

2026 Benefit Plans Open Enrollment



Bank Street
College of Education



A UnitedHealthcare Company

UM1476 0919

Understanding your health care benefits



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Benefit Period Begins 1/1/2026



Open Enrollment: November 24th
Through December 10th

Today you'll learn more about:

- Medical Plan Options
 - PPO Health Plan
 - EPO Health Plan
- Teladoc services
- Vision Benefits
- Contact Information



PPO Plan – Benefit Plan 001	UHC Choice Plus Network	Out-of-Network
Annual Deductible	\$250 per Person \$500 Family	\$1,000 per Person \$2,000 Family
Out-of-Pocket Maximum (Medical + Rx Combined)	\$2,500 per Person \$5,000 Family	\$4,000 per Person \$8,000 Family
Member Coinsurance	10%	30%
Preventive Care	\$0 Member Cost Share	Deductible then 30%
Office Visits <ul style="list-style-type: none"> ○ PCP ○ Specialists ○ Telehealth 	\$25 Copay \$40 Copay \$10 Copay	Deductible then 30% Deductible then 30% Deductible then 30%
Teladoc	\$10 Copay	
Inpatient Hospitalization	\$500 Copay	Deductible then 30%
Outpatient Surgery	\$250 Copay	Deductible then 30%
Emergency Room (Facility)	\$100 Copay	
Emergency Room (Physician Charges)	10% Coinsurance, Deductible Waived	

PPO Plan – Prescription Drugs
Benefit Plan 001
Subject to \$100 Deductible (waived for
Tier 1 medications)

In-Network Pharmacy

Retail Pharmacy 30-day Supply

- Tier-1 Generic \$15 Copay
- Tier-2 Preferred Brand \$30 Copay
- Tier-3 Non-Preferred Brand \$60 Copay

OptumRx Home Delivery 90-day Supply

- Tier-1 Generic \$37.50 Copay
- Tier-2 Preferred Brand \$75 Copay
- Tier-3 Non-Preferred Brand \$150 Copay

Specialty Drugs 30-day Supply

- Tier-1 Generic \$15 Copay
- Tier-2 Preferred Brand \$30 Copay
- Tier-3 Non-Preferred Brand \$60 Copay

EPO Plan – Benefit Plan 003	UHC Choice Plus Network	Out-of-Network
Annual Deductible	\$250 per Person \$500 Family	No Benefit
Out-of-Pocket Maximum (Medical + Rx Combined)	\$6,600 per Person \$13,200 Family	No Benefit
Member Coinsurance	10%	No Benefit
Preventive Care	\$0 Member Cost Share	No Benefit
Office Visits <ul style="list-style-type: none"> ○ PCP ○ Specialists ○ Telehealth 	\$20 Copay \$35 Copay \$10 Copay	No Benefit No Benefit No Benefit
Teladoc		\$10 Copay
Inpatient Hospitalization	\$250 Copay	No Benefit
Outpatient Surgery	Deductible then 10%	No Benefit
Emergency Room (Facility)		\$50 Copay
Emergency Room (Physician Charges)		Deductible then 10%

EPO Plan – Prescription Drugs Benefit Plan 003

In-Network Pharmacy

Retail Pharmacy 30-day Supply

- Tier-1 Generic \$15 Copay
- Tier-2 Preferred Brand \$30 Copay
- Tier-3 Non-Preferred Brand \$35 Copay

OptumRx Home Delivery 90-day Supply

- Tier-1 Generic \$37.50 Copay
- Tier-2 Preferred Brand \$52.50 Copay
- Tier-3 Non-Preferred Brand \$52.50 Copay

Specialty Drugs 30-day Supply

- Tier-1 Generic \$15 Copay
- Tier-2 Preferred Brand \$30 Copay
- Tier-3 Non-Preferred Brand \$35 Copay

Prior authorization process – *Medical Plan*

UMR reviews services for medical necessity before they are provided:

- Inpatient Hospitalization
- Home Health Care
- Partial Hospitalization
- Durable Medical Equipment
- Clinical Trials
- Bariatric Surgery
- Chemotherapy (cancer diagnosis)
- Dialysis
- Specialty injectables, covered under the medical plan
- MRI, MRA, PET, CT scans, CTA and Nuclear Cardiology
- Outpatient surgeries not performed in a physician's office



PRIOR AUTHORIZATION

Utilization Management

Monitoring cases for appropriate care



Program includes:

- Prior authorization for medical necessity
- Determination and ongoing management of inpatient length of stay for both medical and behavioral care
- Identification and steerage to Complex Condition CARE programs
- Review of clinical guidelines with medical director oversight

Utilization Management nurses:

- Monitor all cases from prior authorization through discharge
- Provide clinical oversight and coordination with facility
- Follow evidence-based guidelines to determine appropriate level of care and treatment

Complex Condition CARE

(formerly known as Case Management)

Coordinating complex and catastrophic cases



Program includes:

- Identification and management of complex cases such as NICU, Transplant, Oncology, Behavioral Health and high-risk maternity
- Member advocacy
- Support for patients and caregivers
- Interface with providers, stop loss, EAP

Complex Condition CARE nurses:

- Facilitate communication and coordinate care between physicians and other care providers
- Manage cases from diagnosis to conclusion
- Match interventions with identified risks to foster patient self-management
- Educate on primary care/prevention, behavior modification and maintaining successful lifestyle changes
- Excel in patient advocacy and care

Choose the right health care setting

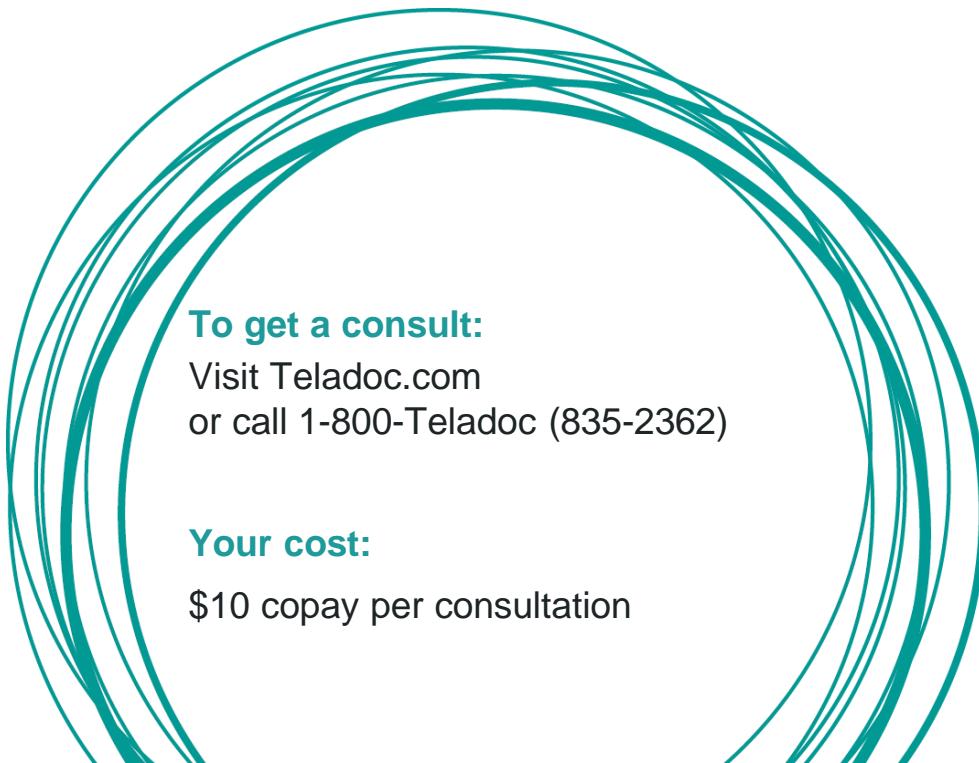
Type of care	Wait time
 Teladoc Consults by phone or online video for routine ailments.	10 minutes for doctor to respond
 Retail clinic/convenient care clinic Clinics located in retail stores, supermarkets and pharmacies.	15 minutes or less
 Urgent care/ walk-in clinic Evening and weekend treatment for illnesses or injuries.	20 to 30 minutes
 Clinical care (your doctor's office) See your primary care provider for preventive and ongoing care.	1 week or longer for an appointment
 Emergency room (ER) Visit the ER only for serious illnesses or injuries. Your health plan may not cover non-emergency ER visits.	3 to 12 hours for non-critical cases

