

ONLINE SERVICES

A quick guide for members



A UnitedHealthcare Company

Find what you need at umr.com

Getting your benefits information is easy using **umr.com**.

You'll be able to find everything you're looking for in no time!



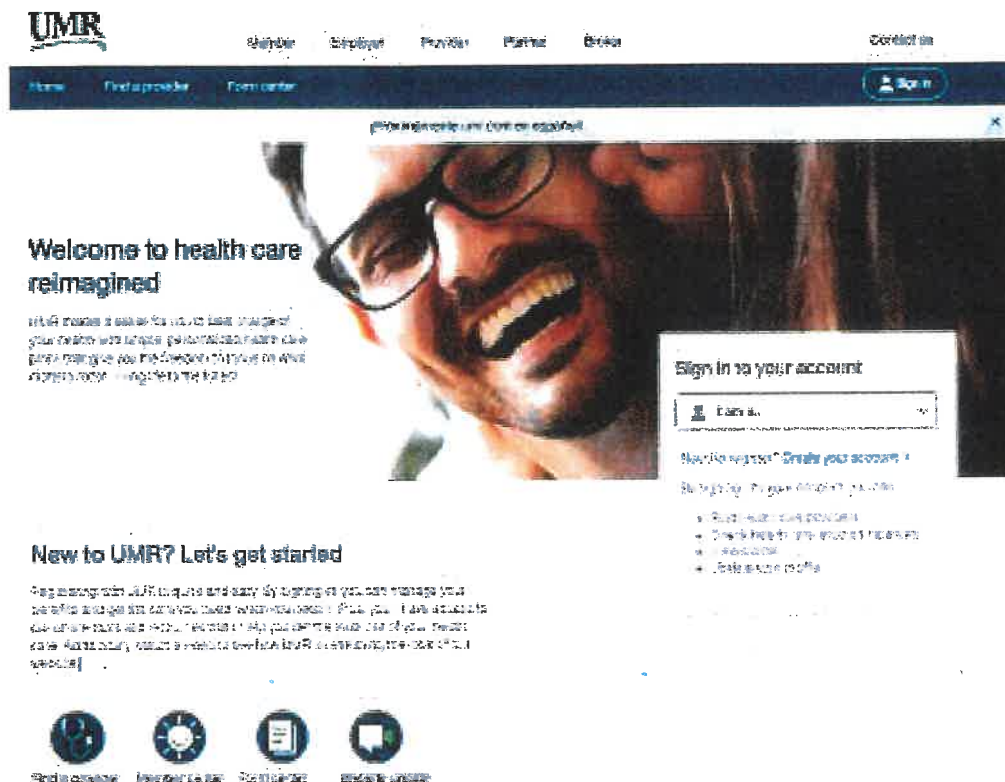
Registering for an Online Account on UMR.com



A UnitedHealthcare Company

It takes only a few steps to Register for an Account on UMR.com

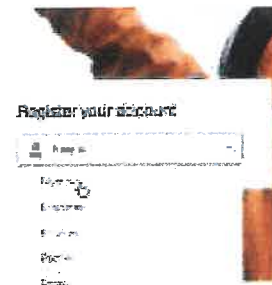
Please open your web browser and go to umr.com, Chrome works best for the website.



To the right of the screen, you will see the words "Create your account" box. Click on these words



Once you click on this button you see a drop-down box,
Please select Member then Register

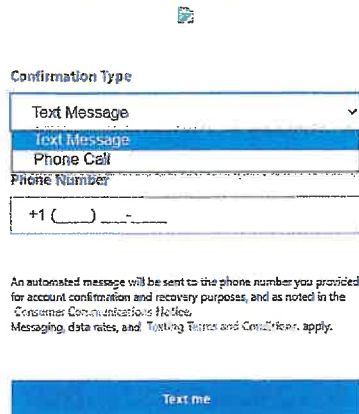


Welcomes to UMR!

Keep your account safe

To keep your account secure, please choose a confirmation method.

All fields are required unless marked as optional.



The screenshot shows a form titled "Confirmation Type" with a dropdown menu. The dropdown is open, showing three options: "Text Message", "Text Message", and "Phone Call". Below the dropdown is a "Phone Number" field with a placeholder "+1 () - - - - -". At the bottom of the form is a blue button labeled "Text me".

An automated message will be sent to the phone number you provided for account confirmation and recovery purposes, and as noted in the Consumer Communications Notice. Messaging, data rates, and Texting Terms and Conditions apply.

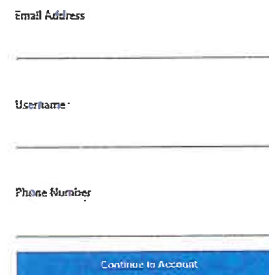
For additional Security, the system will ask you for a number to Call or Text for verification

If you select Phone Call, you will receive a call at number you have entered. The system will then give you a code to enter to create your account

Once your code has been confirmed you will Will see a new screen saying that your account has been created.

