

There's more to explore

2025 benefit options

State of Arizona employees

uhcvirtual.com/stateofaz





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State of Arizona employees

Taking you in healthy directions

At UnitedHealthcare, we are honored to come along with you on your health journey, helping make your health & wellness a top priority. Your path to good health may have obstacles and unexpected detours, but our compassionate health care advocates are here to guide you. Whether it's routine check-ups, preventive care or unexpected medical emergencies, our plans are designed to keep you covered.

In 2025, we are proud to partner with the State of Arizona offering you 2 coverage options: the Triple Choice Plan and High Deductible Health Plan (HDHP) with Health Savings Account (HSA).

We understand your needs may move through your health care journey, so our plans provide personalized support and tailored benefits. In 2025, we are once again enhancing your plans with access to Calm Health.

Calm Health is available through UnitedHealthcare at no additional cost to you. Calm Health is an easy-to-use app that includes all of the Calm app's most popular features and so much more. Calm Health provides personalized plans to help support your mental health and physical well-being.

If you are unsure about which plan is right for you and your family, our Virtual Education Center, plan selection tool and comparison charts can help you with this important decision.

Thank you for considering UnitedHealthcare. Take your first step toward a rewarding health journey today! If you have questions, call us at **1-800-896-1067**. Our team is here for you, every step of the journey.

Heather Kane
Health Plan CEO

Health care terms

Coinsurance – Your share of the costs of a covered health care service, calculated as a percentage of the allowed amount for the service

Copay – A fixed amount you pay for a covered health care service, usually when you receive the service

Deductible – The amount you owe for health care services before your health plan begins to pay

Out-of-pocket maximum – The most money you have to pay for covered expenses in a plan year

For more health care term definitions, visit the Just Plain Clear® English and Spanish Glossary at glossary.justplainclear.com.

A few steps to see along the way



Network coverage
with nationwide Tier 1
and UnitedHealth
Premium® program
providers



Provider access with
24/7 Virtual Visits through
myuhc.com and the
UnitedHealthcare® app



Emotional support
with a variety of
behavioral health tools



Support for families
of children with
special needs



Dedicated Customer
Service team to
answer health and
benefit questions



Innovative technology
with **myuhc.com**
and the
UnitedHealthcare app



Personalized condition
support for over
100 chronic conditions
and catastrophic
health events



Weight management
support with the online
Real Appeal and
Wondr Health
programs

Find your perfect fit

Visit our Virtual Education Center at uhcvirtual.com/stateofaz, where you can learn about the UnitedHealthcare benefits and services offered for 2025 from the comfort of your own home or on the go. Using your computer or mobile device, you can virtually walk through booths to learn about your health plans options, compare plans with our health plan selection tool, search for network providers, and learn about the physical and mental health programs available with both plans.

Benefits wherever you wander

No matter which UnitedHealthcare plan you choose, you'll have access to our network of doctors and hospitals, including:



Access to our nationwide network of nearly **1.8 million** physicians and health care professionals and **5,600** hospitals, including Mayo Clinics*



A local Arizona network that includes over **38,000** health care providers and **80+ hospitals***



Access to visits with specialists without needing a referral



Access to behavioral health benefits including in-person and virtual visits plus digital self-help tools



The ability to see a doctor from the comfort of home with 24/7 Virtual Visits



Access to virtual primary care through **myuhc.com** and the **UnitedHealthcare app**


Tips for using your health plan

General tips	Triple Choice Plan	High Deductible Plan with Health Savings Account (HSA)
<ul style="list-style-type: none">• Choose a network primary care physician (PCP)• Schedule your preventive care with your physician; this is covered at no additional cost as long as you use network providers• Avoid seeing out-of-network providers when possible as they will cost you more• Register for myuhc.com to track expenses, find participating providers and compare costs• Take advantage of your virtual care options	<ul style="list-style-type: none">• Choose a Tier 1 PCP• If you are referred to a specialist, check with UnitedHealthcare to ensure the specialist is Tier 1 to have the lowest out-of-pocket cost• Open a health care flexible spending account (FSA) to help pay for your medical, dental and vision expenses• Your FSA is funded with pre-tax dollars so you automatically save on taxes; make sure to use all the money you've contributed to your FSA so you don't lose it	<ul style="list-style-type: none">• Choose a network provider• Make sure you open your HSA with Optum Bank®; if you don't open your account, you could be losing out on contributions made by your State agency• Consider making your own contribution to the HSA; this is done on a pre-tax basis so you are saving money on taxes and it helps you pay for your health care <p>Tip: Some individuals take the difference in premium between the Triple Choice Plan and the High Deductible Health Plan and deposit the money in their HSA.</p>

