

There's more to explore

2027 State Health Benefit Plan

United Healthcare®

SHBP
State Health Benefit Plan
A Division of the Georgia Department of Community Health

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Taking you in healthy directions

Like Georgia's mountains and plains, your health has peaks and valleys. At UnitedHealthcare, we're here to help you navigate your health plan. For more than 24 years, we've provided State Health Benefit Plan (SHBP) options designed with your best health in mind.

What's inside this brochure:

- **Plan summary –** Provides information about your plan options, UnitedHealthcare network providers, clinical and disease management programs, resources and support to help you make an informed 2027 enrollment decision
- **Benefit grid –** Provides detailed information about your plan coverage, including information about co-pays, deductibles and out-of-pocket maximums

Learn more about:

- **The high deductible health plan (HDHP) option with a Health Savings Account (HSA)** is the least expensive plan offered by SHBP. Employees enrolled in the HDHP can elect pretax contributions to their HSA though payroll deductions* to pay for qualified expenses.
- **Reducing your health care expenses –** You and your covered spouse each can earn points that can be applied to eligible medical and pharmacy expenses. You also can each earn a $250 reward card (up to $500 per household) from UnitedHealthcare for completing certain *Be Well SHBP®*** activities
- **Virtual care –** Whether you need 24/7 Virtual Visits for urgent care needs in the middle of the night or behavioral health appointments from the comfort of home, we have options so you can take an appointment where you want, without traveling to a provider's office

To learn more about how to get the most out of your plan and the advantages of UnitedHealthcare, please review the enclosed information and visit **whyuhc.com/shbp** or call a dedicated SHBP advocate at **800-364-6352** TTY **711** 8 a.m.–8 p.m. ET, Monday–Friday.

Health care terms

Co-insurance – Your share of the costs of a covered health care service, calculated as a percentage of the allowed amount for the service

Co-pay – A fixed amount you pay for a covered health care service, usually when you receive the service

Deductible – The amount you owe for health care services before your health plan begins to pay

Out-of-pocket maximum – The most money you have to pay for covered expenses in a plan year

For more health care term definitions, visit the Just Plain Clear® English and Spanish Glossary at **glossary.justplainclear.com**.

* Administered through Optum Bank.

** *Be Well SHBP,* the SHBP well-being program, is administered by Sharecare.

Personalized support, every step of the way

24/7 access to a registered nurse to help guide your health care decisions

Provider access anywhere, anytime with 24/7 Virtual Visits

Emotional support with a variety of behavioral health tools

Programs and resources that can help with life's challenges

Innovative technology with **myuhc.com®** and the UnitedHealthcare® app

Large national network of over 1.8 million providers and a robust local Georgia network with over 51,000 providers and 134 hospitals*

Personalized nurse support for over 100 chronic conditions and catastrophic health events

Dedicated Customer Service team to answer health and benefit questions

$0 cost for eligible medications with Co-pay/Co-insurance Waiver Program

Additional $250 reward card from UnitedHealthcare for completing *Be Well SHBP* activities**

Find your perfect fit

Visit **whyuhc.com/shbp** to learn about the UnitedHealthcare benefits and services offered for 2027 from the comfort of your own home or on the go. Using your computer or mobile device,*** you can learn about your health plan options, search for network providers and learn about the physical and mental health programs available with both plans. Or watch a short video at **uhc4health.com/video/shbpbenefits.html**.

Scan to watch the video

Visit **uhc4health.com** or scan the code with your smartphone



*As of June 2026.

***Be Well SHBP*, the SHBP well-being program, is administered by Sharecare.

****Data rates may apply.

Where life takes you, we're there

No matter which plan you choose, you'll have access to our broad network of doctors and hospitals, including:

- ✔ Access to our nationwide network of over **1.8 million** physicians and health care professionals and over **5,600** hospitals*
- ✔ A local Georgia network that includes over **51,000** health care providers and **134** hospitals*
- ✔ No referral needed for specialist visits, even when traveling outside of Georgia
- ✔ Behavioral health support with over **12,900** behavioral health clinicians, over **140** behavioral health facilities and **460** group practices throughout Georgia**
- ✔ Access to Centers of Excellence for specialty conditions, such as cancer and transplant
- ✔ Virtual urgent care provider access with 24/7 Virtual Visits

Check if your doctor is in network

1. Go to **whyuhc.com/shbp > Search for a Provider**
2. Click on the health plan you're considering to see a list of network providers
3. Once you're a member, search for a provider at **myuhc.com > Find Care** or search on the **UnitedHealthcare app**
4. Members can sign in at **myuhc.com/virtualvisits** to talk to a doctor by video 24/7
5. Members with the HDHP can see providers outside the network, although coverage is lower and you may pay more



Choose smart. Look for the blue hearts.

As your health ally, we're committed to helping you make informed decisions when searching for and choosing a provider. The UnitedHealth Premium® program helps make it easier for you to find doctors who meet our quality care criteria, which includes safe, timely, effective and efficient care to help you choose care with confidence. To find a Premium Care Physician near you, look for two blue hearts next to their name on **myuhc.com**.

*As of June 2026.
**As of July 2026.

Choose the path that's right for you

You have 2 plan options from UnitedHealthcare.

They're the same in some ways...

Quality care	Choice HMO Plan	HDHP with HSA
Access to a large national and local Georgia network	✓	✓
Coverage at 100% for preventive care*	✓	✓
You are not required to choose a primary care provider (PCP)	✓	✓
You can see a network specialist without a referral	✓	✓
Personalized customer service and clinical care tailored to your needs	✓	✓
Savings opportunities		
You and your spouse can each earn up to **480 points to apply to eligible medical and pharmacy expenses** when you complete *Be Well SHBP*** activities	✓	✓
You and your spouse can each earn a **$250 reward card** from UnitedHealthcare when you complete your *Be Well SHBP* activities and redeem all 480 points	✓	✓
Medical and pharmacy expenses both count toward your out-of-pocket maximum	✓	✓

And different in others...

