2021 Benefit Plan Options
Institute for Advanced Study

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Welcome

1. Original Medicare Basics

2. Plan Benefits, Programs and Features

3. What to Expect Next

4. How to Enroll

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Original Medicare Basics
When are you eligible for Medicare?

You’re 65 years old, or you’re under 65 and qualify on the basis of disability or other special situation

AND

You’re a U.S. citizen or a legal resident who has lived in the United States for at least 5 consecutive years

If you (or your spouse) have contributed payroll taxes to Medicare throughout your working life, you are eligible for Medicare when you reach age 65 — regardless of your income or health status
Understanding your Medicare choices

After you enroll in Original Medicare (Parts A and B), you may choose to enroll in additional Medicare coverage

**Step 1: Enroll in Original Medicare**

**Original Medicare**
Provided by the federal government

- **Part A**
  Helps pay for hospital stays and inpatient care

- **Part B**
  Helps pay for doctor visits and outpatient care

**Step 2: Decide if you need additional coverage.**
There are two ways to get it.

**OPTION 1** ———— or ————
Add one or both of the following to Original Medicare:

- **Medicare Supplement Plan**
  Offered by private companies
  Helps pay some or all of the out-of-pocket costs that come with Original Medicare

- **Medicare Part D Plan**
  Offered by private companies
  Helps pay for prescription drugs

**OPTION 2**
Choose a Medicare Advantage plan:

- **Medicare Advantage Plan or Part C Plan**
  Offered by private companies
  Helps pay some or all of the out-of-pocket costs that come with Original Medicare

  - **Part C:** Combines Part A (hospital insurance) and Part B (medical insurance) in one plan
  - **Part D:** Usually includes prescription drug coverage
  - Provides additional benefits, services and programs not provided by Original Medicare

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Option 1:

Keep Original Medicare and add:

Medicare Supplement Plan

AND/OR

Medicare Part D (prescription drugs)
Option 2:

Medicare Part C (Medicare Advantage Plan)

Medicare Advantage Plan
Offered by private companies

- Combines Part A (hospital insurance) and Part B (medical insurance) in one plan
- Usually includes prescription drug coverage
- Provides additional benefits, services and programs not provided by Original Medicare
Plan Benefits, Programs and Features

UnitedHealthcare Group Medicare Advantage National PPO
Your Medicare Advantage plan

Medicare Advantage (Part C) plans are provided through private insurers, like UnitedHealthcare

All the benefits of Part A
- Hospital stays
- Skilled nursing
- Home health

All the benefits of Part B
- Doctor visits
- Outpatient care
- Screenings and shots
- Lab tests

Prescription drug coverage
- Included in many Medicare Advantage plans

Additional benefits, programs and features
- May be bundled with the plan

The advantages of a single plan

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Your plan overview National PPO

• Coverage for visiting doctors, clinics and hospitals
• Prescription drug coverage
• No referral needed to see a specialist
• You can see a doctor outside the network for the same cost share as in-network providers as long as the provider participates in Medicare and accepts the plan
• Plan is offered in all 50 states and US territories
Your doctors National PPO

• This plan lets you visit doctors, specialists and hospitals in or out of our network for the same cost share as long as the provider participates in Medicare and accepts the plan.

• Even though you are not required to see a network doctor, your doctor may already be part of our network. To find out, search our online Provider Directory at www.UHCRetiree.com or call UnitedHealthcare® Customer Service.
### UnitedHealthcare Group Medicare Advantage National PPO

<table>
<thead>
<tr>
<th></th>
<th>You Pay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual deductible</td>
<td>$0</td>
</tr>
<tr>
<td>Annual out-of-pocket maximum</td>
<td>$2,000</td>
</tr>
</tbody>
</table>

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### UnitedHealthcare Group Medicare Advantage National PPO

