



**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.



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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

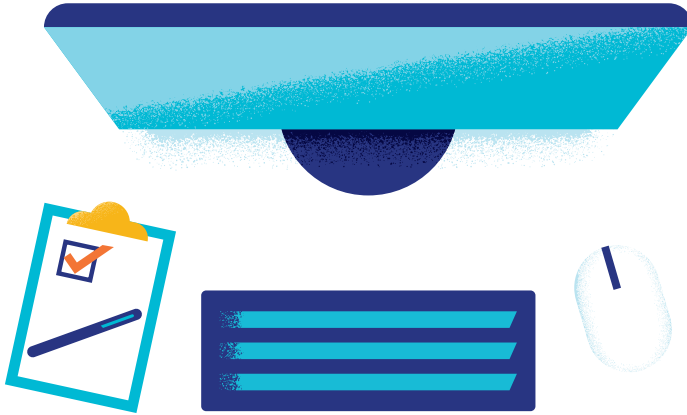
Employees value a full benefits package. We can help maximize that value with UnitedHealthcare specialty plans. Add a UnitedHealthcare specialty plan to your Oxford fully insured medical plan and create a stronger benefits package for your employees.

See page 11 to learn more.

Health plans built to help meet your needs

If you're looking for...	Oxford 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, Sept. 30, 2021.



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 Metro Network®.



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

¹U.S. Chamber of Commerce. “The Best Employee Benefits for Keeping Workers Happy.” March 21, 2019.

Available: <https://www.uschamber.com/co/run/human-resources/top-employee-benefits>. Accessed: Oct. 25, 2021.

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.



**9% lower total cost of care with
UnitedHealth Premium® physicians¹**

Working hand-in-hand with providers

When employees are facing serious health issues like cancer, congenital heart disease and transplants, we direct them to facilities called Centers of Excellence (COEs) that are 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 the best available care for conditions where protocols and technology are changing rapidly.²



**55% savings off billed charges from Transplant
Resource Services³**

¹Savings estimates as of Sept. 25, 2020 UnitedHealthcare Network (Par) Commercial Claims analysis for 172 markets. Figures are based on BoB results and represent the national average expected cost differential between Premium Care Physicians and non-Premium Care Physicians for entire episodes of care. Actual savings achieved will vary by customer depending on geographic availability and customer-specific service mix. All figures and estimated savings represent historical performance and are not a guarantee of future savings.

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).

³Optum repriced claims 2010–2018. Reconciled cases as of February 2020.

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 8+ million HSAs totalling \$17.6+ billion 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.

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

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 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 claims are lower than expected³

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 claims
- 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 Certificate of Coverage 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.

Zero Deductible Plans—New York

In response to consumer demand for more transparency in health care, we have developed 5 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 for members by letting them 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.

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.

This 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.

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 107,000+ dentists;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 100,000+ private and retail vision providers,² 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.



Life³ – 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.



Disability³ – 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.

²UnitedHealthcare internal network reporting, July 2020.

³Life 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. 18, 2021.

Guiding employees to behavioral health care

With Oxford behavioral health support, employers and employees have a guide by their side—leading, every step of the way, to the whole-person care needed to help keep employees engaged and productive.

What does it mean to have a guide 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 guide them every step of the way with understanding, compassion and support.



243,000+ 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 report 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

¹UnitedHealthcare internal analysis, 2021.

²Hearing Loss Association of America. Available: hearingloss.org. Accessed: Dec. 22, 2021.

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 to help employees get and stay healthier.



Rally **Rewards for well-being**

Rally® is an interactive experience that helps encourage healthier actions and rewards employees for completing certain activities. With Rally, employees get engaging, integrated tools designed to help them achieve their personal health goals, including a health survey, health action plans, online challenges and a community of support.

94%

**of Rally participants
completed a health survey¹**



SimplyEngaged² **Rewards for healthier actions**

SimplyEngaged® connects employees to personalized health recommendations. This simple digital experience includes health and wellness content and resources—and may earn employees rewards for going to the gym.

¹UnitedHealthcare BoB, registrants on Rally Health & Wellness. Results through Jan. 2021.

²Available to fully insured NY (101+), NJ (51+) and CT (51+) employers.



Real Appeal

Healthier habits, healthier lifestyle

Real Appeal® is an online weight loss program that's designed to help employees achieve lasting results.