Discover your options

You have 2 plans to choose from: the **Triple Choice Plan** and the **High Deductible Health Plan (HDHP)**. Visit uhcvirtual.com/stateofaz to learn more.

Triple Choice Plan	High Deductible Health Plan
<ul style="list-style-type: none">• You'll first have a deductible to meet before your plan will start to pay; then you'll be responsible for copays for most services*• Preventive care is covered 100% when you see a network doctor• You have network coverage with our nationwide Tier 1 and Tier 2 network• You have out-of-network coverage, but those providers will likely charge you more and you will be responsible for making sure your claim is filed	<ul style="list-style-type: none">• You'll first have a deductible to meet before your plan will start to pay; then you'll be responsible for coinsurance for most services*• Preventive care is covered 100% when you see a network doctor• With the UnitedHealthcare High Deductible Health Plan, you'll have network coverage with our nationwide network• You have out-of-network coverage, but those providers will likely charge you more and you will be responsible for making sure your claim is filed• You are eligible to open an HSA to help you save and pay for qualified medical expenses

<div><div>TIER 1</div><p>Tier 1 providers are listed on myuhc.com and in the UnitedHealthcare app with the blue dot next to their names.**</p><hr/><p>Our Tier 1 providers meet quality standards and deliver the greatest value in health care. With the UnitedHealthcare Triple Choice Plan, all network hospitals, urgent cares, labs, radiology facilities, medical equipment providers, behavioral health providers and surgical facilities are considered Tier 1.</p></div>	<div><div></div><p>Premium Care Physicians are listed on myuhc.com and in the UnitedHealthcare app with 2 blue hearts next to their names.</p><hr/><p>Our Premium Care Physicians meet criteria, for safe, timely, effective and efficient care.</p></div>
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* Consult your plan materials for detailed benefit information.
** Tier 1 providers may be subject to change. Visit myuhc.com for the most current information or call the number on your health plan ID card.

A side-by-side comparison of plans

	Triple Choice Plan			High Deductible Health Plan	
	Tier 1 network	Tier 2 network	Tier 3 out of network	Network	Out of network
Plan year deductible	Jan. 1–Dec. 31			Jan. 1–Dec. 31	
Deductible cross-applies to Tier 1 and Tier 2*					
Individual	\$200*	\$1,000*	\$5,000*	\$1,650^	\$5,000^
Family	\$400*	\$2,000*	\$10,000*	\$3,300^	\$10,000^
Out-of-pocket maximum					
Individual	\$7,350**		\$8,700**	\$3,500^^	\$8,700^^
Family	\$14,700**		\$17,400**	\$7,000^^	\$17,400^^
HSA employer contribution^^^					
Individual	Not applicable			\$720^^^	
Family	Not applicable			\$1,440^^^	
Preventive care services including preventive office visits, lab, radiology and other tests	No charge	No charge	You pay 50% after deductible	No charge	You pay 50% after deductible
Primary care office visit PCP: General practice, family practice, OB/GYN, internal medicine and pediatrician	You pay \$20 copay after deductible	You pay \$20 copay after deductible	You pay 50% after deductible	You pay 10% after deductible	You pay 50% after deductible
Specialist office visit	You pay \$40 copay after deductible	You pay \$40 copay after deductible	You pay 50% after deductible	You pay 10% after deductible	You pay 50% after deductible
Maternity services Includes initial office visit, prenatal and postnatal care	You pay \$20 copay after deductible	You pay \$20 copay after deductible	You pay 50% after deductible	You pay 10% after deductible	You pay 50% after deductible
Urgent care	You pay \$75 copay after deductible	Same as Tier 1	You pay 50% after deductible	You pay 10% after deductible	You pay 50% after deductible
Emergency room (ER copay waived if admitted)	You pay \$200 copay after deductible	Same as Tier 1	Same as Tier 1	You pay 10% after deductible	You pay 10% after deductible
Inpatient hospital	You pay \$250 copay after deductible	Same as Tier 1	You pay 50% after deductible	You pay 10% after deductible	You pay 50% after deductible
Behavioral health, mental health and substance use services					
Inpatient	You pay \$250 copay after deductible	Same as Tier 1	You pay 50% after deductible	You pay 10% after deductible	You pay 50% after deductible
Outpatient	You pay \$20 copay after deductible	Same as Tier 1	You pay 50% after deductible	You pay 10% after deductible	You pay 50% after deductible