<table>
<thead>
<tr>
<th>Benefit Coverage</th>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Care Provider (PCP)</td>
<td>$15</td>
<td>$15</td>
</tr>
<tr>
<td>office visit</td>
<td>$15</td>
<td></td>
</tr>
<tr>
<td>Specialist office visit</td>
<td>$30</td>
<td>$30</td>
</tr>
<tr>
<td>Urgent care</td>
<td>$30</td>
<td>$30</td>
</tr>
<tr>
<td>Emergency room</td>
<td>$65</td>
<td>$65</td>
</tr>
<tr>
<td>Inpatient hospitalization</td>
<td>$250 per admission</td>
<td>$250 per admission</td>
</tr>
<tr>
<td>Outpatient surgery</td>
<td>20%</td>
<td>20%</td>
</tr>
</tbody>
</table>
## UnitedHealthcare Group Medicare Advantage National PPO

### Preventive Services

<table>
<thead>
<tr>
<th>Benefit Coverage</th>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual physical</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Annual wellness visit</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Immunizations</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Breast cancer screenings</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Colon cancer screenings</td>
<td>$0</td>
<td>$0</td>
</tr>
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UnitedHealthcare Group Medicare Advantage National PPO

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<th>Benefit Coverage</th>
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</thead>
<tbody>
<tr>
<td>Medicare-covered podiatry</td>
<td>$30</td>
<td>$30</td>
</tr>
<tr>
<td>Medicare-covered chiropractic care</td>
<td>$15</td>
<td>$15</td>
</tr>
<tr>
<td>Medicare-covered vision services</td>
<td>$30</td>
<td>$30</td>
</tr>
<tr>
<td>Medicare-covered hearing services</td>
<td>$30</td>
<td>$30</td>
</tr>
</tbody>
</table>
Diabetes testing and monitoring supplies

When you use one of the approved meters and corresponding strips, your cost-share for diabetes testing and monitoring supplies is a **$0 copay**.

These supplies also include any brand of lancets, lancing device, glucose control solution (to test the accuracy of your meter), and replacement batteries for your meter.

To switch to one of the preferred brands, you may be required to get a new prescription from your doctor. A temporary supply of your current brand can be requested.
Your Part D (prescription drug) coverage

• UnitedHealthcare® has over 67,000 national, regional, local chains and independent neighborhood pharmacies in our network

• Thousands of covered brand name and generic prescription drugs

Check your plan’s drug list online at www.UHCRetiree.com or call Customer Service to see if your prescription drugs are covered.
# Drug payment stages — full coverage in the gap

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<tr>
<th>Initial Coverage</th>
<th>Coverage Gap</th>
<th>Catastrophic Coverage</th>
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<tr>
<td>In this drug payment stage:</td>
<td>Your plan provides additional coverage through the gap</td>
<td>After your <strong>out-of-pocket costs</strong> reach $6,550.</td>
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<td>You pay a copay or coinsurance (percentage of a drug’s total cost) and the plan pays the rest</td>
<td>You continue to pay the same copay or coinsurance as you did in the initial coverage stage</td>
<td>You pay a small copay or coinsurance amount</td>
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<td>You stay in this stage until your <strong>total drug costs</strong> reach $4,130</td>
<td>You stay in this stage until your <strong>out-of-pocket costs</strong> reach $6,550</td>
<td>You stay in this stage for the rest of the plan year</td>
</tr>
</tbody>
</table>
# Your Part D (prescription drug) plan:

<table>
<thead>
<tr>
<th>Tier</th>
<th>Prescription Drug Type</th>
<th>Your Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Retail 30-day supply</td>
</tr>
<tr>
<td>Tier 1</td>
<td><strong>Preferred Generic</strong> —</td>
<td>$10</td>
</tr>
<tr>
<td></td>
<td>Most generic drugs.</td>
<td></td>
</tr>
<tr>
<td>Tier 2</td>
<td><strong>Preferred Brand</strong> —</td>
<td>$20</td>
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<tr>
<td></td>
<td>Many common brand name drugs, called preferred brands and some higher-cost generic drugs.</td>
<td></td>
</tr>
<tr>
<td>Tier 3</td>
<td><strong>Non-preferred Drug</strong> —</td>
<td>$35</td>
</tr>
<tr>
<td></td>
<td>Non-preferred generic and non-preferred brand name drugs. In addition, Part D eligible compound medications are covered in Tier 3.</td>
<td></td>
</tr>
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<td>Tier 4</td>
<td><strong>Specialty Tier</strong> —</td>
<td>$35</td>
</tr>
<tr>
<td></td>
<td>Unique and/or very high-cost brand and generic drugs.</td>
<td></td>
</tr>
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</table>
More ways you can save

