



Making your choice simpler.

Individual and Family Plans

Designed to fit your budget — and your health care needs.

Individual Marketplace products are HMO products provided by or through UnitedHealthcare of New York, Inc.

Effective Jan. 1, 2022

United
Healthcare



Welcome

Open Enrollment is Nov. 1, 2021, through Jan. 31, 2022.

This guide is designed to help you understand the Compass plans we offer through the NY State of Health Marketplace.

What's inside:



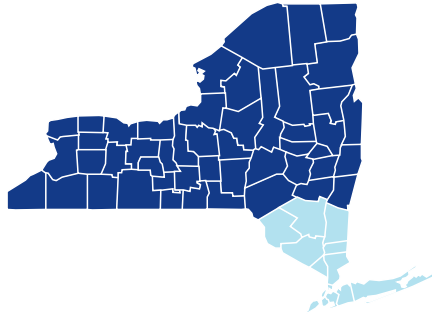
1 Overview.

UnitedHealthcare Compass plans.

Compass plans, offered by UnitedHealthcare of New York, Inc., are a variety of plans available to people who live in the New York counties listed below. These Compass plans have the same doctors, clinics and basic health care coverage. The difference is the cost you will pay. Look closely at your options to see which plan is right for you.

To qualify for enrollment and maintain coverage, you must live in one of the counties in our service area.

- Bronx
- Dutchess
- Kings
- Nassau
- New York
- Orange
- Putnam
- Queens
- Richmond
- Rockland
- Suffolk
- Sullivan
- Ulster
- Westchester



With these Compass plans, you have access to:



Coverage of 10 essential benefits, including preventive and hospital care services, lab tests, prescriptions and more. Learn more at healthcare.gov/coverage.



Preventive care, which covers things such as annual checkups, flu shots and mammograms. (Covered 100% when you use a doctor in the Compass network.)



A network of doctors, clinics and pharmacies in your area.



An online provider directory (uhc.com/xnydocfind2022) to easily find participating providers and pharmacies.



Tools and resources like an online prescription drug list search tool (uhc.com/xnydruglist2022) to help save time and money.

1 Overview.

Things you need to check before choosing our plans.



Primary care providers.

Compass plans require that you team up with a primary care provider (PCP). **You must use a PCP in the Compass network** for yourself and each member of your family enrolled in the plan. Visit uhc.com/xnydocfind2022 to see if your doctor is in the Compass network.

You must get a referral from your PCP before you see another network doctor or specialist. This will help you avoid unexpected costs. Your PCP can refer you to any doctor or hospital in the Compass network.

Make sure you stay in the Compass network. If you go outside of the network, you'll have to pay all of the costs for service. This includes doctors (including specialists), labs, hospitals, pharmacies or medical clinics (like urgent care).



Prescriptions and pharmacies.

You must use a network pharmacy. You can find a list of network pharmacies at uhc.com/xnydocfind2022 within the New York Pharmacy Directory section.

Use the Prescription Drug List (PDL) at uhc.com/xnydruglist2022 to see if your prescription medications are covered and how much they will cost. The cost of your medications will vary depending on the plan you choose and the tier (cost level). The lower the tier, the more money you may save.

Make sure you carefully view your plan details on nystateofhealth.ny.gov.

2 How coverage works.

What will I pay?

There are many types of costs to think about when choosing health coverage. Along with your monthly premium, you may also be responsible for other costs (described below). These costs will vary depending on the coverage option you choose. Reviewing the coverage and cost details of your options on the NY State of Health Marketplace will help you better understand how these costs work together.

Who pays for what.

Deductible:
You pay 100%.

Amount you owe during a coverage period (usually 1 year) for covered health care services before your plan begins to pay.

Copay and/or coinsurance:
You pay part of the cost.

Copay: 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.

Coinsurance: After paying the deductible, your plan might have coinsurance. Coinsurance is your share of the costs of covered services, calculated as a percent of the allowed amount for the service. For example, if your plan pays 80% of the cost, your coinsurance – the amount you must pay – is the remaining 20%.

After out-of-pocket limit is reached:
Health plan pays 100%.

The most you could pay during a coverage period (usually 1 year) for your share of the costs of covered services. After you meet this limit, the plan will usually pay 100% of the amount. Premiums, balance-billed charges and services not covered by your plan do not count toward your annual out-of-pocket limit.

