

WELCOME

Tucson Unified School District

UMR is here for you



TUCSON UNIFIED
SCHOOL DISTRICT



A UnitedHealthcare Company



Greetings from UMR!

Welcome to the Tucson Unified School District’s benefits plan guide! The purpose of this booklet is simple: To help you get the most out of your health care plan.

As your benefits administrator, we’ll walk you through the plan to give you a better understanding of what it all means. Of course our main goal is to provide you and your family with timely, accurate and caring service.

It starts here, but you also have a whole team of UMR customer service and benefits experts behind you whenever a need or question arises.

To help you reach us, we’ve included this list of key contacts and information.

Stick it on your refrigerator or bulletin board if you wish, or place it in your wallet or purse, so it’s there when you need it. You can also find this same information on your UMR ID card.



A handy contact card for your fridge or wallet

My Tucson Unified School District’s benefits information

UMR Customer Service	1-800-826-9781
Need ID Cards	1-800-826-9781
UMR CARE	1-866-494-4502
24-Hour NurseLineSM	1-877-950-5083
Enroll in Maternity CARE	1-888-438-8105
Interactive Voice Response	1-800-826-9781
Teladoc	1-800-Teladoc

Your Preferred Provider Network

UHC Choice Plus

Your Pharmacy Provider

CVS Caremark

Find it online:

- a) go.umar.com/TUSD1
- b) www.umar.com

Find it online at www.umar.com

Write us UMR
PO Box 30541
Salt Lake City, UT 84130-0541





Working with UMR

UMR provides benefits administration services to you and your employer.

Your employer has hired us to assist in managing your benefits plan. For example, we help new employees sign up to receive health benefits. We also process your health claims, making sure they are handled quickly and accurately.

UMR even has medical professionals on staff. They help coordinate your care if you are in the hospital or are dealing with a health condition.

Filing a claim

A claim is a request that your benefits plan pays for a health service. You now have an easier way to file claims with UMR. In fact, we call it EZ Claim.

We don't need any claim forms, except for prescription drug claims.

With EZ claim, your doctor submits your bills directly for processing. Your ID card has instructions on the reverse side for your doctor's office.

To file a claim, simply show your identification (ID) card at your doctor's office. If you're planning or scheduling a treatment or procedure, you can also write or call us beforehand to find out if it will be covered.

How do I contact UMR?

Simply call the toll-free number located on the back of your UMR ID card.



You will receive an explanation of benefits (EOB) form after your claim is processed. It will tell you:

- How much of your cost is covered
- Where checks will be sent
- What amount you are responsible for paying, if anything

Claim appeals

You may sometimes wish to have UMR review a claim decision. This is called an appeal. Appeals must be made within 180 days after you receive written notice of a denied claim. To file an appeal, send us a written request to the address on your ID card to have a claim reviewed.

After you have filed an appeal, UMR will notify you in writing of the final decision within the time limit listed in your employee benefit booklet.

Member services

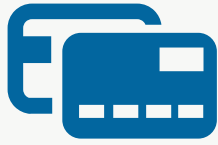
UMR has assigned people to help you answer benefit and claim questions. They are trained on your specific benefit plan.

If you have any questions, you can reach a UMR Customer First Representative by calling the toll-free number on the back of your ID card.



Questions?

**Talk to your
UMR Customer First
Representative for
answers.**



Understanding your new ID card

Have you ever wondered what all that stuff on your ID card really means? Here's a sample of what you might see. Each plan is different.

The number assigned specifically to you to track all of your benefits and claims information.

The number assigned to identify your group health plan.

A list of the family members who are covered under your plan.

Information about your prescription drug plan. Pharmacists use this to process your claims.

Your medical provider network, also referred to as your preferred provider organization (PPO). Going to doctors, clinics and hospitals in your network will save you money.

UMR, A UnitedHealthcare Company
YOUR COMPANY NAME HERE
Issuer (80840) 911-39026-02
Customer Logo (If Applicable)
Member ID: 12345685 Group Number: 76-123456
Member: JAMES A SAMPLE (00 MED DEN)
Dependents: JOANNE SAMPLE (01 MED DEN), JOHN SAMPLE (02 MED DEN), JOSEPH SAMPLE (03 MED DEN)
OPTUMRx
Rx BIN: 610127
Rx PCN: 01960000
Rx GRP: 0196XXXX
UnitedHealthcare Choice Plus Network
CO-PAYS MAY APPLY
01/18
Self-funded plan administered by UMR

More on the back

Look for important contact information, including the customer service phone number to call for answers to claims or benefit questions. You can also go to umr.com to check your benefits, claims status, accumulators and eligibility.

Your in-network (In-Net) and out-of-network (Out of Net) medical individual and family deductibles (Ded) and out-of-pocket maximums (OOPM) information.

Call this number only when you need medical services and your plan requires prior authorization for those services.

Call this number when you have questions about pharmacy benefits.

This card must be presented each time services are rendered.
Medical: In-Net: \$1,500/\$3,000, Out of Net: \$1,500/\$3,000
Ded: \$1,500/\$3,000, OOPM: \$1,500/\$3,000
Call UMR CARE at 866-424-4502 for plan required prior authorization. FAILURE TO CALL FOR PRIOR AUTHORIZATION MAY REDUCE BENEFITS.
For Members: www.umar.com, 8XX-XXX-XXXX, 8XX-XXX-XXXX
Nurseline: 877-233-1800
For Providers: www.umar.com, 877-233-1800
Claims: EDI # 39026, UMR, PO Box 30541, Salt Lake City, UT 84130-0541
Pharmacists & Members: 877-559-2855

Learn the language of health care

Let's face it. Understanding health and benefits terms is like learning a foreign language for most of us. Knowing the difference between co-insurance and co-payment can be confusing. And deciphering an EOB from COB shouldn't require a PhD.

Fortunately, you don't need a foreign language professor or CIA code-breaker to understand all of these terms. That's because our own UMR team of language experts has already defined them for you, along with a few others.

What is a deductible?

Definition: The amount you have to pay before your plan pays for specified services. Deductibles are usually an annual set amount. A deductible may apply to all services or just a portion of your benefits. It depends on your benefits plan.

What is a co-insurance?

Definition: A set percentage of costs that are covered by your plan after your deductible has been paid. Your plan pays a higher percentage. You pay a lower percentage.

Tip...think percentage

What is a co-payment?

Definition: A small set fee. It is paid each time you have an office visit, outpatient service or prescription refill. The fee is determined by your health plan. Co-payments don't vary with the cost of service.

Tip...think set fee

What is an out-of-pocket?

Definition: The amount you pay out of your pocket for particular health care services during a particular period of time. An out-of-pocket maximum limits the amount you have to pay during a particular period of time.



Still confused?

Go to [justplainclear.com](https://www.justplainclear.com) for a searchable glossary of health care terms.

What is coordination of benefits (COB)?

Definition: Many families are covered by more than one health plan. The coordination of benefits (COB) process determines which plan pays first. It also determines if the second plan will pay any remaining charges not covered by the first plan. The process makes sure your doctor doesn't get paid twice for the same service.

What is an explanation of benefits (EOB)?

Definition: An EOB is simply the statement explaining your benefits activity. It includes the services provided, the amount billed and the amount paid, if any. You should review your EOBs carefully. Call the customer service number on your ID card or visit www.umar.com if you have any questions about your EOB.





Understanding your EOB, as easy as 1-2-3

An explanation of benefits (EOB) is not a bill. It simply tells you everything you might want to know about how your recent medical service was covered by your benefits plan. You'll receive a bill from your provider for any amount you may owe.

1 Cost summary

The first page of your EOB is a summary of how much your provider billed, how much was covered by your plan and the total you may owe to your provider.

Here's a summary for you.
Detailed claim and benefit information is located on the following page(s).

Amount billed:	\$500.00	This is the total amount that your provider billed for the services that were provided to you.
Your discount:	\$100.00	Your plan negotiates discounts with providers and facilities to help save you money.
Your plan paid:	\$260.00	This is the portion of the amount billed that was paid by your employer-sponsored benefits plan.
You saved:	\$360.00	72% of your service was covered by your plan discounts and/or your employer-sponsored benefits plan.
TOTAL YOU MAY OWE:	\$140.00	The portion of the amount billed that you may owe to the provider. This amount includes your deductible, co-pay, co-insurance and non-covered charges. Not allowed amounts and any amount you paid when you received care may not be reflected in this amount.

2 Benefits update


On the next page, you'll find a breakdown of how much you and/or your family have applied toward your annual deductibles and out-of-pocket amounts.

Deductible: The amount you have to pay before your plan pays for specified services. Deductibles are usually an annual set amount.

Out-of-pocket: The most you could pay during a coverage period (usually one year) for your share of the costs of covered services. After you reach your "to go" amount, the plan will usually pay 100% of the allowed amount.

In-network

INDIVIDUAL CAL YR DEDUCTIBLE		\$0.00 to go
INDIVIDUAL OUT-OF-POCKET		\$2,126.86 to go
FAMILY CAL YR DEDUCTIBLE		\$1,156.95 to go
FAMILY OUT-OF-POCKET		\$7,126.86 to go



PO BOX 30541 Salt Lake City, UT 84130-0541
(1-800-826-9731) + umr.com

Employee: Code Blank
 Employee address: 1234 Sunshine Blvd
 Suite 10293
 Best City, USA 12345-1112
 Group number: 76-9999999
 Member ID: 99999999
 Employer name: ABC Companies, Inc.
 Notice date: 03/28/2019

Patient: Elizabeth Blank Claim number: 999999999 Provider name: XYZ Provider Inc. Patient account: 1234567890

Service(s) you received	Reason code	Service date(s)	Amount billed by provider	Your discount	Net allowed	Amount due to provider	PLAN PAYS		YOU PAY				
							Plan paid %	Plan paid \$	Co-pay +	Applied to deductible +	Co-insurance +	Not covered +	Total you may owe*
Emergency Care	008	01/14 - 01/19/19	\$500.00	\$100.00	\$0.00	\$400.00	80	\$260.00	\$25.00	\$50.00	\$25.00	\$0.00	\$140.00
Totals			\$500.00	\$100.00	\$0.00	\$400.00		\$260.00	\$25.00	\$50.00	\$25.00	\$0.00	\$140.00

*This total may not reflect any payments/co-pays you made at the time of service. Please wait for a provider bill before making a payment. (+) Indicates any payment you may owe. (-) Indicates any discount or plan payment that will reduce what you owe.

Reason code explanations:
 008: Provider negotiated discount. You are not responsible for this amount.

