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Special Edition:

How your Health Reimbursement Account works





Understanding your HRA plan

The DefinitysM Plan with Health Reimbursement Account (HRA) was created to help you understand how much health care really costs and then to give you choice and control over your own health care purchases. This is a quality medical plan that comes with an HRA. The State Health Benefit Plan (SHBP) puts money into this account to help you pay your eligible medical and pharmacy expenses. In addition, you get personalized support and information along the way to help you stay healthy and get care when you need it.



The Plan is made up of two parts:

- Medical benefits with an annual limit on how much you have to pay outof-pocket
- Your preventive care is covered at 100% when seeing network providers

Health Reimbursement Account

- Funded 100% by SHBP to help you meet your annual deductible
- Pays for your eligible medical and pharmacy expenses before you pay anything yourself
- Unused dollars from your HRA will carry over to the next plan year, and the SHBP will again fund HRA dollar credits to your account

HRA Plan Advantages

- You choose how your health care dollars are spent
- You pay less if you choose a doctor from our network
- There is a limit on how much you will pay out-of-pocket each year
- Emergencies are covered anywhere in the world
- Unused HRA dollars carry over to the next plan year and SHBP will again fund your HRA, further reducing your out-of-pocket portion of your annual deductible
- Tools on myuhc.com help you:
 - check eligible expenses
 - check costs for treatment ahead of time
 - find the best doctors and hospitals
 - manage your claims

How your HRA plan works

Your health expenses are paid by your HRA first

- The SHBP contributes money to your account each year
- Your HRA pays your eligible medical and pharmacy expenses as long as there are funds in it
- These payments apply towards your annual deductible

Then, you pay the rest of your deductible

Your annual deductible is the amount you need to pay before your medical plan pays.

- If you use all of your HRA, you pay the rest of the deductible amount out of your own pocket
- Preventive care is covered up to 100% by the medical plan whether or not you have met your deductible

After that, you pay only coinsurance

Once you have met your deductible, you and the medical plan share expenses. This is called coinsurance.

For your protection, there is a limit on how much you need to pay out of your own pocket. Once you reach that amount, covered services are paid at 100% for the rest of the plan year. (See your Summary Plan Description for specific out-of-pocket information.)

- After you reach your out-of-pocket maximum, all eligible expenses are covered up to 100% for for the rest of the plan year



Money-saving tip:

Using network doctors can save you money.

It will cost you more for services you get from doctors that are not in our network. If you seek care outside the network, your charges are paid based on the usual and customary fees, and you're responsible for paying the remainder. Whenever possible, use network doctors. To find a network doctor, visit myuhc.com or call the Customer Care number on the back of your medical ID card.

To make sure you're not billed at out-of-network rates for your lab or diagnostic imaging services, tell your doctor that you want to be referred to a network provider.

Finding the right doctor

"One of the most important decisions you will ever make - and one you'll likely make more than once – is choosing your doctor. As the owner of a wondrous commodity (your body), you always have a supreme rule, but your doctor is the get-it-done person...Choose wisely, and you could rest easy for many years to come..."

- "You the Smart Patient," Michael F. Roizen, M.D., and Mehmet C. Oz. M.D.

We can't emphasize enough how important the relationship between you and your doctor is. No matter what kind of coverage you have, when you choose the right doctor - someone you feel comfortable with - you're choosing a partner for good health.

And, because UnitedHealthcare is about helping you to become a careful and educated consumer, we can provide some helpful tools in your search:

- A choice of 573,000 network doctors and 4,875 hospitals Search doctors in our network to find the one that has the right experience and credentials to meet your needs. You can also double check your doctor's performance against our quality measurements, plus his or her patient satisfaction survey scores.
- Access to quality and efficiency ratings Look for a doctor who has received UnitedHealth Premium® designation. UnitedHealth Premium assesses doctors and hospital performance against quality and cost efficiency criteria.*
- **Treatment Cost Estimator on myuhc.com** Find out how much you can expect to pay for an office visit or procedure beforehand.

^{*} The UnitedHealth Premium designation program is intended as a resource for informational purposes only. Designations are displayed in UnitedHealthcare on-line physician directories at myuhc.com. You should always consult myuhc.com for the most current information. Premium designations are a guide to choosing a physician and may be used as one of many factors you consider when choosing the physicians from whom you receive care. If you already have a physician, you may also wish to confer with him or her for advice on selecting other physicians. Physician evaluations have a risk of error and should not be the sole basis for selecting a physician. Please see myuhc.com for detailed program information and methodologies. UnitedHealth Premium may not be available in all geographic locations.



Before your appointment

So, you've found the right network doctor and like any new relationship, it starts with a first "date." Here's a prep list to help you prepare and navigate that first encounter.

- Do your homework. The Treatment Cost Estimator is an online tool that you can use to find estimated treatment costs.
- List your medications.
- Gather records from any previous visits you've had for a similar problem. It's good background information for your doctor.