*Tier 1 deductible also applies to Tier 2, and Tier 2 deductible also applies to Tier 1. Out-of-network deductible is separate and does not apply to Tier 1 or Tier 2 services. Deductible is per individual, not to exceed the stated amount per family. Copay or coinsurance applies after deductible has been met. Deductible does not apply to preventive care or pharmacy.

**Deductible and copayments for covered medical and pharmacy services apply to the out-of-pocket maximum. Once the out-of-pocket maximum has been reached for the year, the Plan will pay 100% for all covered services the remainder of the year.

^If more than 1 person is covered under the Plan, the family deductible must be met before the Plan will start to pay. The deductible applies to all covered medical and pharmacy services.

^^If more than 1 person is covered under the Plan, the family out of pocket must be met. Deductible, coinsurance and copays for covered medical and pharmacy services apply to the out-of-pocket maximum. Once the out of pocket has been met, the Plan will pay 100% for all covered services the remainder of the year.

^^^Applies to HDHP election only. Contribution made after account has successfully been opened with Optum Bank. Annual contribution calculation based on 26 pay period cycles of \$27.69 individual/\$55.38 family.

Not sure which plan to choose?

Visit the Virtual Education Center at uhcvirtual.com/stateofaz and use our health plan selection tool to compare your options and choose the best plan to fit your lifestyle and health care needs.

The plan selection tool can help you choose a plan by estimating costs, comparing plans or displaying plan details. Enter some information, such as whether you want married or single coverage, number of children you want to cover and anticipated plan usage for the next year, and the tool will provide results to help you decide.

You can also see additional features, such as what behavioral health services are available, and search providers to see if your doctor is in the network.

Choosing a network doctor

From PCPs to specialists, UnitedHealthcare makes it simple to find a network provider who is the right fit for you. Start your search at uhcvirtual.com/stateofaz/providers.

Through the website, you can search by doctor, facility name, type of service and more. Once you have narrowed your search, you will be able to see if the provider is accepting new patients, read patient reviews, get directions and log in to view costs.



How to recognize provider designations



Tier 1 providers
– available with the Triple Choice Plan



In-network providers
– covered at the tier 2 benefit level with the Triple Choice Plan

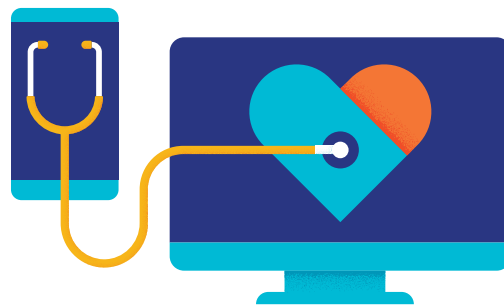


Premium Care Physicians
– look for this with the High Deductible Health Plan

Note that you may see more than 1 tier designation next to Tier 1 and Premium Care providers. Tier 1, for instance, will also display the in-network check mark.

Your North Star for everything benefits related

With **myuhc.com**, you can find answers to questions about your benefits, claims and health information. It's personalized for you and simple to use.