Your account has been created

You can change your information anytime in Account Settings.

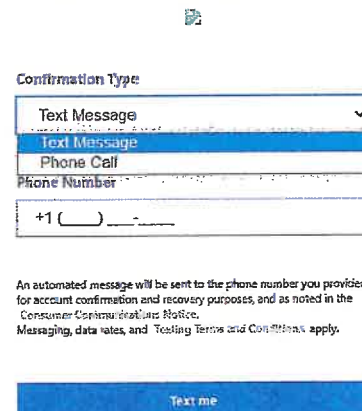


The screenshot shows a form with three input fields: "Email Address", "Username", and "Phone Number". Below the fields is a blue button labeled "Continue to Account".

Keep your account safe

To keep your account secure, please choose a confirmation method.

All fields are required unless marked as optional.



The screenshot shows a form titled "Confirmation Type" with a dropdown menu. The dropdown is open, showing three options: "Text Message", "Text Message", and "Phone Call". Below the dropdown is a "Phone Number" field with a placeholder "+1 () - - - - -". At the bottom of the form is a blue button labeled "Text me".

An automated message will be sent to the phone number you provided for account confirmation and recovery purposes, and as noted in the Consumer Communications Notice. Messaging, data rates, and Texting Terms and Conditions apply.

Call, chat or message online – choose what's convenient for you

Our team members are available to answer your questions via telephone or online chat and messaging at **umr.com**.

We're making it easier for you to get the answers you need – fast.



BY
PHONE



LIVE
CHAT



Three ways to connect

1

You can **call the customer service** phone number on your ID card. Your customer service team is available 24/7 to answer your questions..

2

To access chat, just log into your **umr.com** account and select the **Live Chat** icon. After you start a chat session, you'll be prompted to tell us more about your question. Within moments, a team member will join you to assist with your question.

3

To send and receive **secure messages** and documents, just log into your **umr.com** account and select the **Contact us** icon. A **Message Center** window will display where you can create your new message. You will be notified by email when you receive a response and can view it by logging in to your online account and selecting **Messages** from the options at the top of the screen. It's an easy way to exchange documents/files and receive reminders, alerts and other messages.

**excluding major holidays*

A launch pad for all your health benefit needs

From your personalized home page, you can see a summary of your benefits, link to key areas of the site using myMenu, find out what things you can do to keep your benefits up to date.

myMenu

One-click access to claims, coverage and other resources.



Things to do

Your personalized "Things to do" section will prompt you to take action in three main areas:

- Managing your account
- Reviewing claims and benefits
- Completing health and wellness activities

Benefits snapshot

A short summary of your benefits.

Welcome to **umr.com on the go**

As a UMR member you can access your benefits and claims information anytime, anywhere using your mobile device. There's no app to download. Simply log in to **umr.com**.

Things to do

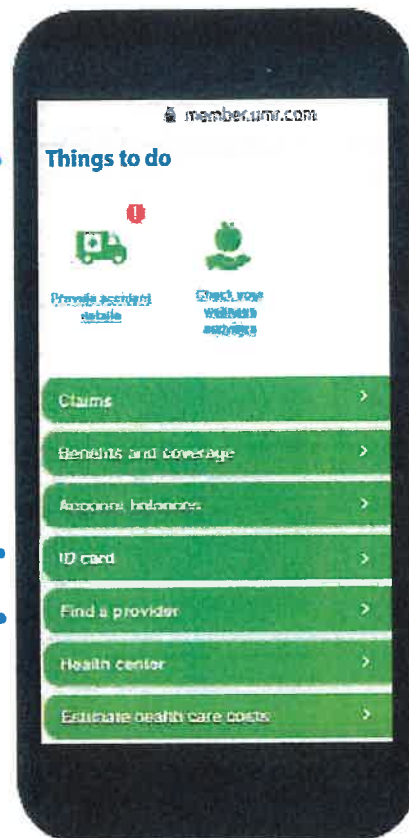
View upcoming tasks right from the homepage.

Share your ID card with your provider

Now there's no need to carry it with you, it's at your fingertips.

Find a provider

Find an in-network provider while you are on the go.



Estimate health care costs

See what you can expect to pay before receiving care with the Health Cost Estimator tool.

Look up claims

Review a claim for yourself or an authorized dependent.

Check your benefits

View medical/dental benefits and see who's covered under your plan.

Access account balances

Look up balances for your special accounts, including HRAs and FSAs.

Want to bookmark umr.com on your mobile device?

iPhone: Touch and hold the open book icon to add **umr.com**.

