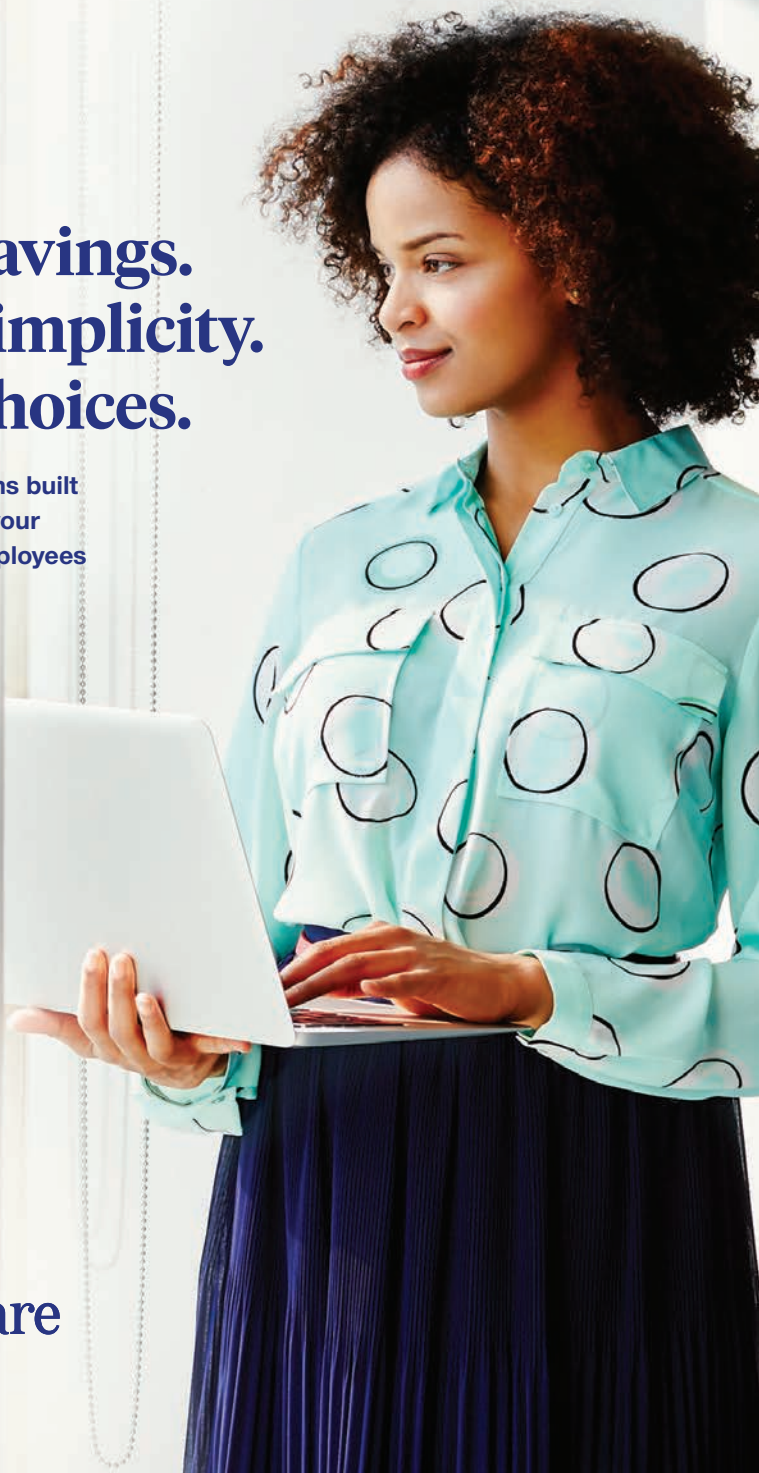




**More savings.
More simplicity.
More choices.**

**Group health plans built
to go farther for your
business and employees**



**United
Healthcare
Oxford**



Health plans built to go farther

With more ways to access quality care, a streamlined experience and options to help lower your costs, see how an Oxford health benefits package is designed to work harder for your business and your employees.



What's inside:

Health plans	4
Specialty benefits	11
Pharmacy services	12
Behavioral health	13
Hearing benefits	13
Health and wellness	14
Services and tools	16
Why choose an Oxford plan?	20

Delivering more value for your employees and your business

Health benefits aren't one size fits all. What's good for one business may not work for another.

