

Video Transcript: How a Health Plan Works

Screen visuals:

The UnitedHealthcare logo stretches into a ribbon that swipes across the screen and flies away.

Narrator:

Welcome in. We've got lots of good info to share with you — so let's get started.

Screen text:

Welcome

Let's get started

Narrator:

Health plans are designed to help take good care of you. Knowing how they work can help you get the most out of your benefits. Let's get into it.

Screen text:

How a health plan works

Screen visuals:

A lotus flower, apple, bandage, digital thermometer, smartwatch, blueberry, drug capsule and medical cross nestle into a neat pile.

Narrator:

Most common health plans have a premium, or plan costs, which is a routine payment typically taken out of your paycheck. This helps keep your plan active, so you can stay covered.

Screen visuals:

A calendar's pages flip forward, and a check mark appears on the same day of each month. A hand sets an empty drinking glass next to the calendar.

Narrator:

At the start of your plan year, you pay 100% of your covered health services until you meet your deductible, which is the dollar amount set by your health plan before it starts to pay costs.

Screen text:

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

Screen visuals:

A hand pours a pitcher of water into a drinking glass. When the glass is half full, a horizontal line appears, labeled "Deductible." A second hand holding another pitcher of water appears and begins pouring into the same drinking glass.

Narrator:

Once you reach your deductible, co-insurance begins. That's the percentage of costs your health plan shares with you. For example, you may pay 20% of a covered medical expense, and your plan will pay the remaining 80%.

Screen text:

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

Screen visuals:

Two streams of water fill a drinking glass. The halfway mark of the glass is labeled "Coinsurance." Water continues to pour into the glass.

Narrator:

Your plan offers you further protection with an out-of-pocket limit, which is the most you could pay for covered services in a plan year. Typically, coinsurance and deductibles count toward your out-of-pocket limit — but premiums don't. Once you've met the out-of-pocket limit, your plan's got you covered at 100% when you see network providers for eligible expenses the remainder of the year.

Screen visuals:

A drinking glass is filled nearly to the brim with water and ice cubes. At the top of the glass, a horizontal line appears, labeled "Out-of-pocket limit." Two streams of water begin to pour into the glass. The water rises up to the horizontal line. The top half of the drinking glass is labeled "Coinsurance and deductibles." The label at the top of the glass changes to "Health plan pays 100%."

Narrator:

Now let's take a closer look at your plan.

Screen text:

Your health plan

Narrator:

A network is a group of providers and facilities who've been contracted to deliver health care services, often at a discount. When you get care from network providers and facilities, you'll save money.

Screen text:

Network coverage

Save money by getting care from network providers

Screen visuals:

A cluster of circles appears. In each circle is a health care-related item, such as a heart, prescription bottle and health care provider. One by one, the circles turn into coins. A piggy bank appears, and the coins drop into it.

Narrator:

Keeping up on preventive care, such as routine wellness exams and certain recommended screenings and immunizations, can help support your overall health. So it's good to know that preventive care is covered for zero dollars out-of-pocket by most plans when you see network providers.

Screen text:

Preventive care

Supports your overall health

Screen visuals:

A calendar and apple appear. The calendar pages flip forward.

Narrator:

Your plan may require prior authorization before you receive certain medical services, treatment plans, prescriptions or durable medical equipment. Generally, if you're receiving services from network providers, your PCP or provider will obtain the prior authorization for you. But, if you go out-of-network, you may be responsible for obtaining it yourself. Without getting the prior authorization, you could be responsible for the full cost of the service. Once you're a member, you can check the UnitedHealthcare app or myuhc.com for details.

Screen text:

Prior authorization may be required for:

- Certain medical services
- Treatment plans
- Prescriptions
- Durable medical equipment

Screen visuals:

A heart, clipboard, prescription medication bottle and wheelchair appear one at a time and then disappear. A cluster of circles appears. In each circle is a health care-related item, such as a heart, prescription bottle and health care provider. The circles are replaced by 2 health care provider circles, which are connected by a dotted line. Three dollar signs appear next to one of the providers.

Check mark

Check mark

Check mark

Check mark

Narrator:

Now that you know how health plans work, you can get more out of your benefits. Thanks for watching.

Screen visuals:

A hot-air balloon drifts upward.

Narrator:

Once your plan is active, visit myuhc.com to browse around and learn more — or sign up for the programs and services that catch your interest.

Screen text:

Already a member?

Visit myuhc.com

Screen visuals:

Providing a quick way to access more information, a clickable button appears near the UnitedHealthcare logo.

Narrator:

Disclaimers are included on screen here, as well as in the video transcript.

Screen text:

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