3 Service and payment details

This section includes information about who received the medical service, the name of the provider and what types of care they received. It gives you a breakdown of how the claim was processed, including:

- How much your provider billed
- Your network discount
- The amount paid by your employer-sponsored plan
- The amount you may owe, including co-pays, deductibles and out-of-pocket amounts



**Go paperless
on umr.com**

Sign up for digital EOBs and you'll receive email reminders every time you have a new EOB. PLUS, we'll let you know if you need to take action on the EOB and give you more details about your claim.

10 ways to control health care costs

Everybody can play a role in controlling the rising cost of health care. In fact, there are many things you can do to reduce how much you spend on health care now and in the future.

1 See preferred doctors

Most health plans let you see any doctor you want. But you can save a bundle by seeing doctors that are part of your plan's preferred network of health care providers. Going to a preferred, in-network doctor usually saves you 20 percent to 30 percent or even more off your bill.

2 Go generic

Generic drugs are the same as other medications, just without the brand name. The biggest difference is the price. Generics usually cost you 30 percent to 70 percent less than brand names.

3 Practice prevention

Preventive care includes things like physical exams, vaccines, blood tests and cancer screenings. These services can prevent you from getting sick or detect a health issue before it gets serious. Check your health plan to see if preventive care is covered in full or at discounted rates.

4 Get online

It makes sense to find out everything you can to make informed, cost-saving health care choices. That's why we offer a number of web tools to help you review your health care options, pharmacy benefits and health coverage estimates using the Internet. Visit our website at umr.com.

5 Choose the right care

There is a time and place for everything. A trip to the emergency room may be needed if you are seriously injured or ill. Consider a cheaper option, like a walk-in clinic or urgent care, if you have a minor illness or issue, such as an ear infection. It may save you time as well as money.

– more –



Fast fact...

Generic drugs usually cost you 30 percent to 70 percent less than brand names.

6 Think long-term

Some people go to the doctor for minor reasons once they meet their yearly deductible. While that may not have an instant impact on health care costs, it is a major factor in driving up everyone's overall costs of care.

7 Eat right

A balanced diet can save you money. It keeps you healthier in the short-term and lessens the chances of developing more serious and costly medical conditions in the future.

8 Exercise

Just 30 minutes of walking or other regular exercise each day helps manage weight, stress and possibly your pocketbook. Exercise helps control and prevent high blood pressure and cholesterol, two of the major risk factors for heart disease.

9 Take care of yourself

The harmful effects of unhealthy habits, such as tobacco use and alcohol abuse, are well known in regard to health issues like cancer and heart disease. If you use tobacco products, seek help to try quitting. Practice moderation if you drink alcohol. Get help if stress or depression are an issue. You will feel better and also save a few dollars.

10 Review your EOB

Billing mistakes sometimes happen. Review your explanation of benefits (EOB) statement to make sure you are properly billed. Contact your doctor or other care provider if you suspect an incorrect charge.



Remember...

Review your explanation of benefits (EOB) statement to make sure you are properly billed.



Looking for a health care provider?

Compare quality and costs before you go

The next time you're in the market for a new doctor or are wondering how much you'll pay for a possible medical procedure, visit **umr.com** first. Your online services make it easy to look up UnitedHealthcare network providers and health care facilities and find cost estimates for different services – all in one place.

You'll get the information you need to make the right choices for you and your family and know what to expect before making an appointment

Stay in-network

With **umr.com**, you have anytime access to a searchable directory of UnitedHealthcare network providers in your area. Choosing a doctor or facility in the network ensures your benefits are paid at the highest level, so you can expect to pay less out of your own pocket. And when you go to a network provider for preventive services, there's typically no cost to you.



START SHOPPING TODAY

Log into **umr.com** and select Find a provider.

Then choose View providers to search for medical providers. Or log in and look for the health cost estimator shopping cart icon to get started.

Find Health Care by Category



People

Doctors, medical groups, and other professionals by specialty



Places

Hospitals, clinics, labs, imaging centers, medical suppliers



Services and Treatments

Providers for office visits, tests, treatments, surgeries



Care by Condition

Find care for common concerns



Cost Estimates

Treatment for common conditions

You can narrow your search to primary care providers or look up physicians by specialty. Then select a physician from your search results to learn more about where they went to school, where they practice and how to schedule an appointment.

Check for quality

The two blue hearts next to a doctor's name tells you they are a Premium Care Provider who has been reviewed by UnitedHealthcare and meets quality standards for delivering cost-effective care.

You may also see star ratings for customer satisfaction based on reviews from previous patients.

Understand the costs

Different providers may charge different amounts for the services they offer. Your search results will give you a range of the average costs for preventive care or medical procedures in your area. And the individual provider listings show whose costs are below, above, or meet the local average.

If a procedure typically includes multiple steps of treatment, you can review the total cost and your estimated out-of-pocket cost for each step. So you'll know what to expect, from start to finish.

Your estimated out-of-pocket costs are personalized to you, based on your own benefit plan's deductible, annual out-of-pocket max, co-pay, co-insurance and how much you've paid toward your deductible.

Abd, Michael A, MD
Cardiology, Cardiovascular Disease, Interventional Cardiology
123 Any Street
Any City, MN 55340
4 Miles Away · Got Credentials ID
(555) 555-5555 · Physic
Specialty: Interventional Cardiology

Two blue hearts (Premium Care Provider)
Accepting All Patients
In-Network Provider
★★★★★ (14)
\$835
Meets Average Cost
View Estimate Detail

★★★★★ 14 Reviews

Cost Estimate for MRI Scan Without and With Dye - Lumbar Spine

Local average cost in your area: \$884 - \$2,309
View Price · View All Local Providers · My Health Plan · View Details

Estimated Out-of-Pocket Cost: \$746

There is 1 step for this service:
Average Duration: 15 min

Step	Service	Building Available	Estimated Cost	Local Average
1	MRI Scan Without and With Dye - Lumbar Spine	Building Available	\$746	\$746

View Step

PAYMENT DETAILS

EXPLANATION OF COSTS

Category	Amount
ESTIMATED OUT-OF-POCKET COST	\$746
Copay	\$0
Applied by Deductible	\$746
Coinsurance	\$0
Not Covered by Health Plan	\$0

\$746
Estimated out-of-pocket cost

Ask your doctor

Save money by using a network lab



The next time your doctor orders laboratory (lab) tests, ask him or her to make sure the lab is in your plan's network.

Just like using a network doctor, using a network lab can save you money. Which is why we want to confirm that **LabCorp®** and **Quest Diagnostics** are contracted network providers available in your service area.

Two simple ways to stay on top of lab expenses:

- 1 Talk to your doctor when any test is ordered.
- 2 Ask for verification that a network lab is being used.



For a current listing of network laboratories in your area, go to umr.com or call the number on your health plan ID card.

Take an active role in your health care – and costs – by using only labs that participate in your network.

The importance of updating **your other insurance information**



Are you or your dependents covered under more than one medical or dental plan? Is UMR the only coverage for you and your dependents? If so, UMR needs to know. This information is used to apply benefit determinations timely and accurately.

UMR requires you to give us updated information about other insurance every year. Even if you or your dependents aren't covered under another medical or dental plan, we still need to know.

Coordination of benefits can help you pay for covered expenses. It helps make sure claims are paid correctly, and that the benefits paid aren't greater than your covered expenses.

For example

1. Bob and Mary have medical coverage through two different employer plans. Bob is the member (plan holder) and Mary is the spouse/dependent on his plan. Mary also has medical coverage through her employer.
2. Coordination of benefits makes sure that for Mary's claims, her plan would pay first.
3. UMR, as the secondary plan, will then coordinate with Mary's primary plan to determine if any additional payments are owed.



Updating your information is easy

- 1 Call our automated phone number at **866-586-0613**
- 2 Go to [umr.com](https://www.umar.com)
Submit your other insurance via an easy electronic form

When claims are denied for other insurance

If UMR receives a claim for medical or dental care you received and your most recent other insurance update is more than 12 months old, we will deny all claims until an update is provided.

You will receive an explanation of benefits (EOB) denial form like the example shown below. The dollar amount or diagnosis on the claim does not change this determination.

When you get an EOB denial for other insurance update, please respond quickly so we can expedite the review of your claims.

You have a specific number of days to give your updated other insurance information to UMR. The time frame is spelled out in your summary plan description (which is often 180 days after the claim is denied).

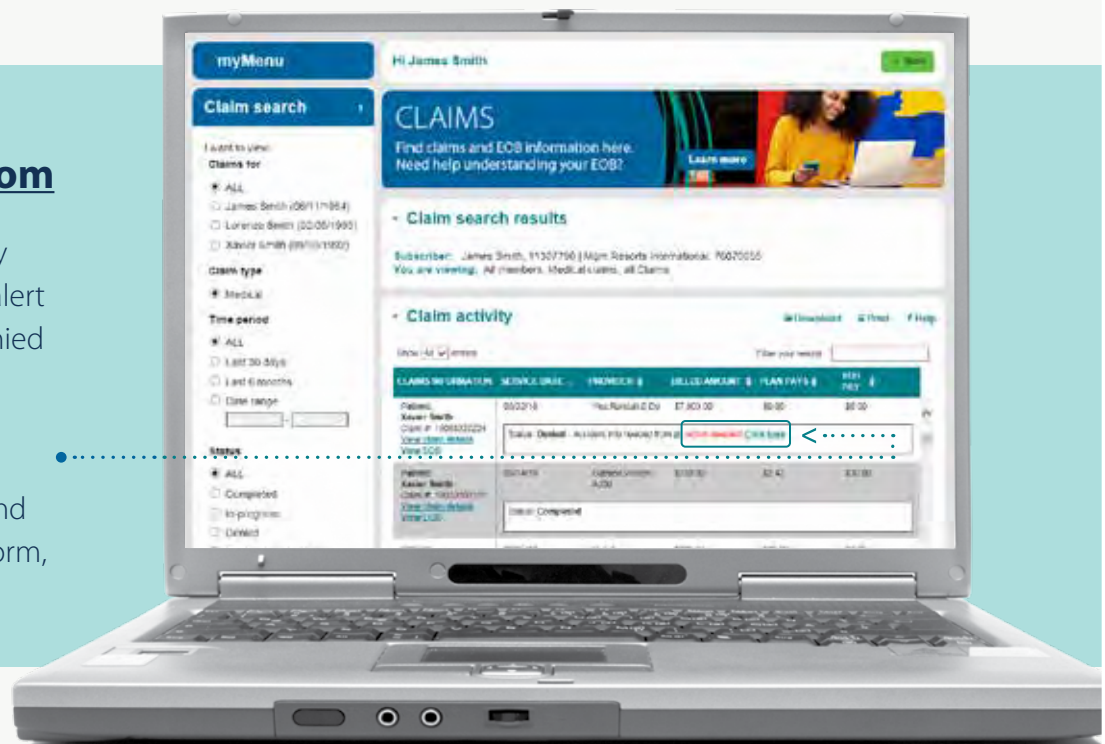
If you are also covered under another group medical plan or dental plan, please provide UMR with the date that coverage began (effective date) and who is covered under that plan.