Android: Tap on the menu. Then select "Add Bookmark."

Note: The images above reflect available features within our mobile site. These features may or may not be available to all users depending on your individual and company benefits. If you are having trouble accessing or logging into our mobile site, contact the 800 number on your ID card for fastest service. You can click the "Contact us" link on the home screen.

Always have your ID card handy

With a couple of clicks, you can have a copy of your ID card pulled up on your smart phone or get a new card mailed to your home.

I want to

Allows you to easily
order an ID card or fax
a copy of your ID card.



View your ID card

Shows all the details of everything that is included on the front and back of your ID card, including your member ID, group number and customer service number.

Find a provider

Finding a network provider on **umr.com** or the **UMR app** has never been easier

1

Go to **umr.com** and select **Find a provider**

2

Search for **UnitedHealthcare Choice Plus Network** using our alphabet navigation or type **UnitedHealthcare Choice Plus** into the search box

3

For medical providers, choose **View providers**. For behavioral health providers (including counseling and substance abuse), select **Behavioral health directory**

The image shows a laptop screen displaying the UMR website's 'Find a Provider' page. The page has a header with the UMR logo and navigation links: Home, Find a provider, Enroll, Renew, My account, and Contact us. Below the header is a large image of a stethoscope and a hand holding a pen. The main content area is divided into two columns. The left column is titled 'Look up in-network health care providers' and contains text about the provider directory. The right column is titled 'Sign in to enhance your search' and contains a 'Member sign in' button. Below the sign-in button is a 'Need to register? Create HealthLink ID' link. The 'Search by' section has two radio buttons: 'Medical' (selected) and 'Dental'. Below the radio buttons is a search bar with the text 'UnitedHealthcare Choice Plus Network (English)' and a 'Search' button. A callout box points to the search bar and the 'Search' button, showing the search results. The callout box contains the text: 'network providers. To verify if the providers are in-network, contact the provider directly or call the toll-free number located on your health plan ID card. Information included in the provider directory is accurate and has been updated to the best of our knowledge. Important: Please verify the provider is still in the network prior to your next visit and before receiving any services.' Below this text is a 'Search by' section with two radio buttons: 'Medical' (selected) and 'Dental'. Below the radio buttons is a search bar with the text 'UnitedHealthcare Choice Plus Network (English)' and a 'Search' button. Below the search bar is a list of network providers, with 'A' and 'B' visible as the first two letters.

Additional Resources

- Behavioral health directory
- National vendors directory
- Add my provider to the network

View Providers →

(Continued)

Benefits and coverage summary at-a-glance

Know how much you've contributed to your deductibles and out-of-pocket expenses using this easy-to-read summary.

Benefit summary

Shows helpful benefit information, including co-pays, coverages and how much you have paid toward deductibles and out-of-pocket maximums.

Benefit search

Set up your search preferences by dependent(s), coverage type, network level and coverage period.

Get more details

Sometimes you need to know about a specific benefit or procedure and what is covered in your plan. Select from the drop down of **Additional benefits** information to get more details. Or, click on the **Summary plan description** button if you still can't find what you are looking for.

The screenshot shows a web-based interface for a benefits and coverage summary. It includes sections for Coverage Type, Network Level, Benefit Period, Copays, Benefit percentage, Deductible, Out-of-pocket, and Additional benefits. Annotations with arrows point to the 'Benefit search' section, the 'Benefit summary' section, and the 'Get more details' section.

Coverage Type
☐ Medical
☐ Dental

Network Level
☐ In-network
☐ Out-of-network

Benefit Period
☐ Current (01/01/2019)
☐ Previous (01/01/2018)
☐ Previous (01/01/2017)

- Benefits

Copays

Office visit	Specialist	Urgent care	Emergency room
\$20.00	\$50.00	\$25.00	\$100.00

Benefit percentage

Plan pays	You pay
80%	20%

Deductible
 Accumulated amount: \$0.00

Individual deductible
 \$0.00 out of \$500.00

Individual out-of-pocket
 \$0.00 out of \$1,500.00

Family out-of-pocket
 \$0.00 out of \$3,000.00

Additional benefits

Chiropractic
 Chiropractic A1
 Major medical benefits apply
 Dollar limit: maximum \$500.00 per calendar year

Office visits Copay
 \$20.00 copay per visit; major medical benefits apply

Not sure what you are looking for?
 Download a PDF of your plan summary information using the button below

[Download PDF](#)

View your claim activity

Claim search

Set up your search preferences by dependent(s), claim type, time period and status.

Claim type

- All
- Medical
- Dental

Time period

- All
- Last 30 days
- Last 6 months
- Date range

Status

- All
- Completed
- In progress
- Pending
- Investigation required

[Advanced member search](#)

I need to...