Quality care	Choice HMO Plan	HDHP with HSA
The lowest monthly premium of all plans offered by SHBP		✓
Allows you to open an HSA and deposit pretax dollars through payroll deductions*** to pay for eligible medical costs		✓
You can use any doctor or hospital you want – inside or outside the network; coverage is lower if you go out of network, and you may pay more		✓
You can use any doctor or hospital in the Choice network; if you use a provider outside of the network, you'll be responsible for the entire cost of the service (except in an emergency)	✓	
Savings opportunities		
You'll pay fixed co-pays when you need care, with co-insurance for certain services	✓	
Under a family tier, once an individual family member's deductible and out-of-pocket maximum have been met, all eligible medical and pharmacy expenses for that member are paid at 100% for the plan year.**** You don't have to wait for the entire family to meet the family deductible and out-of-pocket maximum to receive cost-sharing with the plan.		✓

For more information about your plan options, visit whyuhc.com/shbp

*The plans pay 100% of covered services provided by network providers that are properly coded as "preventive care" within the meaning of the Affordable Care Act (ACA).

***Be Well SHBP*, the SHBP well-being program, is administered by Sharecare.

***Administered through Optum Bank.

****Please note that each individual family member cannot contribute more than their own individual deductible and out-of-pocket maximum to the overall family deductible and out-of-pocket maximum.

Only an HDHP gives you access to an HSA

When you choose a high deductible health plan (HDHP), you can open a Health Savings Account (HSA) through UnitedHealthcare or at any financial institution of your choice. An HSA offers many benefits now and in the future.

What's an HSA?

An HSA is a personal bank account to help you save money and pay for health care expenses, like deductibles and co-insurance, while also giving you real tax savings. Employees enrolled in the HDHP can choose to make pretax contributions to their HSA though payroll deductions.* They can then withdraw that money income tax free to use it for qualified medical expenses.

It's yours to keep

- There is no "use it or lose it" rule
- The balance can grow from year to year
- If you leave your employer, you can take your HSA with you

Use it now, or save it for later

- You can choose to use your HSA for current health care expenses or save it for the future – even into retirement
- Once you reach a balance threshold, you can invest your HSA dollars

It's not just for doctor visits and prescriptions

- Use it to pay for vision exams, eyeglasses, dental exams, hearing aids, long-term care and more

For more information about opening an HSA, visit **whyuhc.com/shbp**

Earn and save with your UnitedHealthcare plan

Whichever plan you choose, you can earn points and a reward card to reduce your costs. (See page 12 for more information.)

You and your covered spouse can each earn up to 480 well-being credits by **completing *Be Well SHBP*** activities**

Apply these credits to eligible medical and pharmacy expenses such as a co-pay, deductible or co-insurance payment

After you've completed the *Be Well SHBP* wellness activities and redeemed your credits, **UnitedHealthcare will give each of you a $250 reward card**

- **With the HDHP,** you'll need to meet a minimum deductible threshold before the points you earn are automatically used to reimburse you the cost of eligible medical and pharmacy expenses***
- **With the Choice HMO Plan,** the points you earn are automatically used to reimburse you the cost of eligible medical and pharmacy expenses

480 well-being credits for you + 480 well-being credits for your spouse + $250 reward card for you + $250 reward card for your spouse = **$1,460 in potential savings**

*Administered through Optum Bank.

***Be Well SHBP*, the SHBP well-being program, is administered by Sharecare.

***For members enrolled in the HDHP, well-being credits cannot be used until the $1,750 (employee) or $3,500 (employee + spouse, employee + child(ren) or employee + family) threshold has been met.

2027 SHBP benefits at a glance

Earn a **$250** reward card ($500 per household) from UnitedHealthcare for completing healthy activities

For more coverage details for each of these plans, please visit **whyuhc.com/shbp** or call **800-364-6352**.

	Choice HMO		HDHP with HSA			
Medical	**Network**	Earned well-being credits reduce cost to:***	**Network**	Earned well-being credits reduce cost to:**	**Out-of-network**	Earned well-being credits reduce cost to:**
Deductible						
You	$1,300	$820	$3,500	$3,020	$7,000	$6,520
You + child(ren)	$1,950	$1,470	$7,000	$6,520	$14,000	$13,520
You + spouse	$1,950	$990	$7,000	$6,040	$14,000	$13,040
You + family	$2,600	$1,640	$7,000	$6,040	$14,000	$13,040
Out-of-pocket maximum						
You	$4,000	$3,520	$6,450	$5,970	$12,900	$12,420
You + child(ren)	$6,500	$6,020	$12,900	$12,420	$25,800	$25,320
You + spouse	$6,500	$5,540	$12,900	$11,940	$25,800	$24,840
You + family	$9,000	$8,040	$12,900	$11,940	$25,800	$24,840
Earned well-being incentive credit maximums	**Your earned well-being incentive credits reduce your out-of-pocket costs by:** You – $480 | You + child(ren) – $480 | You + spouse – $960 | Family – $960					
Co-insurance (plan pays)	**80%**		**70%**		**50%**	
Covered services						
Preventive care services – When provided by network providers and properly coded as "preventive care" within the meaning of the Affordable Care Act (ACA)	100%		100%		Not covered	
Non-preventive diagnostic colonoscopy and mammogram	100%		100%*		Not covered	
Eye exam – Routine (limited to 1 exam every 24 months; no out-of-network coverage); dilated retinal eye exams for those with diabetes covered at 100%	100%		100%		Not covered	
Routine maternity care physician services (prenatal, delivery and postpartum)	100%		70%*		50%*	
Non-routine maternity care physician services (prenatal, delivery and postpartum)	100% after $35 PCP co-pay $45 specialist co-pay		70%*		50%*	
PCP, specialist or clinic office visits (treatment of illness or injury)	100% after $35 PCP co-pay $45 specialist co-pay		70%*		50%*	
Urgent care visit	100% after $35 co-pay		70%*		50%*	
Emergency room (treatment of an emergency medical condition or injury)	100% after $200 co-pay (waived if admitted)		70%*		70%*	
24/7 Virtual Visits	100% after $15 PCP co-pay		70%, no deductible applies		Not covered	
Telehealth	100% after $15 PCP co-pay 100% after $15 SPC co-pay		70%, no deductible applies		50%*	