Any denied claims will be reprocessed, as long as your other insurance information is received within the time frame required by your plan. In addition, when you log on to umr.com, you'll find your **MyTaskbar** on the homepage. On the taskbar, you'll see an icon with a red exclamation point indicating that you need to provide other medical insurance information.

After you provide us with the requested information, no further action is needed. UMR will have the applicable claims reprocessed for benefit consideration.

It's easy to take action on umr.com

In the Claims Summary on umr.com, we will alert you if your claim is denied and waiting for other insurance information. Simply click on the **Action needed** link and submit an electronic form, then you're done!



Understanding qualifying events



Did you recently get married? Are you having a baby?

If you, or a family member, recently had (or expect to have) one of the following qualifying events, you need to request a benefit change within the time frame specified in your plan document (generally 31 days):

- Loss of insurance
- Marriage or divorce
- Dependent child has reached the limiting age
- Adoption or birth of a child

To update your benefits, simply obtain a benefits change form from your Human Resources Department and submit the completed form within the time frame specified by your plan.

If changes are not made within the specified time frame, your coverage will not be able to change until the next open enrollment and only if eligibility guidelines are met at that time.

For additional questions about your health care benefits or other possible qualifying events, please see your plan document or contact your Human Resource department.

Find what you need at umr.com

Getting your benefits information is easy using **umr.com**.
You'll be able to find everything you're looking for in no time!

Select **Login/ Register** to enter your username and password, or to register for a new account.

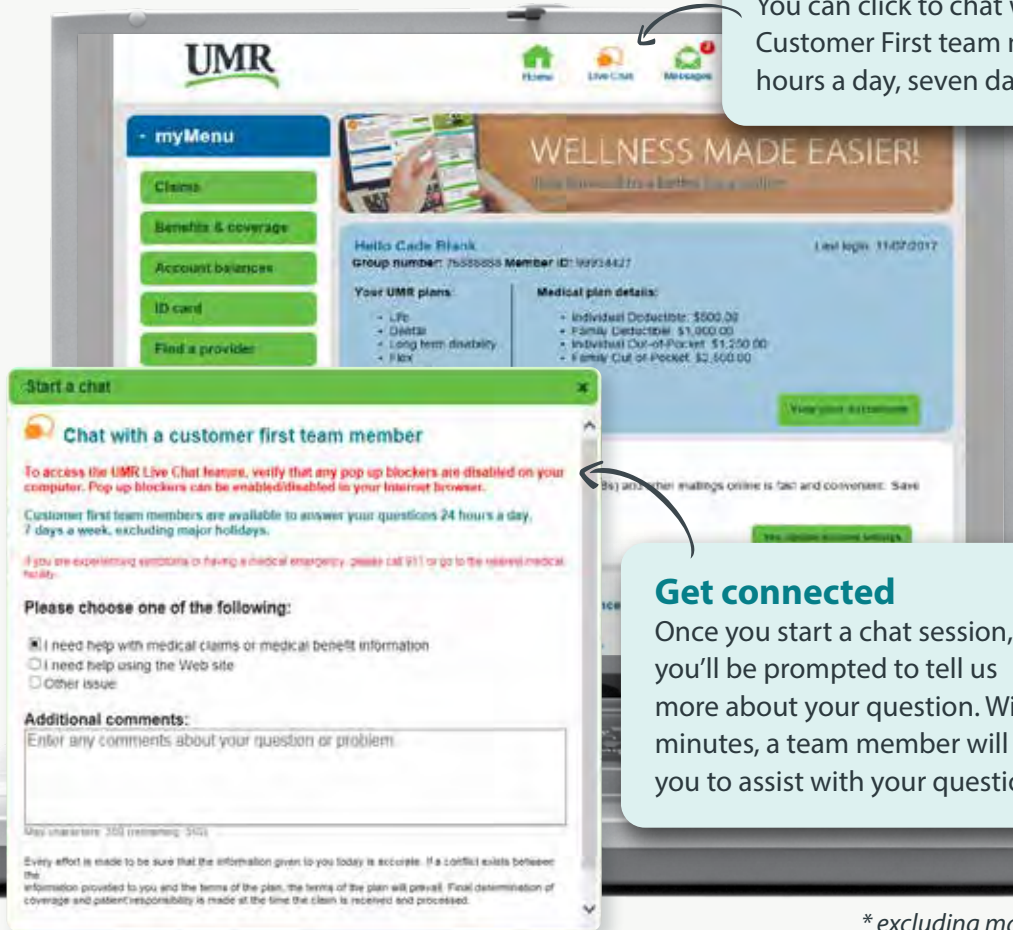


Your live connection to UMR customer service

Our team members are available online to answer your questions about your claims and benefits with just the click of your mouse. Once you've logged in to your **umr.com** account, just click the Live Chat icon in the top navigation bar on your member home page. It's that easy.

Click to chat

You can click to chat with a Customer First team member 24 hours a day, seven days a week.*



Get connected

Once you start a chat session, you'll be prompted to tell us more about your question. Within minutes, a team member will join you to assist with your question.

* excluding major holidays

A launch pad for all your health benefit needs

From your personalized home page, you can see a summary of your benefits, link to key areas of the site using myMenu, find out what tasks you need to complete to keep your benefits up to date, and chat with a UMR customer service team member.

myMenu

One-click access to claims, coverage and other resources.

My taskbar

Your personalized taskbar will prompt you to take action in three main areas:

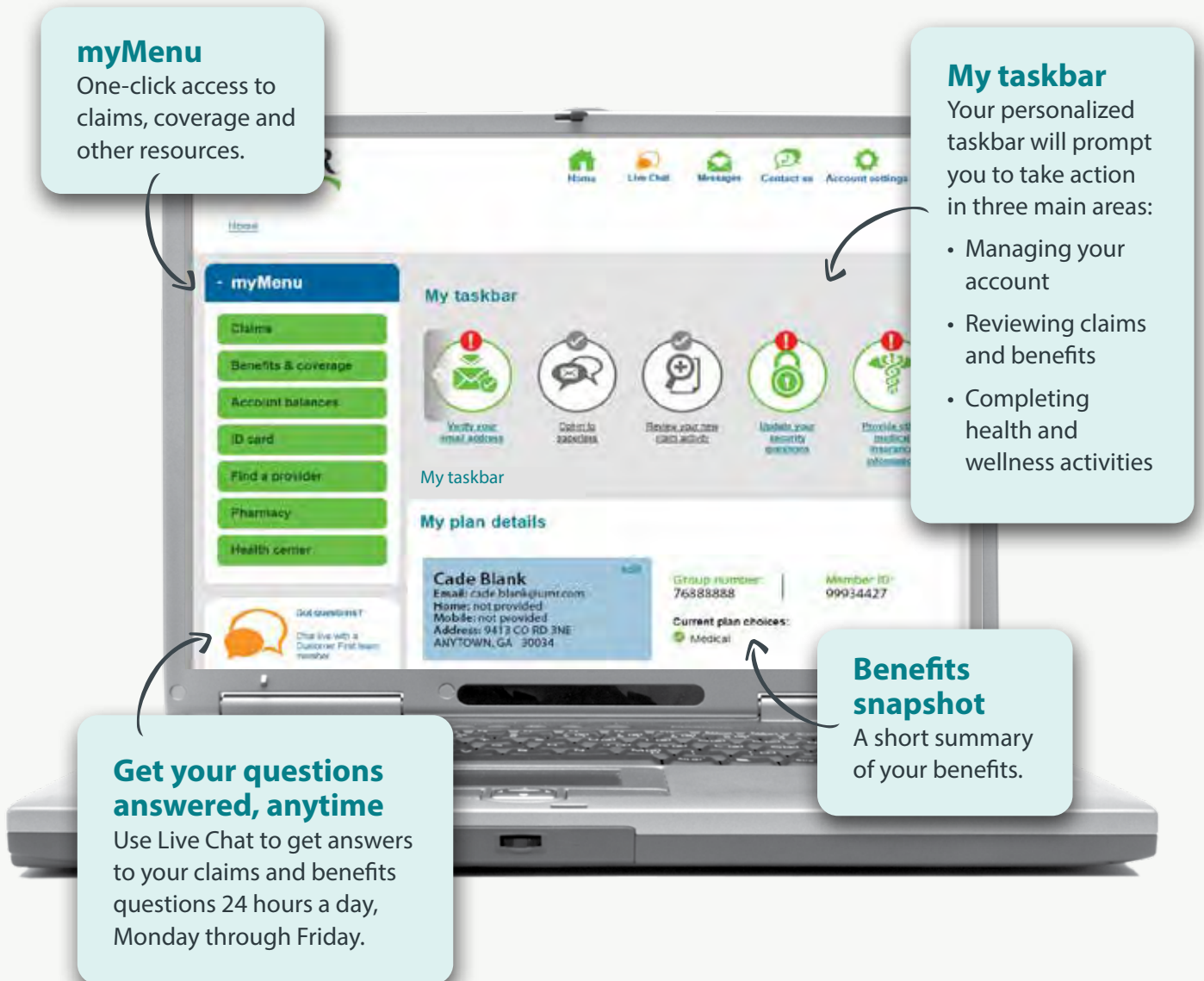
- Managing your account
- Reviewing claims and benefits
- Completing health and wellness activities

Get your questions answered, anytime

Use Live Chat to get answers to your claims and benefits questions 24 hours a day, Monday through Friday.

Benefits snapshot

A short summary of your benefits.



Securing your health information on **umr.com**

These days, it's important to protect all of your personal information. At UMR, we take your privacy seriously. We follow strict rules and security procedures to help maintain the security of your information and restrict access to only you or your authorized providers and/or representatives. We want you to know how to control who has access to view your health information. So you can rest easy, knowing your privacy is safe with us.

Secure login for added protection

As part of our ongoing effort to help keep your personal information secure online, we've added a new security questions entry point requirement when signing on to **umr.com**. Here are some things you should know about the new security questions requirements:

✔ If this is your first time logging in to **umr.com** since the addition of the new security feature, you will be prompted to select two different security questions and provide answers.

