

Explore the ways your health plan is designed to help you take better care of yourself





Thank you for being a member



We're here to help make each step of your health care experience easier. Take a look at this guide to help you better understand your benefits, find care options, manage costs and get more out of your health plan—and start experiencing all that care can do for you.



Call 1-866-228-4215

If you don't have computer access, need language assistance or still have questions after reading this, please call this toll-free member phone number, which can also be found on your health plan ID card.



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- ▼ Twitter.com/UHC
- Instagram.com/UnitedHealthcare
- YouTube.com/UnitedHealthcare

It's easier to connect to your plan

Your benefits include personalized digital tools that help you check in on your plan whenever you want - which helps make it easier to stay on top of your benefit details.



Activate your myuhc.com account

When it comes to managing your health plan, myuhc.com® lets you see what's covered, manage costs and so much more. To help everyone get more from their plan, it's important that each member age 18 and over consider creating their own account. Use myuhc.com to:

- Find the average cost of care
- · See what's covered
- · View claim details
- Check your plan balances
- Find in-network providers

Get started today:

- Go to myuhc.com > Register Now
- · Have your ID card handy and follow the step-by-step instructions



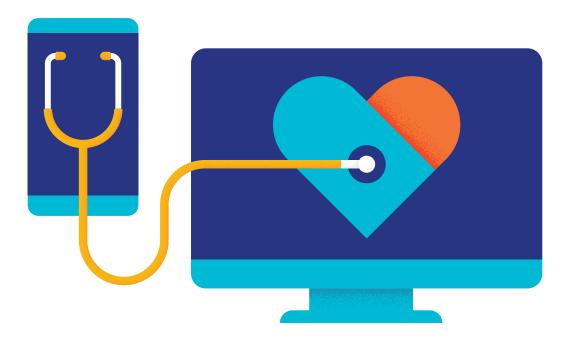
Download the UnitedHealthcare app

The UnitedHealthcare® app puts your health plan at your fingertips. Download it to:

- Find nearby care options in your network
- · View and share your health plan ID card with your doctor's office
- Video chat with a doctor 24/7







Simple ways to help you save

Here are a few good-to-know things you can do to help get more out of your health plan.



Stay in the network

The doctors and facilities in the UnitedHealthcare network or Caterpillar PPO NetWork (depending on where you live) may have agreed to provide services at a discount - so staying in network makes sense, especially when visiting an out-of-network provider could end up costing you a lot more for care or may not be covered at all. Sign in to myuhc.com > Find Care & Costs to locate:

- Labs
- · Mental health professionals
- Hospitals
- In-network providers





Shop around

With such a wide variety of services, from minor procedures to major surgeries, it's a good idea to check approximate pricing first. Visit myuhc.com > Find Care & Costs to view average costs.

Information will vary to reflect your actual coverage.

With a PCP, there's a doctor in your corner

Your primary care provider (PCP) is your health guide—someone who can help connect you to the care you need and help you avoid cost surprises. A PCP can be a family practitioner, internist, pediatrician or general medicine physician.* Your plan doesn't require PCP referrals for care, but it's a good idea to have a PCP partner.

Your PCP:



Generally knows your health history and health goals



Provides routine care, which may help identify potential health issues earlier



Advises you when to see a specialist and can provide recommendations



Find an in-network provider

Sign in to myuhc.com > Find Care & Costs to find an in-network PCP, clinic, hospital or lab based on location, specialty, availability, hours of operation and more. You can even see patient ratings and view average costs before you choose a provider. If you would like more information about a provider's qualifications, call the member phone number on your ID card.

*Laws in some states allow you to choose a specialist, like an OB/GYN, as your PCP.



Keep up on preventive care

Preventive care—such as routine wellness exams and certain recommended screenings and immunizations—help detect small things before they become big things. A preventive care visit may be a good time to help establish your PCP relationship and create a connection for future medical services. In-network coverage includes:

Colonoscopy screening

- One annual stool occult blood screening between ages 50 and 54
- · One colonoscopy screening at age 55 and over
- · Expenses incurred as a result of the screening colonoscopy and related to a diagnosed condition are subject to deductible and coinsurance

Lipid and blood sugar screening

- For males age 35 and over, one screening every five (5) years
- For females age 45 and over, one screening every five (5) years

Well woman preventive care

- One annual routine gynecological exam which includes a physician pelvic and breast exam
- · A PAP smear every three years

Mammography screening

- One screening between ages 35 and 39
- One screening every calendar year from age 40 and over

Routine immunizations are not covered.

