

Welcome

A handbook about your UnitedHealthcare member tools

What You'll Find Inside

- ▶ How to get started
- ▶ What to do if you need care
- ▶ What happens after your doctor visit
- ▶ Additional programs and services

Welcome to UnitedHealthcare

Getting Started

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► Renewing members

Welcome back! Please take a close look at this year's benefit coverage documents. If you have questions, please call the toll-free member phone number listed on your health plan ID card.

► For information about benefits covered under your health plan:

- Check your plan's *Certificate of Coverage* or *Benefit Summary*.
- Log in to your member website, uhcrivervalley.com.



Getting Started

- ▶ Understand your health plan ID card
- ▶ Using your website
- ▶ Find a doctor
- ▶ Get the latest health news and more

1

Understand your health plan ID card

Always carry your health plan ID card.

Your health plan ID card has key information about you and your coverage. Keep your card with you at all times, so you have it when you need it. When you visit your doctor, hospital or other health care provider, remember to show them the card so they know how to bill for the services they are providing you.

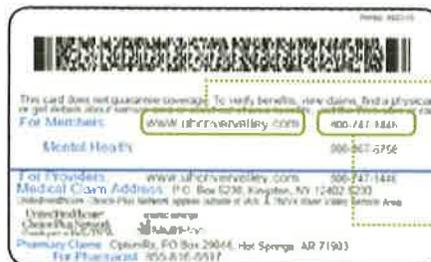


Member ID and Group Number

These numbers are useful when registering on uhcrivervalley.com or calling Customer Care.

Your co-payment amounts (if applicable)

You and your doctor can easily see your co-payment amounts.



Your member website

Use uhcrivervalley.com for all your benefit and wellness information.

Customer Care number

Call the number listed here if you need to speak with a customer care professional.



Get help by phone

Don't have access to a computer, need language assistance or need to talk to a customer care professional? Call the toll-free member phone number listed on your health plan ID card. If you have hearing impairments and would like to use TDD services, you can access the National Relay Center at **1-800-828-1120**.



2

Why it's important to use your member website

uhcrivervalley.com offers members an information resource.

You can find a wide array of health and benefit information, including convenient e-Services that allow you to check personal information such as the status of a claim, Explanation of Benefits, forms and much more.

A. Main navigation

- ▶ **Find a Physician:** Search current listings of network physicians, other health care professionals, hospitals and pharmacies.
- ▶ **Health Plans:** Find overviews of our health plan offerings.
- ▶ **Health Programs:** Select from a menu of programs that includes prevention and disease management initiatives. These programs help our members better understand their conditions, provide self-care tips, and give updates on new information about certain diseases and preventive care.
- ▶ **Member Handbook:** Learn how to use your benefits and the tools available to help you make healthy choices.
- ▶ **Preauthorization:** View certain procedures and medical equipment that require preauthorization.
- ▶ **Pharmacy:** Find important pharmacy documents and information, such as our Prescription Drug List, mail order information and 90- and 100-day supply lists.
- ▶ **Privacy:** View our Privacy Notices and learn how we protect your information.

B. Member e-Services

Access Explanations of Benefits, claim status and other benefit information for you and your family, including co-payment levels, year-to-date deductibles and out-of-pocket expenses.