✔ Upon login to **umr.com**, you will be asked to answer your pre-selected security questions. This will be required every time you log in from a new device.

Hint: You can select **Remember this device** to eliminate answering these questions from specific devices every time you log in.

❗ **REMEMBER** Security questions must be unique and answers must be at least three characters long. Answers are case sensitive.



* Fictionalized data

Note: The images shown reflect available features within our desktop site. These features may or may not be available to all users, depending on your individual and/or company benefits.

Grant access and share information with eligible family members

Choose who can view your personal information online

Adults age 18 and older have a right to determine who may or may not view their information on [umr.com](https://www.umar.com). This right applies to both a covered spouse and adult dependents.

If you are a parent of an adult dependent covered under your plan, your adult dependent must grant you online access to his or her personal health care information for you to view claim or benefit information on their behalf.

Similarly, your spouse must grant you access if he or she wishes for you to view their personal health information. Likewise, the covered subscriber must grant online access to a spouse or any other covered family member you choose to allow to view your information.

Finally, minor dependents between the ages of 13 and 18 may choose to keep their online information private. By default, the plan subscriber will have online access to these minors' information. However, the minor may choose to restrict this access, or choose to grant access to a parent or other legal guardian who is not the primary subscriber for the plan.



WE TAKE YOUR PRIVACY SERIOUSLY

UMR follows strict rules and security procedures to help keep your information safe and restrict access to only you or authorized providers and/or representatives.



What you need to do

1 Discuss with your family members their right to protect their personal health information.

2 If a covered family member wishes to allow access to another covered family member, the member must grant access to view his or her information:

If your spouse or covered dependent has not yet registered for online services with UMR:

Dependents will be asked during the registration process to select the family members they will allow to view their personal health information.

To register, have your covered family member visit **umr.com** and click on the blue **Login/Register** button located in the top right corner of the page. Select **Register** and follow the prompts to complete your account setup. They should have their ID card with member ID and group number handy.

If your spouse or adult dependent has already registered for online services:

Your covered family members can log in to **umr.com** to access their **Account settings** and manage their access settings. The access privileges they select through the online account settings or during registration will apply to both the desktop and mobile versions of **umr.com**.

If a parent or legal guardian other than the plan subscriber wishes to view online information for a minor dependent between the ages of 13 and 18:

The minor dependent may register as a new user on **umr.com**. They will be asked during the registration process to select the family members they will allow to view their information. The subscriber will also need to grant access to the parent or guardian.



* Fictionalized data

Don't forget!

Granting online access to appropriate family members can be important if a member is hospitalized or otherwise unable to view their own information.

Who we may share your information with:

Authorized health plans or physicians and other health care professionals

We may share information, for limited purposes, associated with your health care and benefits as a part of administration of your employer's health care plan and your individual plan benefits.

Our employees may view your information in order to serve you

We share and give access to personal information to our employees and agents in the course of operating our businesses. For example, if you sent us an email asking a question, we would provide your email address to one of our employees or agents, along with your question, in order for that person to reply to your email. We may share personal information with other affiliates or business units within the company.

Legal entities may view your information if required by law

We may share personal information in response to a court order, subpoena, search warrant, law or regulation.

We may cooperate with law enforcement authorities in investigating and prosecuting website visitors who violate our rules, or engage in behavior that is harmful to other visitors, or is illegal.

Contracted entities may view your information to perform services on our behalf

We may share and give access to personal information with other companies that we hire to perform services on our behalf or collaborate with. For example, we may hire an outside company to help us send and manage email, and in that case we might provide the outside company with your email address and certain other information in order for them to send you an email message on our behalf. Similarly, we may hire outside companies to host or operate some of our websites and related computers and software applications.

However, if we share or give access to personal information to outside companies, we require them to use the personal information only for limited purposes, such as for sending you the email in the example above.

Got questions?

For information about your rights to control your protected health information (PHI), please review the privacy statement available on our website.

If you believe we or any company associated with the company has misused any of your information, please call us immediately at 877-561-1622 to report the issue.

View your claim activity

Claim search

Set up your search preferences by dependent(s), claim type, time period and status.

Take action

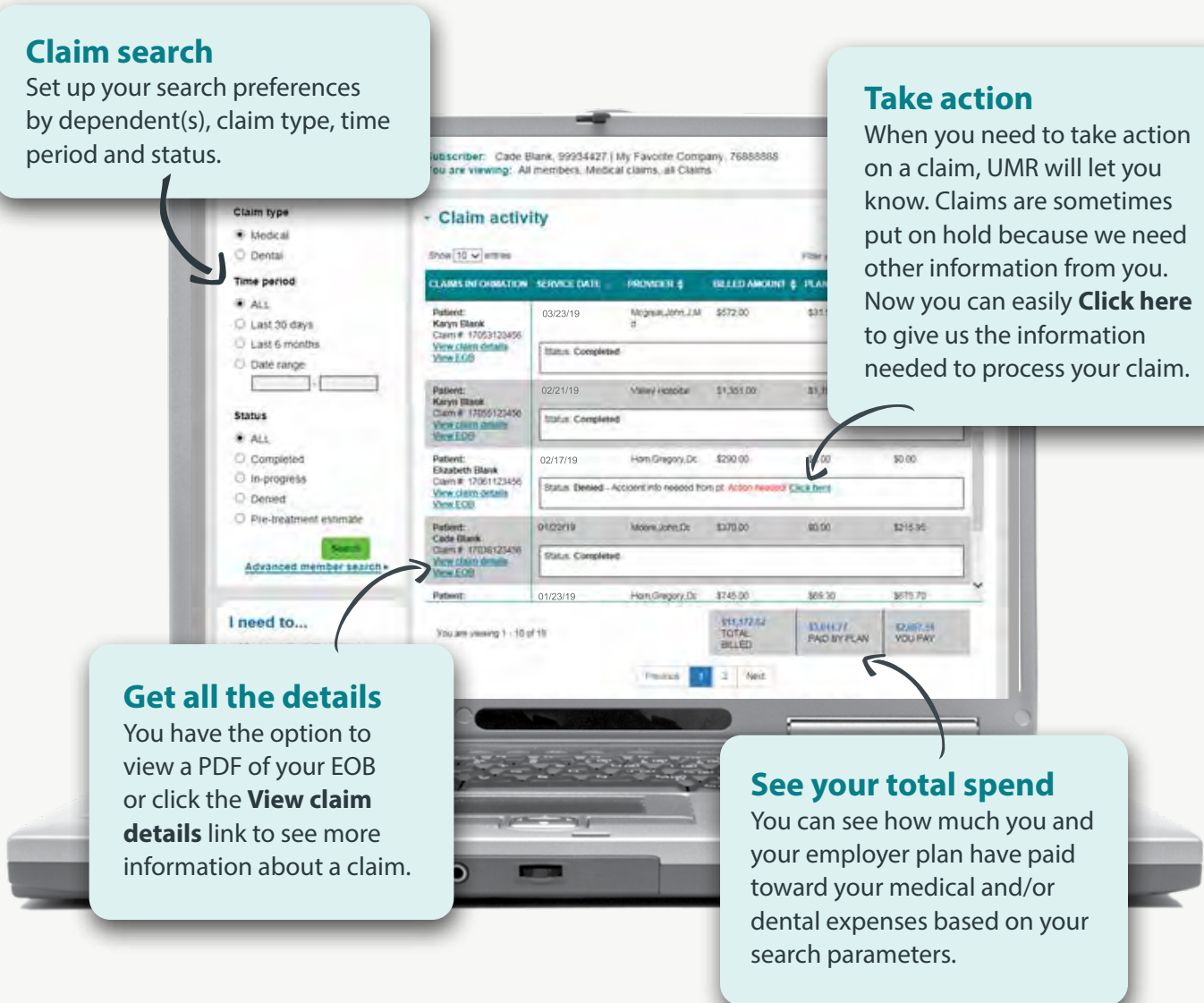
When you need to take action on a claim, UMR will let you know. Claims are sometimes put on hold because we need other information from you. Now you can easily **Click here** to give us the information needed to process your claim.

Get all the details

You have the option to view a PDF of your EOB or click the **View claim details** link to see more information about a claim.

See your total spend

You can see how much you and your employer plan have paid toward your medical and/or dental expenses based on your search parameters.



Benefits and coverage summary at-a-glance

Know how much you've contributed to your deductibles and out-of-pocket expenses using this easy-to-read summary.

Benefit summary

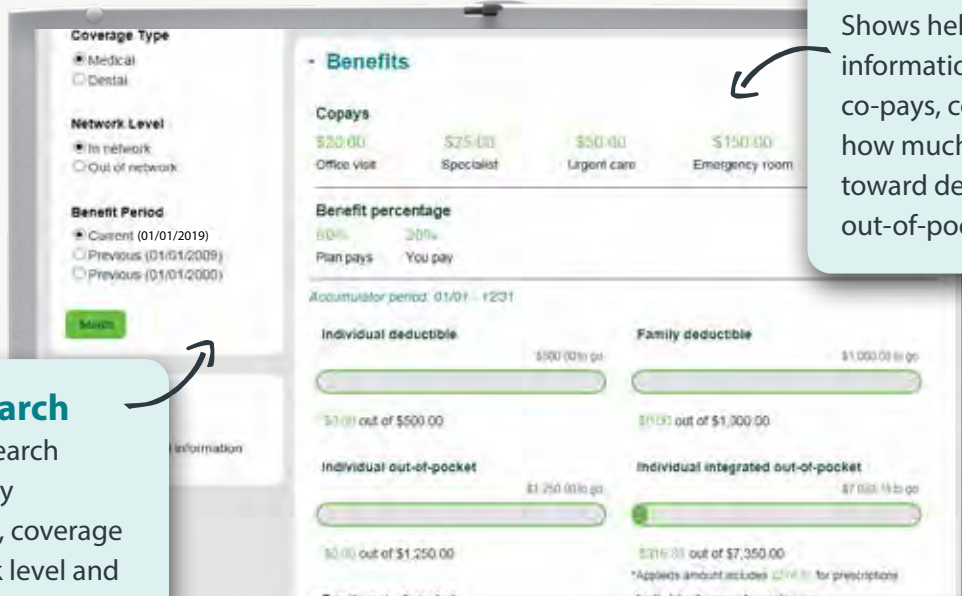
Shows helpful benefit information, including co-pays, coverages and how much you have paid toward deductibles and out-of-pocket maximums.

