## Review

The chart below shows an overview of your current plan, your renewal plan and the associated premiums.



Your current benefit design options are no longer available together in a Multi-Choice package. Your replacement options are included in the new Multi-Choice package, offering you the same flexibility, choice and affordability that you are enjoying today.

## Here is your renewal plan.

	Current medical plan  Heritage_CIA19 / CIA11  Split Copay, BJ-IQ / RX300A <sup>1</sup> G		Renewal medical plan CIA NATLPKG2020 / CIA12 Premier, BS-EI / RX309A <sup>1</sup> S	
Metallic Level				
	Network single/family	Non-network single/family	Network single/family	Non-network single/family
Plan deductibles	\$3,500/\$7,000	\$10,500/\$21,000	\$3,850/\$7,700	\$7,500/\$15,000
Out-of-pocket max	\$6,250/\$12,500	\$18,750/\$37,500	\$7,500/\$15,000	\$15,000/\$30,000
Office copays (PCP/Spec)	\$20/\$40	NA	NA/\$75	NA
Coinsurance	80%	60%	100%	50%
Legal Entity/License	нмо		нмо	
Med/Rx Ded Combined	N		N	
Pharmacy	\$10/\$35/\$70/\$200		\$5/\$50/\$100/\$250 \$250 DED	
Enrolled Employees	8		8	
HSA/HRA Contribution				
Monthly medical premium	\$7,763.08		\$7,799.25 Change from current: 0.5%	

Metallic Levels: P = Platinum, G = Gold, S = Silver, B = Bronze

- Important: If multiple policies are sold to one customer, we require the policy year or calendar year basis selection be the same for each sold policy.

  If you choose to add or change an existing HRA plan, you must choose from the list of United Healthcare HRA-eligible medical plans as shown to you by your broker or agent. If you had the party Administrator for your HRA, please note that HRA plans administered by other insurers or TPAs must comply with UnitedHealthcare HRA design standards.

  This premium may include state and federal taxes and fees.

  Premium rates and/or product forms included herein are subject to approval by regulators. If the rates or product forms offered herein are subsequently modified by regulators we will immediately advise you of the change in plan design and retroactively adjust premium in subsequent billings, in accordance with applicable law.

  Starting with 2014 effective dates, all pharmacy plans include an ancillary charge (also known as a generic pharmacy program). This type of pharmacy program includes out of pocket expenses when a member fills a brand name or higher tier generic prescription but there is a chemically equivalent lower tier brand or generic available.

  Current and renewal medical rates reflect the participant's age on the renewal date and may not be the same as the rates billed in the current billing.

  This medical plan is available with either calendar year or policy year deductibles and out of pocket maximums.

  Renewal Assumptions:

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  The monthly cost noted above is based upon the coverage inforce at the time the renewal was calculated. Please refer to Appendix A included in this package.

  Actual billed premium as of your renewal date may differ from the amounts reflected in this package.

  Renewal of your employer plan is contingent upon meeting United Healthcare's minimum participation requirements.

  Plan design and corresponding premium rates offered herein represent a coverage option that is consistent with your current group size (based on most recent census or survey information) and closely matches your current coverage. Additional coverage options may be available to you.

  Upon the renewal of your employer plan, the Certificate of Coverage or Summary Plan Description, and other documents, notices and communications regarding the plan(s) selected no be transmitted electronically to you (employer group) and the group employees. The employer group may withdraw their consent at any time or request a document in a paper or non-felectronic form.
- Information on alternate benefit plans is summarized for ease of review. It is not intended to be a statement of benefits, nor does it guarantee coverage. The Certificate of Coverage provides the legal description of coverage and is available for your review upon request. UHC Choice plans will cover only the employees within the defined UnitedHealthcare service area. The rates are based upon the employer's primary location. Other locations will require alternate plan designs and rates.