That's why our Oxford plans offer choices for businesses like yours. With a wide variety of plan designs, options to help control your costs, popular wellness programs and tools to help employees get the most from their benefits, an Oxford health plan can be built around what matters most to your business.

Whether you're facing budget challenges or looking to improve retention and recruiting with benefits employees are asking for, we can help you get more from your health plan investment.

What do you want from your health plan?

Think about the features important to you that will help you get the most value from a health plan:

- Outstanding customer service for your plan administrators and employees
- Simpler administration to help save time for your staff
- Innovative tools to make it easier for employees to find care and lower-cost options
- More ways for employees to get care with options for plans with out-of-area coverage¹

See more savings and simplicity by adding specialty benefits

Employees value a full benefits package. We can help maximize that value with UnitedHealthcare specialty plans. Add a UnitedHealthcare specialty plan to your Oxford fully insured medical plan and create a stronger benefits package for your employees.

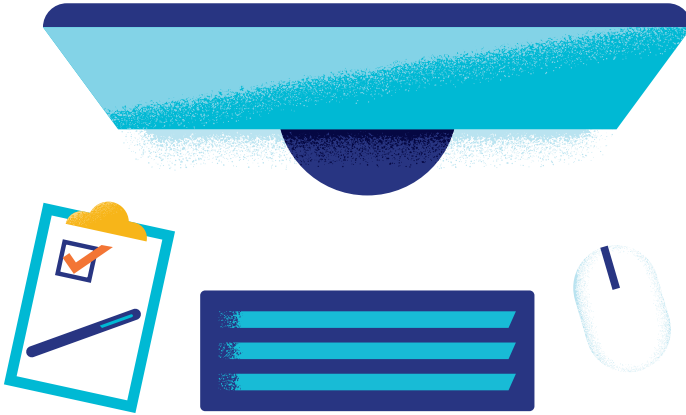
See page 11 to learn more.

¹The Oxford tristate service area includes Connecticut, New Jersey and the following New York counties: Bronx, Dutchess, Kings, Nassau, New York, Orange, Putnam, Queens, Richmond, Rockland, Suffolk, Sullivan, Ulster and Westchester.

Health plans built to help meet your needs

If you're looking for:	Oxford health plans offer:
A choice of benefit plan designs	A variety of options, including level funded, consumer-driven, primary care-centered, tiered plans and more
Resources that help employees compare costs and treatment options	Mobile, online and person-to-person resources that help employees make informed choices about where to go and who to see for care
Access to services and programs designed to enhance employee health	Services that offer support through nurses, counselors, care managers and online wellness programs
Outstanding customer service	Reliable, personal service and support for you and your employees
Tools that help simplify administration for employers	A suite of online administration tools and resources
A national network for care	Many of our Oxford plans with out-of-network coverage offer members traveling outside the service area access to the nation's single largest proprietary network. ¹ Other Oxford plans offer members traveling outside the service area a more focused out-of-area network of care providers.

¹UnitedHealthcare internal analysis, July 25, 2023.



Health plan options designed to deliver more value for you and your team

Health insurance is the No. 1 requested benefit by employees.¹ And the medical plans you choose for them may have a big impact on employee satisfaction, recruiting and retention.

Oxford plans are built to give your employees and their families access to quality care and a simpler experience.



Choose plans from the Oxford Freedom Network, our largest network option, or the Oxford Liberty Network, our more focused mid-sized option. New York and New Jersey employers may also choose a plan from the Oxford Metro Network®.



Most Oxford medical plans will have pharmacy benefits on a carve-in basis, provided by our Pharmacy Benefit Manager, Optum Rx®.

¹Forbes. "Best Employee Benefits In 2023." February 6, 2023.
Available: <https://www.forbes.com/advisor/business/best-employee-benefits/>.
Accessed: July 25, 2023.

Helping to deliver access to quality care at lower costs

Benefits like \$0 copays for primary care, virtual care, rewards programs and more may help make it easier for employees to get care when they want it and take steps toward better health. Our medical plans are designed to connect employees to providers who consistently deliver quality care and cost efficiency.



Studies have shown 10% lower total cost of care for Premium Care Physicians¹

Working hand-in-hand with providers

When employees are facing serious health issues like cancer, congenital heart disease and transplants, we offer care at facilities called Centers of Excellence (COEs) that have been recognized for their ability to pioneer more effective treatments, ensure cost efficiency, and deliver fewer complications and shorter recovery times. Our COE program helps identify available care for conditions where protocols and technology are changing rapidly.²



21–42% savings off a billed rate for Cancer Resource Services³

¹In comparison to non-Premium Care Physicians as of November 2021; specialties evaluated make up over 80% of employers' average medical spend. Health results not guaranteed.