Benefit search

Set up your search preferences by dependent(s), coverage type, network level and coverage period.

Get more details

Sometimes you need to know about a specific benefit or procedure and what is covered in your plan. Select from the drop down of **Additional benefits** information to get more details. Or, click on the **Summary plan description** button if you still can't find what you are looking for.



Additional benefits

- Mental, Alcohol and Drug
- Rehabilitation, Wellness, Adult
- Routine Care for Children
- Chiropractic**
- Therapy
- Prior Authorization Requirements

Chiropractic
Chiropractic All: major medical benefits apply. Dollar amount maximum: \$500.00 per calendar year.
Office Visits Copay: \$25 copay per visit/major medical benefits apply.

Not sure what you are looking for?
View/download a PDF of your plan summary information using the buttons below.
[Summary plan description](#)

Health information all in one place

Online health information: up-to-date and ad-free

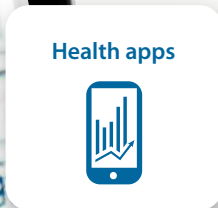
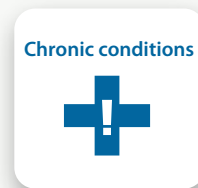
- Search your health symptoms
- Understand your treatment options
- Learn about drug interactions
- Find first aid information

Free tools, apps and calculators

- Calculate your body-mass index (BMI)
- Download apps to help you stay healthy
- Track your nutrition and fitness goals

Our top picks for healthy eating and exercise

- Get the essentials on men's, women's and kids' health
- Watch step-by-step recipe videos
- Log your exercise and activity



Always have your ID card handy

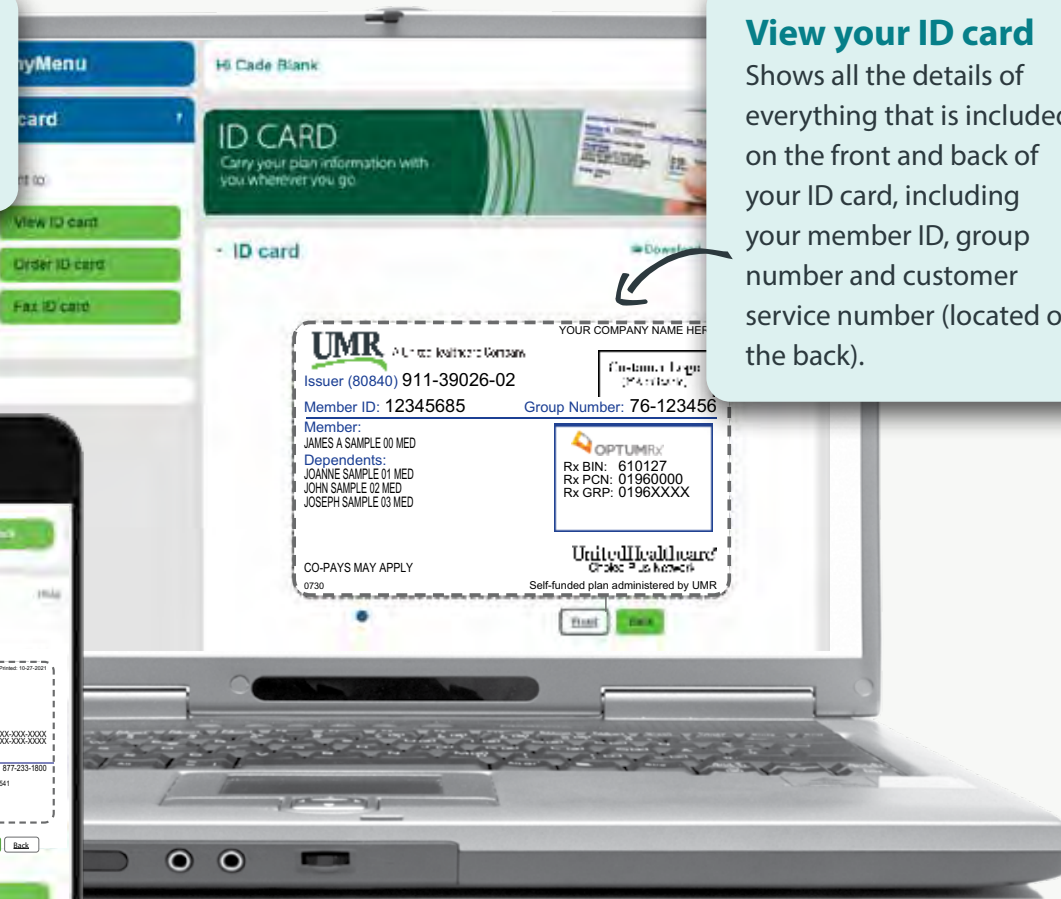
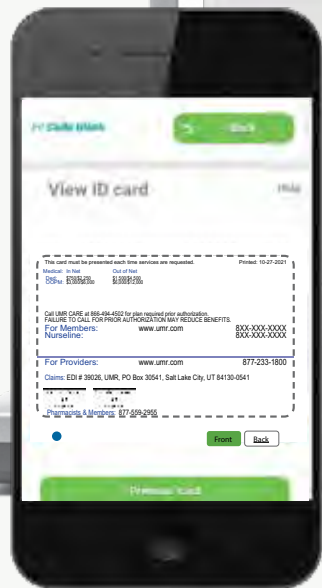
With a couple of clicks, you can have a copy of your ID card pulled up on your smart phone or get a new card mailed to your home.

I want to

Allows you to easily order an ID card or fax a copy of your ID card.

View your ID card

Shows all the details of everything that is included on the front and back of your ID card, including your member ID, group number and customer service number (located on the back).



Welcome to **umr.com on the go**

As a UMR member you can access your benefits and claims information anytime, anywhere using your mobile device. There's no app to download. Simply log in to **umr.com**

My taskbar

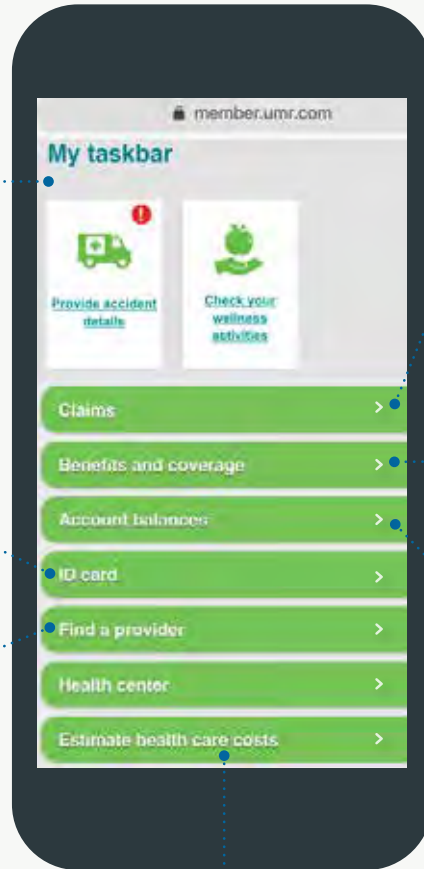
View upcoming tasks right from the homepage.

Share your ID card with your provider

Now there's no need to carry it with you, it's at your fingertips.

Find a provider

Find an in-network provider while you are on the go.



Look up claims

Review a claim for yourself or an authorized dependent.

Check your benefits

View medical/dental benefits and see who's covered under your plan.

Access account balances

Look up balances for your special accounts, including HRAs and FSAs.

Estimate health care costs

See what you can expect to pay before receiving care with the Health Cost Estimator tool.

Want to bookmark umr.com on your mobile device?

iPhone: Touch and hold the open book icon to add **umr.com**

Android: Tap on the menu. Then select "Add Bookmark."

Note: The images above reflect available features within our mobile site. These features may or may not be available to all users depending on your individual and company benefits. If you are having trouble accessing or logging into our mobile site, contact the 800 number on the back of your ID card for fastest service. You can click the "Contact us" link on the home screen.

A trusted source for health information

There are articles, images, videos and other visuals on diseases, conditions, symptoms, medications, injuries, surgeries, procedures and preventive health tips. This wealth of health knowledge comes in a variety of forms, including:

- Health encyclopedia
- Health navigator
- Drug information
- Drug interaction tool

Just click on an area of the body or select from a list of nearly 300 symptoms to quickly find what you need to know.

Over 1,600 diseases and conditions are covered in male, female, adult and child views.



