



There are many ways into the health care system.

Get benefits that can help make it easier to focus on your health, not your health care.

[Open Enrollment Benefits Guide](#)

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Enjoy some healthy discounts on health-related programs and services. On us.

We want to help you to live healthier, and maybe save a few dollars at the same time. That's why we offer the *Healthy Bonus*[®] program, which gives you discounts on health-related programs and services.

To find out more about how to enjoy these offers, please go to the oxfordhealth.com Member website. Then, click on “**Healthy Bonus Member Discounts**” in the **Tools & Resources** section.

Healthy Bonus values for members.

39DollarGlasses.com	Save an extra \$15 during checkout.
Allergy Control Products	20 percent off select allergy relief products plus free shipping on orders over \$79 when shipping ground within the contiguous U.S.
<i>Arthritis Today</i>	Get a free sample magazine issue.
<i>Backpacker</i> magazine	74 percent off the cover price of a one year subscription (nine issues).
Birth and Beginning Year™	Get the ABC's of Prenatal Fitness mini-poster for \$12.
Blue Apron	\$35 off your first delivery (valid only for new Blue Apron subscribers).
Brookstone	\$10 off orders of \$80 or more, or \$15 off orders of \$150 or more.
The Center for Medical Weight Loss	One week free when you buy a six-week plan.
Curves	Join for no enrollment fee and get one week free.
DiabeticCandy.com	10 percent off all products.
GreenMarket.com	15 percent off all products.
Health Journeys	20 percent off select products.
Hello Fresh	50 percent off your first delivery (valid for new customers only).
<i>How to Teach Nutrition to Kids</i>	40 percent off the cover price.

CONTINUED

Modern Martial Arts and Kickboxing NYC	One month of unlimited kickboxing classes and an official uniform or boxing gloves for \$79.
My Gym Children's Fitness Center	5 percent off a continuous monthly class fee; new customers get \$30 off the membership fee.
National Allergy®	20 percent off select National Allergy doctor-recommended products plus free shipping on orders over \$79 when shipping ground within the contiguous U.S.
National Eating Disorder Association (NEDA)	10 percent off eating disorder related books and a variety of awareness items.
Oxygen magazine	56 percent off the cover price of a one-year subscription.
<i>Pickles and Ice Cream: A Father's Guide to Pregnancy</i>	15 percent off the cover price by phone.
Puritan's Pride	10 percent off entire order and free shipping on orders over \$49.98.
RunningShoes.com	10 percent off all products and free three-day shipping on orders more than \$60 (promotion excludes Brooks, sale or clearance products).
Safe Beginnings®	15 percent off select products.
Spafinder	10 percent off all purchases.
<i>Where to Retire</i>	66 percent off the cover price of a one-year subscription.
<i>Yoga Journal</i>	80 percent off the cover price of a one-year subscription (nine issues).



Learn more about how to enjoy these offers.

Visit the oxfordhealth.com Member Website and click on “**Healthy Bonus Member Discounts**” under the **Tools & Resources** section.



UnitedHealthcare and Oxford do not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities. We provide free services to help you communicate with us. Such as letters in other languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free phone number listed on your health plan ID card Monday through Friday, 8 a.m. to 6 p.m. TTY users can dial 711.


ATENCIÓN: Si habla español (Spanish), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文 (Chinese)，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

Healthy Bonus offers are not insured benefits and are in addition to, and separate from, your Oxford benefit coverage. These arrangements have been made for the benefit of members, and do not represent an endorsement or guarantee on our part. Offers may change from time to time and without notice and are applicable to the items referenced only. Offers are subject to the terms and conditions imposed by the vendor. We cannot assume any responsibility for the products or services provided by vendors or the failure of vendors referenced to make available discounts negotiated with us; however, any failure to receive offers should be reported by calling the toll-free phone number on your health plan ID card. Offers valid through Dec. 31, 2018.

Oxford insurance products are underwritten by Oxford Health Insurance, Inc. Oxford HMO products are underwritten by Oxford Health Plans (NJ), Inc. and Oxford Health Plans (CT), Inc. Administrative services provided by Oxford Health Plans LLC.

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Health care guidance from a registered nurse, 24/7.

Questions about your health can come up at any time. It could be your child has a fever in the middle of the night or you have a cold that doesn't seem important enough for a doctor's appointment. With *Oxford On-Call*®, we're always here for you.

You can turn to *Oxford On-Call* for all of the following:



General health information.

Call an *Oxford On-Call* nurse about illness, injury, chronic conditions, prevention, healthy living, and even just basic men's, women's and children's health.



Deciding where to go for care.

Not sure if your situation calls for a doctor visit? Wondering if you should go to urgent care or the emergency room? *Oxford On-Call's* nurses can help you figure out where you should go.



Information on how to care for yourself.

Our registered nurses can give you practical self-care tips to help you manage your condition at home. They can also tell you about signs and symptoms to look out for that may indicate the need for a higher level of care.



Talking with your health care provider.

A great way to make the most of your doctor visits is to chat with an *Oxford On-Call* nurse before you go to your appointment. Our nurses can help you find more information about any concerns you may have and suggest questions you can ask your doctor.



Help for hard decisions.

If you or a family member has a serious medical condition, *Oxford On-Call* nurses can help you learn more about the possible risks and benefits of treatment options, and how you can take your medications safely.

Two ways to speak with an *Oxford On-Call* nurse:



Live chat with us online.

Nurses are available to chat online about a variety of health topics and to confidentially guide you to online resources. Just click on the "Live Nurse Chat" link once you log in to the [oxfordhealth.com](https://www.oxfordhealth.com) Member website.



Call us at 1-800-201-4911.





Exercise and get rewarded.

We listened.

It's our goal to help people live healthier lives. Making exercise a part of your daily or weekly routine can be one of the most important steps you take toward being the healthiest "you." To better help you¹ on your way, we've created the Sweat Equity physical fitness reimbursement program.

The program offers a variety of exercises to choose from and the option to combine your fitness facility visits with your physical fitness classes to help you reach the required 50 "workouts" in a six-month period.

Reimbursement for qualifying fitness expenses.

Eligible Oxford plan members¹ can get reimbursed up to \$200 in a six-month period.² That's right; we will send you a reimbursement for each six-month period that you are in the program, provided you meet the required goals and submit a completed reimbursement form.

You can apply for reimbursement under the program as long as you:

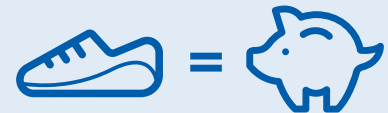
- Are an active member of an eligible Oxford health plan.
- Have gone to the gym and/or exercise classes 50 times in six months.

Your reimbursement period begins on the date of your first fitness facility visit or class and ends six months later, after you have completed 50 visits, 50 classes, or a mix of visits and classes that add up to 50. You can start a new reimbursement period one day after your other reimbursement period ends. If you complete 50 qualifying workouts in less than six months, please do not submit your reimbursement request early. We cannot accept reimbursement requests before six months have passed.

To get started, choose a gym or sign up for fitness classes.

Decide on a cardio (aerobic) workout that you'll enjoy and find a facility with the equipment or classes that promote cardiovascular wellness.³ To get reimbursed, the facility and classes you choose must be open to the general public. Remember to check with your doctor before you start exercising or increasing your activity level.

CONTINUED



So many ways to get fit—and get rewarded.

Examples of qualifying fitness facilities and classes:

- Aerobics
- Boot camps
- Boxing/Kickboxing
- CrossFit
- Indoor rock climbing
- Martial arts
- Personal training
- Organized group fitness event (e.g., marathon)
- Pilates
- Pure Barre
- Standard gym, including YMCAs and community centers where fitness services are offered
- Swimming
- Tennis/Racquetball
- TRX Circuit
- Weight/Resistance
- Yoga
- Zumba®

Examples of cardiovascular equipment:

- Elliptical trainer/Cross-trainer
- Rowing machine
- Stair climber
- Stationary bicycle
- Treadmill

What we need from you.