*After the deductible with the exception of breast cancer screenings with no prior breast cancer diagnosis.

**For members enrolled in the HDHP, credits cannot be used until the $1,750 (employee) or $3,500 (employee + spouse, employee + child(ren), or employee + family) threshold has been met. Amount also assumes member has earned and redeemed 480 points through the UnitedHealthcare HIA.

***Amount assumes member has earned and redeemed 480 points through the UnitedHealthcare HIA.

This policy has exclusions, limitations and terms under which the policy may be continued in force or discontinued. This outline is intended as a summary only. For a detailed description of the benefits available, please refer to the official plan documents.

	Choice HMO	HDHP with HSA	
Medical	**Network**	**Network**	**Out-of-network**
Ambulance (emergency only)	100%	70%*	70%*
Outpatient surgery	80%*	70%*	50%*
Independent laboratory (freestanding lab for bloodwork, strep tests, etc.)	100%	70%*	50%*
Hospital services (inpatient/outpatient facility/outpatient professional)	80%*	70%*	50%*
Hospital services (inpatient professional)	100%*	70%*	50%*
Outpatient rehabilitation – Physical, speech, occupational, cardiac, pulmonary therapy (40 visits per therapy per plan year)	100% after $25 co-pay	70%*	50%*
Chiropractic visit – Spinal manipulation only (20 visits per plan year)	100% after $45 co-pay	70%*	50%*
Hearing – Exam and fitting (office visit)	Hearing aid exam: $35 PCP co-pay $45 specialist co-pay per visit, then 100% of eligible expenses	70%*	50%*
Hearing aid allowance • Children (up to age 19) – $3,000 per hearing-impaired ear/4 years • Adult – ($1,500 max/5 years)	Hearing aid: 100% Up to 4-year benefit maximum for children and 5-year benefit maximum for adults	Hearing aid: 100%* Up to 4-year benefit maximum for children and 5-year benefit maximum for adults	Hearing aid: 100%* Up to 4-year benefit maximum for children and 5-year benefit maximum for adults
Behavioral health			
Mental health and substance use disorder inpatient and outpatient facility, and residential treatment centers **NOTE:** Prior approval required	80%*	70%*	50%*
Mental health/substance use (inpatient professional)	100%*	70%*	50%*
Mental health/substance use disorder outpatient visits (professional and methadone clinics)	100% after $35 co-pay $10 co-pay for group/ family therapy	70%*	50%*
ABA therapy	100% after $35 co-pay	70%*	50%*
Pharmacy – Administered by Express Scripts®			
Retail pharmacy (up to a 31-day maximum supply)	Co-pay applies	70%*	70%*
Participating mail order or retail network pharmacy (90-day maximum supply)	Co-pay applies	70%*	70%*

*After the deductible.

Select generics, listed on the Federal Preventive Drug List, can be obtained for a co-insurance fee without having to meet the deductible first.

This information is a general description of your coverage. It is not a contract and does not replace the official benefit coverage documents, which may include a Summary Plan Description. If descriptions, percentages and dollar amounts in this guide differ from what is in the official benefit coverage documents, the official benefits coverage documents prevail.

This policy has exclusions, limitations and terms under which the policy may be continued in force or discontinued. This outline is intended as a summary only. For a detailed description of the benefits available, please refer to the official plan documents.

The UnitedHealthcare plan with Health Savings Account (HSA) is a high deductible health plan (HDHP) that is designed to comply with IRS requirements so eligible enrollees may open an HSA with a bank of their choice or through Optum Bank, Member of FDIC. The HSA refers only and specifically to the Health Savings Account that is provided in conjunction with a particular bank, such as Optum Bank, and not to the associated HDHP.

Member scenarios

These member examples walk you through different health care situations and estimated health care costs, not including premiums.



John

Single coverage

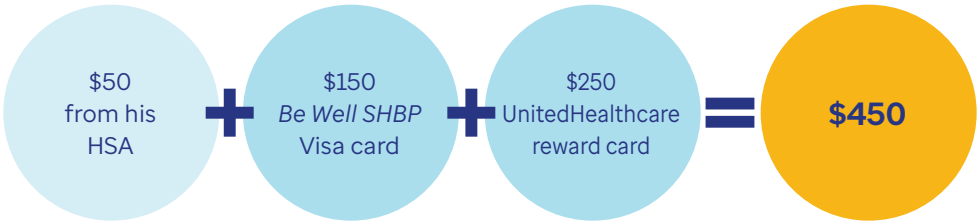
- John is 27 years old, single and in good health
- He's looking for a plan with low monthly premium payments
- The chart to the right shows how he uses care and estimates what it may cost him with each plan
- He decides to enroll in the HDHP with HSA and build his HSA through pretax payroll deductions***
- He learned he can roll over his contributions and use HSA dollars tax free for future qualifying medical expenses, and he may even invest them once his HSA balance grows