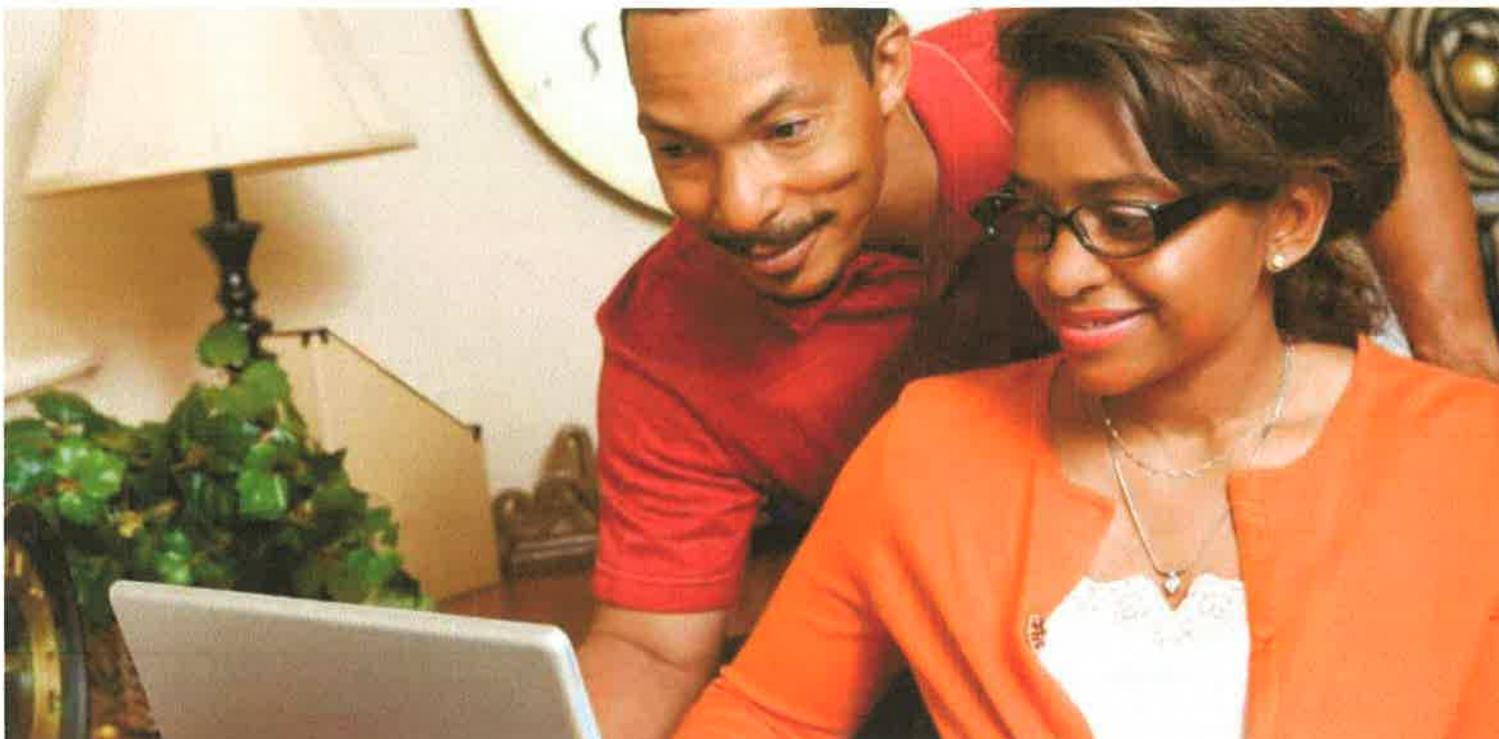
C. Your rights and responsibilities

Review your Bill of Rights, our privacy policy and more.

D. Popular links

Includes links to useful Internet resources on health care quality.

The screenshot shows the uhcrivervalley.com member website. At the top, there's a navigation bar with 'Home', 'My Health', 'My Account', and 'My Plan'. Below this, there's a 'Member Health' section featuring a photo of a doctor and a 'Health Programs' section with a list of programs. There are also sections for 'Member Handbook' and 'Pharmacy'. The page is designed to be user-friendly and informative, providing easy access to various health and benefit resources.



Using Member e-Services

As a member, you can easily access health benefit information at uhcrivervalley.com.

By registering for Member e-Services, you can:

- ▶ Subscribe to receive Explanations of Benefits online and be notified by email when new Explanations of Benefits are available.
- ▶ Search and view your past claims and Explanations of Benefits by date, status of a claim and the amount you owe to the physician or other health care professional.
- ▶ View a summary of your eligibility and benefits, including your required co-payments, deductibles, co-insurance and out-of-pocket maximums.
- ▶ View how much you have paid to date on your deductibles and out-of-pocket maximums for the current year and prior year.
- ▶ View your member handbook and benefit summaries.
- ▶ Order replacement health plan ID cards.
- ▶ View your benefit documents (for members of insured HMO and PPO plans only).
- ▶ Change personal information such as address and phone number.

▶ Questions?

If you have any questions about your benefits or about using Member e-Services, please call the member number on your health plan ID card.

How to sign up for Member e-Services

Visit the Members section of uhcrivervalley.com and click on the Register Now link in the upper right of the page. An easy registration process is all you need to complete to start using Member e-Services.

Note to members of federal programs: If you are a member of any federal program, you will not have access to your personal information via the website. (However, you will be able to access the many other features of our website.)

3

Find a doctor in the network



Your 24-hour nurse

- ▶ Get resources to help manage an illness or injury
- ▶ Help recognize urgent and emergency symptoms
- ▶ Locate doctors and hospitals in your area
- ▶ Help understand medication interactions



You can speak with a 24-hour nurse at any time by calling the number listed on your health plan ID card. Add this number to your cell phone directory for access and answers no matter where you are.

Note: The nurse or coach service cannot diagnose problems or recommend treatment. Please see the disclaimer at the end of this document for additional details.