After you've completed a total of 50 workouts — gym visits, classes, group events — in a six month period, send us:

1. **Your completed Sweat Equity Program Reimbursement Form.**
2. **Proof of your payment** (e.g., receipt, automatic bank withdrawal statement) for the gym fee, as well as any money you paid for fitness classes and organized group fitness events (e.g., marathon), during the six month period.
3. **Copy of the brochure or flier** that describes the cardio (aerobic) machines at the gym you used or the cardio benefits of the class you took or organized group fitness event in which you participated.
4. **Mail these documents to:** Oxford Sweat Equity Program
P.O. Box 29130
Hot Springs, AR 71903

- **These documents must be mailed to us (postmarked) no later than 180 days from the last date of the six month period for which you are asking for reimbursement. Requests postmarked after this date will not be reimbursed.**
- **We cannot accept requests for reimbursement before your six month program end date, even if you have completed the required number of qualifying workouts before this date.**

If you are unable to meet the reimbursement requirements of this program, you might be able to earn the same reward in a different way. Call us at the toll-free phone number ("For Members") on the back of your health plan ID card and we will work with you and, if necessary, your doctor, to find another way for you to earn the same reward.

The total annual reward amount for your participation in incentive-based programs cannot generally exceed 30 percent of the cost of coverage.



If you have questions,

please call us at the toll-free phone number ("For Members") on the back of your health plan ID card.

¹ For this program, the use of “you” and “member” in communications refers to the Oxford plan subscriber or the subscriber’s covered spouse or domestic partner; no other dependents are eligible. For the subscriber’s spouse or domestic partner to be eligible for this benefit, he or she must also be enrolled in an Oxford product. The program is not available to all Oxford plan subscribers and their spouses or partners. Refer to your Certificate of Coverage, Summary Plan Description or other governing member document to determine eligibility for the program and to confirm your plan’s benefit.

² Reimbursement is generally limited to the lesser of \$200 (subscriber)/\$100 (covered spouse/partner) or the actual amount of the qualifying fitness costs per six-month period, but the reimbursement may vary by plan. Refer to your benefits documents or check with your benefits administrator to find out how much you may be reimbursed. You may submit a request for reimbursement under the program once every six months. We cannot accept requests for reimbursement before your six-month program end date, even if you have completed the required number of qualifying workouts before this date. Rewards may be taxable. Consult with an appropriate tax professional to determine if you have any tax obligations from receiving reimbursement under this program.

³ To be eligible for reimbursement under the program, the qualifying facility, class or organized group fitness event (e.g., marathon) that you choose must be available to the general public and promote cardiovascular wellness, as determined by us, and have staff supervision. Memberships in tennis clubs, country clubs, social clubs, sports teams, weight loss clinics or spas or any other similar organizations, leagues or facilities will not be reimbursed. We will not reimburse you for lessons, equipment, clothing, vitamins or other services that may be offered by the facility (e.g., massages). Reimbursement is limited to actual workout visits. Physical and rehabilitative therapies do not apply. Sweat Equity is a voluntary program. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. You should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for you.

Sweat Equity is a voluntary program. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. You should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for you.





If any fraudulent activity is detected (e.g., misrepresented physical activity), you may be suspended and/or terminated from the program.

We provide free services to help you communicate with us. Such as, letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the toll-free phone number listed on your ID card TTY 711, Monday through Friday, 8 a.m. to 8 p.m.

ATENCIÓN: Si habla español (Spanish), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文 (Chinese)，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

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Reimbursement Form

Please Print

Member Information

Member First Name:	Member Last Name:	Date of Birth (Month/Day/Year):	Gender:
Are you the plan subscriber? (Yes/No):	If no, what is your relationship to the plan subscriber? (e.g., spouse, domestic partner):		
Employer/Company Name:	Health Plan Number:	Group Number:	
Street Address:			
City:	State:	ZIP Code:	

Six-Month Period Sweat Equity Program

Start Date:	End Date:
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Completing and Submitting This Form

1. Use one form per subscriber/subscriber's covered spouse/domestic partner. Record the 50 fitness facility visits and/or classes that you completed in a six-month period on the chart shown below.

- The first date you put on the chart marks the beginning of your six-month program. Record only one session per day.
- Your program will end six months from this date. Do not make any entries for activity after your program end date.
- If you complete 50 qualifying workouts in less than six months, please do not submit your reimbursement request early. We cannot accept requests before six-months have passed.
- Instead of filling in the dates of your 50 workouts, you may attach to this form one of the following documents:
 - A computer printout of your visits to the fitness facility and/or classes completed, including dates and the name of the place.
 - Receipts that show the dates of your fitness facility visits and/or classes, with the name of the place.

Your documentation must include signatures from a facility representative, class administrator or event coordinator, as appropriate, to prove participation.

2. Attach proof of payment (e.g., receipt, payroll deduction, automatic bank withdrawal statement) for the fitness facility fee, as well as any costs you paid for fitness classes and events, during the six-month period.¹

3. Enclose a copy of the brochure or flier that describes the cardiovascular wellness equipment at the facility you used or the cardiovascular benefits of the class or organized group fitness event in which you participated.

4. Mail documentation to:
Oxford Sweat Equity Program
P.O. Box 29130
Hot Springs, AR 71903

These documents must be mailed to us (postmarked) no later than 180 days from your program end date. **Requests postmarked after this date do not qualify for reimbursement.**

Questions? Please call us at the toll-free phone number ("For Members") on the back of your health plan ID card.

Fitness Events, Facility Visits and Classes (Record only one session per day)

Date (mm/dd/yyyy)	Session Type*	*Indicate "F" for Facility/Gym; "C" for Class including organized group event (e.g., marathon).							
1. (six-month start date)		11.		21.		31.		41.	
2.		12.		22.		32.		42.	
3.		13.		23.		33.		43.	
4.		14.		24.		34.		44.	
5.		15.		25.		35.		45.	
6.		16.		26.		36.		46.	
7.		17.		27.		37.		47.	
8.		18.		28.		38.		48.	
9.		19.		29.		39.		49.	
10.		20.		30.		40.		50.	

Fitness Event, Class, Session, Facility Information

Organization name: _____ Organization name (if a second one was used): _____
 Organization type: _____ Organization type: _____
 Address: _____ Address: _____
 City, State ZIP code: _____ City, State ZIP code: _____
 Telephone number: _____ Telephone number: _____

Name of event(s)/class(es)/session(s): _____

Fitness Facility/Instructor Information

Facility employee/Class instructor name: _____
 Signature: _____ Date: _____

Instructor or other facility employee's signature above constitutes agreement that the instructor/facility promotes cardiovascular wellness for members.

Member Verification

Any person who knowingly files a statement of claim containing any false or misleading information is subject to criminal and civil penalties.²

My signature below confirms that all of the information I have provided on this form and attached is full, complete and true to the best of my knowledge. False statements will result in the denial of reimbursement.

