USE YOUR PLAN TO YOUR ADVANTAGE.

2017 Getting Started Guide

Look inside to learn about your plan.

UnitedHealthcare Group Medicare Advantage (PPO) plan
Thank you for being a UnitedHealthcare® plan member.

We designed this guide to help you understand what you can do to make the most of your Pfizer-sponsored plan. And if you have questions, we’re always here to help — just give us a call.

Sincerely,
UnitedHealthcare
We’re in this together.

Good health takes teamwork. We’ll work together throughout the plan year to help you live a healthier life.

Getting your preventive care is an important step to good health. That’s why we will offer help or reminders throughout the plan year.

We’ll ask you to complete a health survey.

Medicare requires us to ask these questions, but you don’t have to complete the survey. Your answers will help us work better together. We’ll use your answers to suggest programs and resources that may help meet your needs.

✓ We’ll try to call you and ask you to complete the health survey over the phone. If we can’t reach you, we’ll mail the survey to you.

Questions? We’re here to help.

Toll-Free 1-866-868-0329, TTY 711, 8 a.m. – 8 p.m. local time, Monday – Friday

Learn more online at www.UHCRetiree.com/pfizer
Get a head start.
Schedule these visits early in your new plan year so you may stay healthier.

Enjoy a clinical visit in the comfort of your own home.
HouseCalls is an annual health program offered to you for no extra cost. The program sends a Nurse Practitioner or Physician who will visit you at home. During the visit, they will check your medical history and current medications. It can also give you a chance to ask any health questions you may have. Once completed, HouseCalls will send a summary of your visit to your doctor so that he/she has this additional information regarding your health. HouseCalls may not be available in all areas.

Schedule your annual physical and wellness visit.
Getting preventive care is vital to living a healthier life. It all starts with two yearly visits: your Annual Wellness Visit and routine physical exam. The Annual Wellness Visit is a great chance to meet with your doctor and create a plan for prevention. A co-pay or co-insurance may apply if your doctor orders lab work or includes additional screenings or tests during your routine physical exam. You can schedule both visits together, each calendar year.

Stay on top of your preventive care.
Preventive care is important for your health and may help catch health issues early. Your plan offers preventive care benefits like flu shots, screenings and immunizations, plus your doctor can recommend a personalized preventive care plan based on your age, health and medical history. Talk to your doctor about what is best for you. We will also send you recommendations throughout the year.

Reminder

Find your doctor.
We encourage all of our members to have a strong relationship with a primary care provider (PCP) or doctor. If you need to find a doctor, specialist or facility, we can help. We’ll even help schedule your first appointment after your coverage begins.
Your to-do list.

Here are some more things you can do once your plan is effective.

Make sure we have your current contact information.
To update your address, phone number and email address, please call us toll-free at 1-866-868-0329, TTY 711, 8 a.m. to 8 p.m. local time, Monday through Friday.

Tell us about your primary care provider (PCP) or doctor.
We encourage all our members to have a doctor or health care provider they see regularly. While it is not required, it is important for us to know who your doctor is so we may help your doctor provide you the care and attention that you deserve. You can tell us who your doctor is or get help finding a doctor by calling us at the customer service phone number found in this booklet or on the back of your member ID card.

Choose an authorized representative.
By law, you are the only person who can access your account online or discuss it with us over the phone. You can choose a trusted person to have access to your account information. This person does not have the right to make plan decisions for you, but they can help you understand and manage your plan. Call the number on the back of your member ID card to add an authorized representative.

Please note, if you would like to have an authorized representative help you with hrSource that needs to be done separately with a hrSource representative.

Watch the mail for your member ID card.
Bring your card with you when you get health care services. When your card arrives, check the following:
✓ Is all of your information correct? If not, call us to update it.
Take advantage of extras.

As a member of this Pfizer-sponsored plan, you’ll have an array of programs and services available. Start looking now to see which ones you’ll want to use right away once your plan is effective. Please review the Evidence of Coverage in the Plan Details booklet for complete details.