Type of cost	Choice HMO	HDHP with HSA
Preventive care visit	$0 co-pay	$0
3 therapy visits	$75 co-pay	$450
Total cost before deductible reached	**$75** *Deductible is $1,300*	**$450** *Deductible is $3,500*
Be Well SHBP* reward card	**$150**	**$150**
UnitedHealthcare reward card	**$250**	**$250**

John saves with the HDHP with HSA

- Because he has a low premium with the HDHP with HSA, John uses his premium savings to fund his HSA so he is prepared for health care expenses now or in the future**
- John completes the *Be Well SHBP* activities and chooses to get his reward as a *Be Well SHBP* $150 Visa® prepaid card (administered by Sharecare), which he can use toward his medical expenses
- After completing *Be Well SHBP* activities, John also receives a **$250 reward card** from UnitedHealthcare

How John pays $450 in medical expenses



John's HSA balance

John's HSA contribution**	$2,400
Withdrawal for medical expenses	$50
HSA balance that will roll over to next year	**$2,350**

*Assumes member has completed *Be Well with SHBP* activities.

**Voluntary pretax employee HSA contributions can be used to pay for qualified medical, dental, vision and prescription drug expenses, including certain over-the-counter drugs and medications, as defined in IRS Publications 502 and 969. And the HSA rolls over from year to year, so it can continue to grow to be used in the future – even into retirement.

*** Administered through Optum Bank.



Michelle

Employee plus family coverage

- Michelle is 45 years old, married and has two children
- She's interested in a family plan that will help with her family's care needs – including diabetes and asthma
- Michelle considers her out-of-pocket medical costs and reviews the plan deductibles and the premiums for 2027
- The chart to the right shows how the family uses care and estimates what it may cost with each plan
- She realizes that while the deductible is less with the Choice HMO, the monthly premium is higher than it is for the HDHP with HSA
- Michelle decides that if she signs up for a Diabetes Disease Management Program and qualifies for a Co-pay/Co-insurance Waiver Program, she could save money on her diabetes medications
- She decides to enroll in the Choice HMO

Type of cost	Choice HMO	HDHP with HSA
4 sick visits to PCP	$140 co-pay	$640
3 preventive care visits	$0 co-pay	$0
3 urgent care visits	$105 co-pay	$540
2 specialist visits	$90	$800
Emergency room visit	$200	$2,400
Medication co-pay	$120	$180
Total cost before deductible reached	**$655** *Deductible is $2,600*	**$4,560** *Deductible is $7,000*
Well-being credits cost reduction*	(960 well-being credits)	(960 well-being credits after meeting the $3,500 threshold**)
UnitedHealthcare rewards card	Two cards at $250 each for a total of $500	Two cards at $250 each for a total of $500

- Michelle and her husband complete the *Be Well SHBP* activities and each earn **480 well-being credits for a total of 960 credits**
- The family's **960 well-being credits automatically reimburse** Michelle for the cost of eligible medical and pharmacy bills
- Michelle and her covered spouse each receive a **$250 reward card (for a total of $500)** from UnitedHealthcare

How Michelle pays $655 in medical expenses

960 well-being credits → Applied to $655 in eligible medical expenses → **305 well-being credits remain**

Michelle and her spouse receive $500 in UnitedHealthcare reward cards ($250 each)

Have questions?

If you want to talk to someone about your own coverage scenario, call **800-364-6352**.

*Assumes member has earned and redeemed 480 points through the UnitedHealthcare HIA.

**For members enrolled in the HDHP, well-being credits cannot be used until the $1,750 (employee) or $3,500 (employee + spouse, employee + child(ren), or employee + family) threshold has been met.

Take these steps to earn

You and your covered spouse can **each earn a $250 reward card* ($500 per household) from UnitedHealthcare.** Here's how:

- When you choose a UnitedHealthcare HMO or HDHP, you and your covered spouse are each eligible to earn up to 480 points to use toward eligible medical and pharmacy expenses by completing the activities under *Be Well SHBP***
- Because achieving your best health is an important personal goal, UnitedHealthcare will also reward you with a $250 reward card when you complete your *Be Well SHBP* activities and redeem all 480 points in the Sharecare Redemption Center
- To qualify for points with the *Be Well SHBP* well-being program and the UnitedHealthcare reward card, you must complete the activities listed below between **January 1, 2027** and **November 30, 2027**



What you need to do	What you can earn
Assess your health — complete the RealAge® Test	**120 points**
Know your numbers with a biometric screening	+ **120 points**
Take action Take action with Well-being Coaching, Online Challenges, Preventive Screening Exams or a combination of all three	+ **240 points**
Total	= **480 points**
Earn your UnitedHealthcare reward When you and your covered spouse complete *Be Well SHBP* wellness activities and redeem your points, UnitedHealthcare will reward you by sending you each a $250 reward card	+ **$250 reward card**

Choose from 2 options to redeem points

There are 2 ways to redeem points earned in 2027 through the Sharecare Redemption Center:

- 480 well-being credits applied toward eligible medical and pharmacy expenses in your UnitedHealthcare HIA
- A $150 prepaid Visa card (all 480 points earned in 2027 needed for redemption)

Rollover credits

All unused well-being incentive credits earned in 2026 will automatically roll over to your 2027 plan option. SHBP will deposit your unused credits in the incentive account associated with your 2027 plan selection in April 2027. If you remain with the same medical claims administrator and in the same plan option in which you were enrolled in 2026, rollover credits will be available January 1, 2027.