Here's how your health plan works

Let's take a look at an example of how a typical plan works when you receive care from an in-network provider. Your plan may be different than this example, so to find your specific details go to myuhc.com > Coverage & Benefits.

Plan start **Deductible reached** Out-of-pocket maximum met



You pay 100%*

You pay <20%>

Your plan pays <80%>

Your plan pays 100%



At the start of your plan year, you pay 100% of your covered health services until you meet your deductible, which is the amount you pay before your plan starts sharing costs. Now, your health plan starts to share a percentage of the costs with you -this is your coinsurance.*

Here, your plan's got you covered at 100%. Your out-of-pocket maximum is the most you could pay for covered services in a plan year.

^{*}Your deductible and coinsurance may vary by plan or service. This example is for illustrative purposes only. Please refer to your official plan documents for coverage details.

In-Network	UHC Consumer Choice (CDHP)
Annual deductible	Retiree only: \$1,500 / If you enroll dependents: \$3,000
Annual out-of-pocket maximum ¹	Retiree only: \$3,000 / If you enroll dependents: \$6,000 (includes Rx drugs)
Medical coinsurance	You pay 20% after deductible
Health savings account (HSA) contribution (If you are eligible and enrolled in an HSA)	Caterpillar contributes: Retiree only: \$300 / If you enroll dependents: \$600
Office visit	You pay 20% after deductible
Hospital	You pay 20% after deductible
Urgent care	You pay 20% after deductible
Emergency care	You pay 20% after deductible

Pharmacy (Magellan Rx)							
Caterpillar Pharmacy Network	Walmart, Kroger, Walgreens and CPRxN ² and their affiliates						
Annual deductible	You pay the full retail price until you meet the annual deductible. After you meet the deductible, you pay the copay/coinsurance as shown in the table below. The deductible is waived for specific medications on the Preventive Drug List. ⁴						
Retail ³ up to a 30-day supply	Tier 0	You pay a \$0 copay					
	Tier 1	Walmart or Kroger: You pay a \$5 copay Walgreens or CPRxN ² : You pay a \$10 copay					
	Tier 2	You pay 20% (\$35 min / \$70 max)					
	Tier 3	You pay 50% (\$85 min / \$135 max)					
	Tier 4	You pay 50% (\$110 min / \$210 max)					

¹ The federal annual out-of-pocket maximum for 2022 is \$8,700 / \$17,400, which includes deductibles, coinsurance and copays. These amounts are subject to change each year

² CPRxN is Community Pharmacy Prescription Drug Network.

³ Mail order (home delivery) is available through AllianceRx Walgreens Prime. Contact Magellan Rx Specialty Pharmacy for specialty medications.

⁴ Caterpillar Drug Formulary, CDHP Preventive Drug List and Network Pharmacy Directory can be found at benefits.cat.com.

Here's what to do if you need:



Hospital care

Talk to your PCP first to determine which hospital in your network can meet your medical or surgical needs. Shop around to save yourself some money. You or the admitting physician may be required to notify us before you're admitted.



Prior authorization

Your plan may also require prior authorization, sometimes called preauthorization, before you receive certain services. This means that you or your in-network provider may need to get approval from your plan before the services are covered. Call the member phone number on your ID card or sign in at myuhc.com > Coverage & Benefits to check if prior authorization is needed.



Get to know your care options and costs

How much you pay for care can depend on where you get it — and a great place to start may be with your PCP. For serious or life-threatening conditions, call 911 or go to an emergency room.

Care options to consider and approximate costs	PCP Care from the doctor who may know you best	24/7 Virtual Visits See a doctor whenever, wherever	Convenience care Basic conditions that aren't generally life-threatening	Urgent care Serious conditions that aren't generally life-threatening	Emergency room Life- and limb-threatening emergencies				
Average cost*	\$165	Less than \$50**	\$100	\$185	\$2,500				
Hours	Varies by location	24/7	Varies by location	Varies by location— may be open nights/ weekends	24/7				
How to connect	Contact your PCP	myuhc.com/virtualvisits	myuhc.com	myuhc.com	myuhc.com				
✓ indicates the recommended place for care for the following common conditions:									
Broken bone				~	~				
Chest pain					✓				
Cough	✓	✓	✓						
Fever	✓	✓	✓						
Muscle strain	✓		✓						
Pinkeye	✓	✓	✓						
Shortness of breath					✓				
Sinus problems	✓	✓	✓						
Sore throat	✓	~	✓						
Sprain	✓		✓	~					
Urinary tract infection	✓	✓	~						

Did you know?