Find a nearby network doctor or hospital using uhcrivervalley.com

- 1 Login to uhcrivervalley.com.
- 2 Click on Find a Physician to access the Provider Directory
- 3 Choose a Provider Network
- 4 Search for a doctor or other health care professional by name, facility, specialty, location or any of the other available filter options

For hospital care, talk with your doctor to determine which hospital is best for your medical/surgical needs. Your benefit plan may require you or your physician to notify UnitedHealthcare of a hospital admission.

Using the plan's network can save you money

All health care providers, including doctors, specialists, pharmacies and hospitals that are in your plan's network may help save you money. This is because they have agreed to accept negotiated rates for their services. Additionally, if you seek care outside the network, you may be responsible for a larger part of the health care provider's charges and may not receive the lower network rates from health care providers who have agreed to participate in the UnitedHealthcare network including when you are required to obtain approval before seeing an out-of-network provider and which procedures, drugs, medical equipment and other services may require you to receive approval.

Be sure to log in to uhcrivervalley.com or call Customer Care to understand your coverage details, including when you are required to obtain approval before seeing an out-of-network provider and which procedures, drugs, medical equipment and other services may require you to receive approval.

If you do not have access to the Internet or need a printed copy of the Provider Directory, call the Customer Care number on your health plan ID card. A customer care professional will access the online Provider Directory or send you a printed copy. To find out if there are additional requirements regarding the use of providers, physicians or hospitals, refer to your benefit plan documents or call the Customer Care number on your health plan ID card.

If you would like more information on a practitioner's qualifications beyond what the directory provides, call the Customer Care number on your health plan ID card.



If you need care

- ▶ Prepare for your doctor visit
- ▶ Schedule preventive care screenings
- ▶ Where you can get care
- ▶ Saving money

Prepare for your doctor visit

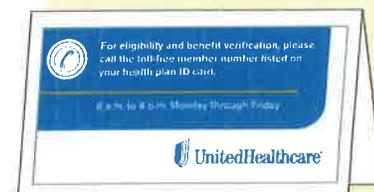
- ▶ **Bring your health plan ID card** and a form of picture ID, such as a driver's license. Show them when you check in at the doctor's office.
- ▶ **Bring a list** of any medications you're taking.
- ▶ **Take any records** from previous visits with you.

When you need lab tests

- ▶ If your doctor orders laboratory (lab) tests, ask them to make sure that a **network lab** is used.
- ▶ Just like using a network doctor, using a network lab will likely save you money.

When you're away

To get care when you are out of town, call the member number on your ID card to find doctors and hospitals where you're located, and to find out if any restrictions apply.



Always be prepared for your doctor visits.

- ▶ Tear out the wallet card on the back cover of this handbook – it contains simple reminders of what to consider before and during a visit.



Schedule your preventive care screenings.

Most UnitedHealthcare plans pay 100 percent of the cost for preventive care when you see a network provider. Check your official benefit plan coverage documents for details.

Visit <http://rivervalley.uhcpreventivecare.com/> to learn more about the age- and gender-appropriate preventive care recommendations that may be right for you.