Choose where to go for services

- Search for a provider, clinic, hospital or lab based on location, specialty, quality, cost, services and more
- View patient ratings
- Estimate treatment costs
- Review your choices and choose where to go for service



Manage your claims

- See the current status of your claims as well as claims history
- Access features to help you track and manage your claims, such as the ability to add personalized notes
- Depending on your plan and if you do owe your health care provider, you may be able to send payment from the site



Learn about your wellness benefits

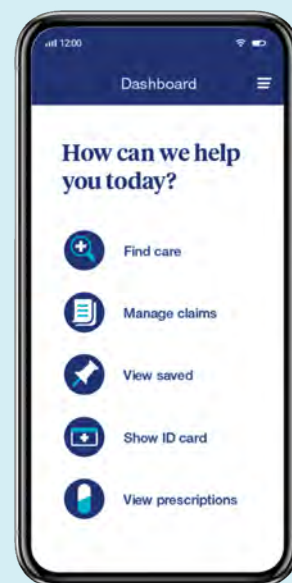
- Get tips on living healthier and using health plan benefits to your advantage
- Get reminders when it's time for check-ups or treatments
- Get suggestions on when to get immunizations, well visits, routine tests or lab work
- Chat with a nurse

Access your plan from anywhere

Whether you're out on the trail or at home, the **UnitedHealthcare app** offers convenient access to all of your plan information. Download the app to:

- Find nearby care options in the network
- Estimate costs
- Video chat with a doctor 24/7*
- View and share your health plan ID card
- See your claim details and view progress toward your deductible

* Data rates may apply.





Have an unexpected medical bill?

Naviguard® is available at no additional cost to you through your UnitedHealthcare health plan benefits. Naviguard can help resolve unexpected out-of-network medical bills over \$300 by negotiating directly with providers.*

What you need to know about the No Surprises Act

The No Surprises Act will protect you from balance billing for certain emergency situations, air ambulance and when an out-of-network provider provides services at a network facility. Naviguard may be able to help you resolve unexpected medical bills for services not covered by the No Surprises Act.

Call us before you pay anything

When you receive an unexpected out-of-network bill, call **1-800-896-1067**. UnitedHealthcare member services will initiate your case with Naviguard, and they'll help you navigate the resolution process.



Naviguard

Your partner in health care
billing resolution.

**Here are 2 options for
how to get started:**

1. Go to naviguard.com/uhc-member
2. Call UnitedHealthcare member
Services at **1-800-896-1067**

We'll be with you every step of the way

1 Call

If you or a family member has an out-of-network (OON) service not covered by the No Surprises Act, you will receive an Explanation of Benefits (EOB) and then a balance bill. Call UnitedHealthcare to get started with Naviguard.

2 Connect

You will be connected with a dedicated Naviguard advisor. You'll meet with their advisor to share your story, upload the OON bill and sign some forms so we can begin negotiating on your behalf.

3 Negotiate

Your dedicated Naviguard advisor begins negotiations with the OON provider while keeping you up to date on progress.

4 Outcome

Your Naviguard Advisor sends you a record of the process and the final outcome of negotiations. A new EOB may also be sent.

Use this card to call us before you pay anything

*For situations where the billed amount is above a certain amount.

Discover ways to find more care



Helping you stay healthy

Need help managing a chronic condition?

A Disease Management nurse can help. Our Disease Management programs offer personalized support.

If you need long-term support after a hospitalization or a catastrophic health event, a case management nurse can help you explore care options and provide resources for more than 100 chronic conditions.

Our Condition Management Programs are now more convenient with digital applications and messaging for a more integrated relationship with your nurse.

See a call from us?

We want to help you improve your health and understand your benefits. We may call you if:

- You or a family member has a serious or chronic medical condition
- You or a family member was recently hospitalized
- You are pregnant

If you see that UnitedHealthcare is calling, please answer. We're here to help.



More ways to save

If you choose the High Deductible Health Plan, you are eligible to open an Optum Bank HSA. You can use your pre-tax HSA contributions to help cover qualified health care expenses—like visits to the doctor, filling prescriptions at the pharmacy, dental work, vision exams and more. You can also save money in your account to help cover future medical expenses since there is no “use it or lose it” rule. The balance rolls over from year to year, so it's there when you may need it.