Go to Teladoc for these health issues



General health

- Colds or flu
- Allergies
- Strains and sprains
- Digestive issues
- Sinus problems
- Pediatric care



Vision Benefits

	NETWORK	NON-NETWORK
Comprehensive Vision Exam	\$15 Copay	Up to \$40
Materials - Eyeglass Lenses/Eyeglass Frames or Contact Lenses	\$30 Copay ¹	See below
Frequencies - Based on last date of service	Exam Once every 12 months Lenses Once every 24 months Frames Once every 24 months	

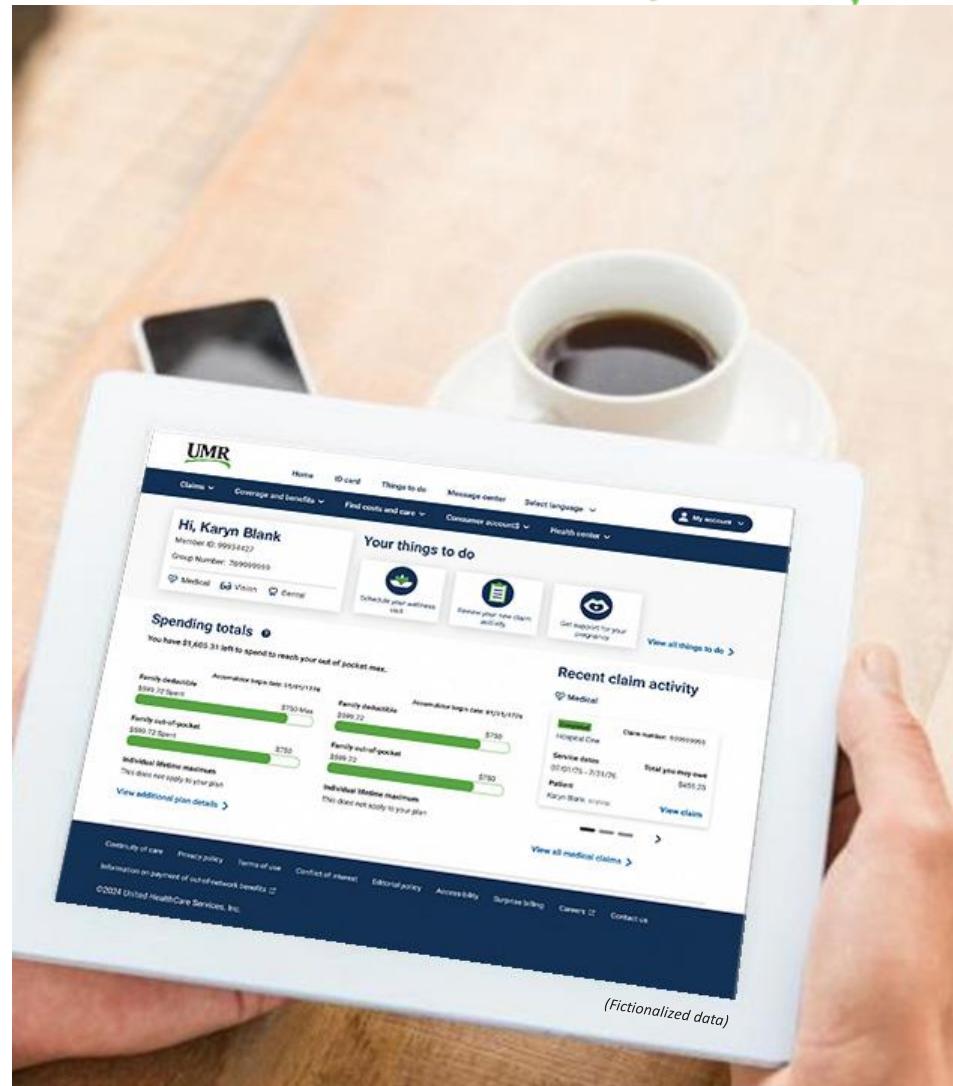
COVERED SERVICES	NETWORK	NON-NETWORK
Pair of Lenses (for Eyewear)		
<ul style="list-style-type: none"> • Standard single vision lenses • Standard lined bifocal lenses • Standard lined trifocal lenses • Standard lenticular lenses <p>Lens options such as progressive lenses, tints, UV, and anti-reflective coating may be available at a discount at participating providers.</p>	Covered in full after applicable copay ¹ Includes standard scratch-resistant coating	Up to \$40 Up to \$60 Up to \$80 Up to \$80
Frames		
You will receive a retail frame allowance toward the purchase of any frame at a network provider. For frames that exceed your allowance, you may receive an additional 30% discount on the overage (available only at participating providers and may exclude certain frame manufacturers).	\$100 Retail Frame Allowance (after applicable copay ¹)	Up to \$45
Contact Lenses²		
<ul style="list-style-type: none"> • Covered contact lens selection It is important to note the covered contact lens selection may vary by provider but does include the most popular brands on the market today.³ A complete list can be found by visiting our website www.myuhcvision.com. 	Up to 4 boxes of contact lenses plus the fitting/evaluation fees and up to two follow-up visits are covered-in-full (after applicable copay ¹)	Up to \$105
<ul style="list-style-type: none"> • Non-selection contacts You receive an allowance which is applied toward the fitting/evaluation fees and purchase of contact lenses outside the covered contact lens selection. 	Up to \$105 (material copay is waived)	Up to \$105
<ul style="list-style-type: none"> • Necessary contact lenses⁴ 	Covered in full after applicable copay ¹	Up to \$210

