Indiana



Make the most of your health plan

Getting Started Guide

Look inside for:

- Getting help
- Benefits
- Extras
- Getting care





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Simple for you. That's our promise.

Thank you for joining UnitedHealthcare Community Plan. We want to be sure you have all the information you need to make this the best health care experience possible. This guide will walk you through the important steps for getting started.

Do you have your member ID card?

You will need this card when you get health care services.



This is your UnitedHealthcare Community Plan member ID card. If you have not received this card, please call us at **1-800-832-4643**, TTY **711**.

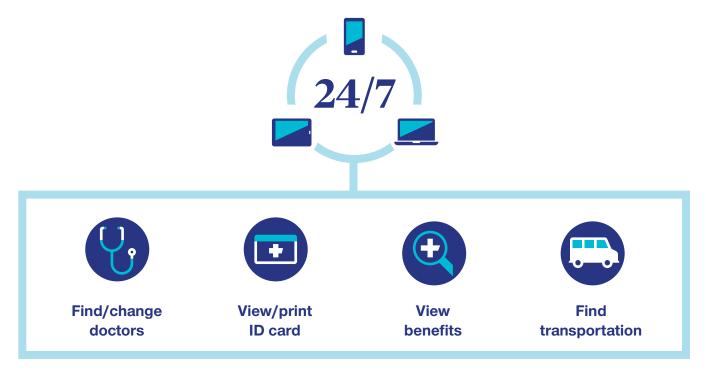
Health Needs Survey

One of the easiest ways to connect with us is to complete your Health Needs Survey. If you take the survey within your first 90 days as a new member, you also earn a \$35 gift card. Here are the ways to complete your survey:

- Online at myuhc.com/ CommunityPlan
- Paper survey, sent to you along with your member ID card
- Over the phone with Member Services at 1-800-832-4643, TTY 711

Get connected

Sign up for 24/7 access to your health plan at **myuhc.com/CommunityPlan.** It's fast, easy and secure. Use your computer, tablet or mobile phone.



Need more help? Call 1-800-832-4643, TTY **711,** 8 a.m.–8 p.m. EST, Monday–Friday. Member Services can answer questions about your coverage, help find a doctor or help with an appointment.

Tell us what you think

Each year, we conduct surveys to gather information from you about the experience you have with UnitedHealthcare. We want to know how happy you are with UnitedHealthcare Community Plan. Should you get a request to complete a survey, please complete and send back. Your answers will be private and your opinion helps us make the health plan better.



Watch our Getting Started videos

They're less than 2 minutes long, and full of helpful information. Go to **UHCWelcomelN.com**.









Your benefits

There are no costs to you for most benefits and services. See your member handbook or visit **myuhc.com/CommunityPlan** for full details.

Medical benefit		Your in-network cost
Doctor visit	s Annual wellness visits Well-child visits (HealthCheck) Primary medical provider (PMP) visits Specialists visits	\$0
Common se	Ervices Emergency and urgent care Hospital services Immunizations Pregnancy care	\$0
Other cover	red services Care management Diabetes supplies Vision services Nursing home services Dental services	\$0

Mental health and substance use treatment

As our member, you are covered for mental health and substance use treatment. This includes services for evaluations, individual and group therapy sessions, as well as substance use screenings and treatments. Talk with your PMP if you think you might need these services. They can help you decide the right options for you.

Your member handbook outlines all your mental health and substance use benefits. You can also call a member advocate at **1-800-832-4643**, TTY **711**.

Transportation

Get unlimited rides to and from medical appointments, the food pantry and more. You may qualify for a free bus pass or friends and family reimbursement. Call Member Services at **1-800-832-4643**, TTY **711**, at least 48 hours in advance of your appointment.

Dental care

- Two exams and cleanings per year
- Bitewing X-ray once every 12 months and 1 complete set of X-rays every 3 years
- Minor restorations such as fillings.
- Periodontal care, which includes deep cleanings and surgical treatment for gum disease
- Partial, full dentures, and repairs to partials and dentures
- Sedation and nitrous oxide, if medically necessary

Vision services

- Exams—1 per year for members age 20 and younger; 1 every 2 years for members age 21 and older, unless more frequent care is medically necessary
- Glasses (including frames and lenses)—1 pair per year for members age 20 and younger; 1 pair per 5 years for members age 21 and older
- Enhanced vision services—optional contact lenses for members when medically necessary

Prescriptions

Your plan covers a long list of prescription medicines. You may have a \$3 copay. See your member handbook for information about coverage for generic and brand-name drugs.