- View my disability claims

Get all the details

You have the option to view a PDF of your EOB or click the **View claim details** link to see more information about a claim.

Claim activity

Search 10 results

CLAIM INFORMATION	SERVICE DATE	PROVIDER	SELECTED AMOUNT	PLAN
Patient: Karyn Lane Claim #: 170012140 View claim details View EOB	02/01/19	Stegmaier, CM	\$1,071.00	001
Status: Completed				
Patient: Karyn Lane Claim #: 170012140 View claim details View EOB	02/01/19	Valley Hospital	\$1,581.00	\$1,189.00
Status: Completed				
Patient: Elizabeth Brown Claim #: 170012140 View claim details View EOB	02/01/19	Wm. Stearns, Dr.	\$200.00	\$0.00
Status: Pending - Approval required for at least \$100.00				
Patient: Karyn Lane Claim #: 170012140 View claim details View EOB	01/01/19	Marin, John, Dr.	\$0.00	\$0.00
Status: Completed				
Patient: Karyn Lane Claim #: 170012140 View claim details View EOB	01/01/19	Wm. Stearns, Dr.	\$1,071.00	\$1,189.00

[You're viewing:](#) 10 results
 \$1,171.00 TOTAL BILLED
\$2,169.00 PAID BY PLAN
\$4,042.00 YOU PAID

Take action

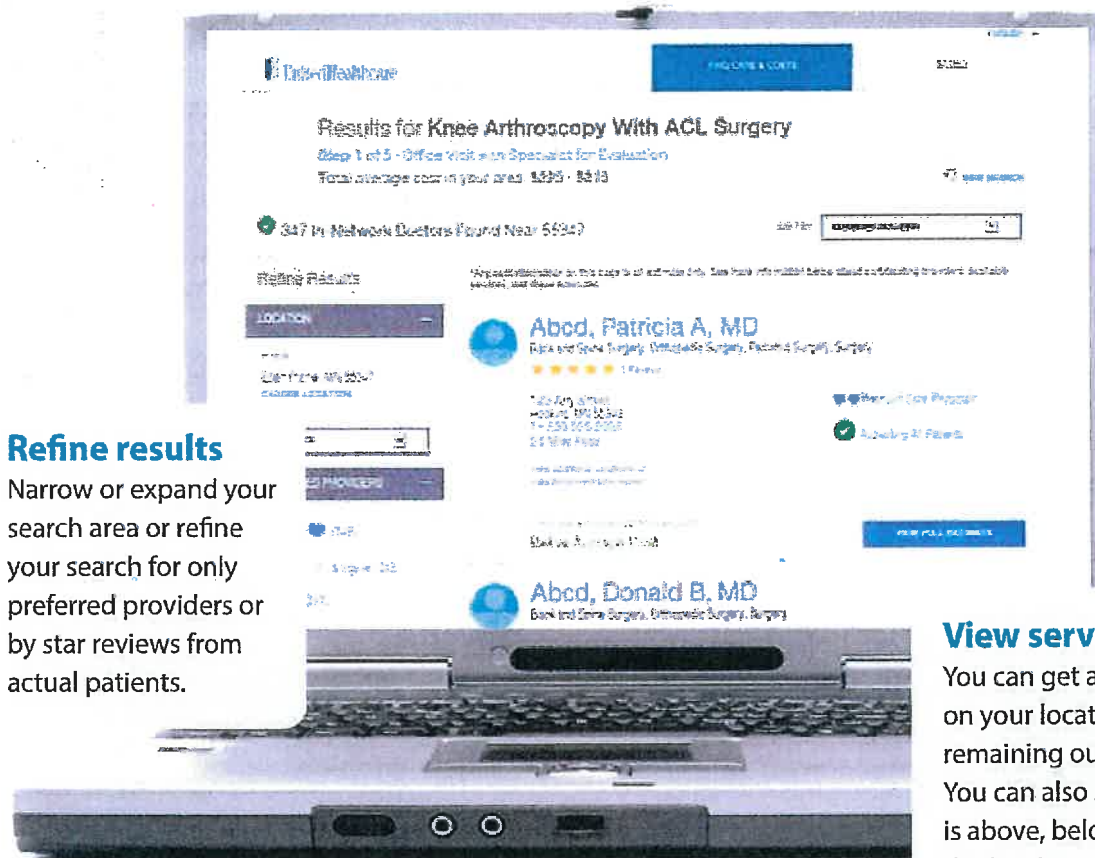
When you need to take action on a claim, UMR will let you know. Claims are sometimes put on hold because we need other information from you. Now you can easily **Click here** to give us the information needed to process your claim.

See your total spend

You can see how much you and your employer plan have paid toward your medical and/or dental expenses based on your search parameters.

