

Health Plan Product Offering

UnitedHealthcare offers a wide variety of plan options that allow you to tailor your benefits to your business needs, choosing what you value in a health plan.

UnitedHealthcare

**Wisconsin Manufacturers and Commerce
10/1/2019**

| Plan Code | Coinsurance | | Deductible | | | | Out-Of-Pocket Maximum | | | | Copay/Per Occurrence | | | | | | | Deductible ⁵ Type | | |
|--------------------------------------|-------------|----------------|------------|----------|----------------|----------|-----------------------|----------|----------------|----------|----------------------|------------------------------|------------------------------|----------|-------------|--------------|-----------|---------------------------------|---------------|--------|
| | Network | Out of Network | Network | | Out of Network | | Network | | Out of Network | | Virtual Visits | PCP ¹ Ages 19+ | PCP ¹ Ages <19 | Spec | Urgent Care | ER | Lab X-Ray | | MRI, CT & PET | |
| | | | Single | Family | Single | Family | Single | Family | Single | Family | | | | | | | | | | |
| Choice Plus Insurance | | | | | | | | | | | | | | | | | | | | |
| AH-2J | 100% | 80% | \$2,000 | \$4,000 | \$4,000 | \$8,000 | \$3,500 | \$6,850 | \$7,000 | \$14,000 | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | NonEmb |
| AH-2L | 100% | 80% | \$3,500 | \$7,000 | \$6,000 | \$12,000 | \$6,350 | \$12,700 | \$12,700 | \$25,400 | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| AH-2K | 90% | 70% | \$2,000 | \$4,000 | \$4,000 | \$8,000 | \$3,500 | \$6,850 | \$7,000 | \$14,000 | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | NonEmb |
| BG-FE | 80% | 60% | \$1,500 | \$3,000 | \$3,000 | \$6,000 | \$5,000 | \$10,000 | \$10,000 | \$20,000 | \$10 | \$30 | \$0 | \$60 | \$100 | \$350 | 100% | Ded+Coin | Ded+Coin | Emb |
| BE-BK | 80% | 60% | \$2,500 | \$5,000 | \$5,000 | \$10,000 | \$5,000 | \$10,000 | \$10,000 | \$20,000 | \$10 | \$30 | \$0 | \$60 | \$100 | \$350 | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| AH-2N | 80% | 60% | \$3,500 | \$7,000 | \$6,000 | \$12,000 | \$6,350 | \$12,700 | \$12,700 | \$25,400 | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BE-BL | 80% | 60% | \$5,000 | \$10,000 | \$10,000 | \$20,000 | \$6,350 | \$12,700 | \$12,700 | \$25,400 | \$10 | \$30 | \$0 | \$60 | \$100 | \$350 | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BE-BP | 70% | 50% | \$3,000 | \$6,000 | \$6,000 | \$12,000 | \$6,350 | \$12,700 | \$12,700 | \$25,400 | \$10 | \$30 | \$0 | \$60 | \$100 | \$350 | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| Choice Plus Wisconsin | | | | | | | | | | | | | | | | | | | | |
| BM-A4 | 100% | 80% | \$2,000 | \$4,000 | \$4,000 | \$8,000 | \$3,500 | \$7,000 | \$7,000 | \$14,000 | \$10 | \$30 | \$0 | \$60 | \$100 | \$350 | 100% | Ded+Coin | Ded+Coin | Emb |
| Choice Insurance¹¹ | | | | | | | | | | | | | | | | | | | | |
| BE-BM | 80% | N/A | \$3,000 | \$6,000 | N/A | N/A | \$5,000 | \$10,000 | N/A | N/A | \$10 | \$30 | \$0 | \$60 | \$100 | \$350 | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BE-BN | 80% | N/A | \$4,000 | \$8,000 | N/A | N/A | \$5,000 | \$10,000 | N/A | N/A | \$10 | \$30 | \$0 | \$60 | \$100 | \$350 | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BE-BO | 80% | N/A | \$5,000 | \$10,000 | N/A | N/A | \$6,350 | \$12,700 | N/A | N/A | \$10 | \$30 | \$0 | \$60 | \$100 | \$350 | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| Choice Wisconsin | | | | | | | | | | | | | | | | | | | | |
| BG-FD | 80% | N/A | \$3,000 | \$6,000 | N/A | N/A | \$6,000 | \$12,000 | N/A | N/A | \$10 | \$30 | \$0 | \$60 | \$100 | \$350 | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BJ-UK | 80% | N/A | \$6,500 | \$13,000 | N/A | N/A | \$7,350 | \$14,700 | N/A | N/A | \$10 | \$25 | \$0 | \$50 | \$50 | 350+Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BJ-UL | 80% | N/A | \$7,000 | \$14,000 | N/A | N/A | \$7,350 | \$14,700 | N/A | N/A | \$10 | \$45 | \$0 | \$90 | \$50 | 350+Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Emb |