Signing up for umr.com

- 1 Visit **umr.com** on your desktop computer or download the **UMR mobile app**
- 2 Select **Create your account** to sign up

Helpful hints

- Have your UMR member ID card handy
- Spouses and adult children must create their own online account
- You must provide a valid email address
- Select a username and password you can remember

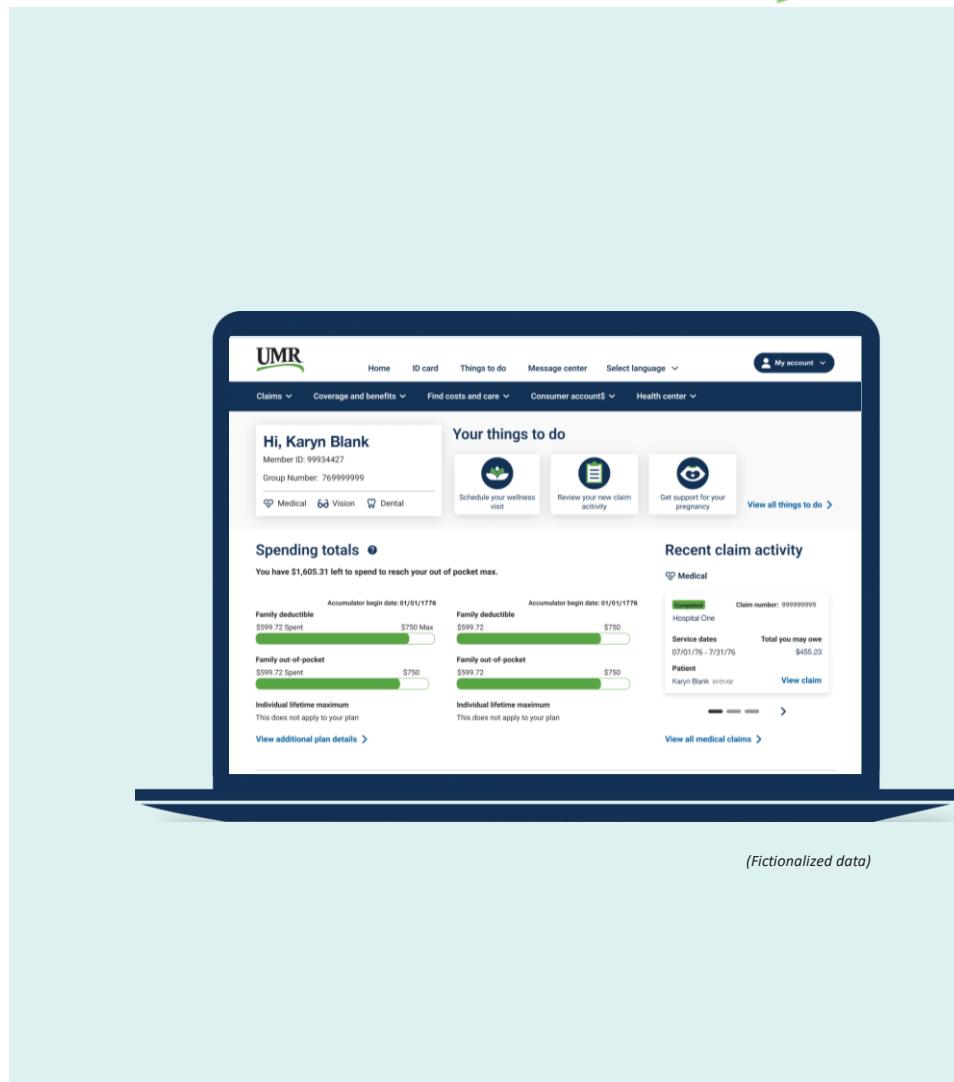


The Your things to do feature lets you know exactly what you need to do

Your things to do will prompt you to:

- Manage your account
- Review claims and benefits
- Complete health and wellness activities

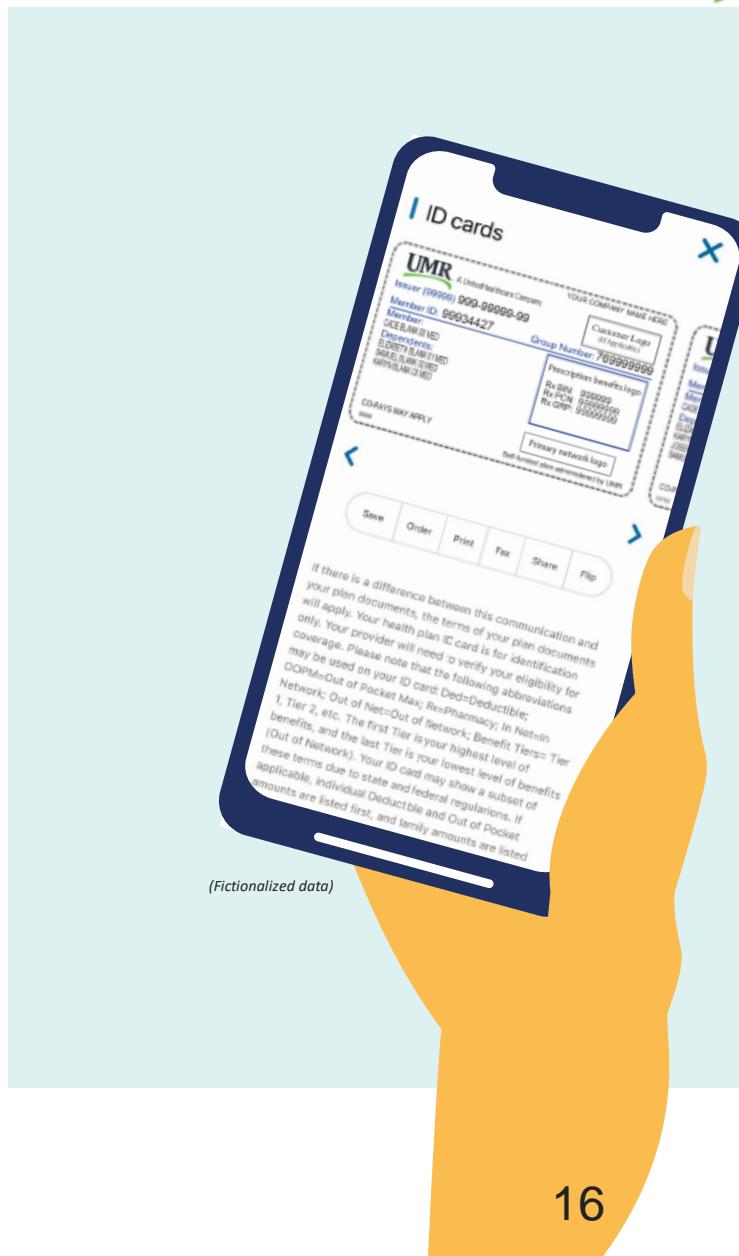
This dynamic tool is personalized for your **umr.com** homepage and prioritizes the tasks you need to complete.