Know what you'll pay before getting care

The health cost estimator allows you to research treatment options and learn about the recommended care and estimated costs associated with your selected treatment option. You can even access quality and efficiency measurements for participating providers.



Refine results

Narrow or expand your search area or refine your search for only preferred providers or by star reviews from actual patients.

View services & costs

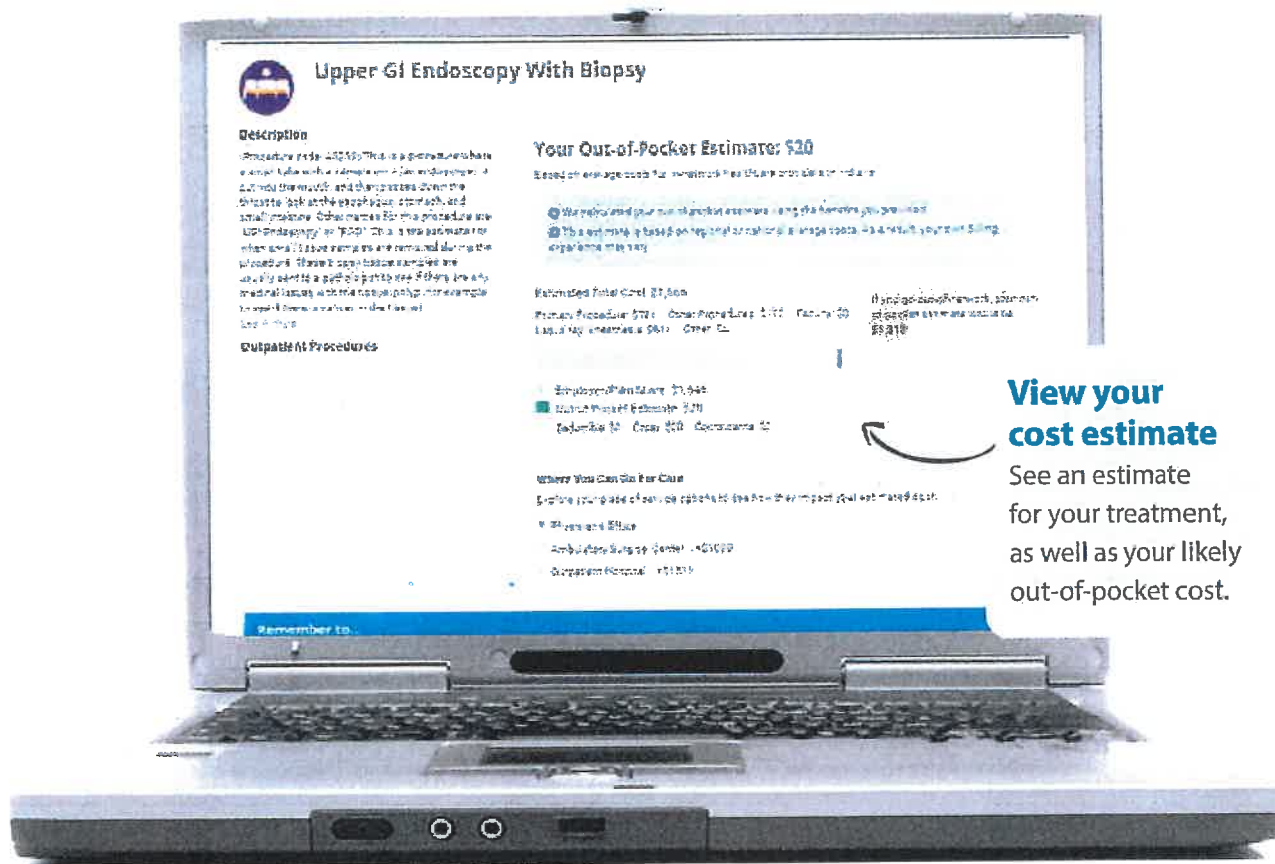
You can get an estimate based on your location, provider and remaining out-of-pocket cost. You can also see if a provider is above, below or in line with the local average cost.



It's easy to get started. Just look for the **Health cost estimator** tile on your personal home page.

Estimate your costs before getting care

The Treatment Cost Calculator offers cost estimates for hundreds of health care services. The estimates are based on the claim experiences of 43 million Americans. Most estimates highlight cost differences, depending on the type of medical facility you visit for care.



Health
cost estimator



It's easy to get started.
Just look for the **Health
cost estimator** tile on your
personal home page.

Something on your mind?

Message a dedicated therapist anytime, anywhere

With Talkspace online therapy, you can regularly communicate with a therapist, safely and securely from your phone or desktop. No office visit required.

Here's how Talkspace can fit your life

With Talkspace, you can message a licensed therapist, 24/7.