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

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| Plan Code | Coinsurance | | Deductible | | | | Out-Of-Pocket Maximum | | | | Copay/Per Occurrence | | | | | | | Deductible ⁵ | |
|---|-------------|----------------|------------|----------|----------------|----------|-----------------------|----------|----------------|----------|----------------------|------------------------------|------------------------------|----------|-------------|--------------|-----------|-------------------------|--------|
| | Network | Out of Network | Network | | Out of Network | | Network | | Out of Network | | Virtual Visits | PCP ¹ Ages 19+ | PCP ¹ Ages <19 | Spec | Urgent Care | ER | Lab X-Ray | MRI, CT & PET | Type |
| | | | Single | Family | Single | Family | Single | Family | Single | Family | | | | | | | | | |
| Choice Plus Insurance Motion H S A⁹ | | | | | | | | | | | | | | | | | | | |
| BG-ER | 100% | 80% | \$1,500 | \$3,000 | \$3,000 | \$6,000 | \$3,500 | \$6,850 | \$7,000 | \$14,000 | 10+Ded | 30+ Ded | \$0 | 60+ Ded | 100+Ded | 350+Ded+Coin | Ded+Coin | Ded+Coin | NonEmb |
| BG-ET | 100% | 80% | \$2,000 | \$4,000 | \$4,000 | \$8,000 | \$3,500 | \$6,850 | \$7,000 | \$14,000 | 10+Ded | 30+ Ded | \$0 | 60+ Ded | 100+Ded | 350+Ded+Coin | Ded+Coin | Ded+Coin | NonEmb |
| BG-EW | 100% | 80% | \$3,500 | \$7,000 | \$7,500 | \$15,000 | \$6,350 | \$12,700 | \$12,700 | \$25,400 | 10+Ded | 30+ Ded | \$0 | 60+ Ded | 100+Ded | 350+Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BE-BS | 80% | 60% | \$2,000 | \$4,000 | \$4,000 | \$8,000 | \$3,500 | \$6,850 | \$7,000 | \$14,000 | 10+Ded | 30+ Ded | \$0 | 60+ Ded | 100+Ded | 350+Ded+Coin | Ded+Coin | Ded+Coin | NonEmb |
| BE-BU | 80% | 60% | \$2,850 | \$5,700 | \$5,000 | \$10,000 | \$6,350 | \$12,700 | \$12,700 | \$25,400 | 10+Ded | 30+ Ded | \$0 | 60+ Ded | 100+Ded | 350+Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BJ-RG | 80% | 60% | \$6,250 | \$12,500 | \$11,000 | \$22,000 | \$6,650 | \$13,300 | \$13,100 | \$26,200 | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BM-H2 | 100% | 70% | \$3,000 | \$6,000 | \$10,000 | \$20,000 | \$3,000 | \$6,000 | \$20,000 | \$40,000 | Ded | Ded | Ded | Ded | Ded | Ded | Ded | Ded | Emb |
| BE-BW | 80% | 60% | \$5,000 | \$10,000 | \$10,000 | \$20,000 | \$6,350 | \$12,700 | \$12,700 | \$25,400 | 10+Ded | 30+ Ded | \$0 | 60+ Ded | 100+Ded | 350+Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BJ-RJ | 100% | 80% | \$6,500 | \$13,000 | \$13,000 | \$26,000 | \$6,650 | \$13,300 | \$14,900 | \$29,800 | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| Choice Insurance Motion H S A^{9, 11} | | | | | | | | | | | | | | | | | | | |
| BG-EY | 100% | N/A | \$3,500 | \$7,000 | N/A | N/A | \$6,350 | \$12,700 | N/A | N/A | 10+Ded | 30+ Ded | \$0 | 60+ Ded | 100+Ded | 350+Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BE-BX | 90% | N/A | \$3,500 | \$7,000 | N/A | N/A | \$6,350 | \$12,700 | N/A | N/A | 10+Ded | 30+ Ded | \$0 | 60+ Ded | 100+Ded | 350+Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| BM-HY | 80% | N/A | \$5,000 | \$10,000 | N/A | N/A | \$6,350 | \$12,700 | N/A | N/A | 10+Ded | 30+ Ded | \$0 | 60+ Ded | 100+Ded | 350+Ded | Ded+Coin | Ded+Coin | Emb |



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Wisconsin Manufacturers and Commerce