Signature of member named above: _____ Date: _____

Exclusions and Limitations

- Sweat Equity is a voluntary program. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. You should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for you.
- For this program, the use of “you” and “member” in communications refers to the Oxford plan subscriber or the subscriber’s covered spouse or domestic partner; no other covered dependents are eligible.
- The program may not be available to all Oxford plan subscribers and their spouses or domestic partners. Reimbursement is generally limited to the lesser of \$200 (subscriber)/\$100 (covered spouse/partner) or the actual amount of the qualifying fitness costs per six-month period, but the reimbursement may vary by plan. Refer to your Certificate of Coverage, Summary Plan Description or other governing member document to determine eligibility, including your plan’s benefit and application deadlines.
- To be eligible for reimbursement under the program, the qualifying facility, class or organized group physical fitness event (e.g., marathon) that you choose must be available to the general public and promote cardiovascular wellness, as determined by us, and have staff supervision.
- You must be an active employee at the time of your application for reimbursement. We will reimburse only those qualified visits, sessions or events that were completed while you were an Oxford member. We will not reimburse visits, sessions or events that occurred before your coverage became effective or after your coverage terminates. Partial reimbursements will not be given for fewer than 50 workouts in a six-month period.
- You must hold an active fitness facility or class membership for the facility/class named in the request at the time of your application for reimbursement.
- Memberships in tennis clubs, country clubs, social clubs, sports teams, weight loss clinics or spas or any other similar organizations, leagues or facilities will not be reimbursed. We will not reimburse you for the purchase of lessons, equipment, clothing, vitamins or other items or services that may be offered by the facility. Reimbursement is limited to actual workout visits. Physical and rehabilitative therapies do not apply.
- Lifetime memberships are not eligible for reimbursement.
- If you paid for a full-year’s facility membership or class enrollment in advance, at the end of the first six-month period for which you are applying for reimbursement, submit the receipt along with the required documentation noted above for reimbursement against half of the annual fee that you paid. Repeat this process at the end of your second six-month period for which you made a full-year’s payment providing you have met the requirements for another, consecutive reimbursement.
- Complete one form per member, for each six-month period for which you are applying for reimbursement.
- We cannot accept requests for reimbursement before your six-month program end date, even if you have completed the required number of qualifying workouts before this date.
- If any information is missing from this form, incorrect or cannot be substantiated, the application for reimbursement will be delayed or denied.
- Any information we collect in conjunction with this program is kept confidential according to HIPAA requirements and is separate from and has no effect on a member’s medical benefits or premium.



Rewards may be taxable. You should consult with an appropriate tax professional to determine if you have any tax obligations from receiving reimbursement under this program.

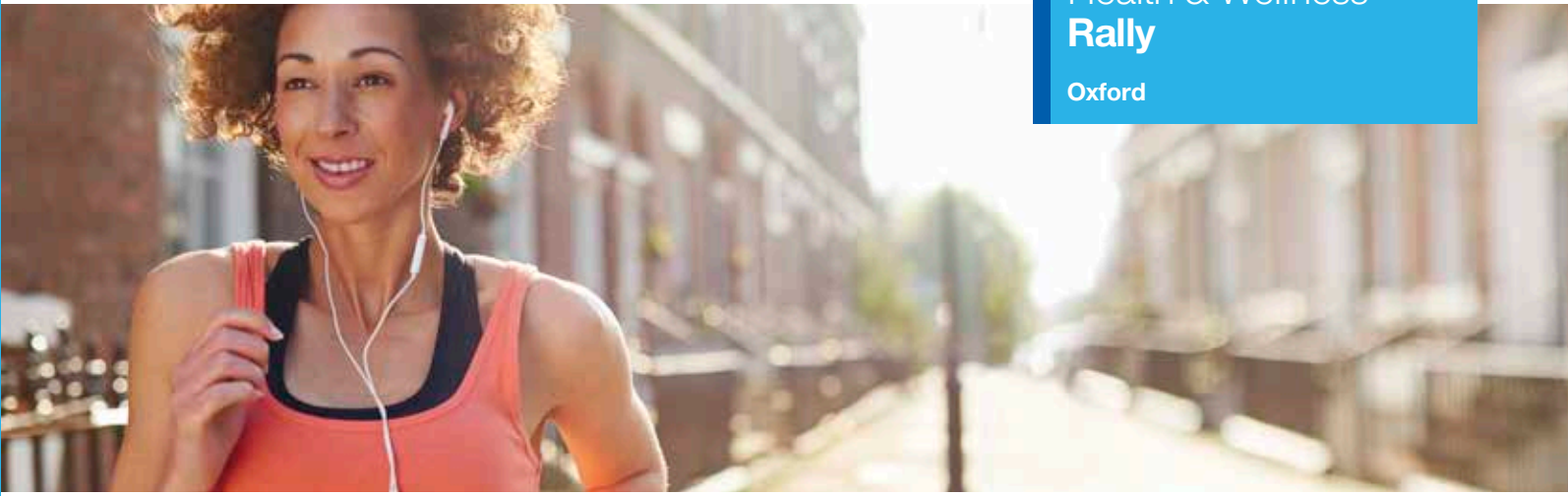
¹ On your proof of payment, please be sure to cross out any personal account ID information that’s not needed so it isn’t readable.

² If any fraudulent activity is detected (e.g., misrepresented physical activity), you may be suspended and/or terminated from the program. In New York, any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed \$5,000 and the stated value of the claim for each such violation.

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Oxford insurance products are underwritten by Oxford Health Insurance, Inc.

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Rally makes managing your health a whole lot easier. And fun.

Brought to you by UnitedHealthcare, Rally® is a user-friendly digital experience available through oxfordhealth.com that gives you the support and tools needed to be healthier.

Get going.

Once you sign up for Rally and take the Health Survey — which gives you your Rally AgeSM, a measure of your overall health — we'll suggest action steps or "Missions," designed to help you eat better, lift your fitness level and even improve your mood.



Rally offers a personalized interactive experience.

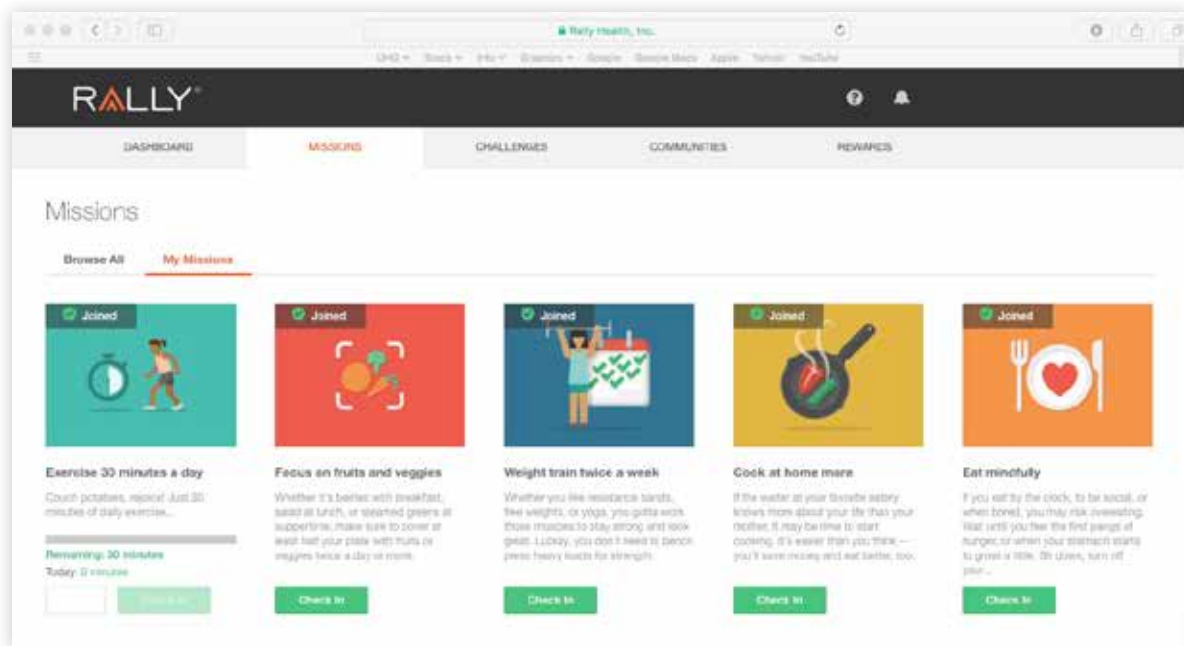
- See your Rally Age.
- Accept your Missions.
- Take on a Challenge.
- Connect with a coach.