Review your medications
Discuss all your prescription drugs with your doctor at least once a year

Use your UnitedHealthcare® member ID card
Show your member ID card at the pharmacy to get the plan’s discounted rates

Use participating network pharmacies
You may save on the medication you take regularly

Consider using OptumRx® Home Delivery Pharmacy
You could save time and trips to the pharmacy
UnitedHealthcare®
HouseCalls

Yearly check-ups at home to help stay up-to-date on your health between regular doctor's visits at no extra cost.

What to expect from a HouseCalls visit:

• A knowledgeable health care practitioner will perform a head to toe exam, health screenings, review your health history and current medications, help identify health risks and provide health education

• You can talk about health concerns and ask questions that you haven't had time to ask before

• You'll get a personalized checklist of topics to discuss at your next doctor's visit

• HouseCalls will send a summary of your visit to you and your primary care provider

Enjoy a preventive care visit in the privacy of your own home*

*HouseCalls may not be available in all areas.
Take an active role in your health with Renew

Renew by UnitedHealthcare® is a health and wellness experience that helps empower you to take charge of your well-being every day. It provides a wide variety of useful resources and activities, including brain games, healthy recipes, learning courses, fitness activities and more. Plus, you may be eligible to earn rewards by completing certain health care activities such as your annual physical or wellness visit.**

Renew can help you take a more active role in your health and wellness through:

- **Renew Magazine**
- **Recipe library**
- **Renew Active™**
- **Streaming music**
- **Renew Rewards**
- **Learning courses**
- **Brain games**
- **Interactive quizzes and tools**
- **Health news, articles and videos**
- **Health topic library**
- **Photo gallery**

*Renew by UnitedHealthcare is not available in all plans. Resources may vary.

**Reward offerings will vary by member and Renew Rewards is not available in all plans with Renew by UnitedHealthcare.
Annual physical and wellness visit

Schedule your annual physical and wellness visit — both are covered by your health plan for a $0 copay.*+

- Save time by combining your wellness visit and physical into a single office visit
- Schedule your appointment early in the year to get any other preventive care you may need
- Make sure you follow through with your provider’s recommendations for screenings, exams and other care

You can get your annual wellness visit any time during the calendar year no matter when you had your last visit the previous year.

* A copay or coinsurance may apply if you receive additional services that are not part of the annual physical.
* Covered at a $0 copay when you see a network doctor (if your plan has a network).
Introducing Renew Active™. The gold standard in Medicare programs for body and mind.

- Stay active with a free gym membership
- Access to our extensive, nationwide network of gyms and fitness locations. It’s one of the largest of all Medicare fitness programs.*
- Personalized fitness plan to help you get started
- Online brain health program from AARP® Staying Sharp, including exclusive content for Renew Active members.
- Connect with other health-minded members at local health and wellness events, and through the Fitbit® Community for Renew Active members. No Fitbit device is needed.
- If you prefer to work out from home, you can access Fitbit Premium™ with thousands of workout videos.

*Based on gym and fitness location network size.
With Virtual Visits, you’re able to live video chat with a doctor or behavioral health specialist from your computer, tablet or smartphone anytime, day or night.<4>

Virtual Doctor Visits
You can ask questions, get a diagnosis, or even get medication prescribed and have it sent to your pharmacy. All you need is a strong internet connection. Virtual Doctor Visits are good for minor health concerns like:

- Allergies, bronchitis, cold/cough
- Fever, seasonal flu, sore throat
- Migraines/headaches, sinus problems, stomachaches

Virtual Behavioral Health Visits
Virtual Behavioral Health Visits may be best for:

- Initial evaluation
- Medication management
- Addiction
- Depression
- Trauma and loss
- Stress or anxiety

You can find a list of participating Virtual Visit providers by logging into your member website.
NurseLine

You are never alone with NurseLine

NurseLine was designed specifically to help make your health decisions simple and convenient by providing answers to your health questions any time, anywhere — 24 hours a day, 7 days a week — at no additional cost.