²The Clinical Sciences Institute, developed by Optum®, collaborates with the field's top clinicians and doctors to develop the criteria to evaluate centers for clinical excellence and is accredited by the National Committee for Quality Assurance (NCQA).

³Book of business survey results, average from 2020. Savings not guaranteed.

We offer a broad portfolio of health plan choices for your business—listed here are a few popular plan types. Your Oxford representative or broker can help you determine which plan may work best for you.

Helping employees manage their health care dollars

An account-based plan is designed to help offset deductibles and coinsurance of high deductible health plans, giving employees a tax-advantaged way to help manage their share of health care costs.¹

Health savings account

A health savings account (HSA) allows employees to deposit pretax money into a bank savings account to use for qualified medical expenses now or in the future. The employer can contribute to the account, but the employee owns it and can carry over any unused funds from year to year. It is not a “use it or lose it” plan.

An HSA must be used with a qualified high deductible health plan. The plan pays for covered services only after the member meets a minimum deductible (usually not including preventive care) and pays the full cost of covered services once the annual out-of-pocket limit is met.

Optum Financial, member FDIC, is one of the nation’s leading HSA custodians, with 8M+ HSAs totalling \$17.6B+ in deposits.² Plus, only Optum Financial offers the convenience of banking through your health plan website. Learn more about Optum Financial at [optumbank.com](https://www.optumbank.com).

¹Not all plans or options are available in all states.

²2020 Year-end Devenir HSA Research Report, March 2021. At Optum Bank®, member FDIC, deposits are insured by the FDIC up to \$250,000.

Health plans designed to give you more

Below is just a sampling of our Oxford portfolio of health plan choices for your business. Your Oxford representative or broker can help you determine which plan may work best for you.

Oxford Level Funded

One of the biggest challenges facing business owners is the cost of employee health coverage. Managing costs is important, but so is offering a health plan your plan participants actually like. Oxford Level Funded health plans¹ are designed to give you a different way to balance the cost savings you're looking for with benefits plan participants want.

Savings

- Plan costs based only on the medical and pharmacy claims experience of your plan participants (groups 5–50 not subject to adjusted community rating)
- \$0 kids copays for primary care physician visits²
- A potential year-end surplus refund if medical and pharmacy claims costs are lower than expected³
- Exemption from many state premium taxes
- Reporting provides insights for improving claim and network usage trends

Flexibility

- Exemption from many Affordable Care Act (ACA) regulations
- A variety of plan and network designs to choose from

Stability

- Fixed monthly payments, similar to a fully insured (traditional) health plan experience
- Stop loss protection from unexpected high medical and pharmacy claims costs
- Online tools to help simplify plan management

¹The Oxford Level Funded product is a level funded arrangement designed for Small Business (5-99) and mid-size Key Accounts (100-300) businesses in CT and NJ.

²\$0 kids copay benefit is available for enrollees in copay-based medical plans with unmarried dependents under the age of 19. See the Summary Plan Description for the full definition of a dependent child.

³Please consult a tax and/or legal advisor to determine if, by receiving this surplus refund, there are any restrictions or obligations. Surplus refund available only where allowed by law.

Zero Deductible Plans—New York

In response to consumer demand for more transparency in health care, we've developed several Oxford non-gated EPO plans with a zero deductible (ZD) for the New York small (1–100) group market. By removing the upfront deductible for members, our **Oxford ZD plans** help remove confusion by letting members know what they will pay out-of-pocket before getting health care services. With fixed copayments for benefits and 100% coinsurance, these plans also tend to be more affordable for small businesses, with the goal of helping them keep both their employees and their bottom line healthier.

As an added benefit, we're now offering a **\$5 Copays for Kids** program when visiting their primary care provider (PCP). This new feature is designed to help employees improve their children's health and lower their overall out-of-pocket medical costs. By using PCPs, members may get more preventive health care, which may result in fewer specialty care needs and emergency room visits—all of which helps to lower costs for everyone.