For details or questions, go to **BeWellSHBP.com** or call **800-616-6411**

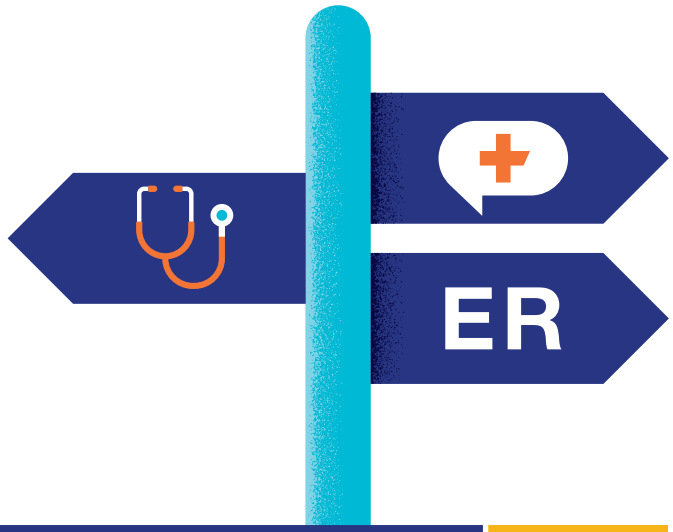
*No fee/expiry. One reward card each per member and covered spouse.

***Be Well SHBP*, the SHBP well-being program, is administered by Sharecare.

Know where to go

When you need care, call your PCP first

They have easy access to your records, know the bigger picture of your health and may even offer same-day appointments. If you can't see them, it's helpful to know your quick-care options so you can find the right care and avoid financial surprises.



Quick-care options	Needs or symptoms		Cost
24/7 NurseLine Call the number on your health plan ID card for expert advice	• Deciding where to get medical care • Finding a provider or hospital	• Health and wellness help • Getting answers to questions about medicines	No cost
PCP Office or telemedicine visit via provider's platform	• Checkups • Immunizations • Minor illnesses • Minor injuries	• Ongoing care for conditions like asthma, diabetes and more	$
24/7 Virtual Visits Online doctor visits anytime, anywhere via **myuhc.com** or the UnitedHealthcare app	• Bladder infections • Bronchitis • Colds/flu	• Fevers • Pinkeye • Sinus problems	$
Convenience care clinic Nearby treatment	• Earaches • Flu shots	• Minor injuries • Skin rashes	$$
Urgent care center Quicker after-hours care	• Infections (e.g., skin, eye, ear/nose/throat, genital-urinary) • Low back pain • Minor injuries (e.g., burns, stitches, sprains, fractures)	• Respiratory issues (e.g., coughs, pneumonia, asthma) • Stomach issues (e.g., pain, vomiting, diarrhea)	$$$
Emergency room (ER) For serious, immediate needs	• Chest pain • Kidney stones • Major burns	• Severe asthma attacks • Severe injuries • Shortness of breath	$$$$

Get care from anywhere

24/7 Virtual Visits

With 24/7 Virtual Visits, you can connect to a care provider by phone or video* through **myuhc.com** or the UnitedHealthcare app. Providers can treat a range of nonemergency health conditions – and may even prescribe medication as needed.**

Here are just some of the things you can treat with a 24/7 Virtual Visit:

- Bronchitis
- Coughs, colds and flu
- Headache
- Pinkeye
- Rashes
- Sinus problems
- Stomach pain
- Urinary tract infections

Learn more at **uhc.com/virtualcare** or go to the UnitedHealthcare app and tap **Find Care > Virtual Care** to get started.

Network provider telehealth

Your PCP is the doctor who knows you best, yet office visits aren't always the most convenient. With telehealth visits, you can see any network provider who offers a telehealth option.

- Video chat with a network provider of your choice – including PCPs, specialists, behavioral health providers and physical therapists
- The technology used to access the virtual visit is determined by the provider, not UnitedHealthcare

Digital tools to keep you connected

Your personalized digital tools – the **UnitedHealthcare app** and **myuhc.com** – give you access to resources designed to help you:

- View benefit info, claim details and account balances
- Search network providers and facilities for the type of care you may need
- Access your health plan ID card and add your plan details to your smartphone's digital wallet
- Learn about covered preventive care
- Learn about behavioral health services available for you and your family
- Compare cost estimates before you get care, which may help you save money

Reach a nurse 24/7

NurseLine provides information from registered nurses who are here to help guide your health care decisions. Get immediate answers to your questions anytime, anywhere – at no extra cost. Call **800-364-6352**.

Virtual specialty care

Get specialty care sooner by meeting with a specialist from the comfort of your home, or anywhere on the go, through secure video, chat or email. A virtual specialist may help you create a personalized care plan for the following conditions:

- Cardiac rehabilitation
- Dermatology
- Gastroenterology
- Migraine
- Sleep conditions
- Speech therapy
- Women's health

Virtual visits with a specialist are available within 5 days – sometimes immediately.***

Learn more at **uhc.com/virtualcare** or go to the **UnitedHealthcare app > Find Care > Virtual Care** to get started.

Virtual therapy

Need a quicker, convenient way to get mental health care? Schedule a virtual therapy appointment with a designated virtual provider in **myuhc.com** or the UnitedHealthcare app. Virtual therapy offers confidential counseling from a licensed therapist with private video sessions. So, you can receive caring support from the privacy of home and the convenience of your mobile device or computer. These visits have a similar standard of care as in-person visits, and you can see the same therapist with each appointment to establish an ongoing relationship. Virtual therapy may also be a great way for children and teens to get an appointment.

Virtual therapy is designed to help treat conditions like:

- ADD/ADHD
- Addiction
- Anxiety
- Depression
- Mental health disorders

Get started at **myuhc.com > Virtual Care > Virtual Behavioral Health Care.**

*Data rates may apply.