Checking in at your appointment

Present your member ID card. When you get to your appointment, present your UnitedHealthcare member ID card at check-in.

Important note: The physician's office should submit a claim to UnitedHealthcare first before you pay anything.

Preventive Care is covered at 100%. When you see a network doctor for preventive care services, the charges are 100% paid. (Be sure to remind your doctor's office staff) This can include routine check-ups, screenings, immunizations and prenatal care. See your benefit plan coverage documents for details.

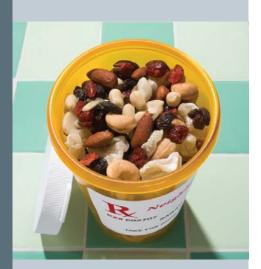
After your appointment - how your claim is paid

UnitedHealthcare has specially negotiated rates with network providers and your doctor's office needs to "bill" UnitedHealthcare first to make sure you get this best price. UnitedHealthcare will pay your doctor directly when medical services are paid by your medical plan or you have available funds in your HRA account. Once your claims are processed, your doctor will bill you for any amount you owe. You can check the amount paid by the medical plan and paid by your HRA at myuhc.com.



With your **UnitedHealthcare** pharmacy benefit, log on to www.myuhc.com to find:

- Medication pricing
- Benefit and coverage information
- Participating retail pharmacies
- Prescription history



How Pharmacy works with your HRA

Getting medication(s)

We believe that more options make for better benefits. There are more than 60,000 pharmacies in our network, which means you're likely to get prescriptions close to home, or on the road, whenever you need them.

Money-saving tips:

Buy generic

Many commonly prescribed medications have generic equivalents. In many cases, generics cost less than name-brand alternatives, and are just as effective. Both generics and brand-name medications are manufactured under the same strict United States Food and Drug Administration (FDA) guidelines, which require that generics and brands contain the same active ingredients and meet the same quality requirements. You and your doctor should refer to the Prescription Drug List (PDL) to consider prescription medication choices and select the appropriate medication(s) to meet your needs. A copy of the PDL can be found on myuhc.com.

Research your prescription drug list

In some cases, brand-name medications may be less expensive than generics.

To price a medication and learn of any lower cost alternatives, go to myuhc.com and select "Price a Medication." As always you should consult your doctor about which medications are right for you. Remember, with your HRA plan, you are responsible for the entire cost of a medication once your URA dollars are exhausted until your deductible has been met.

Look into Over-the-Counter options

Ask your doctor or pharmacist about over-the-counter (OTC) medications. An OTC medication can be a good treatment for many conditions. These medications are generally not covered under your pharmacy benefit, but they may cost less than your out-of-pocket expenses for prescription medications.

Please visit

www.dch.georgia.gov/shbp_plans

to view current issues of this publication.

Important contact information

Where to go when you want information

myuhc.com Personalized tools, information and answers for managing your health care. Log on anytime 24/7 to get important benefit, claim and health information on the Internet when it is convenient for you!

www.liveandworkwell.com An informative Web site with a behavioral health clinician directory, comprehensive health articles, tools and more.

NurseLine Services: 866-696-5846. Talk to a Registered Nurse 24 hours, seven days a week and access thousands of topics in the Health Information Library.

Care Coordination^{sм} Refer to the customer service phone number on the back of your ID card.

Definity HRA: 800-396-6515

Choice HMO: 866-527-9599

High-Deductible Health Plan: 877-246-4195

Retirees: 877-246-4190

For any claims or benefit-related questions or issues, please call the customer service number on the back of your card.

The Connection will be made available monthly at the myuhc.com site (www.myuhc.com/groups/gdch) and at www.dch.georgia.gov/shbp_plans to all State employees who are members of the UnitedHealthcare State of Georgia Health Benefit Plan.

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UnitedHealth Wellness[™] is a collection of programs and services offered to UnitedHealthcare enrollees to help them stay healthy. It is not an insurance product but is offered to existing enrollees of certain products underwritten or provided by United HealthCare Insurance Company or its affiliates to encourage their 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. Therefore, some services may not be included in some programs due to state regulations. Some UnitedHealth Wellness programs and services may not be included in all medical plans for all customers and individuals.

Insurance coverage provided by or through United HealthCare Insurance Company. Health Plan coverage provided by or through United HealthCare of Georgia, Inc.

Address updates

You could be missing out on important mailings.

For active employees, please complete and submit an Enrollment Miscellaneous Update form that is available online at

www.dch.georgia.gov/shbp_plans.

Forms should be completed and returned to your payroll location benefit manager.

For retired employees, please submit the following information:

- Name
- Subscriber number from your UnitedHealthcare ID card or Social Security number
 - Current address
 - New address
 - Telephone number
 - Signature authorizing the address change

Retirees mail to:

State Health Benefit Plan P.O. Box 38342 Atlanta, GA 30334