Where you can get care

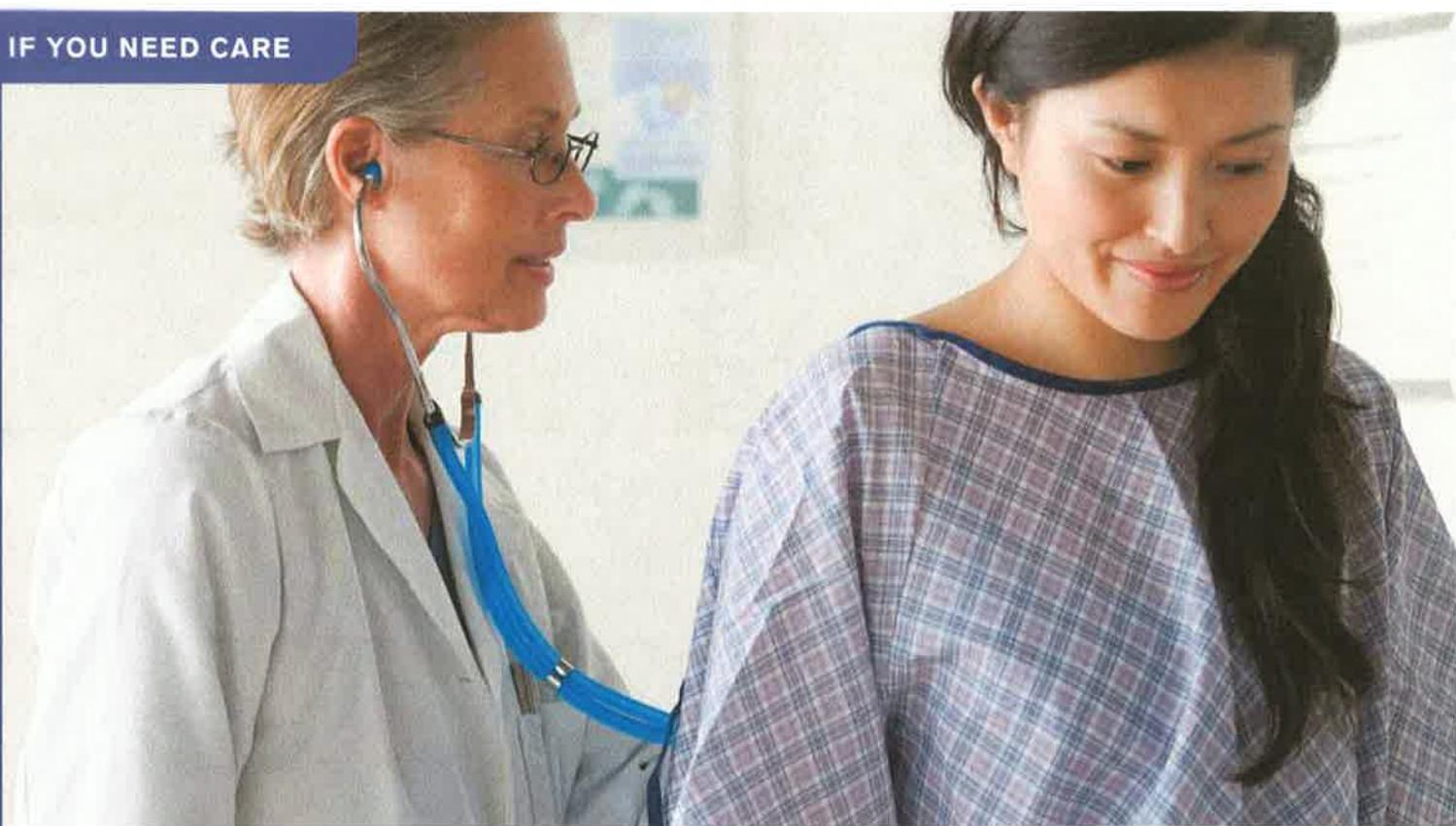
	 Doctor's Office	 Convenience Care Clinic	 Urgent Care Center	 Emergency Room (ER)
WHEN TO GO	You need routine care, preventive exams or treatment for a current health issue. Your doctor knows you best and has your medical records. Your doctor can also help you manage your medications and refer you to a specialist if you need more care.	You can't get to your doctor's office, but your condition is not urgent or an emergency. Convenience care clinics, often located in malls or retail stores, offer services for minor health conditions. Care is normally provided by nurse practitioners or physician assistants.	You may need care quickly, but it is not an emergency, and your regular doctor may not be available. Urgent care centers offer treatment for non-life-threatening injuries or illnesses and are staffed by qualified physicians.	You need immediate treatment of a very serious or critical condition. The ER is for the treatment of life-threatening or very serious conditions that require immediate medical attention. Do not ignore an emergency. If a situation seems life-threatening, take action. Call 911 or your local emergency number right away.
TYPE OF CARE*	<ul style="list-style-type: none"> ▶ Routine checkups ▶ Immunizations ▶ Preventive services ▶ Manage your general health ▶ After hours care: First call your network physician. The physician should provide an answering service or a detailed message that gives instructions for accessing care after hours. 	<ul style="list-style-type: none"> ▶ Common infections (e.g., strep throat) ▶ Minor skin conditions (e.g., poison ivy) ▶ Flu shots ▶ Pregnancy tests ▶ Minor cuts ▶ Earaches 	<ul style="list-style-type: none"> ▶ Sprains ▶ Strains ▶ Minor broken bones (e.g., finger) ▶ Minor infections ▶ Minor burns 	<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 ▶ Difficulty breathing ▶ Major broken bones
COST AND WAIT TIMES**	<ul style="list-style-type: none"> ▶ Often requires a co-payment and/or co-insurance ▶ Normally requires an appointment ▶ Little wait time with scheduled appointment 	<ul style="list-style-type: none"> ▶ Often requires a co-payment and/or co-insurance similar to office visit ▶ Walk-in patients are welcome with no appointments necessary, but wait times can vary 	<ul style="list-style-type: none"> ▶ Often requires a co-payment and/or co-insurance usually higher than an office visit ▶ Walk-in patients are welcome, but waiting periods may be longer, as patients with more urgent needs will be treated first 	<ul style="list-style-type: none"> ▶ Often requires a much higher co-payment and/or co-insurance ▶ Open 24/7, but waiting periods may be longer because patients with life-threatening emergencies will be treated first ▶ If you are in a true medical emergency, and you go to a network or non-network emergency room for care, the same co-payment and co-insurance levels will apply. However, you may incur higher out-of-pocket costs if you go to a non-network provider.