**Certain prescriptions may not be available, and other restrictions may apply.

***Patient Engagement HIT. "Average Patient Appointment Wait Time to see a specialist provider is 26 days in 2022." Accessed September 2023.

Prioritize preventive care

Your body needs regular maintenance. Preventive care may help you catch health problems earlier when they're easier and less costly to treat.

Get the care you need

Preventive care – such as routine wellness exams and certain recommended screenings and immunizations – is **covered at 100%,** which means **no additional cost** to you, when you see network providers. A preventive care visit may be a good time to help establish a relationship with your provider and create a connection for future medical services.

Covered services include:

- An annual exam
- Cancer screenings
- Child and adult immunizations
- Cholesterol and blood pressure screenings
- Pap tests and mammography for women
- Prostate screenings for men

To see which preventive care screenings you need and what's covered, visit **uhc.com/preventivecare**.

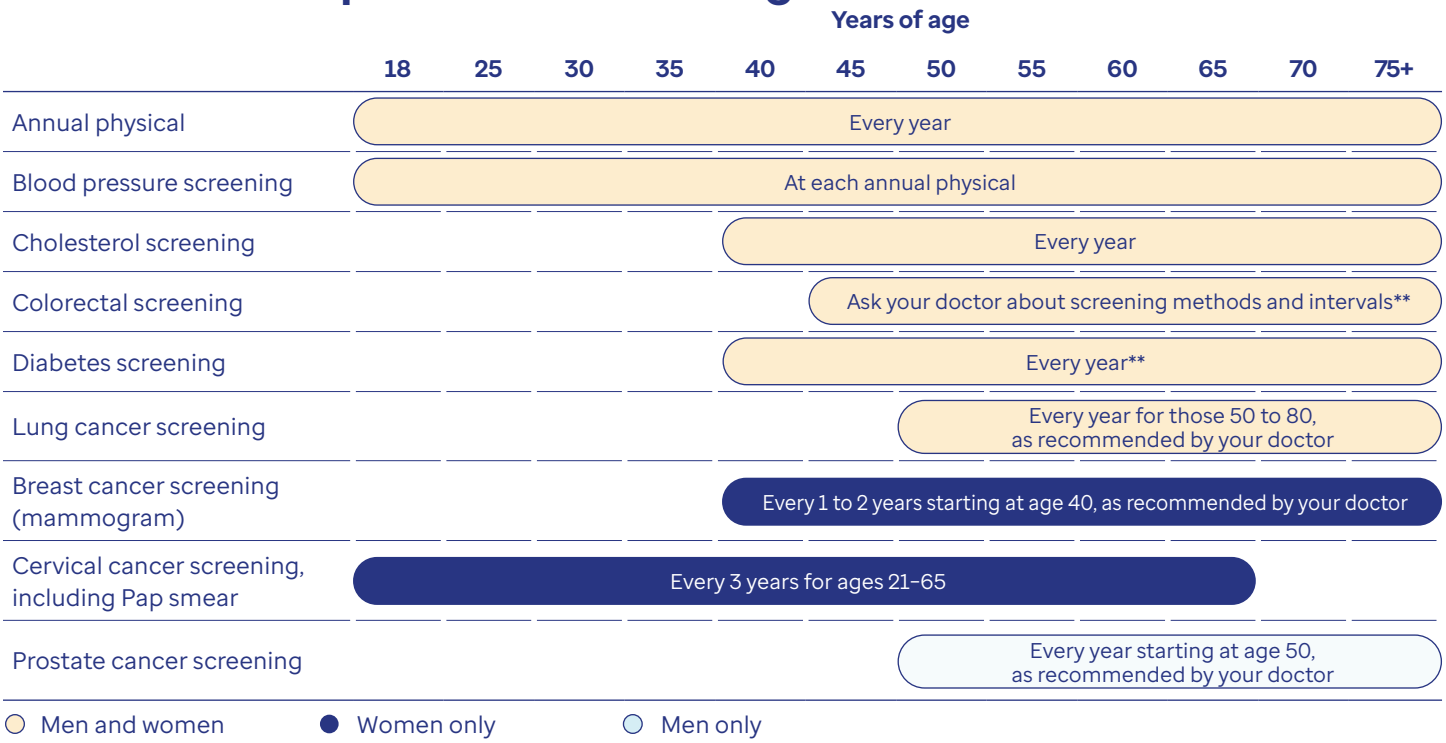
Preventive vs. diagnostic care – know the difference

Preventive care includes annual checkups, routine screenings and immunizations that can help prevent health problems before they even start. Diagnostic care includes treatments for symptoms or existing health conditions. While preventive care appointments are covered at 100% with both the Choice HMO Plan and the HDHP, diagnostic treatments performed during your preventive exam may cost extra. Outpatient diagnostic services are covered at 100% with the Choice HMO Plan.

Looking for a doctor?

Find one at **myuhc.com** or call the dedicated advocate team at **1-888-364-6352,** TTY **711**

Recommended preventive screenings*



These guidelines are provided for informational purposes only and do not constitute medical advice. Individuals with symptoms or at high risk for disease may need additional services or more frequent interventions. Discuss with your doctor how these guidelines may be right for you, and always consult your doctor before making any decisions about medical care. These guidelines do not necessarily reflect the vaccines, screenings or tests that will be covered by your benefit plan. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on the back of your medical plan ID card.