Hearing Aids

In addition to your hearing aid allowance, with hi HealthInnovations™ you may be able to get a discount on hearing aids. Each hearing aid is custom programmed for your unique hearing needs. To learn more, call toll-free 1-855-523-9355, TTY 711, 9 a.m. to 5 p.m CT, Monday through Friday or visit www.hiHealthInnovations.com.

Get active and have fun with SilverSneakers® Fitness

Designed for all fitness levels and abilities, SilverSneakers includes access to exercise equipment, classes and more than 13,000 participating locations. SilverSneakers signature classes, offered at select locations, are led by certified instructors trained specifically in adult fitness and include a range of options from using light hand weights to more intense circuit training. At-home kits are offered for members who want to start working out at home or for those who can’t get to a fitness location due to injury, illness or being homebound.

Solutions for Caregivers

Make caring for a family member, friend or neighbor a little easier with resources and support tailored to your needs. To learn more, call toll-free 1-866-896-1895, TTY 711, 24 hours a day, 7 days a week.

Access educational resources, discounted products and services anytime online at www.UHCforCaregivers.com/welcome/uhcretiree. Please use code uhcretiree when creating an account. Explore myCommunity, a helpful task and calendar tool to manage support and care.

\(^1\) The products and services described above are neither offered nor guaranteed under our contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to the UnitedHealthcare grievance process.
Get rewarded for health-related activities.
You may be eligible for rewards when you complete certain health-related activities. Look for additional information about these rewards soon after your plan’s effective date.

Questions about your extras? Give us a call.
Toll-Free 1-866-868-0329, TTY 711, 8 a.m. – 8 p.m. local time, Monday – Friday
Learn more online at www.UHCRetiree.com/pfizer
Questions? We have answers.

If you have any questions or need help with your plan, we’re here for you.

We can help you:

- Find a doctor and schedule appointments
- Understand your coverage and costs
- And much more

To save time, please have your member ID card ready when you call.

Toll-Free 1-866-868-0329, TTY 711, 8 a.m. – 8 p.m. local time, Monday – Friday

Learn more online at www.UHCRetiree.com/pfizer

Keep an eye out for Renew.

Renew by UnitedHealthcare®¹ is a perk that features exclusive content and resources for members. Renew is designed to help you learn, earn and start living a healthier, happier life. All at no additional cost. To learn more about Renew, go to www.UHCRetiree.com/pfizer and click on the My Health and Wellness tab.

¹Renew by UnitedHealthcare is not available in all plans.
Get support along the way.

Speak to a nurse 24/7.
Whether you have questions about a medication or have a health concern in the middle of the night, with NurseLineSM a registered nurse is only a phone call away. Call toll-free 1-877-365-7949, TTY 711, 24 hours a day, 7 days a week.

See a doctor using your computer, tablet or mobile phone
UnitedHealthcare’s Virtual Doctor Visits let you choose to see and speak to specific doctors using your computer or a mobile device, like a tablet or smart phone. These doctors are special providers that have the ability to offer virtual medical visits. During a virtual visit, you can ask questions, get a diagnosis and the doctor can even prescribe medication1 that, if appropriate, can be sent to your pharmacy. You can find a list of participating virtual medical doctors online at www.UHCRetiree.com/pfizer.

Chronic Conditions Programs
UnitedHealthcare has special programs designed to support members living with chronic conditions like diabetes or heart disease.

We’ll be in touch throughout the year
Health Reminders and Information About Programs and Services
To help you make the most of your plan benefits, throughout the year we’ll call you and mail information about programs and services.

Explanation of Benefits Statements
Each month you use your plan, we’ll send you a statement with your medical claim information.

Annual Notice of Changes
Just before the 2017 plan year ends, we’ll send you information on important plan changes for 2018.

Register at www.UHCRetiree.com/pfizer.
Create a secure personal account. You’ll have access to all of your health plan information in one easy-to-find place. You can view your plan details, personal health records, watch educational videos and more.