Oxford ZD plans are available with either the Freedom, Liberty or Metro networks. When paired with either the Freedom or Liberty network, these plans also include national network access when traveling outside of the Oxford service area.¹

Consumer-driven health plans

It's becoming more challenging for companies to cover employee health care costs. That's why many companies are now choosing consumer-driven health plans (CDHP). These plans are intended to help employees become more involved in their health care choices and take more active control over their health and health care spending.

Tiered benefit plans

These health plans help encourage members to seek care from Tier 1 providers and hospitals, as well as lower-cost freestanding facilities to get the highest level of coverage. They include UnitedHealth Premium Care Physicians who have met quality and cost-efficiency criteria and have been recognized for providing quality and cost-efficient care.

¹The Oxford service area includes Connecticut, New Jersey and the following New York counties: Bronx, Dutchess, Kings, Nassau, New York, Orange, Putnam, Queens, Richmond, Rockland, Suffolk, Sullivan, Ulster and Westchester.

Specialty plans designed for more choice, savings and better health

Balanced benefits packages are becoming increasingly important to compete for new employees and retain top talent. Choose from life, vision, dental and disability standalone options. Small business employers (2–99) in New York, New Jersey and Connecticut can choose from pre-packaged benefit options that combine dental and vision with health discounts and an optional life insurance benefit.



Dental – Includes benefits for oral cancer screening, prenatal dental care and orthodontia;¹ option to add extra cleanings, white fillings and dental implants; network of 122K quality dental providers;² and optional rewards program to help keep costs down while rewarding employees who get routine dental care.



Vision – Includes generous frame allowances, standard scratch-resistant coating and optional, covered-in-full contact lenses; additional maternity and pediatric vision benefits; network of 150K private and retail vision providers,³ including Warby Parker and GlassesUSA™; and discounts on popular contact lens brands, laser vision correction at QualSight® LASIK, nonprescription sunglasses and hearing aids from UnitedHealthcare Hearing.



Life⁴ – Pays a lump-sum cash benefit directly to an employee's beneficiary in the event of death; provides additional coverage for loss of life or dismemberment within 90 days of an accident.



Disability⁴ – Pays a benefit to the employee when unable to work as a result of an illness or injury; includes return-to-work and workplace modification services to help reduce absenteeism and improve productivity.

¹Orthodontia coverage is available for companies who have 5 or more employees with a minimum of 3 enrolled members.

²Network numbers as of January 2023.

³Network snapshot report (internal report) January 2023.

⁴Life and Disability products offered in New York are underwritten by Unimerica Life Insurance Company of New York.



Working to reduce costs and improve health with integrated pharmacy services

Pharmacy is the most used health insurance benefit, as well as one of the fastest growing drivers of overall medical spend.¹ The goal of integrated pharmacy and medical benefits is to help contain those costs and improve health outcomes for your employees.

With integrated benefits, health advocates, physicians, nurses and pharmacists all access the same data systems and 360-degree view to provide employees with the clinical guidance to help ensure the right strategy at every step. This can include educating them about their treatment, notifying doctors when a prescription is abandoned at the pharmacy, sending proactive refill reminders, connecting employees with behavioral health services and alerting prescribers to potential drug safety issues.

¹Antwerp, G.V., Cruse, C.B. and Arora, A. Drug and inpatient spending lines are crossing. Deloitte, Feb. 7, 2020. Available: <https://www2.deloitte.com/us/en/insights/industry/health-care/us-healthcare-spending-prescription-drugs-inpatient-costs.html>. Accessed: Aug. 23, 2023.

Supporting employees with access to behavioral health care

With Oxford behavioral health support, employers and employees have support by their side—helping them access whole-person care that helps them stay engaged and productive.

What does it mean to have support by your side? With Oxford behavioral health support, it means your employees get easier access to a continuum of solutions, including quality clinical care, virtual services, mobile apps and more. Plus, our behavioral health advocates, clinicians and thousands of preferred providers nationwide are here to help support them every step of the way with understanding and compassion.



350,000+ in-person and virtual behavioral health providers in our growing network¹

Better hearing equals better health

While approximately 48 million Americans have some type of hearing loss, the good news is that people who treat their hearing loss reported significant improvements in relationships, self-esteem, quality of life, mental health and safety.²

With hearing benefits included in most fully insured and self-funded (ASO) plans, employees have access to:

- Discounted prices on hundreds of name-brand hearing aids from major manufacturers or UnitedHealthcare Hearing's exclusive brand Relate™
- Choice of hearing aids featuring advanced technology, including Bluetooth® wireless and rechargeable battery options
- A nationwide network of more than 5,500 accredited hearing professionals providing hearing tests, hearing aid evaluations and follow-up support
- Hearing aids available in-person or through convenient home delivery in 5–10 days
- Professional follow-up support with hearing representatives available 12 hours a day

¹SURE Network Summary Dashboard, Commercial E&I and non-E&I UBH General Networks Q1 2023 (March 27, 2023 data); Deanna DuBois, April 10, 2023.

