UnitedHealthcare

Employer Advantage

Medical Product Portfolio
1/1/2023

2023 Plan Code	Deductible				Coinsurance		Out of Pocket Maximum				Member Copay/ Coinsurance						OP Surg [1]	IP Hosp[1]	Rx Code
	Network		Non-Network		Network	Non-Network	Network		Non-Network		Virtual Visit	PCP[2]	SPEC	UC	ER	MRI, CT & PET[1]			
	Single	Family	Single	Family			Single	Family	Single	Family									
Choice Plus																			
BU9Q	$500	$1,000	$1,500	$3,000	80%	50%	$4,000	$8,000	$8,000	$16,000	$0	$30	$60	$50	$300	20%	20%	20%	2V
AQIO	$1,000	$2,000	$3,000	$6,000	80%	50%	$4,000	$8,000	$8,000	$16,000	$20	$20	$40	$75	$200	20%	20%	20%	2V
BU79	$1,000	$2,000	$3,000	$6,000	100%	70%	$4,000	$8,000	$8,000	$16,000	$0	$25	$50	$50	$300	0%	0%	0%	2V
CBVQ	$1,500	$3,000	$4,500	$9,000	80%	50%	$5,500	$11,000	$8,000	$16,000	$0	$25	$50	$50	$500	20%	20%	20%	2V
CBVR	$2,000	$4,000	$6,000	$12,000	80%	50%	$5,500	$11,000	$8,000	$16,000	$0	$25	$50	$50	$500	20%	20%	20%	2V
BU8R	$2,500	$5,000	$5,000	$10,000	100%	70%	$3,500	$7,000	$7,000	$14,000	$0	$20	$40	$50	$250	$400	$250/POD/0%	$500/POD/0%	2V
BVBD	$3,000	$6,000	$9,000	$18,000	80%	50%	$6,250	$12,500	$12,500	$25,000	$0	$30	$60	$50	$300	20%	20%	20%	2V
BU8P	$3,000	$6,000	$9,000	$18,000	100%	70%	$6,250	$12,500	$12,500	$25,000	$0	$25	$70	$50	$300	0%	0%	0%	2V
BU9X	$5,000	$10,000	$10,000	$20,000	80%	50%	$6,250	$12,500	$12,500	$25,000	$0	$35	$70	$50	20%[1]	20%	20%	20%	2V
Flex Point																			
BU8K	$2,000	$4,000	$6,000	$12,000	80%	50%	$6,250	$12,500	$12,500	$25,000	$0	$35[3]	$70[3]	$50[3]	20%[1]	20%	20%	20%	2V
BU8N	$5,000	$10,000	$10,000	$20,000	80%	50%	$6,250	$12,500	$12,500	$25,000	$0	$35[3]	$70[3]	$50[3]	20%[1]	20%	20%	20%	2V
Choice Plus H.S.A.																			
JUW	$3,000	$6,000	$9,000	$18,000	100%	70%	$6,250	$12,500	$12,500	$25,000	$0	$30[1]	$60[1]	$75[1]	$300[1]	0%	0%	0%	2V-H.S.A
JUX	$5,000	$10,000	$10,000	$20,000	100%	70%	$6,250	$12,500	$12,500	$25,000	$0	$30[1]	$60[1]	$75[1]	$300[1]	0%	0%	0%	2V-H.S.A
BCNC	$6,250	$12,500	$12,500	$25,000	100%	70%	$6,650	$13,300	$14,500	$29,000	$0[1]	$35[1]	$70[1]	$100[1]	$300[1]	0%	0%	0%	2V-H.S.A
Primary Advantage																			
BKNC	$2,000	$4,000	$5,000	$10,000	80%	50%	$6,500	$13,000	$10,000	$20,000	$0	$0	$100	$50	$250/POD/20%	20%	20%	20%	455
BKNG	$2,000	$4,000	$5,000	$10,000	50%	50%	$6,500	$13,000	$10,000	$20,000	$0	$0	$100	$50	$250/POD/50%	50%	50%	50%	455
BKND	$3,000	$6,000	$10,000	$20,000	80%	50%	$6,500	$13,000	$20,000	$40,000	$0	$0	$100	$50	$250/POD/20%	20%	20%	20%	455
BKNE	$5,000	$10,000	$10,000	$20,000	80%	50%	$6,500	$13,000	$20,000	$40,000	$0	$0	$100	$50	$250/POD/20%	20%	20%	20%	455
Non- Differential PPO																			
MZX	$500	$1,000	$500	$1,000	80%	80%	$4,000	$8,000	$4,000	$8,000	20%[1]	20%[1]	20%[1]	20%[1]	20%[1]	20%	20%	20%	2V

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Employer Advantage

Pharmacy Plans

Rx Plan Code	Member Copay / Plan Coinsurance				Deductible		Mail Service Ratio (x Retail)
	Tier 1	Tier 2	Tier 3	Tier 4	Single	Family	
Separate Medical/Rx Deductible							
2V	$10	$35	$60	NA	$0.00	$0.00	2.5 X for MO
2VH.S.A	$10	$35	$60	NA	See Medical	See Medical	2.5 X for MO
455	$5	$50	$100	$250	$250 (5)	$500 (5)	2.5 X for MO

(1)After Deductible has been met.

(2) Dependents under 19 have a $0 PCP copay

(3) Copay applies for first 4 office visits /year then 20% co insurance after deductible has been met for all other visits in the same year (PCP and Spec visits combined)

(4) Copay applies for first 4 office visits /year then 20% co insurance after deductible has been met for all other visits in the same year

(5) Deductible does not apply to Tier 1 and Tier 2

Please Note: The information in this grid is provided for informational purposes only and is not intended for use as a contract. For a complete listing of coverage and exclusions please refer to the Certificate of Coverage or talk to your UnitedHealthcare representative for additional details that could impact the benefits.
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.

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