Call us with your questions

The UnitedHealthcare Advocate Team is here to help with any questions and concerns you may have, such as:

- Improving your health, managing a chronic condition and understanding complex medical issues
- Understanding how your health plan works
- Getting answers about your health accounts, a recent claim or how much you can expect to pay
- Finding a network provider, getting a new ID card or saving on health care costs—and much more

Have a child with complex medical needs?

A single point of contact provides more streamlined and compassionate support for your entire family and can help remove barriers that stand in the way of the medical, behavioral and pharmacy help your child needs. Your advocate can help:

- Provide support for insurance and payment, social needs, family well-being and care delivery
- Identify potential issues and provide alternatives
- Provide planning for the future
- Coordinate community and regional resources
- Provide faster access to services without frustration and confusion

To learn more, visit myuhc.com.



Your guide to behavioral health resources



If you or a family member is struggling with a situation that is having a negative impact on your mental health, don't go it alone. UnitedHealthcare offers access to more resources that can help.

Live and Work Well	<p>Live and Work Well offers support for stressful situations such as:</p> <ul style="list-style-type: none"> • Anxiety and stress • Alcohol and drug use • Grief and loss • Marital problems • Eating disorders • Compulsive spending or gambling • Medication management 	Visit liveandworkwell.com
Talkspace	<p>Communicate with a licensed therapist via live video using your phone or desktop computer. No office visit is required, and you can start therapy within hours of choosing a therapist. It's confidential and convenient. Your behavioral health benefit applies as an office visit for each week.</p>	<p>Register at talkspace.com/connect</p> <ul style="list-style-type: none"> • Select UHC under Use my Insurance Benefits • Click Get Started • Have your health plan ID card ready to verify your information
Behavioral health support	<p>From everyday challenges to more serious issues, receive confidential help from a psychiatrist or therapist for:</p> <ul style="list-style-type: none"> • Depression, stress and anxiety • Substance use and recovery • Eating disorders • Parenting and family problems <p>You can schedule a visit in person or virtually.</p>	<p>To schedule a behavioral health in-person or virtual visit:</p> <ul style="list-style-type: none"> • Sign in to myuhc.com • Select Find Care and Costs > Virtual Care • Choose Get Started for Virtual Behavioral Care <p>To schedule an in-person visit on myuhc.com, select Find Care and Costs > Behavioral Health Directory.</p>
Calm Health	<p>Get access to the most popular features of the Calm app and much more with Calm Health. Available through your benefits at no additional cost to you, it includes content written by licensed psychologists. Work at your own pace toward well-being goals like:</p> <ul style="list-style-type: none"> • Better sleep • Building skills to manage stress • Developing resiliency • Starting and building a mindfulness habit 	<p>To get started</p> <ul style="list-style-type: none"> • Sign in to myuhc.com • Go to Coverage & Benefits > Mental Health
Virtual behavioral therapy and coaching	<p>You may also have access to 1:1 professional care from a compassionate AbleTo® therapist, coach or both over an 8-week program for members with qualifying medical conditions. Costs for therapy and coaching will vary based on your plan benefits and deductible.*</p>	Visit ableto.com/explore-more
ABA therapy	<p>Applied behavior analysis (ABA) therapy—included as part of your benefits—uses behavioral principles to teach children skills and behaviors they may not otherwise learn on their own.</p>	Call 1-800-896-1067, TTY 711
Substance use treatment	<p>If you or someone you love is struggling with substance use, call the Substance Use Treatment Helpline. It's available 24/7 as part of your benefits and is completely confidential—you can even remain anonymous.</p> <p>You can also receive confidential alcohol and drug addiction help via text with the Crisis Text Line. Crisis counselors are available 24/7.</p>	<p>To speak with a recovery advocate, call 1-855-780-5955. Or visit liveandworkwell.com/recovery to find care options and resources.</p> <p>To get started with the Crisis Text Line, text "Home" to 741741.</p>



Get maternity and parental support

If you're thinking about having a baby, or you have one already on the way, we are ready to help in every way we can. Tap into our library of pregnancy information, including custom video courses you can stream anytime, 24/7. You'll be able to track what you've learned and keep tabs on what you'll find out about next.