3 Ways you can save.

Financial assistance.

As you're comparing your options on the NY State of Health Marketplace, keep in mind some other ways you may be able to save with financial assistance including premium tax credits or cost-sharing reductions. The NY State of Health Marketplace will determine if you qualify for assistance and the types of plans available to you.



Advance premium tax credit.

When you apply for coverage online through the NY State of Health Marketplace, you'll find out if you qualify for an advance premium tax credit. **This credit lowers your monthly health plan payment.**



Cost-Share Reduction (CSR) plans/ Silver CSR plans.

If your income is between 100% and 250% of the federal poverty level, you may be able to get a CSR health plan, better known as Silver CSR plans. If you do qualify, **Silver CSR plans help lower the out-of-pocket expenses you'll pay for deductibles, copays and/or coinsurance.**

Get help setting up financial assistance.

To learn more about financial assistance and see if you qualify to get help with your costs, visit nystateofhealth.ny.gov. Or call the NY State of Health Marketplace at **1-855-355-5777**.

4 How coverage works.

Open Enrollment is Nov. 1, 2021, through Jan. 31, 2022.

The start date of your coverage will depend on when you enroll and when your first payment is received.

Sign up by	Coverage starts by
Dec. 15, 2021	Jan. 1, 2022
Jan. 15, 2022	Feb. 1, 2022
Jan. 31, 2022	March 1, 2022

Follow these steps when you're ready to sign up.

- 1 Check to see if you are able to get financial assistance, then review your plan details on nystateofhealth.ny.gov. Keep in mind that if you do qualify for financial assistance, you can only get these savings if you enroll through the NY State of Health Marketplace.
- 2 Make sure you can find a PCP in the Compass network near you at uhc.com/xnydocfind2022.
- 3 Visit nystateofhealth.ny.gov for a list of things you'll need to have handy when you enroll in a plan.

5 Let's go.

Sign up today.



To learn more about applying for health insurance, including Medicaid, Child Health Plus, Essential Plan and Qualified Health Plans through NY State of Health, The Official Health Plan Marketplace, visit nystateofhealth.ny.gov or call **1-855-355-5777**. For help in another language, visit uhc.com/legal/nondiscrimination-and-language-assistance-notice.



If you still have questions, call the NY State of Health Marketplace at **1-855-355-5777** or call us at **1-844-joinUHC**, TTY 711.

I'm signed up. Now what?



After you sign up, keep an eye out for a notice to pay your premium. This should arrive in 3 to 5 days.
Your enrollment is complete after you've paid this bill.



Look for your health plan kit and health plan ID card to arrive in the mail in about 7 to 10 days after your full payment is received.



If you have any questions, call the member phone number on your ID card.

The fine print.

For help in another language, visit

<https://www.uhc.com/legal/nondiscrimination-and-language-assistance-notice>

Language Assistance/Nondiscrimination Notice Asistencia de Idiomas/Aviso de no Discrimination 語言協助/不歧視通知

Policy numbers* in this document:

54235NY0010001-01	54235NY0010014-01	54235NY0010031-01
54235NY0010002-01	54235NY0010015-01	54235NY0010032-01
54235NY0010003-01	54235NY0010019-01	54235NY0010033-01
54235NY0010004-01	54235NY0010021-01	54235NY0010034-01
54235NY0010005-01	54235NY0010023-01	54235NY0010035-01
54235NY0010006-01	54235NY0010025-01	
54235NY0010013-01	54235NY0010030-01	

*All policy numbers listed represent the base plans only. Variations of the policies such as cost-share reduction and American Indian plans are not listed. For costs and complete details of the coverage, call (or write) your insurance agent or the company.

Learn more.

Contact your UnitedHealthcare representative for additional information.

**United
Healthcare**



Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. UnitedHealthcare also covers other routine services, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

To learn more about applying for health insurance, including Medicaid, Child Health Plus, Essential Plan, and Qualified Health Plans through NY State of Health, The Official Health Plan Marketplace, visit nystateofhealth.ny.gov or call **1-855-355-5777**.

This coverage is not designed or marketed as employer-provided insurance. These plans cannot be used, now or in the future, by you or an employer to provide insurance for employees.

New York Individual Marketplace products are HMO products provided by or through UnitedHealthcare of New York, Inc.

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