1Doctors can’t prescribe medications in all states.
Terms to know.

Health care and health insurance terms can be hard to understand. Here are some definitions of common words you will see in materials we send you. Feel free to refer back to these definitions whenever you get new communications from us.

**Authorized representative**
Your health information is protected by law. This means only you can get information about your health plan. However, you can give someone else — an authorized representative — access to speak with us about your account. This person does not have the right to make plan decisions for you. Your authorized representative can be a spouse, family member, friend, caregiver or someone else you trust.

**Co-insurance**
Your share of the costs of a covered health care service, calculated as a percentage (for example, 20%) of the allowed amount for the service. The health insurance or plan pays the rest of the allowed amount.

**Co-payment (or co-pay)**
A fixed amount (for example, $15) you pay for a covered health care service, usually when you receive the service. The amount can vary by the type of covered health care service.

**Medicare Part B Premiums**
You must continue to pay your Part B monthly premium to Social Security. If you do not pay your monthly Part B premium, you may be disenrolled from your plan, losing important coverage.

**Medicare Part B versus the Pfizer Rx plan**
The way Medicare covers drugs is different. It depends on where and by whom the drug is administered. Medicare Parts A and B have limited drug coverage. Medicare Part A only covers drugs received as part of your hospital stay. Medicare Part B covers medical services and supplies like diabetic screenings and supplies such as blood sugar monitors, test strips and lancets. It also covers drugs used in an outpatient setting, such as chemotherapy and dialysis drugs.

As a reminder, your Pfizer drug coverage is considered creditable coverage when compared to Medicare Part D. There is no formulary and Pfizer drugs are 100% covered as part of this plan.

Note: As communicated in January 2016, prescription drug coverage for Pfizer Medicare-eligible retirees and their Medicare-eligible dependents will move to [SilverScript Employer PDP sponsored by Pfizer (SilverScript)](SilverScript) effective January 1, 2017. SilverScript is a Pfizer-sponsored Medicare Part D prescription drug plan offered through SilverScript® Insurance Company which is affiliated with CVS/caremark,™ Pfizer’s current pharmacy benefit manager.
**Deductible**
The amount of money you must pay each year before the plan starts to pay its share. Not all plans have deductibles.

**Premium**
The amount that must be paid for your health insurance or plan. You and/or your employer usually pay it monthly.

**Preventive care**
Health care services that are intended to prevent disease or identify disease while it may be easier to treat. Preventive care is covered by your plan. Examples include flu shots, colonoscopies, mammograms or prostate exams.

**Primary care provider (PCP)**
A physician, nurse practitioner, clinical nurse specialist or physician assistant, as allowed under state law, who provides, coordinates or helps a patient access a range of health care services.

Find more definitions in your Evidence of Coverage or online: [www.glossary.justplainclear.com](http://www.glossary.justplainclear.com)

**Required Information**
This information is not a complete description of benefits. Contact the plan for more information. Limitations, co-payments, and restrictions may apply.

Benefits, premium and/or co-payments/co-insurance may change on January 1 of each year.

The provider network may change at any time. You will receive notice when necessary.

Consult a health care professional before beginning any exercise program. Availability of the SilverSneakers program varies by plan/market. Refer to your Evidence of Coverage for more details. Healthways and SilverSneakers are registered trademarks of Healthways, Inc. and/or its subsidiaries. © 2016 Healthways, Inc. All rights reserved.

Solutions for Caregivers assists in coordinating community and in-home resources. The final decision about your care arrangements must be made by you. In addition, the quality of a particular provider must be solely determined and monitored by you. Information provided to you about a particular provider does not imply and is in no way an endorsement of that particular provider by Solutions for Caregivers. The information on and the selection of a particular provider has been supplied by the provider and is subject to change without written consent of Solutions for Caregivers.

Nurseline 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. The service is not an insurance program and may be discontinued at any time.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan’s contract renewal with Medicare.

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