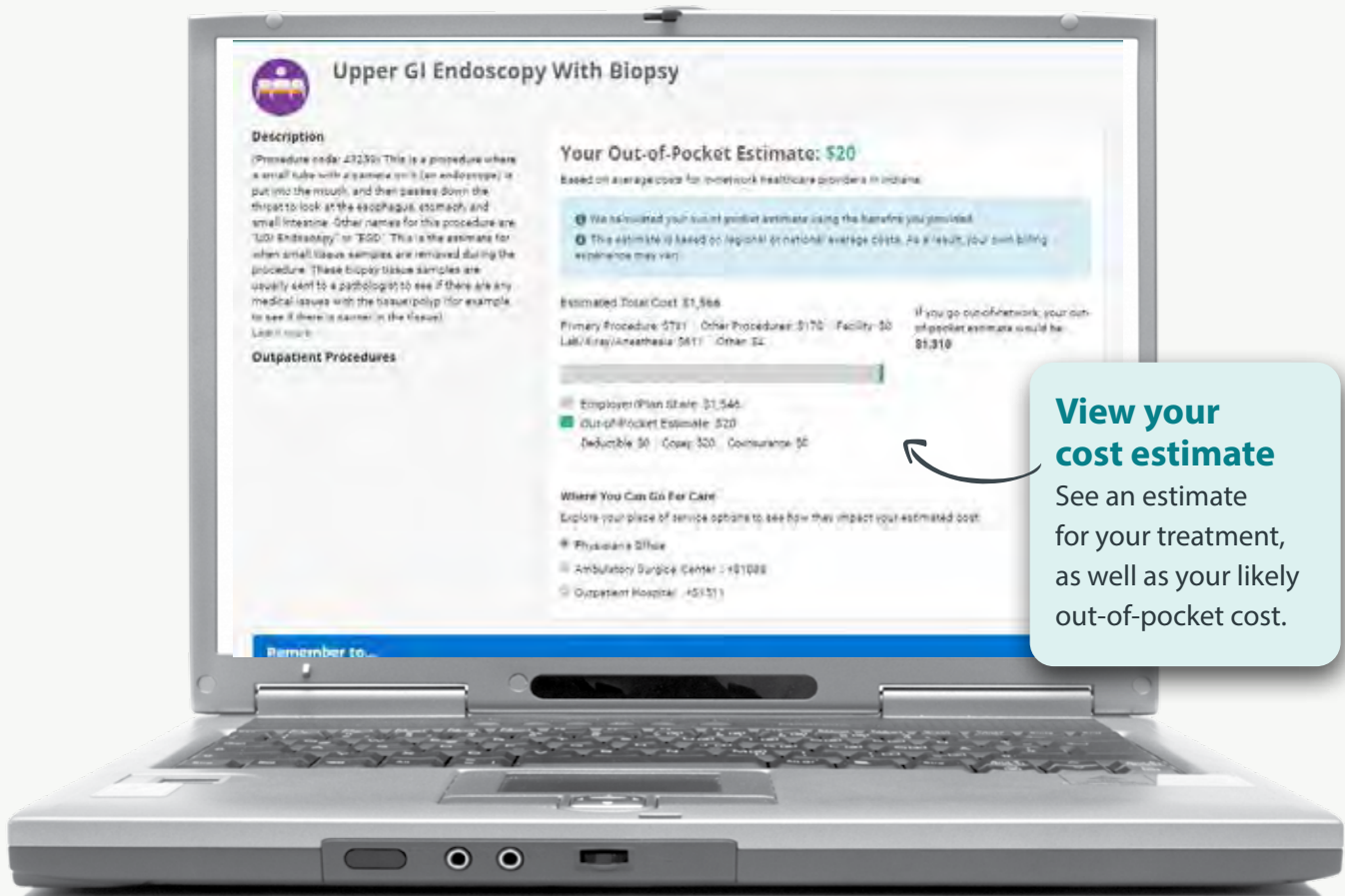
Health education
library



It's easy to get started. Just look for the **Health education library** tile on your personal home page.

Estimate your costs before getting care

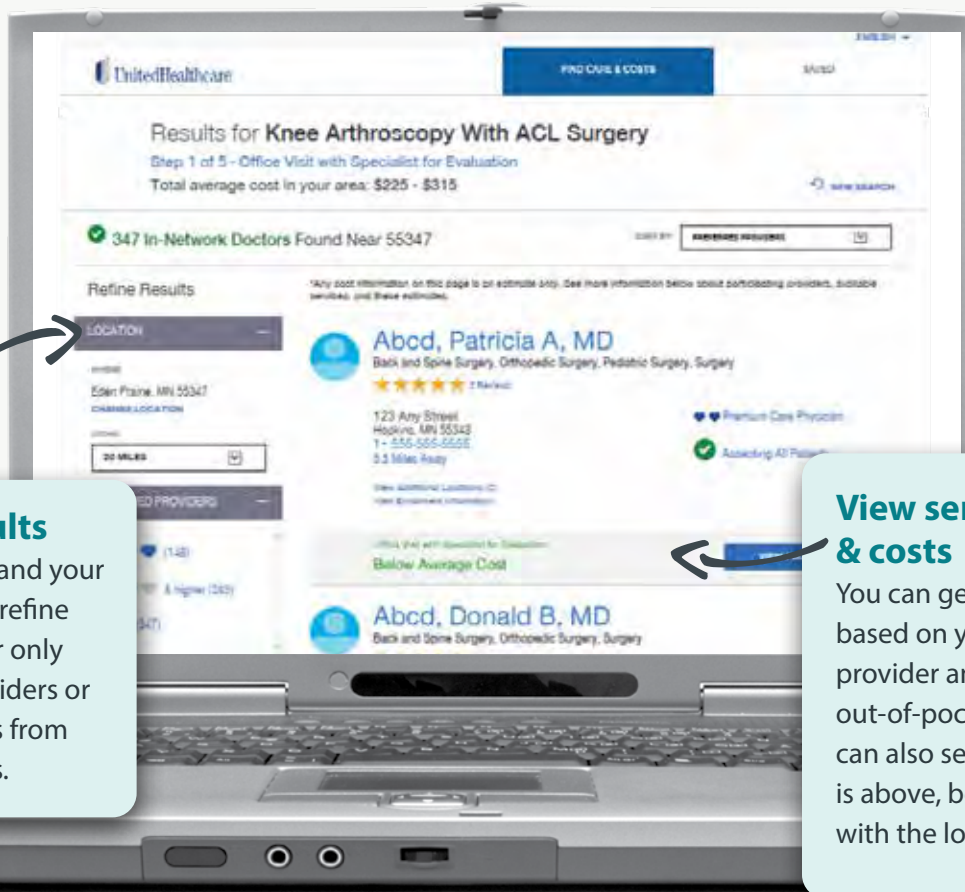
The Treatment Cost Calculator offers cost estimates for hundreds of health care services. The estimates are based on the claim experiences of 43 million Americans. Most estimates highlight cost differences, depending on the type of medical facility you visit for care.



It's easy to get started. Just look for the **Health cost estimator** tile on your personal home page.

Know what you'll pay before getting care

The health cost estimator allows you to research treatment options and learn about the recommended care and estimated costs associated with your selected treatment option. You can even access quality and efficiency measurements for participating providers.



Refine results

Narrow or expand your search area or refine your search for only preferred providers or by star reviews from actual patients.

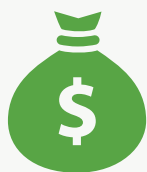
View services & costs

You can get an estimate based on your location, provider and remaining out-of-pocket cost. You can also see if a provider is above, below or in line with the local average cost.

Health
cost estimator



It's easy to get started. Just look for the **Health cost estimator** tile on your personal home page.




Invest in your health

A health savings account (HSA) is an investment option that can help you pay for future medical expenses. An HSA is not part of your actual medical benefits plan. It's actually a cash account with big tax advantages.

To have an HSA, you must first enroll in a qualified high deductible health plan through UMR. You also cannot be covered by any other plan that is not considered a high deductible plan, such as a spouse's plan.

As long as you use the money you put in your HSA for only qualified medical expenses, you won't have to pay FICA or federal income taxes. The only possible exception is you may have to pay state taxes in some parts of the country.



It's your money to take with you if you change jobs, medical plans or retire.

Like an FSA or IRA, only better

Like an FSA

Any qualified medical expense
Tax advantaged

But better

No claims to submit
No "use it or lose it" rule
Can use an HSA for non-medical expense (but this will result in tax consequences)

Like an IRA

Tax advantaged savings
Variety of investments available
Tax advantaged investment earnings
Taxed if withdrawn for non-medical expenses

But better

No FICA or federal income tax if used for qualified medical expenses

In some ways, an HSA is like a flexible spending account (FSA) or individual retirement account (IRA). But in other ways, it is better.

Unlike an FSA, there are no claim forms to submit.

You also will not lose any money in the account if you do not spend it by the end of the year.

It's better than an IRA because you will never have to pay FICA or federal income taxes if the funds are spent only on qualified medical expenses.

Why choose an HSA?

There are many reasons why you should take advantage of an HSA:



It's always your money with any money left in the account at the end of the year carrying over to the next year



You decide how to spend it and on what



You can keep your HSA even if you change jobs or medical coverage



The cash is always available for an emergency. You can spend the money in your HSA on any expenses if you are willing to pay tax plus a 20 percent penalty. The 20 percent penalty does not apply if you are 65 or older



It's an investment in which earnings are not taxed



You can use your funds for long-term care, Medicare premiums and supplemental retirement income

Putting money in your HSA

There are single and family maximums that you can deposit in your HSA each year. If you are between 55 and 64, you can deposit additional "catch-up" amounts. All of the amounts you can contribute are subject to yearly HSA contribution rules.

You also have the option of investing these funds, which can build up into big bucks!

For current rates or more information on investment options, please check with your bank or other financial institution.



HSAs can accumulate into BIG BUCKS!

\$1,000/year
invested at 5%

accumulates to



What your HSA covers

You can use your HSA to pay for qualified medical expenses defined by the Internal Revenue Service (IRS).

Generally, those expenses are any amounts spent on medical care for you, your spouse or dependents, including:

- Doctor visits
- Prescribed medicines
- Over-the-counter medicines and supplies
- Eyeglasses and vision care
- Dental care and other services

It does not include amounts spent on things like cosmetic surgery or general items like toothpaste.

Easy to use

You can use your HSA debit card to pay your doctor or pharmacy. Remember, most health care expenses are eligible under your qualified high deductible health plan.

Do not pay any medical expenses from your HSA until after UMR has processed the claim and applied any discounts.

Here are a couple of examples:

- At the pharmacy, present your medical card to the pharmacist. Your pharmacy benefits manager will discount the drug and may pay a portion of the claim. Your pharmacist will then ask you to pay the remaining balance. You can use your HSA debit card or pay for the amount out-of-pocket.
- With other medical bills, have your medical provider send the bill to UMR. You will receive an explanation of benefits (EOB) once UMR has processed the claim. The EOB will show how much you will need to pay the provider. You can use your HSA debit card or pay for the amount out-of-pocket.



Keep your receipts

The IRS requires proof that you used your HSA money to pay for qualified medical expenses. Make sure to save your receipts.



Using your debit card makes accessing your HSA dollars easy.

Things to know about your HSA

✓ It offers the best tax advantages

Money deposited in your HSA can earn interest and is not taxable if used only for qualified medical expenses and premiums for certain insurance coverages, such as long-term care, Medicare and COBRA medical while unemployed. You won't pay federal income taxes, Social Security or Medicare taxes for your contributions. You might have to pay state taxes, depending on where you live.

✓ It's real money that's always yours

Your employer has no say about how you use your HSA money. Any money in your account will be yours even if you leave the company that offered you the initial HSA.

When you sign up for a qualified high deductible health plan, you decide how much money to put in your account.* This is your money to keep, save and invest to meet your short- or long-term health care savings goals.

✓ Use it at the pharmacy

Before purchasing a prescription, give your medical ID card to the pharmacist. Any discounts available through your plan will be applied and a portion of the cost may be covered.

Then use your HSA debit card or another form of payment to pay the remaining balance.

✓ Wait! Pay after you've received an EOB

Wait for your claim to be submitted to UMR, so discounts can be applied. Once you receive your explanation of benefits (EOB) and bill from the doctor, you can then make your payment.

– more –



Create a health care "nest egg" for you and your family.

*The maximum amount you can contribute each year is established annually by the IRS.

Things to know about your HSA (continued) ...

✔ Use your HSA on medical expenses only

You'll never have to worry about paying penalties or having your HSA funds taxed if you make sure you use your account for qualified medical expenses.