For certain prescriptions, you may need prior approval. Prior approval means we need to give permission before you get a specific drug. We'll let you know if you need prior approval from us for any of your prescriptions.

If you have a prescription to fill, be sure to:

- Check that your prescribed drug is on the preferred drug list (PDL), posted on our website at myuhc.com/CommunityPlan. This list will tell you which drugs are covered by your plan.
- Fill your prescriptions at one of the pharmacies in our network. You can find a list of these pharmacies on our website. Show your member ID card at the pharmacy when you get your prescriptions filled. This confirms your eligibility and helps the pharmacy in processing your claim.
- If you have questions about your prescription drugs, ask your PMP. Or call Member Services at the number on the back of your member ID card.









Extras from UnitedHealthcare

Be sure to make use of all the extras you get as a UnitedHealthcare member.

Member Services Center

Every Hoosier Care Connect member is assigned to a Member Service Navigator (Navigator). Your Navigator is here to help. They will answer your questions and work to get you connected to needed services and programs.

Get rewarded for staying healthy

You can earn rewards for getting your needed preventive care services, such as annual dental or well visits.

One Pass fitness program

We offer free access to many local gyms and online fitness sites. We can also send you an at home fitness kit.

Internet and phone access

We support access to the Affordable Connectivity Program to get you connected with low-cost internet and devices.

Healthy First Steps

Pregnant women and new mothers get extra help to stay healthy and have a healthy baby. Members earn great rewards for completing checkups on time during and after pregnancy. It includes prenatal, postpartum and well-child care (up to 15 months).

Members can join at **UHCHealthyFirstSteps.com** or call **1-800-599-5985** for more information.



See your member handbook

You'll find more details about your covered benefits in your member handbook. You can always view it online at **myuhc.com/CommunityPlan.**

Getting care



Your primary medical provider

We call the main doctor you see a primary medical provider, or PMP. When you see the same PMP over time, it's easier to develop a relationship with them. Each family member can have their own PMP, or you may all choose to see the same person. Your PMP is available to assist you 24 hours a day, 7 days a week for:

- Routine care, including yearly checkups
- Coordinating your care with a specialist
- Treatment for colds and flu
- Other health concerns



Behavioral health services

You can get a wide range of treatments and services for mental health and drug and alcohol misuse. To find a behavioral health provider, visit **myuhc.com/communityplan** or call Member Services at **1-800-832-4643**, TTY **711**.



Change your PMP at any time

It's important to have a PMP you like and trust. You can change your PMP at any time online or simply by calling us. If you like, we can recommend someone for you.



Schedule a wellness exam soon

A yearly wellness exam with your PMP is important for good health. These visits are fully covered. Schedule your visit within the first 30 days of joining your health plan.



Need help finding a PMP?

Call us at 1-800-832-4643, TTY 711.









Guide to getting care

NurseLine

NurseLine gives you 24/7 telephone access to experienced registered nurses. They can give you information, support and education for any health-related question or concern. Interpreter services are available. Call **1-866-801-4407**, TTY **711**.

Your primary medical provider (PMP)

This is the person you should see for most of your care. This includes checkups, treatments, vaccinations, minor injuries and other health concerns.

Urgent care clinics

Network urgent care clinics are a good option if your PMP is not available, and you have an illness or injury that needs quick attention. This could include sprains or strains, minor cuts needing stitches, sore throat, minor burns, rash, fever or infection of any kind.

Doctor Chat

You can talk to a doctor online anytime, day or night. Visit **myuhc.com/communityplan** to learn more.

Emergency care

This level of care is for chest pain, bleeding that won't stop, trouble breathing, severe allergic rashes or the feeling that you might hurt someone or yourself. If it's an emergency, **call 911 or go to the nearest emergency room.**

We speak your language

If you speak a language other than English, we can provide translated printed materials. Or we can provide a telephonic interpreter to help translate materials sent to you. To arrange for an interpreter, translation services, call Member Services at **1-800-832-4643**, TTY **711**.

Alternate formats

You can request the materials we send you in other formats. This includes braille, large print or audio files. Call Member Services to share your preferred format.