Medical Claim Form – If you receive services from a doctor who is an out-of-network provider***, you may need to fill out a medical claim form. Our network doctors normally take care of claim forms for you.

*This is a sample list of services and may not be all-inclusive.

**Cost and time information represent averages only and are not tied to a specific condition, level of coverage or treatment. Your out-of-pocket costs will vary based on plan design.

***Check your benefit plan documents to see whether out-of-network benefits are available to you.



How to save money on care

Get care in your plan's network

Use the physician search tool on uhcrivervalley.com or call Customer Care using the member number on your health plan ID card to find in-network providers.

Know your coverage

Health plans vary in their coverage of brand-name drugs, emergency care and different types of surgery. Check your benefit plan documents to see what your plan covers and what it doesn't cover. **You should receive your benefit plan documents in one of these three ways:**

- ▶ Online at uhcrivervalley.com. On your Member e-Services home page, select **My Family's Benefits** from the left-hand column.
- ▶ A book from UnitedHealthcare through the mail
- ▶ A brochure or flier from your employer

After you receive care

- ▶ Learn how claims are paid
- ▶ Learn where to go for answers
- ▶ How to submit a claim for covered services

Learn how claims are paid

When you have a doctor visit with a network doctor, he or she will submit the claim for you. The doctor's office may ask you to pay some or all of the bill before you leave. Some network doctors can instantly submit your claim online. UnitedHealthcare will then process the claim to:

- ▶ Make sure the claim is an eligible expense under your plan.
- ▶ Determine whether the claim was for eligible preventive care, so it can be paid 100 percent.
- ▶ Make sure the service is charged at a discounted rate for seeing a network doctor.

Doctors in the network have agreed to charge lower prices. This means your costs will likely be lower compared to seeing a doctor who is not in the network. Plus, when you see a network doctor for your preventive care, you don't have to pay anything out of your pocket. Those services will be covered 100 percent.

If your doctor is not in the network:

You may be asked to pay some or all of the bill before you leave. Also, some doctors not in our network are not able to submit your claim to UnitedHealthcare directly. This means you would have to pay the bill and then submit a medical claim form to UnitedHealthcare.



Medical claim form

If you receive care from an out-of-network provider, you may need to fill out a medical claim form. Our network doctors normally take care of claim forms for you.

How to submit a claim for covered services

The provider will likely be able to file a claim with us if you present your health plan ID card. If the provider is unable to submit a claim to us, you may pay for the charges and be reimbursed (according to your benefit plan). Just send us an itemized bill and keep a copy for your records. The bill should include this information:

- ▶ Date(s) of service
- ▶ Description of services
- ▶ Procedure codes for services
- ▶ Provider name
- ▶ Address and tax identification number

Please mail your claim to the address on the reverse side of your ID card. Be sure to include your name, member ID number and a daytime telephone number where you can be reached. Payment will be made to you based on your benefit plan.

Claims, complaints and appeals

Where to go for answers

How to file a complaint

If you are dissatisfied with services provided by a doctor, hospital or other provider, or with the handling of a claim processing issue by UnitedHealthcare or any other experience with UnitedHealthcare, you may file a complaint by calling the toll-free member phone number on your health plan ID card. UnitedHealthcare will investigate the issue and, in the case of a written complaint, provide a response in writing, including any corrective actions that may be taken to resolve the issue.

How to appeal a coverage decision and other claim denials

If you have questions or concerns about how a benefit coverage decision or claim payment was determined, you may call the member number on your health plan ID card. If the issue cannot be resolved to your satisfaction over the phone and you wish to appeal the determination, ask for the required information and the appropriate address to which you can submit your written appeal request. Appeal requests must be submitted to us within the time frame required under the terms of the benefit plan document.



Programs to help you

- ▶ Health and wellness
- ▶ Online communities

- ▶ Special care
- ▶ Get the latest health news and more

Health and wellness on uhcrivervalley.com

When you want to stay healthy

Healthy Mind Healthy Body®

Sign up today for your personal, monthly e-newsletter, *Healthy Mind Healthy Body*, an award-winning newsletter that provides health and wellness information. Go to uhc.com/myhealthnews.