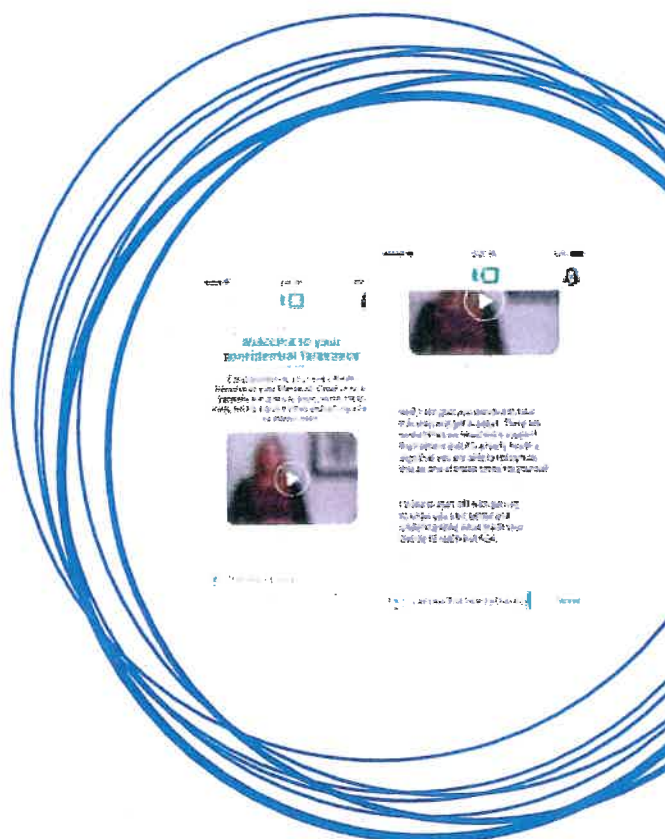
- Support for anxiety, depression, PTSD, substance use disorders, eating disorders, compulsive disorders and other conditions
- Specialized clinicians delivering services across all 50 states and are matched to members based on location, needs and preferences
- Find a therapist with an online matching tool
- Start therapy within hours of choosing your therapist
- Choose real-time face-to-face video visits by appointment, when needed
- You can also access Talkspace Psychiatry to schedule live video sessions with a psychiatrist trained in mental health care and prescription management for a tailored treatment plan

Talkspace is convenient, safe and secure.

Simply register (first visit only) and choose a provider and message anywhere, anytime at talkspace.com/connect.

After you register, download the Talkspace app on your mobile phone. Talkspace is supported by Chrome, FireFox, Safari or Edge browsers on your desktop computer.

Talkspace is your space to use in your time. It's covered under your plan's behavioral health benefits.**



iOS • Android • Desktop • Messaging • Voice • Video • Photo

*Data rates may apply.

**Copayment may apply and will be charged via credit card. You may use Talkspace as often as desired per week once copayment for that week has been paid. iOS is a trademark or registered trademark of Cisco in the U.S. and other countries and is used under license. Android is a registered trademark of Google LLC.