Enjoy the rewards.

You'll earn Rally coins when you complete your Missions, complete a Challenge — or even just for logging in once a day. You can use the coins to enter to earn rewards for all that good work. It's a great way to experience the rewards of healthier living every day.

Make healthier connections.

With Rally, you can also share your accomplishments with others, connect with a personal wellness coach or join a competition to increase the fun.



RALLY[®]

UnitedHealthcare[®]
Oxford

All trademarks are property of the respective owners. Participation in the health survey is voluntary. Your health survey 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. This program 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 the program is for informational purposes only and provided as part of your health plan. The wellness team cannot diagnose problems or recommend treatment and is not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. The program is not an insurance program and may be discontinued at any time. If you have questions about your account, claims or benefits, or would like additional information, please visit oxfordhealth.com or call the toll-free phone number on the back of your health plan ID card. If you do not wish to receive this type of information from your employer in the future, please contact your benefits administrator.

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How to search for a doctor

For current and prospective members

Current Members

Follow these easy steps to find a participating doctor, hospital or lab:

Step 1: Check with your employer or go over your Summary of Benefits and Coverage to see whether your plan uses the Freedom or Liberty Network¹.

Step 2: Go to oxfordhealth.com. Click “Members” in the upper left-hand corner of the screen to enter the Oxford Member portal. Log in with your Oxford user name and password. If you don’t have an Oxford user name and password, click “Register Now.”

Step 3: Under the “Links and Tools” section, click “Find a Physician or Facility.”

Step 4: Locate a physician or facility by using one or more of the following options:

- Select the option you would like to use for your search (Location, Name or Oxford Provider ID)
- Enter your search information (e.g., ZIP Code, Provider ID or Last Name)
- Select the type of physician (Primary Care Physician/OBGYN, Specialist or Dentist) or select the type of facility (Hospital or Ancillary Facility)
- You can also choose a specialty and your specific network (Freedom or Liberty)
- To narrow your search, choose a physician type and select preferences for Specialty, UnitedHealth Premium[®], network, gender or language

Step 5: Click on the “Search” button.

Step 6: View your results.

For members residing outside of the Oxford service area, please keep in mind the following:

- Claims submitted on behalf of Oxford plan members should be sent directly to the Oxford Claims Department for payment. Claims sent directly to UnitedHealthcare for Oxford plan members will not be processed for reimbursement.

Please use the following claims address for member claims:

Oxford Claims Department
P.O. Box 29130
Hot Springs, AR 71903

- UnitedHealthcare Choice Plus providers should call our Provider Services line with any questions about precertification/benefits/eligibility and claims submissions at the following number:

1-800-666-1353

(Monday – Friday, 8 a.m. – 6 p.m.).

Prospective Members

Within the Oxford service area:

Log in to our website, oxfordhealth.com. On the bottom left of the home page, click on, “*Search for an Oxford doctor, hospital or lab,*” to start your search.

The Oxford service area includes the following:

- Connecticut,
- New Jersey and
- New York (the five boroughs and all counties south of and including Ulster)

Outside of the Oxford service area:

Click on the below link to access the Choice Plus Network for Oxford plan members:

<https://www.oxhp.com/PSTWeb/ChoicePlusSearch.jsp>

Important note on excluded doctors: There are certain UnitedHealthcare Choice Plus doctors who are **not in-network** for members enrolled through an Oxford plan. The list below shows those who are **not** participating, although they may appear within the UnitedHealthcare Choice Plus doctor search (this list is not a complete list and can change):

- Mayo Clinic Arizona doctors identified with the following places of service:
13400 E. Shea Blvd, Scottsdale, AZ
20199 N. 75th Ave, Glendale, AZ
13737 N. 92nd Street, Scottsdale, AZ
5779 E. Mayo Blvd, Phoenix, AZ
- Mayo Clinic Hospital – Rochester
- Mayo Clinic Dialysis Centers [with places of service in Rochester (MN), Wabasha (MN), Albert Lea (MN), Fairmont (MN), Decorah (IA) and La Crosse (WI)]
- Mayo Clinic Hospital (Phoenix, AZ)
- Mayo Clinic Jacksonville doctors (identified with the place of service address of 4500 San Pablo Rd, Jacksonville, FL)
- Mayo Clinic Florida (Jacksonville, FL)
- Mayo Clinic Outpatient Dialysis Center (Jacksonville, FL)
- O’Connor Hospital (all locations)
- Saint Luke’s Hospital (Orlando, FL)

(NOTE: When you return to the Oxford tri-state service area, you must use doctors participating with the Oxford network to get in-network services.)

In case of a medical emergency (as defined in your Certificate of Coverage or Summary Plan Description, whichever applies to your plan), you should obtain medical assistance immediately.

¹ Liberty PlanSM is not available in Connecticut.

The content provided in this document is for informational purposes only, and does not constitute medical advice. Always consult your doctor before making any decisions about medical care. The services outlined here do not necessarily reflect the services, vaccines, screenings or tests that will be covered under your benefit plan. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member telephone number on the back of your health plan ID card. Certain procedures may not be fully covered under some benefit plans.

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Did you know

You can also search for complementary and alternative medicine (CAM) providers, hospitals and health facilities. To do so, narrow your search by selecting “*Alternative Medicine*” from the “*Network*” drop-down menu.



Your go-to health care resource when you're on the go.

Now upgraded with simpler navigation, UnitedHealthcare Health4Me® puts your Oxford plan in your hands—24 hours a day, seven days a week.

Three ways Health4Me can work for you.



Estimate costs.

With the myHealthcare Cost Estimator tool, you can estimate out-of-pocket costs before you go to the doctor. Just enter a procedure or condition and see how different costs can be depending on where you go for care.



Access important information, immediately.

View and share important information, email your family's health plan ID cards, review claims, and check account balances and benefit amounts.



Get real, personal care.

The Health4Me app can also connect you with helpful professionals when you need them.

The Easy Connect feature asks you what kind of help you need, then has a Health Advisor contact you to answer your questions.



To learn more, visit
uhc.com/health4me.

Download the Health4Me app.





UnitedHealthcare and Oxford do not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.

We provide free services to help you communicate with us, such as letters in other languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free phone number listed on your health plan ID card Monday through Friday, 8 a.m. to 6 p.m. ET TTY users can dial 711.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文 (Chinese)，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

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A mobile version of myHealthcare Cost Estimator is available in the Health4Me mobile app, and additional ZIP codes and procedures will be added soon. This tool is not intended to be a guarantee of your costs or benefits. Your actual costs and/or benefits may vary. When accessing the tool, please refer to the Terms and Conditions of Use and Why Your Costs May Vary sections for further information regarding cost estimates. Refer to your health plan documents for information regarding your specific benefits.

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Preventive care guidelines for children and adults.





Keeping a focus on regular preventive care can help you—and your family—stay healthy.

Preventive care can help you avoid potentially serious health conditions and/or obtain early diagnosis and treatment. Generally, the sooner your doctor can identify and treat a medical condition, the better the outcome.

Under the Affordable Care Act (ACA),¹ you can get certain preventive health care services, covered at 100 percent, without any cost to you. Just obtain your preventive care from a health plan network provider. Diagnostic (non-preventive) services are also covered, but you may have to pay a copayment, coinsurance or deductible. Check your plan documents to make sure.

