health plan ID card, find nearby care and more.

(3) Download the Oxford Member Welcome Guide.

Get the most out of your Oxford plan.

Download the Oxford Member Welcome Guide on **myuhc.com**, your new health plan member website, to get more details on your Oxford health benefits plan. Go to "Coverage and Benefits" and look in the "Coverage Documents" section.

PRIVACY PRACTICES OVERVIEW

To protect your privacy, UnitedHealthcare and Oxford follow rules for how we use and share your information. In addition, you have certain rights for managing your private information. These rules and rights are summarized below. To view the full Notice of Privacy Practices, visit **myuhc.com**. To request a printed copy, call Customer Service at the member phone number on your health plan ID card or **1-800-444-6222, TTY 711**.

We may use and share your information as we:
- Help manage your health care treatment
- Run our organization
- Pay for your health services
- Administer your health plan
- Help with public health and safety issues
- Do research
- Comply with the law
- Respond to organ and tissue donation requests, and work with a medical examiner or funeral director
- Address workers' compensation, law enforcement and other government requests
- Respond to lawsuits and legal actions

You have the right to:
- Get a copy of your health and claims records
- Correct your health and claims records
- Request confidential communication
- Ask us to limit the information we share
- Get a list of those with whom we've shared your information
- Get a copy of the privacy notice
- Choose someone to act for you

Exercising your rights

To exercise your rights, or if you believe your privacy rights have been violated, call the phone number above or send a written notice to:

UnitedHealthcare
Customer Service — Privacy Unit
P.O. Box 740815
Atlanta, GA 30374-0815

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文 **(Chinese)**，我們免費為您提供語言協助服務. 請撥打會員卡所列的免付費會員電話號碼.

알림: 한국어**(Korean)**를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오

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 **1-800-842-2656**. Someone who speaks your language can help you. If you need more help, call the Department of Insurance Hotline at **1-800-927-4357** or HMO Help Line at **1-888-466-2273**.

IMPORTANTE: Puede obtener la ayuda de un intérprete sin costo alguno para hablar con su médico o con su compañía de seguros. 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 al 1-800-842-2656.

Alguien que habla español puede ayudarle. Si necesita ayuda adicional, llame a la línea directa del Departamento de seguros al **1-800-927-4357** o llame a la Linea de Ayuda de la HMO al **1-888-466-2273**. (Spanish)

重要事項：您與您的醫生或醫療保險公司交談時，可獲得免費口譯服務。 如欲請翻譯員提供口譯，或欲查詢中文書面資料，請先致電您的保險公司，電話號碼，1-800-842-2656 中文人士將為您提供協助。如需更多協助，請致電保險部熱線 **1-800-927-4357 PPO / 1-888-466-2219 HMO (Chinese)**

XIN LƯU Ý: Nếu quý vị nói tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: 한국어**(Korean)**를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

PAUNAWA: Kung nagsasalita ka ng Tagalog (Tagalog), may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является русским (**Russian**). Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

ةحاتم ةيناجملا ةيوغللا ةدعاسملا تامدخ نإف ،(**Arabic**)، ةيبرعلا ثدحتت تنك اذا :هيبنت
.ةيوضعلا فرعم ىلع دوجوملا يناجملا فتاهلا مقر ىلع لاصتالا ءاجرلا. كل

注意事項：日本語**(Japanese)**を話される場合、無料の言語支援サービスをご利用いただけます。健康保険証に記載されているフリーダイヤルにお電話ください。

رایتخا رد ناگیار روط هب ینابز دادم تامدخ ،تسا **(Farsi)** یسراف امش نابز رگا :هجوت
سامت هدش دیق امش ییاسانش تراک یور مک یناگیار نفلت هرامش اب افطل .دشاب یم امش هدیریگب.

ध्यान दें: यदि आप हिंदी **(Hindi)** भाषी हैं तो आपके लिए भाषा सहायता सेवाएं निःशुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर दिए टोल-फ्री फोन नंबर पर कॉल करें।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយភាសាខ្មែរ **(Khmer-Cambodian)** សេវាជំនួយភាសាដោយឥតគិតថ្លៃ គឺមានសំរាប់បំរើអ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃ ដែលមានបានរៀបរាប់ក្នុងប័ណ្ណសំគាល់អ្នក។

ՈՒՇԱԴՐՈՒԹՅՈՒՆ՝ Եթե խոսէրեն **(Armenian)** եք խոսում, անվճար լեզվական օգնության ծառայություններ են հասանում Ձեզ: Խնդրում է զանգահարել անվճար հեռախոսահամարով, որը նշված է Ձեր ճանաչողական քարտի վրա:

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀ ਪੰਜਾਬੀ **(Punjabi)** ਬੋਲਦੇ ਹੋ, ਤਾ ਤੁਹਾਡੇ ਲਈ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾ ਬਿਲਕੁਲ ਮੁਫ਼ਤ ਉਪਲਬਧ ਹਨ। ਕਿਰਪਾ ਕਰਕੇ ਆਪਣੇ ਪਛਾਣ-ਪੱਤਰ 'ਤੇ ਦਿੱਤੇ ਗਏ ਟੋਲ ਫ੍ਰੀ ਨੰਬਰ 'ਤੇ ਕਾੱਲ ਕਰੋ।

โปรดทราบ: หากคุณพูด**ภาษาไทย (Thai)** มีบริการความช่วยเหลือด้านภาษาให้แก่คุณ โดยที่คุณไม่ต้องเสียค่าใช้จ่ายต่อย่างใด โปรดโทรศัพท์ถึงหมายเลขโทรฟรีที่อยู่บนบัตรประจำตัวของคุณ

Nondiscrimination Notice and Access to Communication Services

UnitedHealthcare does not exclude, deny Covered Health Care Benefits to, or otherwise discriminate against any Member on the ground of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, or disability for participation in, or receipt of the Covered Health Care Services under, any of its Health Plans, whether carried out by UnitedHealthcare directly or through a Network Medical Group or any other entity with which UnitedHealthcare arranges to carry out Covered Health Care Services under any of its Health Plans.

Free services are available to help you communicate with us such as letters in other languages, or in other formats like large print. Or, you can ask for an interpreter at no charge. To ask for help, please call the toll-free number listed on your health plan ID card, TTY **711**, Monday through Friday, 8 a.m. to 8 p.m. ET.

If you think you weren't treated fairly because of your sex, age, race, color, national origin, or disability, you can send a complaint to:
Online: UHC_Civil_Rights@uhc.com
Mail: Civil Rights Coordinator
UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UTAH 84130

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again. If you need help with your complaint, please call the toll-free phone number listed on your health plan ID card, Monday through Friday, 8 a.m. to 8 p.m.

You can also file a complaint with the U.S. Dept. of Health and Human Services.
Online: https://ocrportal.hhs.gov/ocr/portal/lobby.jsf
Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.
Phone: Toll-free **1-800-368-1019, 800-537-7697** (TDD)
Mail: U.S. Dept. of Health and Human Services
200 Independence Avenue, SW Room 509F, HHH Building
Washington, D.C. 20201

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