

Understanding Your PPO Plan



A UnitedHealthcare Company

UMR Managed Care Services

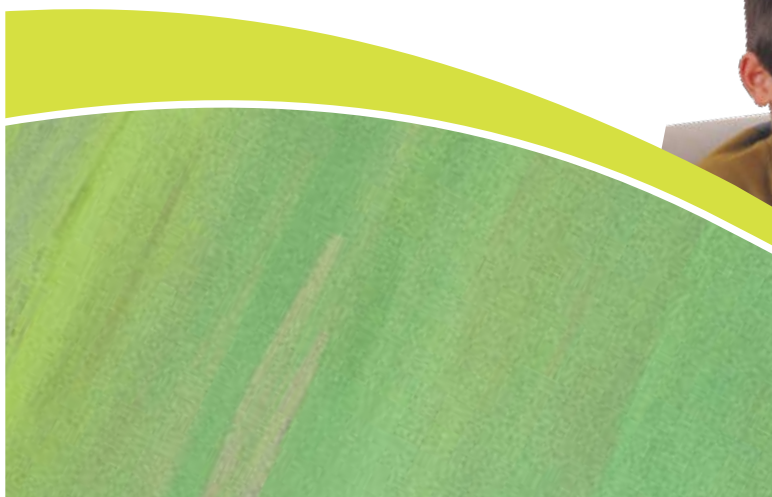
You now have access to a preferred provider organization (PPO) network through UMR. Your PPO network will provide you with access to hospitals and physicians throughout your community.

Frequently Asked Questions

Q: How does your employer sponsored preferred provider plan work?

You can choose from a broad network of participating physicians and hospitals in your area. The participating physicians and hospitals are called preferred providers. Here's how the plan works:

- In order to obtain the highest level of benefits from your medical plan, see a PPO in-network preferred provider.
- To find a participating provider, please consult your PPO Network Directory or call the toll-free number that will be located on the back of your UMR ID card.
- Whenever possible, present your ID card when you need medical care at the provider office or facility.
- Generally, there are no claim forms to worry about. Preferred providers are responsible for calling the plan for eligibility, benefits and submission of claim forms.
- For all types of care, you select the preferred provider you would like to see.
- You have the option to obtain care from an out-of-network provider. It will, however, cost you more out-of-pocket.



Q: How do I take advantage of my PPO health plan benefits?

Once you enroll in the PPO, you will receive a PPO member identification card. This card identifies you as a participant in a health plan that uses the PPO provider network and includes important information and phone numbers for both you and your physician.

To receive medical care, just call a participating preferred provider (who can be found in your directory, on the Internet or by calling the toll-free number on the back of your ID card) and schedule an appointment. The doctor may want to see your ID card, so be sure to bring it with you each time you have an appointment. When you present your ID card and see a network provider, all the paperwork will be handled for you.

Q: Can I choose to see a physician that is not in the PPO network? What happens if I do?

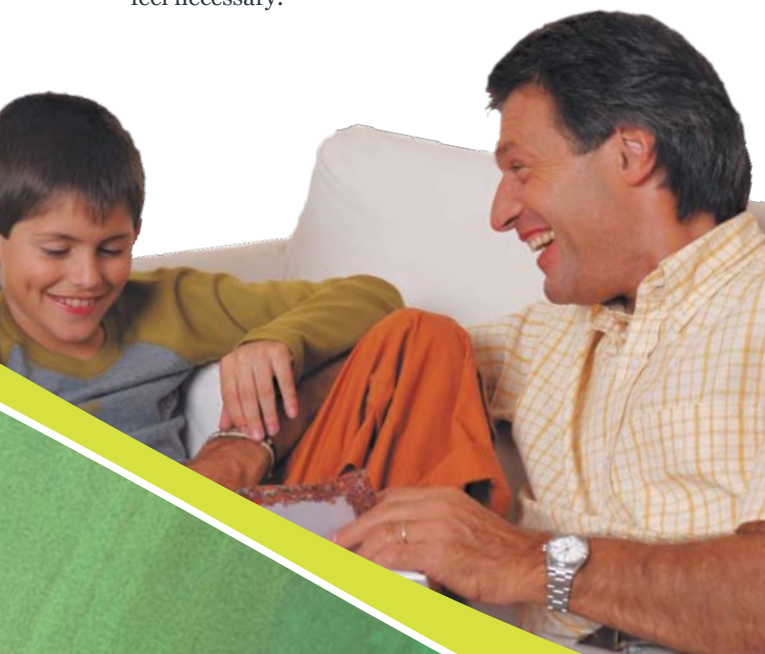
Yes. You may choose to see a physician that is not in the network. However, if you do, you will receive a reduced level of benefits and may need to submit a claim form.

Q: Where do I find out how much I will pay for in-network vs. out-of-network expenses?

Your schedule of benefits lists the percentage that will be paid toward your in-network and out-of-network expenses.

Q: When can I see a network physician?

You can see a network physician as often as you feel necessary.



The Provider Nomination Process

Employees are encouraged to nominate nonparticipating providers for inclusion in their PPO network. If your current provider is not a member of the PPO network, you may wish to nominate him or her to become a participating provider. You can do so by calling the toll-free number that will be located on the back of your ID card.

Nominated providers must meet the stringent credentialing standards and network needs in order to be accepted into the network. You may check with your provider's office for a status update during the application process.

If your provider informs you that he or she has been accepted to participate in the PPO network, please call the customer service telephone number, which will be located on the back of your ID card to confirm your provider's effective date. If your provider is not active in the network at the time of your appointment, you may not be paid at the maximum level.



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