Preventive care guidelines for children.²

Recommended preventive care services for children will vary based on age and may include some of the following:

- Age-appropriate well-child examination.
- Measurement of your child's head size.
- Measurement of your child's length/height and weight.
- Metabolic screening panel for newborns.
- Screening blood tests, if appropriate.
- Age-appropriate immunizations.
- Vision screening, by primary care physician.
- Oral health risk assessment.
- Fluoride application and/or oral supplements, under certain circumstances.
- Hearing screening.
- Autism screening.
- Lead screening, for children under age 7.
- Counseling on the harmful effects of smoking and illicit use of drugs (children and adolescents).
- Counseling for children and their parents on promoting a healthy diet and exercise.
- Screening certain children at high risk for sexually transmitted diseases, lead, depression, tuberculosis and more.
- Evaluating the need for iron supplements.

Not all children require all of the services identified above. Your doctor should give you information about your child's growth, development and general health, and answer any questions you may have.



Help protect and maintain your child's health with regular preventive care visits with a network doctor.



Preventive care immunization guidelines for children and adolescents—18 years or younger.

Immunizations can help protect your child against many childhood diseases. The following immunization schedule provided by the Centers for Disease Control and Prevention (CDC) will provide you with the guideline recommendations for children 18 years or younger.

Vaccine	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19–23 mos	2–3 yrs	4–6 yrs	7–10 yrs	11–12 yrs	13–15 yrs	16 yrs	17–18 yrs	
Hepatitis B (HepB)	1st dose	2nd dose		3rd dose														
Rotavirus (RV) RV1 (2-dose series); RV5 (3-dose series)			1st dose	2nd dose														
Diphtheria, tetanus, & acellular pertussis (DTaP: <7 yrs)			1st dose	2nd dose	3rd dose			4th dose				5th dose						
Haemophilus influenzae type b (Hib)			1st dose	2nd dose		3rd or 4th dose												
Pneumococcal conjugate (PCV13)			1st dose	2nd dose	3rd dose	4th dose												
Inactivated poliovirus (IPV: <18 yrs)			1st dose	2nd dose	3rd dose						4th dose							
Influenza (IIV)	Annual vaccination (IIV) 1 or 2 doses													Annual vaccination (IIV) 1 dose only				
Measles, mumps, rubella (MMR)					1st dose								2nd dose					
Varicella (VAR)					1st dose								2nd dose					
Hepatitis A (HepA)									2-dose series									
Meningococcal (Hib-MenCY >6 weeks; MenACWY-D >9 mos; MenACWY-CRM ≥2 mos)														1st dose		2nd dose		
Tetanus, diphtheria, & acellular pertussis (Tdap: >7 yrs)														Tdap				
Human papillomavirus (HPV)																		
Meningococcal B																		
Pneumococcal polysaccharide (PPSV23)																		

- No recommendation.
- Range of recommended ages for all children.
- Range of recommended ages for non-high-risk groups that may receive vaccine, subject to individual clinical decision making.
- Range of recommended ages for catch-up immunization.
- School entry and adolescent vaccine age groups.
- Range of recommended ages for certain high-risk groups.

If your child has any medical conditions that put him or her at risk for infection or is traveling outside of the United States, talk to your child's doctor about additional vaccines that he or she may need.

Note: If your child misses a shot, talk with your child's doctor for his or her direction—and to answer any questions about vaccines.



For more information about vaccines, visit [cdc.gov/vaccines](https://www.cdc.gov/vaccines).

Preventive care screening guidelines and counseling services for adults.²

A preventive health visit can help you see how healthy you are now and help identify any health issues before they become more serious. You and your doctor can then work together to choose the care that may be right for you. Recommended preventive care services may include the following:

For adult men:

- **Wellness examinations.**
- **Abdominal Aortic Aneurysm Screening**—for age 65–75 years who have ever smoked.
- **Alcohol Screening and Brief Counseling**—screening during wellness examinations. Brief counseling interventions for certain patients.
- **Blood Pressure Screening**—at each wellness examination. Certain patients may also require ambulatory blood pressure measurements outside of a clinical setting. Check with your doctor.
- **Cholesterol Screening**—for age 40–75 years.
- **Colorectal Cancer Screening**—for age 50–75 years. Ask your physician about screening methods and intervals for screening.
- **Depression Screening**—for all adults, in a primary care setting.
- **Diabetes Screening**—for age 40–70 years who are overweight or obese.
- **Falls Prevention Counseling**—during wellness examination, for community-dwelling older adults.
- **Healthy Diet Behavioral Counseling**—for persons with cardiovascular disease risk factors, in a primary care setting.
- **Hepatitis B Virus Infection Screening**—for persons at high risk.
- **Hepatitis C Virus Infection Screening**—one time screening for adults born between 1945–1965, or, persons at high risk.
- **Human Immunodeficiency Virus (HIV) Screening.**
- **Immunizations**—FDA approved and have explicit ACIP recommendations for routine use.
- **Latent Tuberculosis Infection Screening**—for persons at increased risk.
- **Lung Cancer Screening with Low-Dose CT Scan**—for age 55–80 years with at least a 30 pack-year smoking history (requires prior authorization).
- **Obesity Screening and Counseling**—at each wellness examination. Certain patients may need medical nutrition therapy.
- **Sexually Transmitted Infections, Behavioral Counseling to Prevent**—behavioral counseling for adults who are at increased risk, in a primary care setting.
- **Skin Cancer, Behavioral Counseling to Prevent**—at each wellness examination, for young adults up to age 24 years.
- **Syphilis Screening**—for adults at increased risk.
- **Tobacco Cessation, Screening, Behavioral Counseling**—screening, and behavioral counseling for adults who smoke, in a primary care setting (refer to pharmacy vendor for pharmacotherapy for tobacco cessation).



For adult women:

- **Wellness Examinations, Well-Woman Visits**—well-woman visits, including routine, low-risk prenatal visits.
- **Abdominal Aortic Aneurysm Screening**—for age 65–75 years who have ever smoked.
- **Alcohol Screening and Brief Counseling**—screening during wellness examinations. Brief counseling interventions for certain patients.
- **Bacteriuria Screening**—during pregnancy.
- **Blood Pressure Screening**—at each wellness examination. Certain patients may also require ambulatory blood pressure measurements outside of a clinical setting. Check with your doctor.
- **Breastfeeding Primary Care Interventions, Counseling, Support and Supplies**—during pregnancy and after birth. Includes personal use electric breast pump.
- **Cervical Cancer Screening (Pap Smear)**—women age 21–65 years old.
- **Chemoprevention of Breast Cancer, Counseling**—for women at high risk of breast cancer, but low risk for adverse effects.
- **Chlamydia and Gonorrhea Infection Screening**—for sexually active women age 24 and younger, and older women at increased risk.
- **Cholesterol Screening**—for age 40–75 years.
- **Colorectal Cancer Screening**—for age 50–75 years. Ask your physician about screening methods and intervals for screening.
- **Contraceptive Methods (Including Sterilizations)**—FDA-approved methods of contraception for women, including patient education and counseling.
- **Depression Screening**—for all adults, in a primary care setting.
- **Diabetes Screening**—for age 40–70 years who are overweight or obese.
- **Falls Prevention Counseling**—during wellness examination, for community-dwelling older adults.
- **Genetic Counseling and Evaluation for BRCA Testing, and BRCA Lab Testing**—lab testing requires prior authorization.
- **Gestational Diabetes Mellitus Screening**—during pregnancy.
- **Healthy Diet Behavioral Counseling**—for persons with cardiovascular disease risk factors, in a primary care setting.
- **Hepatitis B Virus Infection Screening**—for persons at high risk.
- **Hepatitis C Virus Infection Screening**—one-time screening for adults born between 1945–1965, or, persons at high risk.
- **Human Immunodeficiency Virus (HIV) Screening**—for all adults.
- **Human Papillomavirus DNA Testing**—for women age 30–65.
- **Immunizations**—FDA approved and have explicit ACIP recommendations for routine use.
- **Intimate Partner Violence, Interpersonal and Domestic Violence, Counseling and Screening**—during wellness examination.
- **Latent Tuberculosis Infection Screening**—for persons at increased risk.
- **Lung Cancer Screening with Low-Dose CT Scan**—for age 55–80 years with at least a 30 pack-year history (with prior authorization).
- **Mammography Screening.**
- **Obesity Screening and Counseling**—at each wellness examination. Certain patients may need medical nutrition therapy.
- **Osteoporosis Screening**—women age 65 and older, and younger women at increased risk.
- **Rh Incompatibility Screening**—during pregnancy.
- **Sexually Transmitted Infections, Behavioral Counseling to Prevent**—behavioral counseling for adults who are sexually active or otherwise at increased risk, in a primary care setting.
- **Skin Cancer, Behavioral Counseling to Prevent**—at each wellness examination, for young adults up to age 24 years.
- **Syphilis Screening**—for adults at increased risk.
- **Tobacco Cessation, Screening, Behavioral Counseling**—screening, and behavioral counseling for adults who smoke, in a primary care setting (refer to pharmacy vendor for pharmacotherapy for tobacco cessation).




