

Care Coordination works with enrollees and physicians to close gaps in care. UnitedHealthcare monitors continuity of care from the first medical services through home health care, rehabilitation and follow-up appointments. That may mean making sure enrollees understand the purpose of their prescriptions, knowing when to take the prescriptions, and identifying community resources available.

Emergency room and urgent care services

UnitedHealthcare enrollees have a lot of options when it comes to deciding where to get medical care such as primary physicians, urgent care centers and hospital emergency rooms. We encourage you to contact your primary physician if you aren't certain where to get the medical care you need. As your partner in your health care, your primary physician is familiar with your medical history and can help you manage your medical care. You can reach your physician or a covering physician by phone, pager or answering service 24 hours a day, seven days a week.

Emergency services are eligible for coverage under your certificate of coverage or summary plan description and will be covered regardless of whether the hospital is in our network. If you receive services in a hospital emergency room, you are responsible for paying the emergency room co-payment as specified in your certificate of coverage or summary plan description.

An emergency is defined as a medical condition that manifests itself by such acute symptoms, including severe pain, that a prudent layperson with an average knowledge of health and medicine could reasonably expect that the absence of immediate medical attention would result in any of the following:

- placing the health of the individual or, with respect to a pregnant woman, the health of the woman or her unborn child in serious jeopardy
- serious impairment to bodily functions
- serious dysfunction of any bodily organ or part

Please refer to your certificate of coverage.

A visit at an urgent care center located at a hospital will be considered an emergency room visit, for which you will be required to pay an emergency room co-payment, unless the urgent care center is listed as a contracted urgent care center in this directory. When you visit a contracted urgent care center, you will be responsible for paying the urgent care co-payment specified in your certificate of coverage. Routine care, such as a physical, should be provided at your doctor's office.

Preventive health guidelines for children, adolescents and adults

NOTE: THE FOLLOWING GUIDELINES DO NOT LIMIT OR EXTEND COVERAGE. FOR INFORMATION ON COVERED BENEFITS, PLEASE REFER TO YOUR CERTIFICATE OF COVERAGE.

UnitedHealthcare has adopted the following preventive care guidelines based on the recommendations of the U.S. Preventive Services Task Force.

The guidelines don't limit coverage and aren't official standards of care. Enrollees with symptoms or at high risk for disease may need additional services or more frequent interventions. Talk to your physician to determine your personal medical needs.

Getting regular physicals with appropriate preventive health screenings can help you prevent illness when possible and detect problems early when they are easiest to treat. Additional preventive care information can be found on our Web site, www.uhc.com/healthwellbeing/prevent.html.

Young Childhood: Birth to 10 years

Screenings

- T4 and/or TSH: between day 2 and 6, but in all cases before discharge from hospital
- Phenylalanine level (PKU): at birth
- Height and weight: regularly throughout infancy and childhood
- Blood pressure: periodically throughout childhood; please discuss the frequency your child's physician
- Vision: once between 3 and 4 years

Immunizations

- Diphtheria/tetanus/pertussis (DTP) or diphtheria/tetanus/acellular pertussis (DTaP) vaccination: five doses (once at 2 months, 4 months and 6 months; once between the ages of 15 and 18 months; once between the ages of 4 and 6 years)
- Polio vaccination: four doses (once at 2 months, 4 months, between the ages of 6 and 18 months, and between the ages of 4 to 6 years)
- Hib vaccination: three or four doses: once at 2 months, 4 months, 6 months, and between 12 to 15 months
- Hepatitis B vaccination: three doses: birth, 1 to 2 months and between 6 to 18 months
- Measles/mumps/rubella (MMR): two doses: once between the ages of 12 and 15 months, and once between the ages of 4 and 6 years.
- Varicella vaccination: one dose at 12 to 18 months, if not previously immunized and lack of chicken pox history.

Dental Health

- Exam for baby bottle tooth decay
- Regular dental visits
- Floss, brush and fluoride

Adolescents and Young Adults: 11 to 24 years

Screenings

- Height and weight: frequency should be discussed with your physician
- Blood pressure: frequency should be discussed with your physician
- Pap test: every one to three years beginning at the onset of sexual activity or at age 18, whichever is earlier
- Chlamydia: recommended for all sexually active females; frequency should be discussed with your physician
- Rubella serology or vaccination history: recommended for all females of child-bearing age

Immunizations

- Tetanus diphtheria (Td): boosters between ages of 11 and 16 years; afterward frequency should be discussed with your physician
- Hepatitis B: If not previously immunized one dose at current (next) visit, one month later and six months later
- Measles/mumps/rubella: immunization between ages of 11 and 12 years, if second dose was not received
- Varicella: between ages of 11 and 23 years if susceptible to chicken pox
- Rubella: administered after age 12 - females who are not pregnant

Dental Health

- Regular dental visits
- Floss, brush and fluoride

Adults: 25 to 64 years

Screenings

- Height and weight: frequency should be discussed with your physician
- Blood pressure: frequency should be discussed with your physician
- Total blood cholesterol: males between 35 and 64 years; females between 45 and 64 years; frequency should be discussed with your physician
- Fecal occult blood test: beginning at age 50; frequency should be discussed with your physician
- Sigmoidoscopy: every three to five years beginning at age 50
- Femal screenings:
 - Clinical breast exam: females between ages 50 and 69 years; annually
 - Mammogram: females between ages 50 and 69 years; every one to two years (effective 01/01/1998, Medicare requires coverage for annual mammogram for all women age 40 or older)
 - Pap test: sexually active females who haven't had a hysterectomy; every one to three years

Immunizations

- Rubella serology or vaccination history: recommended once for all females of child-bearing age
- Tetanus diphtheria (Td): booster once every 10 years or as recommended by your physician

Dental Health

- Regular dental visits
- Floss, brush and fluoride

Age 65+

Screenings

- Height and weight: frequency should be discussed with your physician

- Blood pressure: frequency should be discussed with your physician
- Fecal occult blood test: frequency should be discussed with your physician
- Sigmoidoscopy: every three to five years
- Vision: annually
- Hearing: frequency should be discussed with your physician
- Female screenings:
 - Pap test: every one to three years, sexually active females who have not had a hysterectomy. Consider discontinuing if previous regular screenings were normal
 - Clinical breast exam: females between 65 and 69 years; annually
 - Mammogram: females between 65 and 69 years of age every one to two years (effective 01/01/1998, Medicare requires coverage for annual mammograms for all women age 40 or older)

Immunizations

- Tetanus diphtheria (Td): booster once every 10 years
- Pneumococcal: administered once to all whose immune systems have not been compromised
- Influenza: annually

Dental Health

- Regular dental visits
- Floss, brush and fluoride

Enrollee rights and responsibilities

Following are your rights and responsibilities pertaining to UnitedHealthcare of Ohio Inc. or UnitedHealthcare Services Inc. If you have questions, please refer to your certificate of coverage/certificate of insurance/summary plan description or call Customer Service at the number listed on your enrollee identification card.

You have the right to:

- receive information about UnitedHealthcare, its services, contracted physicians and providers, and enrollee rights and responsibilities
- be treated with respect and in a manner that recognizes the need for personal privacy and dignity
- receive assistance in a prompt, courteous and responsible manner
- be provided with information about the UnitedHealthcare network of physicians and providers
- be informed by your physician or other medical care provider of your diagnosis, prognosis and plan of treatment in terms you understand
- be informed by your physician or other medical care provider about any treatment you may receive regardless of cost or benefit coverage