Broker/consultant fact sheet UnitedHealthcare Tiered Benefit Plans

General introduction

Offers competitive employee benefits combined with incentives for employees to make choices regarding their care, including lower office visit copayments and greater plan coinsurance coverage when employees receive care from UnitedHealth Premium® designated physicians.

Key features

Tiered Benefit Base Plans (fully insured and self-funded customers)

- Lower office copayments and higher plan coinsurance with designated specialists
- Primary care covered at the highest benefit level
- Network hospital inpatient stays covered at the highest benefit level
- Radiology, anesthesiology, pathology, lab and hospitalbased consulting physicians are paid under the facility charge at the plan's highest benefit level
- ▶ Urgent care copay \$50; ER copay range of \$100 \$125
- Family deductible at 2x (twice) individual

A suite of Tiered Benefit Value Plans with additional cost controls is also available.

Product positioning

When consumer-level benefits are clearly communicated to employees, their behavior at the point of care may change and produce long-term savings. Tiered Benefits features out-of-pocket savings — in the form of lower copay and coinsurance levels — for individuals who choose to receive services provided by UnitedHealth Premium® quality- and cost-efficiency designated physicians. Physician designations are displayed on the member website, myuhc.com®, with two stars.

Competitive differences

Consumer engagement through increased use of quality and efficiency providers in the UnitedHealth Premium designation program:

- ▶ Since 2005, the longest running program of physician quality and cost designation
- Quality measures based on medical specialty organization standards
- Quality required before cost efficiency

Target audience

Employers who are looking for affordable premium rates on employer-sponsored health care coverage that provides access to quality care.

Employee/member value proposition

Rewards employees with lower out-of-pocket costs at point of service for choosing quality first.

Employer value proposition

- Ability to continue to offer quality, accessible and affordable health benefits to employees given the rise in health insurance costs.
- Engaging employees in health care decision-making may result in improved quality of care and long-term cost reductions.

With the Communication Resource Center, employers can provide employees with information on UnitedHealth Premium, plus other health topics in ready-to-use print and electronic formats.

Broker/sales and consultant value proposition

Tiered Benefit plans can reduce the medical premiums paid by employers by offering member incentives to use physicians designated with two stars for quality and efficiency.

Sample plan design

Example of how a basic Tiered Benefit Plan works using Plan 7T-E

\$1,000	Deductible
\$20	Copayment for primary care physicians and "two star" Premium-designated specialists
100%	Plan coinsurance coverage for network inpatient services
\$40	Plan coinsurance coverage for "one star" or non-Premium specialists/outpatient facility/ major diagnostics services

Member Responsibility for Specialist Services using Plan 7T-E

	"Two star" Premium- designated	"One star," "no stars" or non-Premium- designated
Primary care physician	\$20	\$20 copayment
Specialist office visit	\$20	\$40 copayment
Specialist professional fees	100% after deductible	90% after deductible

Benefit levels in the example are for network services only. Actual plan benefits are subject to state requirements and may not be available in all states. Refer to the Certificate of Coverage and corresponding Schedule of Benefits issued with each Group Policy for actual benefit or coverage levels.

Network considerations

Tiered Benefit plans are centered on use of the UnitedHealth Premium designation program, which was developed to evaluate and recognize physicians who meet national industry standards for quality care and local market benchmarks for cost efficiency. Employees simply need to look for the stars, which indicate that a physician is designated.

"One Star" Quality of Care — A doctor has met quality of care guidelines by following evidence-based medical standards and practices.

"Two Stars" Quality of Care and Cost Efficiency — A doctor has met quality of care guidelines by following evidence-based medical standards and practices, and has met guidelines for providing cost efficient care.

Cost controls

- Increased use of quality and efficiency providers through the UnitedHealth Premium program
- Doptimal Benefit Pharmacy pairings
- ▶ Flexible deductible, copays and out-of-pocket maximum design options
- Tiered Benefit Value Plans also include inpatient and outpatient per-occurrence deductibles

Medical management

Standard UnitedHealthcare medical management applies.

Member support

Our member website, myuhc.com, helps employees to find designated specialty physicians in the online physician directory. It also explains the value of quality and costefficiency measures, plus each specialist's location and accessibility. myuhc.com offers a wide range of member tools, including: benefit details, Personal Health Record, and Treatment Cost Estimator.

Our NurseLineSM and Care24® assistance lines are open 24 hours, and for members who have specific chronic conditions, we offer disease management programs.

Date first introduced

2008

Availability

State/market

Fully Insured available in 32 states; ASO available nationally

AL	CT	GA	KS	MI	NE	RI	UT
AR	DC	IA	KY	MO	NM	SC	VA
AZ	DE	IL	LA	MS	ОН	TN	WI
CO	FI.	IN	MD	NC	$\bigcirc K$	TX	WW

Funding types

- **ASO**
- Fully Insured

Group sizes

▶ Key Accounts and Public Sector, 100 – 3,000 employees



Not all products are available in all markets. Please discuss product options with your UnitedHealthcare representative.



The Care24® Program integrates elements of traditional employee assistance and work-life programs with health information lines for a comprehensive set of resources. It is not a substitute for a doctor's or professional's care. Due to the potential for a conflict of interest, legal consultation will not be provided on issues that may involve legal action with UnitedHealthcare, or its affiliates, or any entity through which the caller is receiving UnitedHealthcare, or its affiliates, services directly or indirectly (e.g., employer or health plan). The Care24 Program and its components may not be available in all states or for all group sizes and are subject to change. Coverage exclusions and limitations may apply.

Disclosure: The UnitedHealth Allies health discount program is administered by HealthAllies*, Inc., a discount medical plan organization located at 505 N. Brand Blvd., Suite 850, Glendale, CA, 91203, 1-800-860-8773. The health discount program is NOT insurance. The health discount program provides discounts for certain health products and services. The health discount program does not make payments directly to the providers of health products and services. The program member is obligated to pay for all health products and services but will receive a discount from those providers who have contracted with the discount plan organization. The health discount program is offered to existing members of certain products underwritten or provided by UnitedHealthcare Insurance Company or its affiliates to provide specific discounts and to encourage participation in wellness programs. Health care professional availability for certain services may be dependent on licensure, scope of practice restrictions or other

requirements in the state. UnitedHealthcare does not endorse or guarantee health products/services available through the discount program. This program may not be available in all states or for all groups. Components subject to change.

For informational purposes only. NurseLineSM nurses cannot diagnose problems or recommend specific treatment and are not a substitute for your doctor's care. NurseLine services are not an insurance program and may be discontinued at any time.

The UnitedHealth Premium* designation program is an information resource to help our members choose a physician. It may be used as one of many factors members consider when choosing the physicians from whom they receive care. As with any performance assessment program, physician evaluations have a risk of error. Please see myuhc.com* for detailed program information and methodologies.

For a complete description of the UnitedHealth Premium* designation program, including details on the methodology used, geographic availability, program limitations and medical specialties participating, please see myuhc.com*.

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