Preventive care immunization guidelines for adults.

Immunizations may help protect against many illnesses and diseases. The following immunization schedule provided by the Centers for Disease Control and Prevention (CDC) will give you the recommendations for adults aged 19 years or older.

Vaccine	19–21 years	22–26 years	27–59 years	60–64 years	≥ 65 years
Influenza (flu shot)	1 dose annually				
Tetanus, Diphtheria, Pertussis Vaccine—Td/Tdap	Substitute Tdap for Td once, then Td booster every 10 yrs				
Measles, Mumps, Rubella—MMR	1 or 2 doses depending on indication				
Varicella (Chicken Pox)	2 doses				
Herpes Zoster Vaccine (Shingles)—Shingrix				2 doses, separated by 2–6 months	
Herpes Zoster Vaccine (Shingles)—Zostavax				1 dose	
Human Papilloma Virus (HPV)—Female	3 doses				
Human Papilloma Virus (HPV)—Male	3 doses				
Pneumococcal Conjugate Vaccine—PCV13					
Pneumococcal Polysaccharide Vaccine—PPSV23	1 or 2 doses depending on indication				1 dose
Hepatitis A—HepA	2 or 3 doses depending on vaccine				
Hepatitis B—HepB	3 doses				
Meningococcal Vaccine—MenACWY or MPSV4	1 or more doses depending on indication				
Meningitis B—MenB	2 or 3 doses depending on vaccine				
Haemophilus Influenzae Type B—Hib	1 or 3 doses depending on indication				

	No recommendation.		Recommended for adults who meet the age requirement, lack documentation of vaccination, or lack evidence of past infection.		Recommended for adults with additional medical conditions or other indications.
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The recommendations in this schedule were approved by the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP).

 For more information about preventive guidelines for your age and gender, visit uhc.com/preventive.care.



¹ Under the Patient Protection and Affordable Care Act (PPACA), many plans are required to cover certain preventive services without cost share for members. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on your health plan ID card.

² These guidelines are based, in part, on the requirements of the Patient Protection and Affordable Care Act, and recommendations of the U.S. Preventive Services Task Force (USPSTF), the Health Resources & Services Administration (HRSA) of the U.S. Department of Health and Human Services, and the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC). Individuals with symptoms or at high risk for disease may need additional services or more frequent interventions that may not be covered as a preventive benefit. These guidelines do not necessarily reflect the vaccines, screenings or tests that will be covered by your benefit plan. These clinical guidelines are provided for informational purposes only, and do not constitute medical advice. Preventive care benefits may not apply to certain services listed above. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on your health plan ID card.

Source: www.archive.ahrq.gov/clinic/prevenix.htm
 Source: www.allkids.com/customers/checkups.html
 Source: Centers for Disease Control and Prevention, Recommended immunization schedules for children and adolescents aged 18 years or younger - United States, 2018, at: www.cdc.gov/vaccines/pubs/ACIP-list.htm

Development, psychosocial and chronic disease issues for children and adolescents may require frequent counseling and treatment visits separate from preventive care visits. These guidelines represent a consensus by the American Academy of Pediatrics (AAP) and Bright Futures. The recommendations in this statement do not indicate an exclusive course of treatment or standard of medical care. Variations, taking into account individual circumstances, may be appropriate. Discuss with your doctor how these guidelines may be right for your child, and always consult your doctor before making any decisions about medical care. These clinical guidelines are provided for informational purposes only, and do not constitute medical advice. Preventive care benefits may not apply to certain services listed above. Always refer to your plan documents for your specific coverage.

Additional information about the vaccines in this schedule, extent of available data, including a full list of footnotes and contraindications for vaccination is also available at cdc.gov/vaccines or from the CDC-INFO Contact Center at 1-800-CDC-INFO (1-800-232-4636) in English and Spanish, 8 a.m.–8 p.m. Eastern Time, Monday–Friday, excluding holidays. For a complete list of footnote references, please visit: cdc.gov/vaccines/schedules/downloads/adult/adult-schedule.pdf.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates. Health Plan coverage provided by or through a UnitedHealthcare company.

Your guide to oxfordhealth.com with Rally.



Log in today.

Our website, oxfordhealth.com, can help make it easier for you to keep track of your health care coverage. You can check on a claim, let us know you're pregnant, change your address and even search for a doctor, check referrals, and access your benefits and personalized health care information. You also can get to resources to help you make more informed health care decisions. Such as how to get the care you need, how to use our tools designed to help you stay healthier and how to make the most of your health coverage.

You might be surprised at how much you can do with just a few simple keystrokes.

Take a look around.

It's probably a good time to do a quick "website walk through" to help make sure you know where to find everything you need, and ensure you are taking advantage of all we have to offer. So, log in to oxfordhealth.com, and use this guide to take you where you need to go.

Member Site Login

To log in to our website, type in your username and password, and click "**Log In.**" If you forgot your username or password, click the "**Forgot your username or password?**" link to recover your information. If you need to register for our website, click the "**Register Now**" button.

Home

Once you log in to our site, your personalized home screen will open and show your primary care physician (PCP), your coverage information, our current messages, and our Live Nurse Chat — available 24 hours a day, seven days a week.

You'll also notice large blue buttons along the right side of the page and seven blue tabs at the top of the page. These visual features will help you navigate through our website.

Claims & Accounts

Search and sort claims information for you and those who are on your health plan.

Use this page to view your claim summary and details, and to search past claims. You can also see your health savings account (HSA) balances, if you have an HSA. Or download a copy of your Explanation of Benefits (EOB) for each claim, if you need to do that.

From here, you can go to other parts of the website, including **Account Balances**, **Prescription Claims** and **Claim Forms**.

Benefits & Coverage

All of your coverage details are included here. By clicking on "Persons Covered" on the left side of the screen, you can view information for everyone covered under your plan, including:

- Name with member ID number.
- Relationship.
- Date of birth.
- Status.
- Effective date.
- Coverage ended date (if applicable).





Finding a physician.

Use doctors, hospitals, pharmacies, labs and other providers and facilities in your health plan network. It can help you save money and lower health care costs.

Here's a step-by-step guide to help you find them:

1 Go to oxfordhealth.com and click on “Members.”

You can log in to your account, create a new one by clicking on “**Register Now**” or continue to the next step.

2 Click “Find a Physician or Facility.”

If you're logged in, click the “**Find a Physician**” button.

3 Enter your five-digit ZIP code. (If you're not logged in, you will be asked what Oxford plan you are looking for.)

Then you have two choices:

- If you have a specific provider in mind, enter the doctor's name or the name of the medical group, clinic, hospital or other facility. You can also enter a medical specialty (dermatology, for example) if you want to see all of the network providers in a category.