The screenshot shows the UMR.com homepage with a light blue header and a white main content area. The header includes the UMR logo, a search bar, and navigation links for Home, ID card, Things to do, Message center, Select language, and My account. The main content area is titled 'Your things to do' and features three buttons: 'Schedule your wellness visit', 'Review your new claim activity', and 'Get support for your pregnancy'. Below this, there are sections for 'Spending totals' and 'Recent claim activity'. The 'Spending totals' section shows various benefit limits and how much has been spent, with progress bars. The 'Recent claim activity' section shows a claim for 'Hospital One' with details like service dates (07/01/16 - 7/31/16), patient (Karyn Blank), and total amount (\$455.23). A note at the bottom of the page states '(Fictionalized data)'.

A digital ID card on umr.com and UMR mobile app

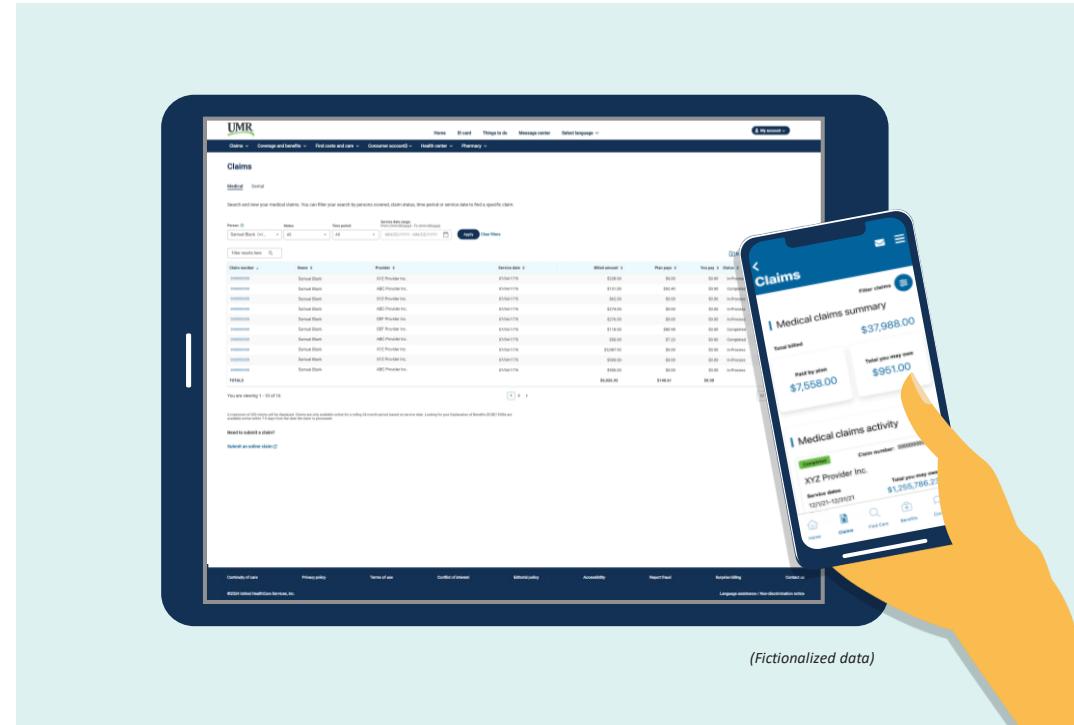
- View your member ID information on your computer or mobile device
- Have your doctor scan the on-screen bar code for your benefits information
- Print a temporary replacement card
- Fax a copy of your card to your doctor's office



