

# Intelli-Series<sup>SM</sup>

The smarter choice.

**New health care plans designed exclusively for Western Pennsylvania. UnitedHealthcare's Intelli-Series includes three types of plans:**

## **Choice**

Access to network physicians and hospitals only.  
No referrals for specialist care required.

## **Choice Plus**

Access to network and non-network physicians and hospitals.  
No referrals for specialist care required.

## **Consumer-Driven**

Access to network and non-network physicians and hospitals. No referrals for specialist care required. Combined with a Definity<sup>SM</sup> Health Savings Account or Health Reimbursement Account to provide long-term cost management to employers, while providing choice and incentives to members for more engagement in their health care.

## **All of the plans offer:**

- No referrals for specialist care
- No primary care physician selection required
- Preventive coverage for HRA and HSA plans
- Access to thousands of local and national physicians, facilities and health care professionals

# Intelli-Series<sup>SM</sup> Product Portfolio

For 2 or more employees

Plan Category & Code	Copayment				Tier 1–Network			Tier 2–Network			Tier 3–Non-Network			Medical Deductible Type
	PCP/SPEC	URG CARE	ER	Single/Family Deduct	Co-insurance	Single/Family OOPM	Single/Family Deduct	Co-insurance	Single/Family OOPM	Single/Family Deduct	Co-insurance	Single/Family OOPM		
Insurance Choice	5P-D	\$10/\$20	\$35	\$100	N/A	100%	N/A	N/A	80%	\$3,000/\$6,000	N/A	N/A	N/A	Emb
	5P-E	\$30/\$30	\$35	\$100	N/A	100%	N/A	N/A	80%	\$3,000/\$6,000	N/A	N/A	N/A	Emb
	5P-A	\$30/\$30	\$35	\$100	\$250/\$500	100%	\$250/\$500	\$500/\$1,000	80%	\$3,250/\$6,500	N/A	N/A	N/A	Emb
	5P-B	\$30/\$30	\$35	\$100	\$500/\$1,000	100%	\$500/\$1,000	\$1,000/\$2,000	80%	\$3,500/\$7,000	N/A	N/A	N/A	Emb
	5P-C	\$30/\$30	\$50	\$100	\$1,000/\$2,000	100%	\$1,000/\$2,000	\$2,000/\$4,000	80%	\$4,500/\$9,000	N/A	N/A	N/A	Emb
Insurance Choice Plus	6P-D	\$10/\$20	\$35	\$100	N/A	100%	N/A	N/A	80%	\$3,000/\$6,000	\$750/\$1500	60%	\$5,000/\$10,000	Emb
	6P-E	\$30/\$30	\$35	\$100	N/A	100%	N/A	N/A	80%	\$3,000/\$6,000	\$1,000/\$2,000	60%	\$6,000/\$12,000	Emb
	6P-A	\$30/\$30	\$35	\$100	\$250/\$500	100%	\$250/\$500	\$500/\$1,000	80%	\$3,250/\$6,500	\$1,500/\$3,000	60%	\$6,500/\$13,000	Emb
	6P-B	\$30/\$30	\$35	\$100	\$500/\$1,000	100%	\$500/\$1,000	\$1,000/\$2,000	80%	\$3,500/\$7,000	\$2,000/\$4,000	60%	\$7,500/\$15,000	Emb
	6P-C	\$30/\$30	\$50	\$100	\$1,000/\$2,000	100%	\$1,000/\$2,000	\$2,000/\$4,000	80%	\$4,500/\$9,000	\$3,000/\$6,000	60%	\$9,000/\$18,000	Emb
Consumer-HRA	6P-F	N/A	N/A	N/A	\$1,500/\$3,000	100%	\$1,500/\$3,000	\$1,500/\$3,000	80%	\$4,500/\$9,000	\$1,500/\$3,000	60%	\$7,500/\$15,000	Non-Emb
Consumer-HSA	8P-A	N/A	N/A	N/A	\$1,250/\$2,500	100%	\$1,250/\$2,500	\$1,250/\$2,500	80%	\$3,750/\$7,500	\$1,250/\$2,500	60%	\$6,250/\$12,500	Non-Emb
	8P-D	N/A	N/A	N/A	\$2,000/\$4,000	100%	\$2,000/\$4,000	\$2,000/\$4,000	80%	\$6,000/\$12,000	\$2,000/\$4,000	60%	\$10,000/\$20,000	Non-Emb

For 100 or more employees

Plan Category & Code	Copayment			Tier 1 - Network			Tier 2 - Network			Tier 3 - Non-Network			Medical Deductible Type	
	PCP	URG CARE	ER	Single/Family Deduct	Co-insurance	Single/Family OOPM	Single/Family Deduct	Co-insurance	Single/Family OOPM	Single/Family Deduct	Co-insurance	Single/Family OOPM		
Consumer-HSA	8P-B	N/A	N/A	N/A	\$2,850/\$5,700	100%	\$2,850/\$5,700	\$2,850/\$5,700	80%	\$5,500/\$11,000	\$2,850/\$5,700	60%	\$14,250/\$28,500	Non-Emb

Hospital charges are limited to contracted fee schedule for Tier 1 and Tier 2.

Deductibles do not cross-apply between tiers for Choice and Choice Plus plans.

Deductibles cross-apply between Tier 1 and Tier 2 on Consumer HSA and HRA plans.

Consumer HRA and HSA plans have a combined medical and pharmacy deductible for Tier 1 and Tier 2.

All plans available Calendar Year or Policy Year.

Family Deductible is two times the individual.

Deductibles are included in the OOPM for all plans.

Non-Embedded Deductible plans, the family deductible must be satisfied before plan benefits are paid for any one member. Embedded Deductible, a member can satisfy the individual deductible before the plan benefits apply.

In 2008, maximum HSA contribution is \$2,900 single/\$5,800 family. These amounts are subject to change by IRS and do not include catch-up contributions for subscribers age 55 and over.

The Definity<sup>SM</sup> Health Service Savings Account (HSA) high deductible health plan (HDHP) is designed to comply with IRS requirements so eligible enrollees may open a Health Savings Account with a bank of their choice or through OptumHealth Bank, Member of FDIC. "Definity HSA" refers generally to the Definity HSA product, which includes a HDHP, although at times "Definity HSA" may refer only and specifically to the Definity Health Savings Account, and not to the associated HDHP.

UnitedHealthcare's Definity Health Reimbursement Account, or HRA, combines the flexibility of a medical benefit plan with an employer-funded reimbursement account.

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. Different UnitedHealthcare plans may have varying approaches to whether pharmacy costs are included or excluded from the medical deductible, whether preventive services are covered at 100% and other benefit details.

Insurance coverage provided by or through United HealthCare Insurance Company or its affiliates. Administrative services provided by United HealthCare Insurance Company, United HealthCare Insurance Company, United HealthCare Services, Inc. or their Affiliates.