Pregnancy support

The **Healthy Pregnancy Program** is designed to help expectant mothers find help through all pregnancy stages. It's best to enroll within the first 12 weeks of your pregnancy, but you can enroll through week 34. The program is provided to you at no extra charge, as part of your benefit plan. To enroll, call 1-800-411-7984* or visit www.healthy-pregnancy.com for more information.

When you need special support

Emotional health

Your behavioral health benefit provides confidential support for your everyday challenges and life's more serious problems. Get help, 24/7, for:

- ▶ Alcohol and drug abuse recovery
- ▶ Coping with grief and loss and more
- ▶ Depression, anxiety or stress
- ▶ Relationship difficulties

All your personal records, including medical information, referrals and evaluations, are kept strictly confidential. To find out more, call the number on your health plan ID card or visit www.liveandworkwell.com.

*Please note: access for questions and concerns is available 24/7, however program enrollment is limited to 8 a.m. to 8 p.m. Central time.

Your programs for special care

Getting help if you're in the hospital or have a long-term illness

Care Management

Care Management services make your transition from hospital to home a smooth one, and help you recover. If you need hospital care, our Care Management program is designed to help you with a successful recovery. Our medical directors, case managers and inpatient hospital review nurses work with your doctor to help see that your treatment plan is carried out effectively. And for certain chronic conditions, we may call you to make sure you understand your follow-up care, be a resource for your questions and support your journey home from the hospital.

Disease Management

Disease management services are designed to help you manage chronic health conditions more effectively. Programs and nurse consultations are available to help you and your family deal with certain conditions such as:

- ▶ Asthma
- ▶ Chronic kidney disease
- ▶ Chronic obstructive pulmonary disease (COPD)
- ▶ Coronary artery disease
- ▶ Diabetes
- ▶ Heart failure
- ▶ Infertility
- ▶ Obesity
- ▶ Neonatal care
- ▶ Pregnancy
- ▶ Preventive care
- ▶ Transplants
- ▶ Women's health

For specific information based on your health plan, please call the member number on your ID card to verify your eligibility.

Utilization Management

Utilization management involves coordinating how much care people get. It also determines each patient's level or length of care. The goal is to make sure you get the care you need without wasting resources. Our Clinical Coverage Review (CCR) unit preauthorizes certain procedures, durable medical equipment, home health services, and non-emergency, out-of-network referrals. If you have questions about a preauthorization you can call the member number on your health plan ID card and ask to be connected to a representative in our CCR unit.



To get these services

Call the toll-free, member phone number on your health plan ID card and ask the customer care professional about the service you're interested in.



To learn more online

Visit uhcrivervalley.com for more information about these services.



Language assistance

Notification of Language Assistance Services

We understand that we serve an increasingly diverse membership. More than ever, we believe that it is important to accommodate language preferences, especially when it comes to our members accessing care and services to ensure that language is not an obstacle to receiving proper care. We offer language assistance services to limited English proficiency (LEP) members. Language assistance services are provided free of charge to members. If you need assistance or have any questions about these services, please call the toll-free member phone number on your health plan ID card.

Notificación de los Servicios de Ayuda en Otros Idiomas

Comprendemos que prestamos servicios a una diversidad cada vez mayor de miembros. Más que nunca, creemos que es importante dar cabida a las preferencias de idioma, especialmente cuando se trata del acceso de nuestros miembros a la atención y los servicios, a fin de asegurar que el idioma no sea un obstáculo para recibir la atención apropiada.

Ofrecemos servicios de ayuda en otros idiomas a miembros con competencia limitada en inglés (LEP, por sus siglas en inglés). Los servicios de ayuda en otros idiomas se prestan gratuitamente a los miembros. Si necesita ayuda o tiene alguna pregunta sobre estos servicios, llame al número de teléfono gratuito para el miembro que figura en el reverso de su tarjeta de identificación.

語言協助服務通知

我們瞭解，我們所服務的會員日益多元化。我們認為尊重語言偏好比起以往更為重要，特別為確保會員於獲取照護及服務時，語言不致成為獲得適當照護的障礙。

我們為英語程度有限(LEP)的會員提供語言協助服務。語言協助服務是免費為會員提供。

若您需要協助或對這類服務有任何疑問，請撥打會員卡背面的免付費會員電話號碼。



Online communities

Several online communities are available, depending on your needs and interests. Each site addresses specific health risks and lifestyle concerns.



Source4Women.com

Source4Women® offers the following information and support:

- ▶ Monthly seminars
- ▶ Tips, guidelines, checklists, interactive quizzes and health assessments to help maintain a healthy lifestyle
- ▶ Expert blogs on nutrition, emotional well-being and other important health issues
- ▶ Health topics that may be important to the whole family
- ▶ Delicious, healthy recipes

Connect with us on:

Twitter® at @Source4Women,
Facebook® at Source4WomenUHC,
Pinterest® and Instagram®.



uhcasian.com

At uhcasian.com, you can find games, videos, an interactive wellness information booklet and a searchable health care handbook to help you learn about your benefits and manage your health.