OR

- Click on the icon that reflects the type of provider you're looking for and follow the prompts.

4 Choose from Primary or Specialty care.

Then, select the type of physician you're looking for. You'll be shown a list of primary care physicians or specialty physicians—depending on your search—that are near the ZIP code you entered.

5 Take a closer look.

Click a doctor's name to get more information, including address, phone number, hospital affiliation, if he or she is accepting new patients, and if the doctor is a UnitedHealth Premium® care physician, who meets our criteria for providing quality and cost-efficient care. Just look for the blue hearts. Learn more at UnitedHealthPremium.com.

If you need the provider ID to identify your PCP, you'll find it under “Locations.”



Pharmacy coverage information.

Get the most up-to-date information online (for members with pharmacy coverage).

- 1 **Log in to oxfordhealth.com.**
- 2 **Click on the [Pharmacies & Prescriptions](#) tab.**
- 3 **Select one of the following options:**

[Online Pharmacy \(takes you to the login page for OptumRx®\).](#)¹

See an overview of your pharmacy benefit, check your prescription order status, locate pharmacies and more.

[Mail-Order Program.](#)

Find out more about our mail-order program. You can also get our **[New Prescription Mail-In Order Form](#)**.

[Prescription Drug List \(PDL\).](#)²

View a list of drugs that may be covered under our prescription drug benefit.

[Three-Tier Pharmacy Benefit.](#)

See an overview of the three-tier prescription drug benefit.

[Precertification.](#)

View the medications that require precertification (sometimes referred to as preauthorization) by us.

[Frequently Asked Questions \(FAQ\).](#)

See answers to the questions that get asked the most.

¹ OptumRx is the administrator of your Oxford pharmacy benefit plan.

² Please note: The listing of a medication on our Prescription Drug List (PDL) does not guarantee coverage, as certain medications are excluded due to benefit plan design limitations that are specific to members' individual or group benefits. The PDL is current at the time of release and subject to change.



Health & Wellness.

The first step: log in to oxfordhealth.com.

Go to oxfordhealth.com's Member website. If you are already registered, log in with your username and password and proceed to the **Health & Wellness** tab—the farthest right tab at the top of the page.

If you've never registered on oxfordhealth.com, click "**Register Now**" and follow the prompts, then go to the **Health & Wellness** tab as described above.

Let's get started with Rally®.

You're now on the Rally registration page. Register by following the three on-screen steps. You'll need to choose a profile image to participate in online communities or other activities. Please note that your username should be fun and memorable but NOT your real name.

With Rally, it takes just a few minutes to answer some simple questions and get immediate and confidential results. You'll get specific health suggestions for you to consider and follow-up actions that are designed to work with you and your daily behaviors. This information may help you better understand your healthy behaviors to help you live a healthier lifestyle.

Rally experience.

With Rally, you get an interactive journey answering questions to personalize your experience. After completing the easy-to-follow health survey, you'll get your results as a "Rally Age"—an indicator of how your health age compares with your actual age.

Select your missions.³

In addition to your Rally Age, you'll also get personalized and interactive results, including suggested missions, or individual action plans, based on your health survey. Missions provide activities that may help improve or maintain your health.

Track your missions.

After joining your Missions, you can easily track your progress by self-reporting or integrating wearable fitness devices from Fitbit®, Jawbone UP® or BodyMedia®.

Make healthy connections.

With Rally, you can also join an online challenge, participate in communities where you can connect with others about health topics that may be important to you, and stay up-to-date on health-related news.



³ Please talk to your doctor before starting a new fitness program.

Get started with Rally today.

In about 15 minutes, you can get a health summary, complete with suggestions designed to help you improve your health.

You'll get real-time feedback and:

- Missions designed to help you in changing your behavior.
- Ways to track or monitor your actions, like physical activities, weight loss and more.
- Help as you work toward a healthier lifestyle.
- Your "Rally Age" and how it compares to your actual age, which may help you assess your current health status.



Tools & Resources.

You'll find information designed to help you find a doctor and stay healthy.

Access to Care

Search for a doctor or facility.

Access Oxford On-Call®, which puts you in touch with a registered nurse any time of day or night for information on sources of care.

View our complementary and alternative medicine (CAM) offerings and compare our tristate facilities.

Manage Your Health

Member Health links you to our Health & Wellness Center.

General Health & Programs gives you reminders and general care information.

Healthy Bonus® Member Discounts lists special offers that promote a healthy lifestyle.

Managing Disease shows you a series of programs that support members with serious conditions like asthma, diabetes and heart disease.

Practical Resources

Medical & Administrative Policies lists our most up-to-date policies.

Your Pharmacy Coverage displays our **New Prescription Mail-In Order Form**, as well as our most up-to-date PDLs. You can also log in to optumrx.com for your complete pharmacy benefit details.

Forms & Materials allows you to download many of our forms and other materials.

Learn About antibiotics, pediatric health or our health savings accounts (HSAs).

These are just a few of the tools you have at oxfordhealth.com. Log in today to learn more about our preventive care programs, download forms or read our policies. If you have any questions, just click "Help" or "Contact Us" at the top right-hand corner of the page. If you don't have an Oxford plan from UnitedHealthcare yet, please visit www.oxfordhealth.com/newmember.



UnitedHealthcare and Oxford do not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.

We provide free services to help you communicate with us, such as letters in other languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free phone number listed on your health plan ID card Monday through Friday, 8 a.m. to 6 p.m. ET. TTY users can dial 711.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意: 如果您說中文 (**Chinese**), 我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

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.

Oxford HMO products are underwritten by Oxford Health Plans (NY), Inc., Oxford Health Plans (NJ), Inc. and Oxford Health Plans (CT), Inc. Oxford insurance products are underwritten by Oxford Health Insurance, Inc. Administrative services provided by Oxford Health Plans LLC.

 [Facebook.com/UnitedHealthcare](https://www.facebook.com/UnitedHealthcare)  [Twitter.com/myUHC](https://twitter.com/myUHC)  [YouTube.com/UnitedHealthcare](https://www.youtube.com/UnitedHealthcare)



Don't Let the Flu Slow You Down. Get Vaccinated Today.

Take care of yourself and those you love.

The flu affects millions of people each year and can result in severe illness — even death. A flu vaccine is the best defense to not only protect you, but also help protect the people around you. The Centers for Disease Control and Prevention (CDC) recommends annual flu vaccinations for everyone six months and older.¹

Choose a convenient provider.

Annual flu shots are covered under most medical plans when you use a network provider. For quick and easy access to a flu vaccine, you can visit:



**Your network doctor or other
health care professional.**



**Any of the retail pharmacies
listed on the back.**



**Any of the convenience care
clinics listed on the back.**



What you need to know.

- Most of our health plans cover annual flu shots at 100 percent when you use a contracted network provider.
- Talk to your doctor about which vaccinations may be right for you.
- Show your health plan ID card before getting your shot.
- On the other side of this flier is a list of national pharmacy chains and convenience care clinics that are contracted to provide flu shots to Oxford members.



To find network care, visit your member website or call the toll-free phone number on your health plan ID card.

CONTINUED

Get your flu shot from any of these network providers.

There may be some instances where a particular location offered by one of the flu shot providers listed below is not participating in the Oxford network.

Age restrictions or limitations may also apply. Check with your provider for specific age or flu shot requirements.