*For a full list of recommended screenings by age and gender, plus tips on how to prepare for your visit and more, go to **uhc.com/preventivecare.**

**SHBP covers as a preventive screening starting at age 18.

Helping you stay healthy

Call a dedicated Advocate

Your dedicated UnitedHealthcare Advocate Team is here to help you:

- Improve your health, manage a chronic condition and understand complex medical issues
- Understand how your health plan works
- Get answers about a recent claim or how much you can expect to pay
- Find a network provider, get a new health plan ID card and much more

Support for managing chronic or catastrophic conditions

If you or a loved one has a chronic health condition or has experienced a catastrophic health event, you probably have questions. A dedicated, personal nurse can help you and your family explore care options and provide additional support and resources for more than 100 chronic conditions including the following:

- Asthma
- Cancer
- COPD
- CAD
- Diabetes
- Heart failure
- Kidney disease

Personalized guidance throughout pregnancy

If you're thinking about having a baby, or already have one on the way, maternity support is here to provide information and resources. Start by taking a maternity support assessment, which only takes minutes to complete. You'll get 24/7 access to 7 online maternity courses covering topics from preconception through postpartum.

Based on your responses, a maternity nurse may reach out to you and connect you with the care you need, answer your questions and support you every step of the way.

Access to the nation's leading health care facilities

Our Centers of Excellence network provides access to leading health care facilities, physicians and services to support safe, specialized and cost-effective care for services such as transplant and cancer care.

Flexible fitness options

With One Pass Select®, our mission is to make being healthy fun for all. Find a routine that's right for you and choose a membership tier that fits your lifestyle. With One Pass Select, you can:

- Access a large gym network, including national fitness centers and boutique studios
- Use any location in your network tier at no additional cost
- Change tiers monthly to create a routine that fits your lifestyle
- Cancel your membership at any time by giving a 30-day notice
- Add unlimited friends and family members (18+) to an existing account. New members can select any membership tier, and you'll receive a 10% discount on their memberships.

Learn more at **OnePassSelect.com**.

Bariatric Resource Services

If you are considering surgical treatment for obesity, you need to make some difficult and important decisions. Among the most important decisions are which treatment to get and where to receive it. When you enroll in the Bariatric Resource Services program, an experienced bariatric nurse will work with you to help you make informed decisions and find a Bariatric Center of Excellence for weight-loss surgery with better outcomes and fewer complications.

Waive costs on select prescriptions

With the Co-pay/Co-insurance Waiver Program, you may not have to pay any co-pay or co-insurance for certain medications. If you are participating in and meet the requirements of a disease management program for diabetes, asthma or CAD, the program may cover co-pays or co-insurance for certain medications used to treat that condition. That means you could save up to hundreds of dollars per year, depending on which medications you are taking over a 12-month period.

Member cost-share is $0 for approved addiction treatment medications. Enrollment and participation in the Disease Management Co-pay/Co-insurance Waiver Program is not required for these savings.

See your health plan documents for details, or call us at **1-888-364-6352**.

Support for emotional well-being

From everyday stress to ongoing concerns like anxiety, depression and substance use, you have access to a wide range of resources and ways to get support. Start by visiting **myuhc.com** to see all that's available.

Use the **provider search tool** to find therapists, psychiatrists or other behavioral health clinicians and facilities near you

Check out **articles, podcasts, videos** and other tools on topics you care about

Link to a **variety of resources**

Behavioral health support

Get confidential help in person or virtually from a psychiatrist or therapist for:

- Depression, stress and anxiety
- Substance use and recovery
- Eating disorders
- Parenting and family problems

Calm Health

You may have heard about or even used the Calm app. Now you have access to its most popular features and much more with Calm Health. Available through your benefits at no additional cost to you, it includes content written by licensed psychologists.

Work toward well-being goals like:

- Better sleep
- Building skills to manage stress
- Developing resiliency
- Starting and building a mindfulness habit

It's all self-guided, so you can go at your own pace.

ABA therapy

Applied behavior analysis (ABA) therapy – included as part of your benefits* – uses behavioral principles to teach children skills and behaviors they may not otherwise learn on their own.



* Precertification is required. If your child has already been diagnosed with autism and is receiving treatment, your provider may already be approved.

Substance use treatment

If you or someone you love is struggling with substance use, call the Substance Use Treatment Helpline. It's available 24/7 as part of your benefits and is completely confidential – you can even remain anonymous.

To speak with a recovery advocate, call **1-855-780-5955** or visit **liveandworkwell.com/recovery** to find care options and resources.

988 Suicide & Crisis Lifeline

Free and confidential emotional support 24 hours a day, 7 days a week for anyone in suicidal crisis or emotional distress.

Call or text **988**. You can also visit **988lifeline.org**.

Here's the fine print

We do not treat members differently because of sex, age, race, color, disability or national origin.

If you think you weren't treated fairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator:

Mail: UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UT 84130

Online: UHC_Civil_Rights@uhc.com

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again. If you need help with your complaint, please call the toll-free member phone number listed on your ID card.

You can also file a complaint with the U.S. Dept. of Health and Human Services:

Online: **https://ocrportal.hhs.gov/ocr/portal/lobby.jsf**

Phone: Toll-free **800-368-1019, 800-537-7697** (TDD)

Mail: U.S. Dept. of Health and Human Services
200 Independence Avenue SW, Room 509F
HHH Building
Washington, DC 20201

We provide free services to help you communicate with us such as letters in other languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free member phone number listed on your health plan ID card.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

ATENCIÓN: Si habla español (**Spanish**), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文 (**Chinese**)，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

XIN LƯU Ý: Nếu quý vị nói tiếng Việt (**Vietnamese**), quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: 한국어(**Korean**)를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

PAALALA: Kung nagsasalita ka ng Tagalog (**Tagalog**), may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является русским (**Russian**). Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

تنبيه: إذا كنت تتحدث العربية (**Arabic**)، فإن خدمات المساعدة اللغوية المجانية متاحة لك. يُرجى الاتصال برقم الهاتف المجاني المدرج على ظهر بطاقة العضوية الخاصة بك.

