

Making your choice simpler

A quick guide to 2027 Compass plans

Individual Marketplace products are HMO products provided by or through UnitedHealthcare® of New York, Inc.
Effective Jan. 1, 2027

UnitedHealthcare® | nystateofhealth™ The Official Health Plan Marketplace



Welcome

Open Enrollment is Nov. 1, 2026 through Dec. 31, 2026

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

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1 Overview

UnitedHealthcare Compass plans

Compass plans, underwritten by UnitedHealthcare of New York, Inc., are a variety of plans available to people who live in the New York counties in our service area. 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.



1 Overview

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**.
- Preventative 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 our area
- An online provider directory (**uhc.com/xnydocfindg2027**) to easily find participating providers and pharmacies.
- Tools and resources like an online prescription drug list search tool (**uhc.com/xnydruglist2027**) to help save time and money.

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



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/xnydocfindg2027** 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/xnydocfindg2027** within the New York Pharmacy Directory section.

Use the Prescription Drug List (PDL) at **uhc.com/xnydruglist2027** 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 documents 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 othercosts (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.



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 to 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 qualify for 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** or TTY: **1-800-662-1220**.

4 Sign up today

Open Enrollment is Nov. 1, 2026 through Dec. 31, 2026

Your coverage will not begin until your first premium payment is received. If you enroll during Open Enrollment (through Dec. 31) for a Jan. 1 start date, be sure to submit your payment by the required deadline to confirm coverage begins on time.

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/xnydocfindg2027**.

3. Visit **nystateofhealth.ny.gov** for a list of things you'll need to have handy when you enroll in a plan.

4 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**.

For help in another language, visit:
uhc.com/legal/nondiscrimination-and-language-assistance-notices.

Call today

If you still have questions, call the NY State of Health Marketplace at **1-855-355-5777** (1-800-662-1220) or call to speak with a licensed insurance agent at **1-844-joinUHC (1-844-564-6842)**, TTY **711**.



5 Let's go

What to expect after you enroll

- 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.

Additional information

For help in another language, visit

https://www.uhc.com/legal/health-insurance-marketplace/new-york-language-assistance





Plan numbers* in this document:

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

*All plan 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.

The benefits described may not be offered on all plans or in all states. Some plans may require copayments, deductibles and/or coinsurance for these benefits. The policy has exclusions, limitations, reduction of benefits, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, review the plan coverage documents, or call or write your insurance agent/broker or the company, whichever is applicable. By responding to this offer or communication, you agree that a representative may contact you.

Preventive care services are covered as required by the Affordable Care Act (ACA).

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.

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