²WedMD. April 1, 2022. Available: <https://www.webmd.com/a-to-z-guides/important-hearing-loss-treatment>. Accessed: July 25, 2023.

Health and wellness programs to help your employees thrive

Healthier employees can be critical to the success of your business. Available at no additional cost to your employees, our wellness programs and services include online resources, digital tools and personal support designed to help employees get and stay healthier.



UnitedHealthcare Rewards **Earnings for healthy activities**

UHC Rewards is an incentive program where employees and their spouses can earn dollars for reaching program goals and completing one-time actions. Participants can personalize their experience by choosing the activities that are right for them—and choosing how to spend their earnings. Part of a simple digital experience, participants can start earning rewards immediately upon activation from the UnitedHealthcare® app or myuhc.com®.

\$1M+

**(in total) has been earned by
members in the first 3 months of
UHC Rewards launch¹**



Sweat Equity **Rewards for meeting exercise requirements**

With Sweat Equity®, employees may earn up to \$200 for every 6-month period in which they go to a fitness facility and/or participate in organized exercise classes or events (e.g., marathon) a total of at least 50 times.²

¹UHC Rewards data as of March 30, 2023.

²Reimbursement is generally limited to the lesser of \$200 (subscriber)/\$100 (covered spouse/partner and eligible dependents aged 13 and older) or the actual amount of the qualifying fitness costs per 6-month period, but the amount may vary by plan.



Real Appeal

Healthier habits, healthier lifestyle

Real Appeal® is an online lifestyle and weight management program that's designed to help employees achieve lasting results. Backed by clinically proven science, it's built to help motivate employees to improve their health and reduce their risk of developing costly chronic conditions such as heart disease and diabetes. It comes with a Success Kit filled with tools to help members kick-start their weight loss, a personal health coach to help guide them through the program and online support to help them stay accountable.

88%

of at-risk participants lost weight.¹

Over one-third lost 5% or more in body weight¹



Quit For Life

Quit tobacco for good

Quit For Life® treats every tobacco user uniquely, tailoring a quit plan based on their needs. Your employees will have access to a coach to help make a plan, set a quit date and receive ongoing support.

¹UnitedHealthcare book of business; results through May 2022: Cohort represents participants at risk, in program 26+ weeks, attending 9+ ILIs (N > 50,000).

Personalized services and tools designed to make health care easier

24/7 Virtual Visits: Employees can see a provider whenever, wherever

With 24/7 Virtual Visits, employees can conveniently connect to a provider by video or phone¹ through myuhc.com or the UnitedHealthcare app. Providers are able to diagnose a wide range of nonemergency medical conditions and even prescribe medication,² if needed.



- 24/7 access and an expansive provider network
- Digital, personalized care and care navigation

Virtual primary care: Another way for employees to access quality care

With virtual primary care, employees can chat with a primary care provider (PCP) by video or phone.¹ Designed to help expand access to care and create opportunities for employees to engage in their health—which may help improve their health and lower medical costs—these virtual visits offer many of the same services as in-person primary care. Employees can:

- Establish a relationship with a PCP virtually from anywhere
- Schedule same-day appointments
- Chat with a care team member 24/7¹

No additional administrative costs to you

24/7 Virtual Visits and virtual primary care are fully integrated with your Oxford benefit plan and provided at no additional administrative cost to you, as the employer.

¹Data rates may apply.

²Certain prescriptions may not be available, and other restrictions may apply.

Integrated tools designed to help employees find and price care

With myuhc.com and the UnitedHealthcare app, employees can:

- Find quality care
- Filter their search by provider location, gender, language and more
- See patient-created provider ratings
- Access personalized cost and provider information
- Schedule and start virtual appointments
- Access personalized resources, recommendations and support

Online tools built for a more personal, actionable and connected health journey

Personal: Built to create a highly tailored, convenient experience to help fit employees' needs—no matter where they're at in their lives

Actionable: Designed to help employees get healthier, stay healthier and use benefits more effectively by offering timely, digestible and actionable recommendations

Connected: Created to help make it easier to take care of health needs by connecting the dots across multiple touchpoints in the health care ecosystem



Access to quality, cost-efficient providers

The UnitedHealth Premium program has been addressing variation in the cost and quality of health care for over 15 years. It's built to help your employees review their options and make informed decisions when choosing a doctor.