Online maternity courses include:

- Preconception: Preparing for a Healthy Pregnancy
- Pregnancy Nutrition and Exercise
- Pregnancy in the First Trimester
- Pregnancy in the Second Trimester
- Pregnancy in the Third Trimester
- Postpartum: The Fourth Trimester after Pregnancy
- Exploring Breastfeeding



With the **Neonatal Resource Services program**, receive consultations with neonatal nurses as well as access to some of the top neonatal intensive care unit (NICU) treatments in the nation.

Call to learn more: **1-800-896-1067, TTY 711**



Access Transplant Resource Services

If you need help with a transplant, our Centers of Excellence are designed to help you take care of all transplant-related services including travel and lodging assistance and hospital and physician charges. To learn more or get started, call **1-800-896-1067, TTY 711**.



Navigate your orthopedic care

Through a single point of contact, you get more help navigating the complex health care system, including access to specialized nurses and quality providers to help meet your needs, from early pain through treatment and beyond. To learn more or to get started, call **1-800-896-1067, TTY 711**.



Get support with Bariatric Resource Services

If you are considering surgical treatment for obesity, you need to make some difficult and important decisions. Among the most important decisions are which treatment to get and where to receive it. When you enroll in the BRS program, an experienced bariatric nurse will work with you to help you make informed decisions and find a Bariatric Center of Excellence for weight-loss surgery with better outcomes and fewer complications. To learn more or get started, call **1-800-896-1067, TTY 711..**



Get fit with One Pass Select

Find a fitness routine that fits your lifestyle and lets you explore a variety of activities. One Pass Select offers:

- No long-term contracts or annual fees*
- Flexible fitness options and the ability to use locations nationwide (not limited to 1 gym)
- Access to digital fitness apps and classes
- The ability to add up to 4 additional discounted memberships on your account (ages 18+)
- The option to change tiers monthly
- A grocery delivery subscription with Classic tier or above

Get started at onepassselect.com. Have your Health Plan ID card handy.

Build healthy habits with Real Appeal

Real Appeal is an online program, available at no additional cost, that can help you lose weight and improve your health.

Start with small steps

Set achievable nutrition, exercise and weight management goals, and track your progress from your daily dashboard.

Find support and community

Get support with personalized messages, online group sessions lead by coaches and a caring community of members.

Get a Success Kit

Make the most of tools and resources like weight and food scales, a portion plate and more delivered right to your door.

Try Wondr Health

Wondr is also an online program, available at no additional cost, that can help you lose weight and improve your health. Wondr has:

- Self-paced online classes
- A Welcome Kit including a manual, tape measure and bracelet
- A member portal
- A mobile app

*There is a 1-time fee at time of registration.

Notice

We do not treat members differently because of sex, age, race, color, disability or national origin.

If you think you weren't treated fairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator:

Mail: UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UT 84130

Online: UHC_Civil_Rights@uhc.com

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 member phone number listed on your ID card.

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>

Phone: Toll-free 1-800-368-1019, 1-800-537-7697 (TDD)

Mail: U.S. Dept. of Health and Human Services
200 Independence Avenue SW, Room 509F
HHH Building
Washington, DC 20201

We provide free services to help you communicate with us such as letters in other languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free member phone number listed on your health plan ID card.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

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。

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.

PAALALA: 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.

توجّه: إذا كنت تتحدث لغة عربية (**Arabic**)، فيمكننا مساعدتك في فهم اللغة الإنجليزية. اتصل بنا على الرقم المجاني. كل حركاتنا مجانية. كل حركاتنا مجانية.

ATANSYON: Si w pale Kreyòl ayisyen (**Haitian Creole**), ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

ATTENTION : Si vous parlez français (**French**), des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

UWAGA: Jeżeli mówisz po polsku (**Polish**), udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala português (**Portuguese**), contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ACHTUNG: Falls Sie Deutsch (**German**) sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

توجّه: اگر زبان شما فارسی (**Farsi**) است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفاً با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप हिंदी (**Hindi**) बोलते हैं, आपको भाषा सहायता सेवाएं, नि:शुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

DÍÍ BAA'ÁKONÍNÍZIN: Diné (**Navajo**) bizaad bee yánilti'go, saad bee áka'anida'awo'ígíí, t'áá jíik'eh, bee ná'ahóót'i'. T'áá shqodí ninaaltsoos nítł'izí bee nééhozinígíí bine'déé' t'áá jíik'ehgo béésh bee hane'i biká'ígíí bee hodíilnih.