Retail Pharmacies	Pharmacists associated with these retail pharmacies can administer flu shots. No appointments are necessary.
Albertsons® Including Albertsons Sav-on and Albertsons Osco.	albertsons.com/pharmacy/immunizations/
CVS®	cvs.com/flu
Harris Teeter®	harristeeter.com/pharmacy-services/#/app/cms
H-E-B®	heb.com/pharmacy/services/immunizations.jsp
Kmart®	pharmacy.kmart.com/newrx-immunization
The Kroger Co.® (Smith's, Ralph's, Roundy's, Pick 'n Save, Copps Food Center, Metro Market, Mariano's, Fred Meyer, Fry's, QFC, Harris Teeter, King Soopers, City Market, Food 4 Less, Dillons, Baker's, Gerbes, Jay C Food Stores, Owen's, Pay Less, Scotts)	kroger.com/topic/pharmacy/#/vaccinations-made-easy
Meijer®	meijer.com/content/content.jsp?pageName=immunization_services
New Albertsons® Including Acme Sav-on, Jewel-Osco, Star Market, Shaws Osco and Safeway.	albertsonssavonpharmacies.com/ishp/ishp_adultImmunizations.action
Publix®	publix.com/pharmacy-wellness/pharmacy/preventive-care/vaccinations
Rite Aid®	riteaid.com/pharmacy/services/vaccine-central
Safeway® Including Carrs, Pak'N Save, Pavilions, Randalls, Tom Thumb and Vons stores.	safeway.com/ShopStores/Immunizations.page
Shopko® Including Shopko Express and Shopko Hometown.	shopko-pharmacy.com/flushots.php
United Supermarkets® Including Albertsons Market, Amigos and Market Street.	acmemarkets.com/pharmacy/immunizations/
Walgreens® Including Duane Reade, Jim Myers, Kerr Drug, May's Drug, Parkway Drug and Super D.	walgreens.com/flu
Walmart® Stores Inc. and Sam's Club®	walmart.com/cp/1228302
Network Convenience Care Clinics	Convenience care clinics are typically located in retail stores and don't require appointments.
MinuteClinic®	minuteclinic.com/services/vaccination
RediClinic®	rediclinic.com/riteaid
Walgreens Healthcare Clinic®	walgreens.com/topic/pharmacy/healthcare-clinic.jsp

¹ www.cdc.gov/flu/protect/keyfacts.htm#flu-vaccination.

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Cancer Support Program.

We're here for you.

If you or one of your dependents are diagnosed with cancer, you may have questions and need to make some difficult decisions. Call **1-866-936-6002**, Monday through Friday, 8:00 a.m. to 8:00 p.m., ET, for valuable resources, answers and support.

You may have questions such as:

- Where should I go for more information?
- What treatments will I need, and what side effects might I experience?
- Where should I go for treatment?
- How will cancer affect my family?
- How can I maintain my quality of life during treatment for cancer?

If you or one of your dependents has been touched by cancer, the Cancer Support Program is available as part of your medical benefit plan. This program gives you and your family a source of personal support from an experienced cancer nurse and specialized social workers.

Compassionate support available to you.

In order to receive the cancer care that is best for you, it is important to be well-informed about the many treatment options and providers. Our Cancer Nurse Advocates can provide information, answer your questions, help you make informed decisions, and help you find a provider in your local community or within your plan network.

To seek help or to find more information about the Cancer Support Program please call **1-866-936-6002** between 8 a.m. and 8 p.m., ET, Monday through Friday. Or call us at the toll-free phone number on your health plan ID card or **1-800-444-6222**. TTY users can dial **711**.

Si usted necesita ayuda en español llame al número de teléfono en su tarjeta de identificación, 若需中文協助, 請致電**1-800-303-6719**, 한국어로 도움이 필요하시면 **1-888-201-4746**.

The Cancer Support program is optional, and you are not required to use the service.

Remember, cancer is not one disease but rather a wide spectrum of diseases. Each case is different, and the needs of each person with cancer are different. We encourage you to decide where to receive your care in consultation with your doctor, based on your personal values, needs and preferences.

The Cancer Support Program is led by highly experienced cancer nurses with assistance from a board-certified medical oncologist, a hematologist and other doctors, as well as social workers with specific experience on how to support you and your family as you cope with cancer.

This program 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 the nurse support service is for informational purposes only and provided as part of your health plan. The nurse cannot diagnose problems or recommend treatment and is not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. This nurse support service is not an insurance program and may be discontinued at any time.

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How we can help





- Cancer awareness
- Disease and treatment education
- Treatment decision support
- Comprehensive cancer case management, addressing symptoms and side effects
- Second opinion support
- Patient empowerment through education and guidance
- Clinical coverage review of treatment, prescriptions and clinical trials
- Prescription drug management support
- Help with treatment-related travel and lodging
- Assist in coordination of care and benefit issues

In a recent member survey, 97% were satisfied or very satisfied with the Cancer Support Program, and the vast majority would recommend it to others¹.

¹ Live telephone survey of UnitedHealthcare members; conducted by Burke Institute, 2015. Members who have either successfully completed their program or have reached their annual anniversary of enrollment in the program are eligible for the survey.

Know where to go for care.

With many options for getting care, how do you choose? This chart may help you understand where to go for what – and how you can save money.

Where to go	What it is	When to use	Cost ¹
24-hour Nurse² 	You can speak with a registered nurse 24 hours a day, seven days a week. Call the toll-free phone number on your health plan ID card to get started.	<ul style="list-style-type: none"> • Choosing appropriate medical care • Finding a doctor or hospital • Understanding treatment options • Supporting a healthier lifestyle • Answering medication questions 	\$0
Convenience Care Clinics 	Visit a convenience care clinic when you can't see your doctor and your health issue isn't urgent. These clinics are often in pharmacies and retail stores.	<ul style="list-style-type: none"> • Common infections (e.g., strep throat) • Minor skin conditions (e.g., poison ivy) • Vaccinations • Pregnancy test • Minor injuries • Earaches 	\$\$+
Urgent Care³ 	Urgent care is ideal when you need care quickly, but it isn't an emergency (and your doctor isn't available). Urgent care centers treat issues that aren't life-threatening.	<ul style="list-style-type: none"> • Sprains • Strains • Small cuts that may need a few stitches • Minor burns • Minor infections • Minor broken bones 	\$\$\$
Emergency Room (ER) 	The ER is for life-threatening or very serious conditions that require immediate care. This is also when to call 911 or your local emergency number.	<ul style="list-style-type: none"> • Heavy bleeding • Large open wounds • Sudden change in vision • Chest pain • Sudden weakness or trouble talking • Major burns • Spinal injuries • Severe head injury • Breathing difficulty • Major broken bones 	\$\$\$\$

Finding care when you're traveling.

Call the toll-free member phone number on your health plan ID card to find providers near you, and to learn if any restrictions apply.

Still need help deciding where to go?

Call the toll-free member phone number on your health plan ID card (TTY **711**).



¹ Source: 2015 Average allowed amounts by UnitedHealthcare Network Providers and not tied to a specific condition or treatment. Actual payments may vary depending upon benefit coverage. (Estimated \$1,500 difference between the average emergency room visit and the average urgent care visit.) The information and estimates provided are for general informational and illustrative purposes only and is not intended to be nor should be construed as medical advice or a substitute for your doctor's care. You should consult with an appropriate health care professional to determine what may be right for you. In an emergency, call 911 or your local emergency number, or go to the nearest emergency room.

² Member phone number services should not be used for emergency or urgent care needs. In an emergency, call 911 or your local emergency number, or go to the nearest emergency room. The information provided through the member phone number services are 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. Member phone number services are not an insurance program and may be discontinued at any time.

³ Urgent care facility names, addresses, phone numbers and network statuses are subject to change without notice.

⁴ The company does not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities. We provide free services to help you communicate with us, such as letters in other languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free phone number listed on your health plan ID card Monday through Friday, 8 a.m. to 6 p.m. TTY users can dial 711.

ATENCIÓN: Si habla español (Spanish), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación. 請注意：如果您說中文 我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

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