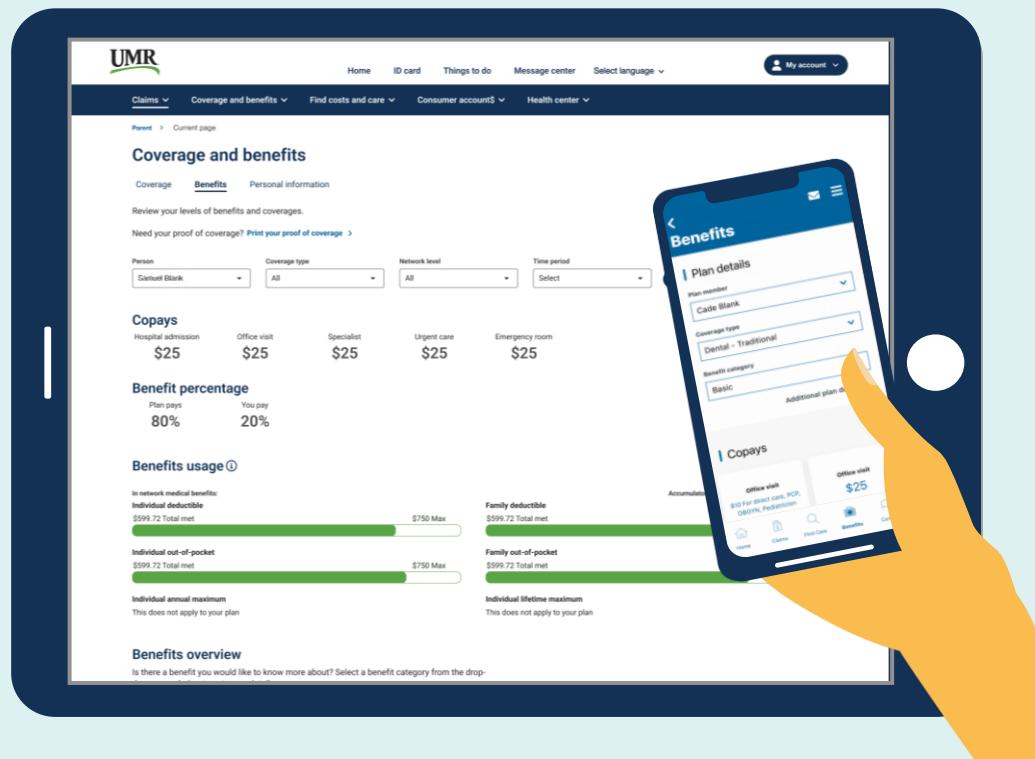
How to check claims status on umr.com and the UMR app

View claims by service date, family member, status and more

- Clearly organized and easy to sort
- Find out what you owe
- Get all the details in one place
- Safe and secure
- No lost paperwork