When you call, a registered nurse can help you:

• Choose where to go for care — whether that’s self-care, a doctor visit or urgent care
• Find a doctor or hospital that meets your needs and preferences
• Understand your diagnosis and explore treatment options

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UnitedHealthcare Hearing

Hear the moments that matter most

With UnitedHealthcare Hearing, you can receive a hearing exam and have access to a wide selection of name-brand and private-labeled custom-programmed hearing aids at significant savings. Plus, you’ll receive personalized care and follow-up support from experienced hearing providers, helping you to hear better and live life to the fullest.

• Get access to the largest nationwide accredited network of more than 5,500 hearing providers*

• Choose latest technology hearing aids from major manufacturers, including Phonak, Starkey®, Oticon, Signia, ReSound, Widex® and Unitron™

• Order hearing aids in-person or through home delivery

• Receive exclusive pricing, helping you save thousands of dollars

*Please refer to your Summary of Benefits for details on your benefit coverage.
Plan Benefits, Programs and Features
UnitedHealthcare AARP Medicare Supplement and Part D Plan
Changes to Medicare Supplement Plans

• Congressionally mandated changes to Plan F eligibility go into effective January 1, 2020.
  
  • Any Medicare eligible individual who turned 65 prior to January 1, 2020 will remain eligible for Plan F.
  
  • Any Medicare eligible individual who turned 65 after January 1, 2020 will no longer be able to enroll in Plan F.

The main difference between Plan F and Plan G is that Plan G requires individuals to pay their Part B deductible, $198 in 2020.
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Understanding Original Medicare’s rules

• You must be entitled to Medicare Part A and/or enrolled in Medicare Part B and continue to pay your Medicare Part B premium.

• You can only be in one Medicare Advantage plan at a time. Enrolling in another plan will automatically disenroll you from any other Medicare Advantage or prescription drug plan.

• If you do not enroll in a Medicare Part D prescription drug plan or a Medicare Advantage plan that includes prescription drug coverage, or you do not have other creditable prescription drug coverage, you may have to pay Medicare’s Late Enrollment Penalty.

• The EOC also covers specific plan benefits, copays, exclusions, limitations and other terms.

• Please review the full text of the Statement of Understanding in your 2021 enrollment kit.
What to Expect Next
What to expect after enrollment

You will receive your new UnitedHealthcare® member ID card along with Quick Start Guide that gives you more information on how your benefits work and how to get the most out of your plan. You can start using your member ID card as soon as your plan is effective.

After you receive your member ID card, you can register online at www.UHCRetiree.com to get access to your plan information.

Soon after your effective date, we will contact you to complete a short health survey so we can understand your unique health needs.
Explore your plan benefits virtually

The Virtual Education Center, a new online resource, was created because it's not always possible to share information face-to-face. We've brought all our resources together in one place, wherever and whenever you need it.

You can learn about the benefits, programs and services available to you as part of the UnitedHealthcare Group Medicare Advantage National PPO Plan. View flyers, brochures, videos and more at www.uhcvirtualretiree.com/ra
How to use your new plan

It’s easy!

• Simply use your UnitedHealthcare® member ID card each time you go to the doctor or hospital or get a prescription filled at the pharmacy

• The back of your member ID card lists important phone numbers you may need throughout the year

• Don’t discard your red, white and blue Medicare card

Store this card in a safe place
After you get your UnitedHealthcare® member ID card, sign up for your secure online personal account at UHCRetiree.com.