Available in 172 markets and 45 states, the Premium program is designed to:

- **Assess quality** by evaluating physicians using evidence-based standardized measures and national industry guidelines
- **Examine cost efficiency** by measuring efficient use of resources and cost of providing care using local market benchmarks
- **Identify and provide access** while empowering employees to make informed health care decisions
- **Deliver results** by helping reduce care variation and lower overall costs



A physician's UnitedHealth Premium designation is easy to find on myuhc.com as well as in printed provider directories. Just look for the blue hearts.

Powerful, easier-to-use administration solutions for employers

uhceservices.com is a suite of online tools and resources that simplifies eligibility management, billing and reporting. It provides real-time data integration with access to eligibility, billing and all lines of coverage in one place.

uhceservices.com is fully integrated among employees, physicians and health care professionals to allow HR staff to:

- **Manage transactions**, eligibility information and more in real time
- **Save time** with online billing and payment options
- **Improve workforce wellness** engagement with tools like distribution-ready emails, fliers, posters and more

For your employees, our goal is simple: To connect them with people and resources to help meet their unique needs

With our Oxford products, programs and service, we strive to deliver a simpler and more personal experience to help your employees access quality care.

Advocate4Me® is designed to simplify the member experience by connecting employees to a single point of contact. Just one call reaches an Advocate who can answer questions and help solve issues including financial, benefits and claims, pharmacy, provider search, plan selection, wellness, and clinical and complex care management.

Employees can get answers without waiting on hold with the Easy Connect service on the UnitedHealthcare app. Calls are returned by a representative who can answer questions about claims, benefits and more.

And our efforts are helping make the health care experience better:

Savings through engagement

\$72M+

saved by members and employers¹

Inspiring trust

91%

overall member satisfaction rating¹

¹UnitedHealthcare Advocate4Me performance reporting, 2021. Results are not guaranteed.

Why choose an Oxford plan?

Health plans are not all alike, and neither are health plan companies

We're working to make the health care system simpler. And the quality of that work is getting noticed: UnitedHealth Group was the top-ranking company in the insurance and managed care sector for Fortune's 2023 "World's Most Admired Companies" list.¹



35+ years committed to the New York, New Jersey and Connecticut tristate area

Access to quality local providers

119K+

NY, NJ and CT
physicians and care
professionals in the
Freedom Network²

116K+

NY, NJ and CT
physicians and care
professionals in the
Liberty Network²

73K+

NY and NJ physicians
and care professionals
in the Metro Network²

¹Fortune magazine, Feb. 1, 2023. FORTUNE is a registered trademark of Time, Inc. FORTUNE and Time Inc. are not affiliated with, and do not endorse products or services of UnitedHealth Group.

²Network Data and Analytics Reporting from E&I Counts Dashboard, June 13, 2022. Provider count includes Physicians (Degree = MD, DO) Advanced Practice Providers (Degree = APRN, NP, PA) and Allied Health Providers (Degree = NOT MD, DO). Only one specialty is counted per provider. Provider may be counted more than once if they practice in multiple states or counties.

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.

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.

The UnitedHealthcare[®] app is available for download for iPhone[®] or Android[®]. iPhone is a registered trademark of Apple, Inc. Android is a registered trademark of Google LLC.

Members can access average cost data online or on the mobile app. None of the average costs are intended to be a guarantee of your costs or benefits. Your actual costs may vary. When accessing average cost data, please refer to the Website or Mobile application terms of use under Find Care & Costs section.

Specialty benefits and programs may not be available in all states or for all group sizes. Components subject to change.

UnitedHealthcare Rewards is a voluntary program. 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. You should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for you. Receiving an activity tracker, certain credits and/or rewards and/or purchasing an activity tracker with earnings may have tax implications. You should consult with an appropriate tax professional to determine if you have any tax obligations under this program, as applicable. If any fraudulent activity is detected (e.g., misrepresented physical activity), you may be suspended and/or terminated from the program. If you are unable to meet a standard related to health factor to receive a reward under this program, you might qualify for an opportunity to receive the reward by different means. You may call us toll-free at 1-866-230-2505 or at the number on your health plan ID card, and we will work with you (and, if necessary, your doctor) to find another way for you to earn the same reward. Rewards may be limited due to incentive limits under applicable law. Components subject to change. This program is not available for fully insured members in Hawaii, Vermont and Puerto Rico nor available to level funded members in District of Columbia, Hawaii, Vermont and Puerto Rico.