You will have to pay taxes on any HSA money spent on non-medical purchases, and you could also pay an additional 20 percent penalty if you are under the age of 65.

If your provider refunds dollars that were originally paid from your HSA, you may need to return those dollars back to the HSA, unless you have new expenses not yet reimbursed from the HSA that can offset the amount refunded. Please talk with your tax advisor for details.

Remember, it's always a good idea to save your receipts in case you are audited.

✔ Understanding HSA contributions

You are only allowed to contribute to your HSA when you are enrolled in a qualified high deductible health plan (QHDHP). If you ever leave your current employer, you will need to enroll in another QHDHP to continue to put money in your HSA.

However, you can still use your HSA money to pay for medical expenses not paid by your health plan, even after you are no longer covered by a QHDHP.

✔ Save for your retirement

If you can afford it, you might want to treat your HSA like a 401(k) or IRA. You may then build up much more money for medical expenses after you retire.



Common questions about your HSA

Your qualified high deductible health plan (QHDHP) is your health plan or health insurance. Your health savings account (HSA) is paired with your QHDHP and is a special account you can use to pay for qualified medical expenses. You must enroll in a QHDHP to have an HSA.



Visit umr.com

How can I check my claims?

There are three simple ways you can check your claims activity:

- Visit www.umar.com
- Call the customer support line on the back of your ID card
- Look at your explanation of benefits (EOB)

Should I pay my bill in full when I visit the doctor?

No. Wait until you receive a bill in the mail. This will help make sure any discounts are applied first.

How do I access my HSA dollars?

You can access your HSA dollars through your bank or financial institution. Most have more than one way to make withdrawals, such as debit cards or checks. You can withdraw money from your HSA much like a regular checking or savings account.

Why should I save my receipts?

You are required to keep receipts for qualified medical expenses. If you don't the Internal Revenue Service (IRS) could rule that withdrawals were not for qualified medical expenses and subject you to additional penalties.

– more –

What expenses are eligible to be paid from my HSA?

In general, qualified medical expenses include:

- Co-pays, deductibles and co-insurance
- Eligible expenses that can't be reimbursed under another health plan
- Over-the-counter (OTC) medicines and drugs
- Dental care or vision care services

You can see a sample of eligible/ineligible expenses by visiting www.umar.com.

How do I check my HSA balance?

Your bank or financial institution will be able to provide your balance and account information. UMR does not have access to your accounts. That means we cannot provide balance or withdrawal information.



Find out how...

If you have any other questions, please call the UMR customer service line listed on the back of your ID card.





Know your eligible & ineligible expenses

If you have a health savings account (HSA) or flexible spending account (FSA), you can use pre-tax dollars to cover eligible expenses. To help better understand what is and isn't eligible, we've developed a list of both. For a more detailed list of eligible and ineligible expenses, log in to [umr.com](https://www.umr.com).

Eligible expenses

Expenses that could be considered dual purpose (having both medical and personal benefits) may need a medical practitioner's note explaining the diagnosis and treatment action that is needed for this specific medical condition. This list is not meant to be all inclusive.

Dental services	Medical treatments/procedures	Medical equipment supplies and services	Weight loss drugs <i>(to treat specific disease)</i>
Dental services	Acupuncture	Abdominal/back supports	Wheelchair
Dental X-rays	Alcoholism <i>(inpatient treatment)</i>	Ambulance services	Wigs <i>(hair loss due to disease)</i>
Dentures	Drug addiction	Arches/orthopedic shoes	Medication
Exams/teeth cleaning	Hearing exams	Contraceptive, prescribed	Insulin
Extractions	Hospital services	Counseling	Prescribed birth control & vitamins
Fillings	Infertility	Crutches	Prescription drugs
Gum treatment	In vitro fertilization	Guide dog <i>(for visually/hearing impaired)</i>	Obstetric services
Oral surgery	Norplant insertion or removal	Hearing devices and batteries	Lamaze class
Orthodontia/braces	Physical exam <i>(not employment related)</i>	Hospital bed	Midwife expenses
Lab exams/tests	Physical therapy	Lead paint removal <i>(if not capital expense and incurred for a child poisoned)</i>	OB/GYN exams
Blood tests	Reconstructive surgery <i>(if medically necessary due to congenital defect or accident)</i>	Learning disability <i>(special school/teacher)</i>	OB/GYN prepaid maternity fees <i>(reimbursable after date of birth)</i>
X-rays	Rolfing	Medic alert bracelet or necklace	Prenatal and postnatal Treatments
Cardiographs	Speech therapy	Oxygen equipment	Practitioners
Laboratory fees	Sterilization	Prescribed medical and exercise equipment	Allergist
Metabolism tests	Transplants <i>(including organ donor)</i>	Prosthesis	Chiropractor
Spinal fluid tests	Vaccinations/immunizations	Splints/casts or support hose <i>(if medically necessary)</i>	Christian Science
Urine/stool analyses	Vasectomy and vasectomy reversal	Syringes	Dermatologist
Vision services	Weight loss programs <i>(as prescribed by your doctor)</i>	Transportation expenses <i>(mileage and parking)</i>	Homeopath
Eye examinations	Well baby care	Tuition fee at special school for disabled child	Naturopath
Eyeglasses			Osteopath
Contact lenses			Physician
Laser eye surgeries			Psychiatrist
Artificial eyes			
Prescription sunglasses			
Radial keratotomy/LASIK			

Over-the-counter eligible expenses

Effective Jan. 1, 2020, eligible products include over-the-counter (OTC) products that are for medical care and primarily for a medical purpose. They include products, such as OTC medicines or drugs with or without a prescription that diagnose, alleviate or treat existing or imminent injuries, illnesses or medical conditions, or used for the prevention of disease. OTC medicines must be prescribed if incurred before 2020.

Acne preparations	Digestive aids	Foot care	Pain and fever reducers
Allergy and sinus medications	Antacids	Cushions	Aspirin
Antihistamines	Laxatives	Pads	Acetaminophen
Claritin	Lactose intolerance medications	Creams	Ibuprofen
Asthma flow meters and nebulizers	Eye care	Anti-fungal medications	Menstrual cycle and migraine medications
Primatene mist	Contact lens solution	Health monitors and medical equipment	Muscle and joint pain relief creams and balms
Nasal spray and strips	Eye drops	Blood pressure and heart rate monitors	Heating pads
Baby care	Reading glasses	Crutches	Personal Protective Equipment (PPE) for COVID-19
Petroleum Jelly	Face masks	Medical bracelets	Hand sanitizer
Diaper rash ointment	Cold weather	Cholesterol tests	Anti-bacterial wipes
Thermometers	Dust/pollen	Hemorrhoid treatments	Masks (see Face masks)
Pediatric electrolyte solutions	Work/general health needs	Homeopathic medicines	Pregnancy products
Cough, cold and flu medications	First aid products	Incontinence supplies	Ovulation monitor
Syrups	Antibiotics	Lice and scabies treatments	Pregnancy testing kits
Capsules	Analgesics and ointments	Menstrual products	Prenatal vitamins
Rubs	Bug bites and anti-itch medications	Tampons	Smoking cessation products
Drops	Bandages	Pads	Nicotine patches
Condoms and contraceptive devices	Gauze pads and elastic bandages	Liners	Gum and lozenges
Diabetes care/accessories	Rubbing alcohol	Cups	Inhalers
Blood test strips	Wart removal products	Sponges	Toothache and teething pain relievers
Glucose tester	Supports and braces	Disposable or non-disposable underwear for menstruation, or other similar products	Weight loss drugs to treat a specific medical condition
Glucose food	First aid kits	Nausea and motion sickness medications	
Monitors and kits	Wound care products		
	Tape and gloves		

Ineligible expenses

Expenses to promote general health are not eligible expenses unless prescribed by a physician for a specific medical ailment. This list is not meant to be all-inclusive.

Babysitting and child care	Diaper service	Health club dues	Vitamins or nutritional supplements
Contact lens or eyeglass Insurance	Electrolysis	Insurance premiums and interest	Swimming lessons
Cosmetic surgery/procedures	Personal trainers or exercise equipment	Long-term care premiums	Teeth whitening/bleaching
Dancing/exercise/fitness programs	Hair loss medication	Marriage counseling	Personal care items
	Hair transplant	Maternity clothes	

A valuable part of your medical benefits

Few things in life are more important than the health of you and your family. Fortunately, you have UMR CARE on your side to help you understand all your medical care options.

UMR CARE has a staff of experienced, caring nurses (RNs) who help you get the most out of your health plan benefits. They work with you, your doctors and other medical advisors to get the services that best meet your needs.

Our expert CARE nurses can guide you before, during and after your medical care. They will listen to your concerns, answer questions and explain your options.

Helpful support in any situation

Whether you're having a baby, have an emergency hospitalization or need non-emergency care, our CARE nurses are there for you.

For example, we can assist you during a hospital stay, after you are released and with your home care. You can concentrate on getting well, knowing your UMR CARE nurse will review your progress with your doctor.

As an added bonus, our services can save you money and prevent delays in your medical claim processing.

You will also learn about quality medical services and become a more informed health care consumer.

– more –



BONUS!

Our services can save you money and prevent delays in your medical claim processing.

Here for you in times of crisis

Hopefully, you or a family member never experience a serious injury or long-term illness. But if you do, we will have UMR CARE nurses on the case at no cost to you.

They will assist with your medical care and treatment by:

- Helping negotiate treatment from the beginning of your care to recovery
- Helping you look at treatment needs and options under the direction of your doctor
- Serving as your advocate with your benefits administrator
- Providing an understanding of any complex issues to your claims payer
- Helping you better understand your health benefits

Important note...

Your doctor remains solely responsible for decisions concerning your medical treatment and care.





Get a healthy start to motherhood

If you're thinking about having a baby, are pregnant for the first time, or are adding a new little brother or sister to your family, UMR can help support you throughout your pregnancy.

What the *expecting* can expect

UMR offers one-on-one guidance and support to help you reduce your risk of complications and prepare to have a successful pregnancy and a healthy baby.

- Our experienced CARE nurses will help you understand your health risks before you become pregnant

- When the time arrives, our registered nurses will provide timely prenatal education and follow-up calls. They will also refer you to UMR Complex Condition CARE if a serious condition arises
- Your CARE nurse will call you each trimester and then one time after your baby is born
- If you are identified as high-risk, a CARE nurse manager will monitor your condition. The CARE nurse manager will also work to reduce your claims costs throughout your pregnancy and after delivery

– more –

JOIN TODAY!