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

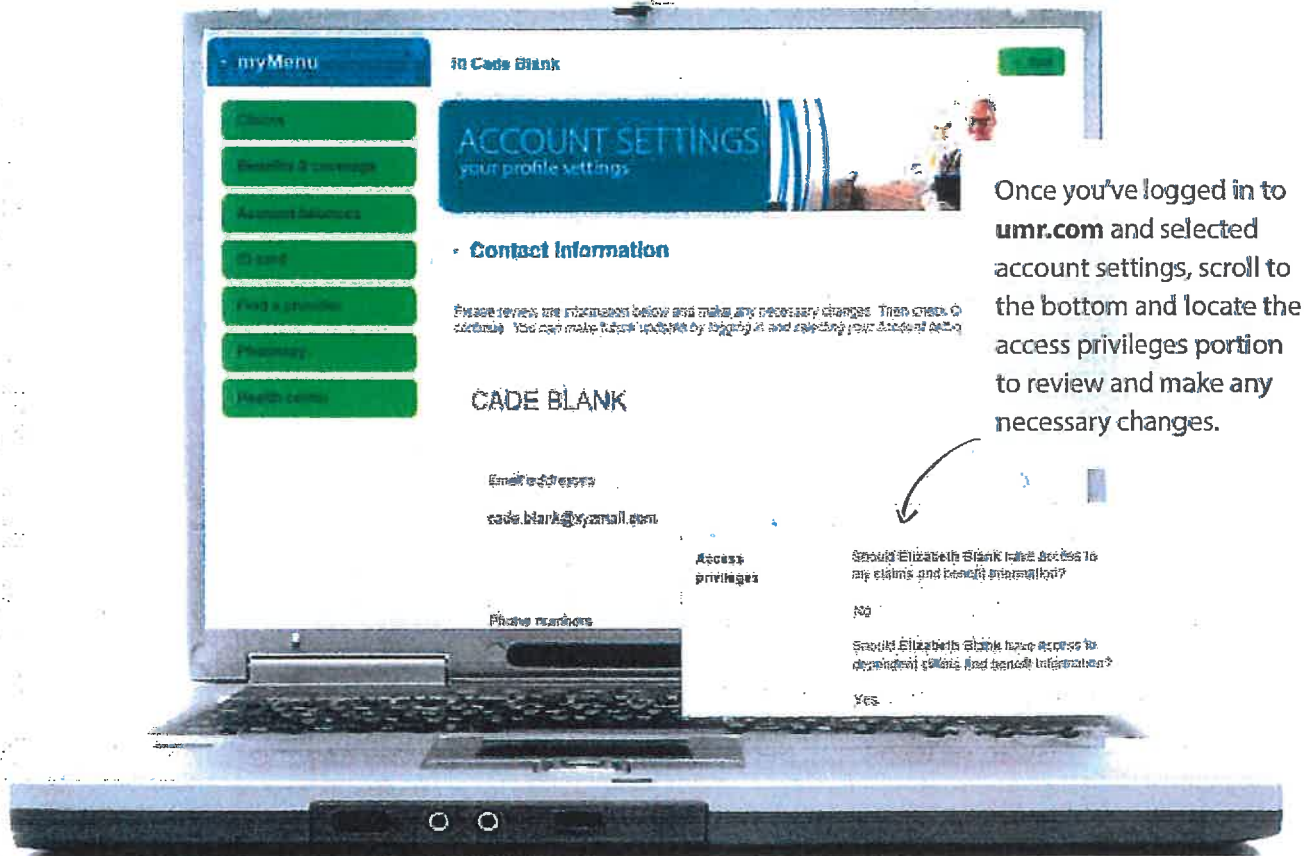
If you are experiencing thoughts of suicide or if this is urgent and an emergency, call 911 or 1-800-SUICIDE (784-2433) or 1-800-273-TALK (8255).

UMR does not recommend or endorse any treatment, medication, suggested approach, specific or otherwise. The information provided herein is for educational purposes only. For advice about specific treatments or medications, please consult your physician and/or mental health care provider. Certain conditions and restrictions may apply. Also, certain treatments may not be covered in some benefit plans. Check your health plan regarding your coverage of services.



Protecting your health information

UMR follows strict rules and security procedures to ensure your information stays safe and is accessed only by you or authorized providers and/or representatives. If you, your spouse or a dependent age 18 or older wishes to allow online access to another covered family member, each member must grant access to view their information:



Not registered? Dependents will be asked during the registration process to select family members they will allow to view their personal health information. To register, have your covered family member visit **umr.com** and select **Log in/Register**.

If your spouse or adult dependent has already registered for online services, your covered family member can log into **umr.com** to access their account settings.

A trusted source for health information

There are articles, images, videos and other visuals on diseases, conditions, symptoms, medications, injuries, surgeries, procedures and preventive health tips. This wealth of health knowledge comes in a variety of forms, including:

- Health encyclopedia
- Health navigator
- Drug information
- Drug interaction tool

Over 1,600 diseases and conditions are covered in male, female, adult and child views.

Just click on an area of the body or select from a list of nearly 300 symptoms to quickly find what you need to know.

Health education
library



It's easy to get started. Just look for the **Health education library** tile on your personal home page.

Important Prescription Benefit Information



Prepared Exclusively for:



MEBC – Auglaize County
Employees



Welcome to Elixir!

Dear Member:

This booklet contains important information about your prescription benefits.

There are a few things you should do to get the most out of your prescription benefits:

- 1) Register on our website at elixirsolutions.com
- 2) Call if you have questions at 800-771-4648

We look forward to serving you!

Your friends at Elixir

Welcome

MEBC – Auglaize County utilizes Elixir to administer the prescription drug plan.

Your Plan Benefit Details:

Effective: 1/1/2024

Elixir Group #10002211

Participating Pharmacy	Retail Pharmacy Network	Preferred Pharmacy Network	Mail Service
Maximum Day Supply Allowed	30 Days	90 Days	90 Days
Generic Copay	\$7	\$14	\$14
Preferred Brand Copay	\$35	\$70	\$70
Non-Preferred Brand Copay	50%	50%	50%
Specialty Copay	50% of the cost with a 30 day supply allowed per fill.		
Annual Rx/Medical Combined Deductible	\$1,800 per Individual, \$3,600 per Family beginning every January 1 st . Once you have met this amount, you will pay the above copays until the end of the benefit year, December 31 st , or until you reach the Out-of-Pocket maximum as stated below.		
Annual Rx/Medical Combined Out of Pocket Maximum	\$4,000 per Individual, \$6,000 per Family beginning every January 1 st . Once you have met this amount, you will pay \$0 copay until the end of the benefit year, December 31 st .		