Generations of Wellness®

At uhc.com/generations_of_wellness.htm, you can find a wealth of useful information about African American health, including flyers covering an array of health topics such as diabetes prevention, nutrition, weight management and more. In addition, you can build your own family tree, download healthy recipes, exercise tips and a doctor visit checklist.



uhclatino.com

At uhclatino.com, you can learn more about Hispanic families, and find valuable bilingual (English/Spanish) information including health brochures, podcasts, interactive health modules and a fotonovela. This site is also available from your smartphone.

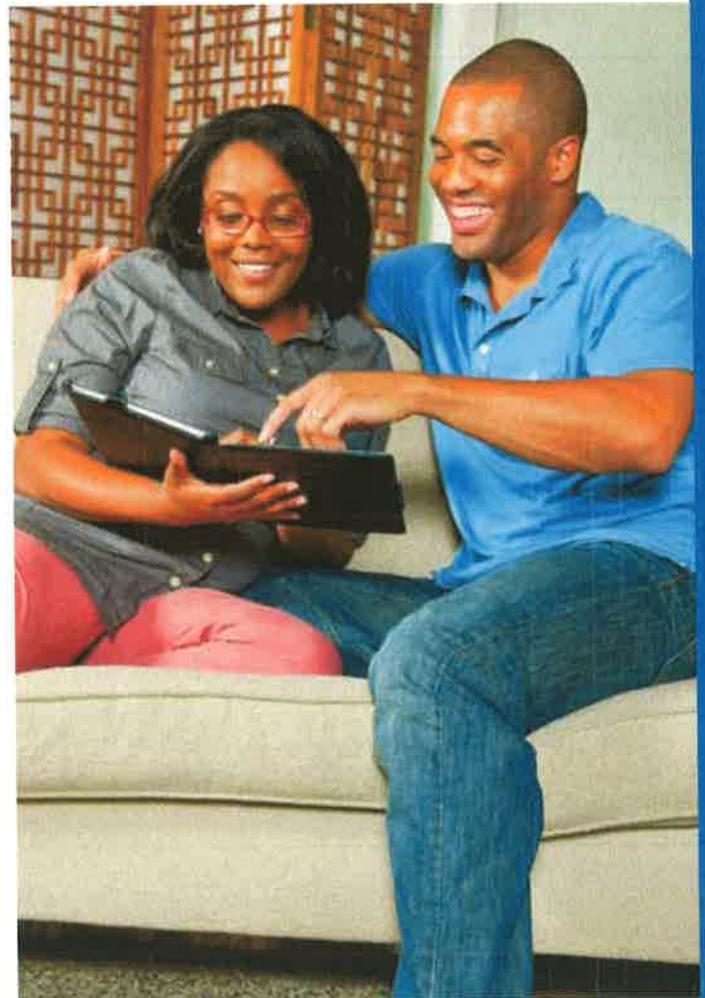
Your UnitedHealthcare Bill of Rights

You have the right to:

- ▶ Be treated with respect and dignity by UnitedHealthcare personnel, network doctors and other health care professionals.
- ▶ Privacy and confidentiality for treatments, tests and procedures you receive. See Notice of Privacy Practices in your benefit plan documents for a description of how UnitedHealthcare protects your personal health information.
- ▶ Voice concerns about the service and care you receive.
- ▶ Register complaints and appeals concerning your health plan and the care provided to you.
- ▶ Receive timely responses to your concerns.
- ▶ Candidly discuss with your doctor the appropriate and medically necessary treatment options for your conditions, regardless of cost or benefit coverage.
- ▶ Access doctors, health care professionals and other health care facilities.
- ▶ Participate in decisions about your care with your doctor and other health care professionals.
- ▶ Receive and make recommendations regarding the organization's rights and responsibilities policies.
- ▶ Receive information about UnitedHealthcare, our services, network doctors and health care professionals.
- ▶ Be informed about, and refuse to participate in, any experimental treatment.
- ▶ Have coverage decisions and claims processed according to regulatory standards, when applicable.
- ▶ Choose an Advance Directive to designate the kind of care you wish to receive should you become unable to express your wishes.