You can enroll yourself by calling the number on the back of your member ID card. You can also go to umr.com.



Maternity CARE

If you are thinking of having a baby or already expecting, this is the program for you.

What you will get

Moms to be enjoy ongoing conversations with a personal CARE nurse who:

- Provides complete pre-pregnancy and pre-birth assessments
- Answers your questions
- Shares information before and during your pregnancy
- Encourages you to call when you have questions or concerns
- Calls after delivery to see how you and your baby are doing

Another important part is free educational mailings. They include a choice of high-quality books and materials. The materials contain helpful information about pregnancy, early labor, childbirth, breast-feeding and infant care.

Talk to a CARE nurse and earn a reward

If you sign up during your first or second trimester and actively participate throughout your pregnancy, you'll receive an incentive reward, sent to you after your delivery.





Expert help for your ongoing condition

When you face a new or existing medical challenge, it's nice to have a team of experts on your side. That's why UMR offers personalized guidance and support for those living with certain health conditions through Ongoing Condition CARE.

The goal is to help you set reachable goals for managing your symptoms and addressing any unhealthy habits that might be holding you back.

Free support

If you or a eligible family member has one or more of the managed conditions, you may be contacted and invited to participate in a series of one-on-one calls with a UMR CARE nurse.

Your nurse will help you better understand your condition and follow your prescribed treatment plan.

Selected conditions

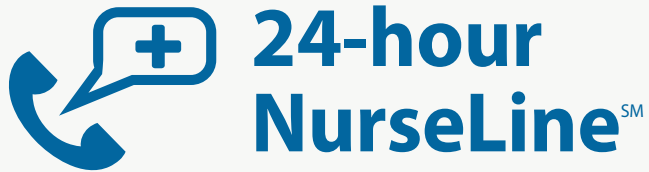
UMR CARE's registered nurses help individuals overcome the physical, mental and emotional hurdles that may affect those with one or more of the following conditions:

- ALS, multiple sclerosis, myasthenia gravis or rheumatoid arthritis
- Hypertension, heart failure or coronary artery disease
- Asthma or COPD
- Depression or anxiety*
- HIV/AIDS, hepatitis C or sickle cell anemia
- Ulcerative colitis or Crohn's disease
- Breast, prostate, colorectal or lung cancers
- Diabetes (types 1 or 2)
- Chronic kidney disease

** Only when identified as a co-morbidity*

Web support

We provide helpful online tools to help you reach your health goals. You can set goals, track your progress, keep a personal health record and more.



You have questions, our nurses have answers

Nobody likes to feel alone when it comes to their health. When we have questions about a medical issue, we want answers fast – even if it’s not an emergency.

So if you find yourself up late with a sick child, or worrying about a recent diagnosis or upcoming surgery, we’re here for you.

Let’s talk!

A call to UMR’s NurseLine service will connect you to a team of registered nurses who can answer your questions and provide advice.

Our nurses are standing by to help any time of day, seven days a week. We even have nurses available to chat live with you online at **umr.com**.

Best of all, it’s part of your health benefits, so there is no cost to you.

Reach out by phone

Calling NurseLine is easy. Simply dial the toll-free phone number on the back of your member ID card, and your call will be answered in 36 seconds, on average.

Your nurse can help you choose the right health care setting for an illness or injury, or offer information about common health issues or symptoms.

We can assist callers in more than 140 languages, as well as those who need hearing assistance.

Plus, we have an audio library of health information on more than 1,100 topics.

Chat online

Our Nurse Chat feature gives you convenient access to nurses who can answer questions and provide information about common conditions, treatments and preventive care.

Chat live online

- > Log in to **umr.com**
- > Select **Health center** from myMenu
- > Look for the link in the **“I need to…”** section

**Call
NurseLine
today!**

Use the number
on the back of
your ID card.



24/7 doctor visits via phone or mobile app

Teladoc gives you round-the-clock access to U.S. board-certified doctors, from home or on the go. Call or connect online or using the Teladoc mobile app for affordable medical care, when you need it.



Talk to a doctor anytime, anywhere you happen to be



Receive quality care via phone, video or mobile app



Prompt treatment, median call back, in 10 minutes



A network of doctors that can treat every member of the family



Prescriptions sent to pharmacy of choice if medically necessary



Teladoc is less expensive than the ER or urgent care

Talk to a doctor anytime!
visit **Teladoc.com**
or call
1-800-Teladoc



Get the care you need

Teladoc doctors can treat many medical conditions, including:

- Cold & flu symptoms
- Allergies
- Pink eye
- Respiratory infections
- Sinus problems
- Skin problems
- And more

With your consent, Teladoc is happy to provide information about your Teladoc visit to your primary care physician.





Real Appeal

Lose weight and get help to keep it off

We all hear that losing weight is just a matter of eating less and moving more, right? It sounds easy, but if it were only that simple, wouldn't we all be at our ideal weight? Losing extra pounds, no matter how many or few, is a difficult task, especially when you try to do it alone.

That's why UMR is excited to introduce a new healthy weight management program through **Real Appeal**. With the help of experts in weight management behavior change, Real Appeal uses the secrets to weight loss that may help people lose weight. They have proven experience in helping people develop simple weight loss plans that actually work.

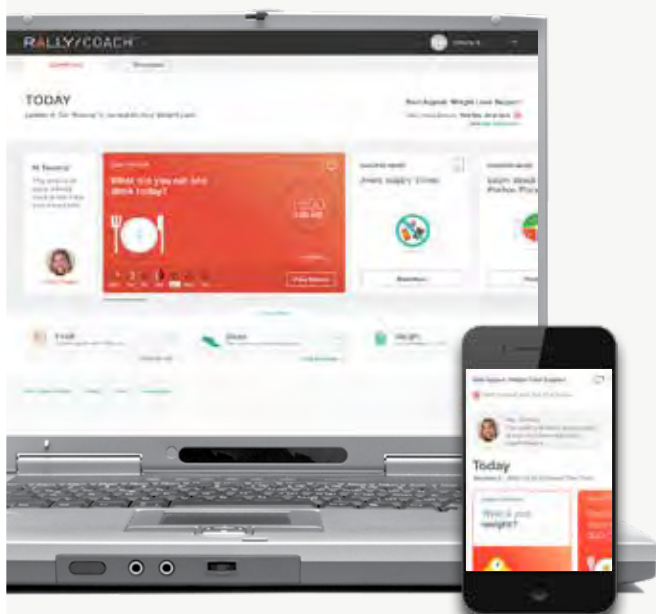
How is Real Appeal different from other weight management programs?

Real Appeal uses a highly interactive weekly internet show, with videos and live online coaching to help you make small behavior changes week by week. These tools may help you lose weight and achieve your long-term health goals. Using weight-loss research studies, Real Appeal has designed a program to support you through every stage of weight management. Whether you need to lose a lot of weight, are moderately overweight or simply need to lose those extra 10 pounds, this program may work for you.

What are your reasons to lose weight?

- To feel better
- To look better
- To be more active
- To improve your health

Whatever your reasons, Real Appeal may help you lose weight and keep it off, feel and look better and do things you enjoy such as, have the extra energy to play with your kids, wear clothes more comfortably, sleep better and think better — all the good stuff.





Why wait?

Get started today to lose weight and keep it off.

To learn more about Real Appeal visit realappeal.com

The Real Appeal program includes:

Coaching

- One-on-one coaching with a weight-loss expert
- Weekly group coaching and live online discussion

Personalized support

Tools to help support success based on individualized needs:

- Nutrition guides, meal plans, recipes, shopping lists and tips for dining out
- Video workouts and fitness guides

Engaging entertainment

Education videos featuring popular celebrities and experts:

- **Samantha Harris** — former “Dancing with the Stars” host
- **Dr. Ian Smith** — co-host of “The Doctors” and correspondent for “Rachael Ray”

- **David Jack** — recognized sports performance and conditioning coach
- **Ellie Krieger** — host of the Food Network® show, “Healthy Appetite with Ellie Krieger”
- And more

Tools and tracking

- Hands-on tools tailored to participant needs
- Online support tools, including educational website and digital applications
- Online or mobile tracking tools to monitor nutrition and exercise — such as changing moods, cravings, feelings of satiety, exercise and food intake

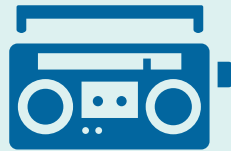
EMERGENCY PLAN

A resource for readiness

When it comes to emergencies, you can never be too prepared. Knowing how to respond quickly may help you and your family stay safe. For a variety of action plans, check out [Ready.gov](https://www.ready.gov). You'll find answers to questions like:

What should I have on hand in case of a power outage?

It's not always possible to avoid a disaster — but there are ways to be prepared. Plan ahead with these five steps:



Have a way to get emergency alerts. You may be able to receive warnings and instructions by email, text, phone or mobile app. A battery-operated radio is likely going to last longer than your cell phone.



Know how and where to evacuate. Choose several safe places to go in an emergency and always be aware of where exits are located. And work out what help you might need to get there.



Create a support network. See if people you know can check on you after a disaster. Give them an extra set of keys for your home.



Figure out how family members will get in touch. Carry a printed copy of their phone numbers and email addresses with you. Designate a meeting spot and pick an out-of-town person you can all contact to check in.



Prepare for your medical needs. Have a seven-day supply of medicines on hand. Store backup batteries for your medical equipment. And if you have treatments at a hospital or clinic, find out where to go if they are closed.

How can I make my home safer if a hurricane is coming?

How can I make sure my pets are taken care of in a disaster?

How can I help?

WHAT IF?

Have you ever seen someone having car trouble, and you wonder what you could do to help?

What if you were stranded? In addition to having a plan for natural disasters and home emergencies, you should also try to prepare for the “what-ifs” of travelling. As most of modern American travel is done by car, it is important to be prepared.

Keep these items accessible in your car.

- Jumper cables
- Tow strap
- Blankets
- Flashlight
- Bottled water
- Phone charger
- Non-perishable snacks
- Map
- First aid kit
- Printed copies of important phone numbers



THE FLIP SIDE:

Here are some ways to help others that may be affected by emergencies, big or small:

- Help a neighbor when they are sick
- Watch children, pets or a loved one’s home in a pinch
- Travel with a first aid kit
- Know CPR and basic first aid
- Drive a loved one to their doctor appointment
- Send a card or “help kit”
- Help clean up or provide aid after a disaster
- Volunteer for an emergency relief organization. Or, make a monetary donation

Sources:

American Red Cross; Federal Emergency Management Agency; Ready.gov; dhs.gov, FEMA.gov