This document includes general information about your medical benefit plan. This summary is not a plan document under which the plan is maintained and administered. Any discrepancies between this information and your plan documents will be governed by the plan documents. The benefits described on this website are subject to change at any time.

24/7 Virtual Visits is a service available with a provider via video, or audio-only where permitted under state law. It is not an insurance product or a health plan. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 24/7 Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times, or in all locations, or for all members. Check your benefit plan to determine if these services are available.

The UnitedHealth Premium® program is a resource for informational purposes only. Designations are displayed in UnitedHealthcare online physician directories at myuhc.com®. You should always visit 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 a physician. If you already have a physician, you may also wish to confer with him or her for advice on selecting other physicians. You should also discuss designations with a physician before choosing him or her. Physician evaluations have a risk of error and should not be the sole basis for selecting a physician.** Please visit myuhc.com for detailed program information and methodologies.

Disease Management programs and services may vary by location and are subject to change with written notice. UnitedHealthcare does not guarantee availability of programs in all service areas and provider participation may vary. Certain items may be excluded from coverage and other requirements or restrictions may apply. If you select a new provider or are assigned to a provider who does not participate in the Disease Management program, your participation in the program will be terminated. Self-Funded or Self-Insured Plans (ASO) covered persons may have an additional premium cost. Please check with your employer.

Calm Health is not available to UnitedHealthcare E&I Fully Insured customers/members in District of Columbia, Maryland, New York, Pennsylvania, Virginia and West Virginia until a later date due to regulatory filings.

The information provided under Maternity Support is for general informational purposes only and is not intended to be nor should be construed as medical and/or nutritional advice. Participants should consult an appropriate health care professional to determine what may be right for them. If you believe you may have an emergency medical condition you should seek immediate care at an emergency department or call 911. Employers are responsible for ensuring that any wellness programs they offer to their employees comply with applicable state and/or federal law, including, but not limited to, GINA, ADA and HIPAA wellness regulations, which in many circumstances contain maximum incentive threshold limits for all wellness programs combined that are generally limited to 30 percent of the cost of self-only coverage of the lowest-cost plan, as well as obligations for employers to provide certain notices to their employees. Employers should discuss these issues with their own legal counsel.

The Centers of Excellence (COE) program providers and medical centers are independent contractors who render care and treatment to health plan members. The COE program does not provide direct health care services or practice medicine, and the COE providers and medical centers are solely responsible for medical judgments and related treatments. The COE program is not liable for any act or omission, including negligence, committed by any independent contracted health care professional or medical center.

One Pass Select is a voluntary program featuring a subscription-based nationwide gym network, digital fitness and grocery delivery service. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. Individuals should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for them. Purchasing discounted gym and fitness studio memberships, digital fitness or grocery delivery services may have tax implications. Employers and individuals should consult an appropriate tax professional to determine if they have any tax obligations with respect to the purchase of these discounted memberships or services under this program, as applicable.

Real Appeal is a voluntary weight management program that is offered to eligible members at no additional cost as part of their benefit plan. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical and/or nutritional advice. Participants should consult an appropriate health care professional to determine what may be right for them. Results, if any, may vary. Any items/tools that are provided may be taxable and participants should consult an appropriate tax professional to determine any tax obligations they may have from receiving items/tools under the program.

Advocate services 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 Advocate (Advocate4Me) services is for informational purposes only and provided as part of your health plan. Wellness nurses, coaches and other representatives 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. Advocate services are not an insurance program and may be discontinued at any time.

NurseLine is for informational purposes only. 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.

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What's on your mind?

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Start your journey

Ready to enroll? Visit benefitoptions.az.gov.