Will I receive an ID card?

Prior to your effective date, you will receive a new UMR health insurance card which includes Elixir's logo. Show this card at any participating pharmacy when you get your prescription filled.

Online Benefits

2 Easy Ways to Register

1 Go to elixirsolutions.com

2 Call 800-771-4648



Fill out your member registration using your cardholder ID and you will have access to all your important prescription information including:

- View Your Claims History
- Find a Pharmacy
- Price a Drug
- Search Drugs & Alternatives
- Print a Temporary ID card
- Manage Your Family
- And Much More!

Once you are registered, you will have easy access to all of your prescription benefit information through any mobile device. If you are at your doctor's office and need to find out if the medication you are being prescribed is covered... check your phone. It's that easy!



Preferred Pharmacy Network

Need a Pharmacy? We have over 65,000 options

1. **Retail Pharmacies**—providing monthly fills
2. **Preferred Pharmacy Network**—retail pharmacies providing 90 day fills of maintenance medications
3. **Mail Order**—provides 90 day supply of maintenance medications



Want to Locate a Pharmacy?

1. Go to elixirsolutions.com
2. Login with your username and password
3. Click on 'Find a Pharmacy'
4. Search by City or State
5. Choose one of these pharmacies and your prescriptions will be covered according to your benefit plan

FAQs

What Copay will I pay for my medication?

Generic Copay: The amount you are required to pay for generic medications, which are low cost medications.

Preferred Brand Copay: The amount you are required to pay for formulary medications, which are high cost generics and low cost brand medications.

Non-Preferred Brand Copay: The amount you are required to pay for non-formulary medications, which are expensive brand medications that may have lower cost alternative(s).

Please refer to the copay structure table within this booklet. You will pay either the Generic copay or the Brand copay for drugs on the formulary. To determine if your medication is covered, please refer to the **Elixir Select Formulary**, which can be found by logging on to your Member Portal and clicking on *My Plan Information* → *Forms and Downloads*. Please ask your doctor to prescribe a Generic or Formulary drug whenever possible.

How can I find out more about cost savings?

Log into your Member Portal. Click on Rx Price Finder to find the cost of specific drugs and lower cost alternatives. Please discuss this information with your doctor. Switching to the preferred alternative will save you and your employer money.

I have a combined Medical/Rx deductible. How does Elixir work with my Health Plan?

You are required to pay the total discounted cost of prescriptions until the combined Medical/Rx deductible under the HDHP is met for the benefit year. After meeting the deductible, you are responsible for the copays until you reach your out-of-pocket maximum. Elixir will automatically submit all Rx claims to your Health Insurance Plan administrator for reimbursement.

Can I obtain a 90-day supply of my NEWLY prescribed medication?

Your prescription drug plan includes a "Starter Dose" program. Prior to getting a 90-day supply of any new medication, you must start with a 30-day supply at a participating retail pharmacy. This reduces waste in cases where your doctor tells you to stop taking the new medication early due to efficacy or side effects.

What is Step Therapy?

Step Therapy is a program designed for members to start with the most cost-effective and safest medication before progressing to more costly or risky therapies. With Step Therapy, members are required to take a Step One medication before trying a Step Two medication. For more information, call 800-771-4648 and speak to a pharmacy benefit advisor.

Will I pay more if I choose to fill a Brand when a Generic is available?

Yes. If your brand drug has a generic equivalent, you will pay higher copay in addition to the difference in cost between the brand and generic prescription. The difference in cost is not applicable towards the annual Deductible or the annual Out of Pocket Maximum.

What is the difference between a brand and a generic?

Cost. The FDA requires that a generic drug have the same quality and performance as its brand counterpart. Generics are less expensive because they are not required to repeat costly clinical trials the brand drug completed, along with lower advertising, marketing and promotion costs. To find out if your drug offers a lower cost alternative, log into your Member Portal and price a medication under Rx Price Finder.

What if a doctor prescribes a drug and the pharmacy offers a generic instead?

Generic drugs provide significant value to both you and your employer. The FDA requires that generics have the same strength, purity and stability as the original brand product so they work the same as their brand equivalent. Whenever possible, you should use the generic over the brand equivalent, which will save you and your plan money without sacrificing effectiveness.

What if I have more questions?

We want to help you! We highly encourage you to call a Elixir Pharmacy Benefit Advisor at 800-771-4648 or visit our website at elixirsolutions.com. In addition, if you encounter any issues when visiting your local pharmacy, please ask the pharmacist to call us so we can assist them right away!

This is practical information regarding your Prescription Benefit Plan. For a more detailed description of your Health Plan, please refer to your Summary Plan Description (SPD) provided by your plan