Your Responsibilities as a UnitedHealthcare Member

- ▶ Know and confirm your benefits before receiving treatment.
- ▶ Contact an appropriate health care professional when you have a medical need or concern.
- ▶ Show your health plan ID card before receiving health care services.
- ▶ Pay any necessary co-payment at the time you receive treatment.
- ▶ Use emergency room services only for injuries and illnesses that, in the judgment of a reasonable person, require immediate treatment to avoid jeopardy to life or health.
- ▶ Keep scheduled appointments.
- ▶ Provide information needed for your care.
- ▶ Follow the agreed-upon instructions and guidelines of doctors and health care professionals.
- ▶ Participate in understanding your health problems and developing mutually agreed-upon treatment goals.
- ▶ Notify your employer of any changes in your address or family status.
- ▶ Log in to uhcrivervalley.com or call Customer Care when you have a question about your eligibility, benefits, claims and more.
- ▶ Log in to uhcrivervalley.com or call Customer Care before receiving services to verify that your doctor or health care professional participates in the UnitedHealthcare network.



The health care reform law requires the coverage of certain preventive services, based on your age, gender and other health factors, with no cost-sharing. The preventive care services covered are those preventive services specified in the health care reform law. UnitedHealthcare also covers other routine services, which may require a co-payment, co-insurance or deductible. Always refer to your plan documents for your specific coverage.

Disease Management programs and services may vary on a location-by-location basis and are subject to change with written notice. UnitedHealthcare does not guarantee availability of programs in all service areas and provider participation may vary. Certain items may be excluded from coverage and other requirements or restrictions may apply. If you select a new provider or are assigned to a provider who does not participate in the Disease Management program, your participation in the program will be terminated. Self-Funded or Self-Insured Plans (ASO) covered persons may have an additional premium cost. Please check with your employer.

Source4Women content and materials are for information purposes only, are not intended to be used for diagnosing problems and/or recommending treatment options, and are not a substitute for your doctor's care. Lists of potential treatment options and/or symptoms may not be all inclusive.

Evaluation of New Technologies - UnitedHealthcare's Medical Technology Assessment Committee reviews clinical evidence that impacts the determination of whether new technology and health services will be covered. The Medical Technology Assessment Committee is composed of Medical Directors with diverse specialties and subspecialties from throughout UnitedHealthcare and its affiliated companies, guest subject matter experts when required, and staff from various relevant areas within UnitedHealthcare. The Committee meets monthly to review published clinical evidence, information from government regulatory agencies and nationally accepted clinical position statements for new and existing medical technologies and treatments, to assist UnitedHealthcare in making informed coverage decisions.

The medical centers and programs in UnitedHealthcare's network and within OptumHealthSM Care Solutions are independent contractors that render care and treatment to UnitedHealthcare members. UnitedHealthcare does not provide health services or practice medicine. The medical centers and programs are solely responsible for medical judgments and related treatments. UnitedHealthcare is not liable for any act or omission, including negligence, committed by any independent contracted health care professional, medical center or program.

For informational purposes only. Nurse and EAP services should not be used for emergency or urgent care situations. In an emergency, call 911 or go to the nearest emergency room. The nurse can not diagnose problems or recommend specific treatment. The information provided by the nurse or EAP services are not a substitute for your doctor's care. On topical articles (giving tips and advice to members), the information and therapeutic approaches in this article are provided for informational and/or educational purposes only. They are not meant to be used in place of professional clinical consultations for individual health needs. Certain treatments may not be covered in some benefit plans. Check your health plan regarding your coverage of services.

The Healthy Pregnancy Program follows national practice standards from the Institute for Clinical Systems Improvement. The Healthy Pregnancy Program can not diagnose problems or recommend specific treatment. The information provided is not a substitute for your doctor's care. Twitter is a registered trademark of Twitter, Inc. Facebook is a registered trademark of Facebook Inc. Pinterest is a registered trademark of Pinterest, Inc. Instagram is a registered trademark of Instagram, LLC.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Health Plan coverage provided by or through a UnitedHealthcare company.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Health Plan coverage provided by or through a UnitedHealthcare company.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Health Plan coverage provided by or through a UnitedHealthcare company.

Tips to make your doctor's visit worthwhile



Before your appointment:

- 1** Make a list of all questions you have for your doctor, nurse or pharmacist.
- 2** Write down medications you are currently taking, including prescriptions, over-the-counter medicines and herbal supplements.
- 3** Plan to bring a family member or friend to your visit if you have a hard time remembering what your doctor tells you.

During your appointment:

- 1** Tell your doctor if a family member has been diagnosed with a serious disease or condition. Also mention if you have or will be traveling outside the country.
- 2** Ask your doctor at every visit to send any laboratory tests to a network facility.
- 3** Before you leave, make sure you can read and/or understand your doctor's or pharmacist's instructions. If you don't, it's okay to ask them to explain until you understand.