ATANSYON: Si w pale Kreyòl ayisyen (**Haitian Creole**), ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

ATTENTION : Si vous parlez français (**French**), des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

UWAGA: Jeżeli mówisz po polsku (**Polish**), udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala português (**Portuguese**), contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ACHTUNG: Falls Sie Deutsch (**German**) sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

توجه: اگر زبان شما فارسی (**Farsi**) است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفا با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप हिंदी (**Hindi**) बोलते है, आपको भाषा सहायता सेबाएं, नि:शुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

DÍÍ BAA'ÁKONÍNÍZIN: Diné (**Navajo**) bizaad bee yáníłti'go, saad bee áka'anída'awo'ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shǫǫdí ninaaltsoos nitł'izí bee nééhozinígíí bine'dęę' t'áá jíík'ehgo béésh bee hane'í biká'ígíí bee hodíilnih.



Prepare to enroll

Open enrollment is October 19 – November 6, 2026

We know choosing a health plan can be confusing. We're here to help you make informed decisions during open enrollment, including helping you understand your benefits so you and your family can make the most of them.

Learn more about the HMO and HDHP options, plus the tools and programs included with UnitedHealthcare coverage at no additional cost. Visit **whyuhc.com/shbp**.

Questions?

Call us at **888-364-6352**, TTY **711**

Ready to enroll?

Getting started is easy. Scan to visit **mySHBPga.adp.com**.

The UnitedHealth Premium® designation program is a resource for informational purposes only. Designations are displayed in UnitedHealthcare online physician directories at myuhc.com. You should always visit myuhc.com for the most current information. **Premium designations are a guide to choosing a physician and may be used as one of many factors you consider when choosing a physician. If you already have a physician, you may also wish to confer with him or her for advice on selecting other physicians. You should also discuss designations with a physician before choosing him or her. Physician evaluations have a risk of error and should not be the sole basis for selecting a physician.** Please visit myuhc.com for detailed program information and methodologies.

The UnitedHealthcare plan with Health Savings Account (HSA) is a high deductible health plan (HDHP) designed to comply with IRS requirements so eligible enrollees may open a Health Savings Account (HSA) through Optum Bank®, Member FDIC. The "HSA" refers generally to the UnitedHealthcare HSA product, which includes an HDHP, although at times "HSA" may refer only and specifically to the UnitedHealthcare Health Savings Account, provided in conjunction with Optum Bank and not to the associated HDHP. Accounts are offered by Optum Bank and are subject to eligibility. This communication is not intended as legal or tax advice. Please contact a competent legal or tax professional for personal advice on eligibility, tax treatment and restrictions. Federal and state regulations are subject to change. Please check your health benefit plan materials to determine whether your employer will make supplemental contributions to your HSA.

Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. Other routine services may be covered under your plan, and some plans may require Co-payments, Co-insurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

24/7 Virtual Visits is a service available with a Designated Virtual Network Provider via video, or audio-only where permitted under state law. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 24/7 Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times, or in all locations, or for all members. Check your benefit plan to determine if these services are available.

The Centers of Excellence (COE) program providers and medical centers are independent contractors who render care and treatment to health plan members. The COE program does not provide direct health care services or practice medicine, and the COE providers and medical centers are solely responsible for medical judgments and related treatments. The COE program is not liable for any act or omission, including negligence, committed by any independent contracted health care professional or medical center.

One Pass Select is a voluntary program. For self-funded participants nationally, it features a subscription-based nationwide gym network, digital fitness and grocery delivery service. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. Individuals should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for them. Purchasing discounted gym and fitness studio memberships, digital fitness or grocery services may have tax implications. Employers and individuals should consult an appropriate tax professional to determine if they have any tax obligations with respect to the purchase of these discounted memberships or services under this program, as applicable.

The information provided under Maternity Support is for general informational purposes only and is not intended to be nor should be construed as medical and/or nutritional advice. Participants should consult an appropriate health care professional to determine what may be right for them. Employers are responsible for ensuring that any wellness programs they offer to their employees comply with applicable state and/or federal law, including, but not limited to, GINA, ADA and HIPAA wellness regulations, which in many circumstances contain maximum incentive threshold limits for all wellness programs combined that are generally limited to 30 percent of the cost of self-only coverage of the lowest-cost plan, as well as obligations for employers to provide certain notices to their employees. Employers should discuss these issues with their own legal counsel.

The UnitedHealthcare® app is available for download for iPhone® or Android®. iPhone is a registered trademark of Apple, Inc. Android is a registered trademark of Google LLC.

Apple, App Store and the Apple logo are trademarks of Apple, Inc., registered in the U.S. and other countries. Google Play and the Google Play logo are registered trademarks of Google LLC.

Administrative services provided by United HealthCare Services, Inc. or their affiliates.

We're here to help

If you have any questions – from help finding a network doctor to learning more about what's covered in a health plan – please visit us online or give us a call. With a team of dedicated SHBP service advocates ready to answer questions, coordinate and make referrals to important resources, and help you make the most of your plan, the personalized support you are looking for may be just a phone call away.

Call **888-364-6352**
TTY **711**

Visit
whyuhc.com/shbp

Scan to visit **whyuhc.com/shdp**

Additional contact information

Optum Bank® (for HDHP with HSA)	**1-800-791-9361**
Member website	**myuhc.com**
United Behavioral Health	**liveandworkwell.com**
Sharecare	**1-888-616-6411** **BeWellSHBP.com**
Express Scripts	**1-800-809-8593** **Express-Scripts.com/shbp**

Cheers to a healthy year ahead

Ready to enroll? Get started by visiting **mySHBPga.adp.com**.



United Healthcare® | SHBP State Health Benefit Plan
A Division of the Georgia Department of Community Health

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