Real Appeal is a voluntary weight loss program that is offered to eligible participants 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. 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.

Sweat Equity is a voluntary program. Rewards may be taxable to the plan participant. You should consult with an appropriate tax professional to see if you have any tax reporting obligations for the plan participants' reimbursements

under this program and for the tax treatment of these expenses for your group. Participants should consult with an appropriate health care professional before starting any exercise to determine what may be right for you. If you are unable to meet a standard related to a health factor to obtain a reward under this program, you might qualify for an opportunity to earn the same rewards by different means. Members can call us at the number on their health plan ID card and we will work with you (and, if necessary, your doctor) to find another way for you to earn the same reward.

The Quit For Life Program provides information regarding tobacco cessation methods and related well-being support. Any health information provided by you is kept confidential in accordance with the law. The Quit For Life Program does not provide clinical treatment or medical services and should not be considered a substitute for your doctor's care. Please discuss with your doctor how the information provided is right for you. Participation in this program is voluntary. If you have specific health care needs or questions, consult an appropriate health care professional. This service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room.

The Oxford Health Savings Account (HSA) is a qualifying high-deductible health plan (HDHP) that is designed to comply with IRS requirements so eligible enrollees may open a health savings account with a bank of their choice or through Optum Bank, Member FDIC. "Oxford HSA" refers generally to the Oxford HSA product, which includes a HDHP, although at times "Oxford HSA" may refer only and specifically to the Oxford Health Savings Account provided in conjunction with Optum Bank and not to the associated HDHP.

Advocate4Me 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 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.

24/7 Virtual Visits is a service available with a Designated Virtual Network Provider via video, or audio-only where permitted under state law. 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.

Telehealth services are available in Connecticut in addition to 24/7 Virtual Visits.

The UnitedHealth Premium® designation 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.

Virtual primary care are services available with a provider via video, chat, email, or audio-only where permitted under state law. Virtual primary care services are only available if the provider is licensed in the state that the member is located at the time of the appointment. Virtual primary care is 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. Certain prescriptions may not be available, and other restrictions may apply.

All trademarks are the property of their respective owners.

Health plan products may include exclusions, limitations, reduction of benefits, and terms under which the plan may be continued in force or discontinued. For costs and complete details of coverage, contact an Oxford representative.

UnitedHealthcare Hearing is provided through UnitedHealthcare, offered to existing members of certain products underwritten or provided by UnitedHealthcare Insurance Company or its affiliates to provide specific hearing aid discounts. This is not an insurance nor managed care product, and fees or charges for services in excess of those defined in program materials are the member's responsibility. UnitedHealthcare does not endorse nor guarantee hearing aid products/services available through the hearing program. This program may not be available in all states or for all group sizes. Components subject to change.

UnitedHealthcare vision coverage provided by or through UnitedHealthcare Insurance Company, located in Hartford, Connecticut, UnitedHealthcare Insurance Company of New York, located in Islandia, New York, or their affiliates. Administrative services provided by Spectera, Inc., United HealthCare Services, Inc. or their affiliates. This policy has exclusions, limitations and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact either your broker or the company.

UnitedHealthcare dental coverage underwritten by UnitedHealthcare Insurance Company, located in Hartford, Connecticut, UnitedHealthcare Insurance Company of New York, located in Islandia, New York, or their affiliates. Administrative services provided by Dental Benefit Providers, Inc., Dental Benefit Administrative Services (CA only), DBP Services (NY only), United HealthCare Services, Inc. or their affiliates. This policy has exclusions, limitations and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact either your broker or the company.

Oxford insurance products are underwritten by Oxford Health Insurance, Inc. Oxford HMO products are underwritten by Oxford Health Plans (CT), Inc. and Oxford Health Plans (NJ), Inc. Administrative services provided by Oxford Health Plans LLC. Stop-loss insurance is underwritten by All Savers Insurance Company, UnitedHealthcare Life Insurance Company in NJ, and UnitedHealthcare Insurance Company of New York in NY.



**Connect with an Oxford representative
by calling 1-866-438-5914 or contact your broker**