After you sign up, you can:

- Look up your latest claim information
- Review benefit information and plan materials
- Print a temporary UnitedHealthcare® member ID card and request a new one
- Look up drugs and how much they cost under your plan
- Search for network doctors
- Explore Renew by UnitedHealthcare, our member-only Health & Wellness experience
- Get your Explanation of Benefits online

Follow these easy steps to sign up for your online account:

1. Visit the website and click on the “New user? Register Now” button and then click “Register Now”.
2. Enter your information (first and last name, date of birth, ZIP code, UnitedHealthcare member ID number) and click "Continue".
3. Create your username and password, enter your email address, and click “Create my ID”.
4. For security purposes, you will need to verify your account by email, call or text.
How to Enroll
How To Enroll

Enrollments can be completed over the phone or by mailing in your application

• If you would like to enroll in a plan offered by the Institute for Advanced Studies, please call our customer service team 8 am – 8pm local time, 7 days a week at 877-714-0178, TTY 711

• When calling UnitedHealthcare, please ensure you identify yourself as a retiree from Institute for Advanced Study to ensure you receive information on the correct benefit options for you
Questions and Answers
Thank You
We look forward to welcoming you to our Medicare family.
Additional information

This information is not a complete description of benefits. Call [insert customer service phone number/TTY] for more information. [Limitations, copayments, and restrictions may apply.] [Benefits, premiums and/or copayments/co-insurance] may change on January 1 of each year.

The <formulary, pharmacy network, and/or provider network> may change at any time. You will receive notice when necessary.

You must continue to pay your Medicare Part B premium [,] [if not otherwise paid for under Medicaid or by another third party.]

Out-of-network/non-contracted providers are under no obligation to treat <Plan/Part D Sponsor> members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information [, including the cost-sharing that applies to out-of-network services].

This document is available in alternative formats. If you receive full or partial subsidy for your premium from a plan sponsor (former employer, union group or trust), the amount you owe may be different than what is listed in this document. For information about the actual premium you will pay, please contact your plan sponsor's benefit administrator directly.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor. Enrollment in the plan depends on the plan's contract renewal with Medicare.

[<1>OptumRx is an affiliate of UnitedHealthcare Insurance Company. You are not required to use OptumRx home delivery for a [<90- or 100-day>] supply of your maintenance medication. If you have not used OptumRx home delivery, you must approve the first prescription order sent directly from your doctor to OptumRx before it can be filled. Prescriptions from OptumRx should arrive within 5 business days after we receive the complete order. Contact OptumRx anytime at 1-888-279-1828, TTY 711.]

[Other pharmacies are available in our network.]
Additional information

Renew by UnitedHealthcare is not available in all plans.

[<2>Availability of the SilverSneakers program varies by plan/market. Refer to your Evidence of Coverage for more details. Consult a health care professional before beginning any exercise program. SilverSneakers is a registered trademark of Tivity Health, Inc. SilverSneakers GO and SilverSneakers On-Demand are trademarks of Tivity Health, Inc. © 2020 Tivity Health, Inc. All rights reserved.]

[<3>Participation in the Renew Active™ program is voluntary. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine. Renew Active includes standard fitness membership. Equipment, classes, personalized fitness plans, caregiver access and events may vary by location. Certain services, classes and events are provided by affiliates of UnitedHealthcare Insurance Company or other third parties not affiliated with UnitedHealthcare. Participation in AARP® Staying Sharp and the Fitbit® Community for Renew Active is subject to your acceptance of their respective terms and policies. AARP® Staying Sharp is the registered trademark of AARP®. UnitedHealthcare is not responsible for the services or information provided by third parties. The information provided through these services is for informational purposes only and is not a substitute for the advice of a doctor. The Renew Active program varies by plan/area. Access to gym and fitness location network may vary by location and plan. Renew Active premium gym and fitness location network only available with certain plans.]

[<4>Benefits and availability may vary by plan and location.]

[<5>The NurseLine service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through this service is for informational purposes only. The nurses cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. Access to this service is subject to terms of use.]

This information is available for free in other languages. Please call our customer service number located on the back of your member ID card.