Rooted in clinical research, Real Appeal helps employees set nutrition, exercise and weight loss goals and track their progress from a daily dashboard.

They'll also get a Success Kit with tools and resources like weight and food scales, exercise equipment, food guides and more.

56%

of participants lost weight¹



Quit For Life

Quit tobacco for good

Quit For Life® is a tobacco cessation program that has helped over 4.3 million tobacco users quit.² Your employees can develop a personal action plan and work with a Quit Coach® to help kick the habit once and for all.



Sweat Equity

Rewards for employees for meeting the program's 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.³

¹UnitedHealthcare BoB; results through Dec. 2020: Cohort represents participants at risk, in program 26+ weeks, attending 9+ ILIs (N > 50,000).

²Quit For Life employer book of business survey results. Results measured among responders to a survey at 6 months post-program enrollment, with quit-rate success defined as 30+ days of abstinence from all forms of tobacco, cumulative from 2006 to Q2 2018.

³Reimbursement 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.

Personalized services and tools designed to make health care easier

24/7 Virtual Visits: Employees can see a provider anytime

With 24/7 Virtual Visits, employees can connect to a provider by phone or video¹ 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.



\$49 or less for a 24/7 Virtual Visit³

98% of needs are resolved⁴

93% consumer satisfaction rating⁵

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 phone or video.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 24/7 when their PCP is not available¹

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.

³The Designated Virtual Visit Provider's reduced rate for a 24/7 Virtual Visit is subject to change at any time.

⁴Based on internal analytics of UnitedHealthcare Employer and Individual (UNET platform) population for all providers, full year 2020.

⁵Consumer rating of 24/7 Virtual Visit experience for UnitedHealthcare Employer and Individual (UNET platform) population for all providers, Jan. through July 2021.

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

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

Personal: Deliver simpler experiences and personalized guidance to help lower cost and achieve better health

Actionable: Help guide employees to their next best action, whether that's finding appropriate care, providing personalized health and wellness recommendations or understanding their cost and coverage

Connected: 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. The Premium program can help your employees review their options and make informed decisions when choosing a doctor.

The Premium program—available in 172 markets and 45 states—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 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 employers in 2021¹

Inspiring trust

91%

overall satisfaction rating¹

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

Why choose an Oxford plan from UnitedHealthcare?

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 2022 "World's Most Admired Companies" list.¹



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



845K medical members get Oxford health benefits and coverage services²

Access to quality local providers

124k+

NY, NJ and CT
physicians and care
professionals in the
Freedom Network³

119k+

NY, NJ and CT
physicians and care
professionals in the
Liberty Network³

81k+

NY and NJ physicians
and care professionals
in the Metro Network³

¹Fortune magazine, February 2, 2022. 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.

²UnitedHealthcare internal analysis, Feb. 2022.

³Network Report, December 2020. This data represents all participating (network) providers except ancillary providers (i.e., laboratories, radiology centers, urgent care centers, hospitals, etc.). Dental, behavioral health practitioners, complementary and alternative medicine providers are included. Providers who are board certified in more than one specialty, and/or practice at more than one location, are counted only once and at only one location.

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.

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

SimplyEngaged® 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 with an appropriate health care professional to determine what may be right for you. Rewards may be taxable. You should consult with an appropriate tax professional to determine if you have any tax obligations from receiving rewards under this program. 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 reward by different means. Contact us at **1-855-215-0230** and we will work with you (and, if necessary, your doctor) to find another way for you to earn the same reward.

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 plan with 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 (HSA) with a bank of their choice or through Optum Bank, Member of FDIC. The HSA refers only and specifically to the Health Savings Account that is provided in conjunction with a particular bank, such as 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 phone and video chat with a doctor are not an insurance product, health care provider 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.

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

Rally Health provides health and well-being information and support as part of your health plan. It does not provide medical advice or other health services, and is not a substitute for your doctor's care. If you have specific health care needs, consult an appropriate health care professional. Participation in the health survey is voluntary. Your responses will be kept confidential in accordance with the law and will only be used to provide health and wellness recommendations or conduct other plan activities.

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

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.

Note: Due to physician licensing restrictions, virtual primary care is only available within the member's state of residence. If the member's location is outside of their state of residence, virtual visits for primary care will be provided as a 24/7 Virtual Visit provided by Optum Everycare Now™ or American Well (Amwell).

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**

**United
Healthcare
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