Review deductible and out-of-pocket amounts



Get your answers fast

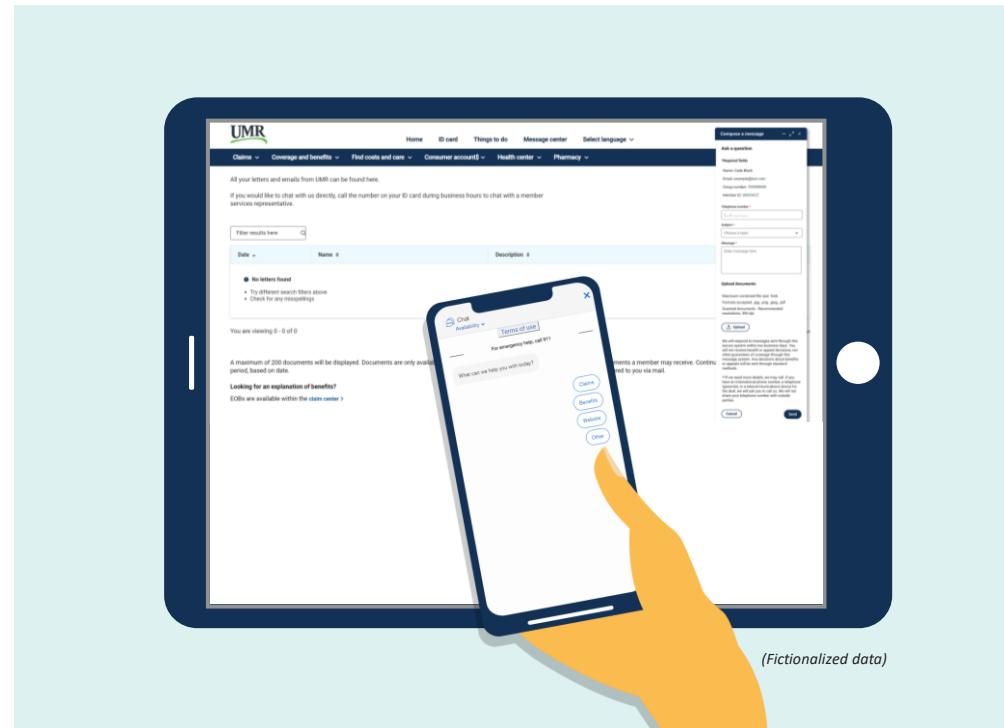
- Is there a co-payment for your office visit? If so, how much?
- What's your deductible, and are you close to reaching it?
- How much have you paid toward your out-of-pocket maximum?

Chat online with UMR customer service

- Simply sign in to **umr.com** and select the **Chat** icon to get started.
- On the **UMR app**, select **Contact** to access the **Live Chat** icon
- Team members are available 24 hours a day, seven days a week (excluding major holidays)



We've made it easier for you to get the answers you need — fast



Changing your coverage after a 'life event'



**Loss of other
insurance**



**Marriage or
divorce**



**Dependent
child reaching
limiting age**



**Adoption or
birth of a child**

Contact Human Resources within 31 days to make changes

Are you or your spouse also covered under another plan?

UMR needs to know in order to coordinate coverage

For example:

You have health coverage through two different employer plans – one as a member and one as a spouse.



UMR makes sure the **primary plan** pays first on a claim.



The **secondary plan** coordinates with the primary plan and may pay an additional amount.

Two ways to provide your other insurance information:

- 1 Provide other insurance when you activate your ID card.
- 2 Provide other insurance when you sign up for **umr.com** or download the **UMR mobile app**.

We will prompt you on the **Your things to do** area of the screen if you need to provide us your information.



You may be asked if you've been in an accident

If a recent medical claim was the result of an injury. A third party may be responsible for part of the costs.

If your claim is NOT accident related. UMR will process the claim according to your benefits plan.



To provide information, sign in to your account at umr.com. Then select the **Claims** drop down and go to **Accident details transactions**. You can also call 888-291-3774.



How to enroll

During open enrollment, you can:

- Sign up for medical coverage
- Switch from one plan to another
- Add or drop coverage for a spouse

If you do not do anything, you will stay in the plan you are currently enrolled in today for 2026

Contact Information



UMR Member Services
(800) 826-9781
www.umr.com



Teladoc
(800) 835-2362
www.Teladoc.com

OptumRx
(877) 559-2955

UHC Vision
(800) 638-3120
www.myuhcvision.com