Emergency rooms are likely the most expensive place to get care. When you need to be seen, consider the chart above to help you find care. If you're still unsure about what's best for your situation, sign in to myuhc.com > Find Care & Costs to locate an in-network provider or call the member phone number on your ID card for support. If you have a question about what's covered by your plan, visit myuhc.com > Coverage & Benefits for answers.

^{*}Source 2020: Average allowed amounts charged by UnitedHealthcare Network Providers and not tied to a specific condition or treatment. Actual payments may vary depending upon benefit coverage. (Estimated \$1,800.00 difference between the average emergency room visit, \$2,500, and the average urgent care visit, \$185.) The information and estimates provided are for general informational and illustrative purposes only and are not intended to be nor should be construed as medical advice or a substitute for your doctor's care. You should consult with an appropriate health care professional to determine what may be right for you. In an emergency, call 911 or go to the nearest emergency room.

^{**}The Designated Virtual Visit Provider's reduced rate for a 24/7 Virtual Visit is subject to change at any time.

Check your official health plan documents to see what services and providers are covered by your plan.



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

Complaint forms are available at

http://www.hhs.gov/ocr/office/file/index.html.

Phone: Toll-free 1-800-368-1019, 1-800-537-7697 (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.

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.

ةي غللا قدع اسمل تامدخ ن إف ، (Arabic) قيبر على الشدحت تنك اذا : ويبنت على عرف المدحت تنك اذا : ويبنت على عرب عرب المن عرب المناطقة عن ال

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 yániłti'go, saad bee áka'anída'awo'ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shǫǫdí ninaaltsoos nitł'izí bee nééhozinígíí bine'dę́ę́' t'áá jíík'ehgo béésh bee hane'í biká'ígíí bee hodíilnih.

Visit www.uhc.com/legal/required-state-notices to view important state required notices.

Member phone number services should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through the member phone number services are for informational purposes only and provided as part of your health plan. Wellness nurses, coaches and other representatives cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. Please discuss with your doctor how the information provided is right for you. Your health information is kept confidential in accordance with the law. Member phone number services are not an insurance program and may be discontinued at any time.

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. UnitedHealthcare also covers other routine services, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

Evaluation of New Technologies: UnitedHealthcare's Medical Technology Assessment Committee reviews clinical evidence that impacts the determination of whether new technology and health services will be covered. The Medical Technology Assessment Committee is composed of Medical Directors with diverse specialties and subspecialties from throughout UnitedHealthcare and its affiliated companies, guest subject matter experts when required, and staff from various relevant areas within UnitedHealthcare. The Committee meets monthly to review published clinical evidence, information from government regulatory agencies and nationally accepted clinical position statements for new and existing medical technologies and treatments, to assist UnitedHealthcare in making informed coverage decisions.

The information in this guide 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 of Benefits and Coverage and Certificate of Coverage/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.

In the event that the content of this communication or any representations made by any person regarding Caterpillar's employee benefits plans and programs conflict with or are inconsistent with the provisions of the governing documents, the provisions of the plan documents are controlling. To the fullest extent permitted by law, Caterpillar has reserved the right to amend, modify, suspend, replace or terminate any of its plans, policies or programs, in whole or in part, at any time and for any reason, by appropriate company action.

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The UnitedHealthcare® app is available for download for iPhone® or Android®.

Android is a registered trademark of Google LLC.

Google Play and the Google Play logo are registered trademarks of Google Inc.

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

All UnitedHealthcare members can access a cost estimate online or on the mobile app. None of the cost estimates are intended to be a guarantee of your costs or benefits. Your actual costs may vary. When accessing a cost estimate, please refer to the Website or Mobile application terms of use under Find Cost and Care section. Refer to your health plan coverage documents for information regarding your specific benefits.

24/7 Virtual Visits phone and video chat with a doctor are not an insurance product, health care provider or a health plan. 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.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates.