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| Plan Code | Coinsurance | | Deductible | | | | Out-Of-Pocket Maximum | | | | Copay/Per Occurrence | | | | | | | Deductible ⁵ Type | |
|--|-------------|----------------|------------|----------|----------------|----------|-----------------------|----------|----------------|----------|----------------------|------------------------------|------------------------------|-------|-------------|----------------|-----------|---------------------------------|---------------|
| | Network | Out of Network | Network | | Out of Network | | Network | | Out of Network | | Virtual Visits | PCP ¹ Ages 19+ | PCP ¹ Ages <19 | Spec | Urgent Care | ER | Lab X-ray | | MRI, CT & PET |
| | | | Single | Family | Single | Family | Single | Family | | | | | | | | | | | |
| Choice Plus Primary Advantage Wisconsin | | | | | | | | | | | | | | | | | | | |
| BJ-XJ | 80% | 50% | \$1,000 | \$2,000 | \$5,000 | \$10,000 | \$6,500 | \$13,000 | \$10,000 | \$20,000 | \$0 | \$0 | \$0 | \$100 | \$50 | \$250+Ded/Coin | Ded+Coin | Ded+Coin | Emb |
| BJ-XK | 80% | 50% | \$2,000 | \$4,000 | \$5,000 | \$10,000 | \$6,500 | \$13,000 | \$10,000 | \$20,000 | \$0 | \$0 | \$0 | \$100 | \$50 | \$250+Ded/Coin | Ded+Coin | Ded+Coin | Emb |
| BJ-XL | 80% | 50% | \$3,000 | \$6,000 | \$10,000 | \$20,000 | \$6,500 | \$13,000 | \$20,000 | \$40,000 | \$0 | \$0 | \$0 | \$100 | \$50 | \$250+Ded/Coin | Ded+Coin | Ded+Coin | Emb |
| BJ-XM | 80% | 50% | \$5,000 | \$10,000 | \$10,000 | \$20,000 | \$6,500 | \$13,000 | \$20,000 | \$40,000 | \$0 | \$0 | \$0 | \$100 | \$50 | \$250+Ded/Coin | Ded+Coin | Ded+Coin | Emb |
| Choice Primary Advantage Insurance¹¹ | | | | | | | | | | | | | | | | | | | |
| BJ-XX | 50% | N/A | \$1,000 | \$2,000 | N/A | N/A | \$7,350 | \$14,700 | N/A | N/A | \$0 | \$0 | \$0 | \$100 | \$50 | \$250+Ded/Coin | Ded+Coin | Ded+Coin | Emb |
| BJ-XY | 50% | N/A | \$2,000 | \$4,000 | N/A | N/A | \$7,350 | \$14,700 | N/A | N/A | \$0 | \$0 | \$0 | \$100 | \$50 | \$250+Ded/Coin | Ded+Coin | Ded+Coin | Emb |
| BJ-XZ | 50% | N/A | \$3,000 | \$6,000 | N/A | N/A | \$7,350 | \$14,700 | N/A | N/A | \$0 | \$0 | \$0 | \$100 | \$50 | \$250+Ded/Coin | Ded+Coin | Ded+Coin | Emb |

| Plan Code | Coinsurance | | Deductible | | | | Out-Of-Pocket Maximum | | | | Copay/Per Occurrence | | | | | | | Deductible ⁵ Type | |
|--|-------------|----------------|------------|----------|----------------|----------|-----------------------|----------|----------------|----------|----------------------|------------------------------|------------------------------|------|-------------|--|-----------|---------------------------------|--|
| | Network | Out of Network | Network | | Out of Network | | Network | | Out of Network | | Virtual Visits | PCP ¹ Ages 19+ | PCP ¹ Ages <19 | Spec | Urgent Care | Deductible ER, MRI, Op Surg, Scopic, Inpatient | Lab X-Ray | | |
| | | | Single | Family | Single | Family | Single | Family | | | | | | | | | | | |
| Choice Plus Flex Free Insurance⁶ | | | | | | | | | | | | | | | | | | | |
| AQ-18 | 80% | 50% | \$2,500 | \$5,000 | \$5,000 | \$10,000 | \$6,850 | \$13,700 | \$10,000 | \$20,000 | \$10 | 100% | 100% | 100% | 100% | \$250+Ded/Coin | Ded+Coin | Emb | |
| AQ-19 | 80% | 50% | \$3,500 | \$7,000 | \$7,000 | \$14,000 | \$6,850 | \$13,700 | \$14,000 | \$24,000 | \$10 | 100% | 100% | 100% | 100% | \$250+Ded/Coin | Ded+Coin | Emb | |
| AQ-2A | 80% | 50% | \$5,000 | \$10,000 | \$10,000 | \$20,000 | \$6,850 | \$13,700 | \$20,000 | \$40,000 | \$10 | 100% | 100% | 100% | 100% | \$250+Ded/Coin | Ded+Coin | Emb | |



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| Plan Code | Coinsurance | | Deductible | | | | Out-Of-Pocket Maximum | | | | Copay/Per Occurrence | | | | | | | | | | Deductible ⁵ |
|--|-------------|----------------|------------|----------|----------------|----------|-----------------------|----------|----------------|----------|----------------------|---------------------------|---------------------------|----------------------------|-------------------|-------------|----------------|----------|---------------------------|-------------------|-------------------------|
| | Network | Out of Network | Network | | Out of Network | | Network | | Out of Network | | Virtual Visits | PCP ¹ Ages 19+ | PCP ¹ Ages <19 | Spec ² Prem Des | Spec ³ | Urgent Care | ER | Lab/Xray | Major Diag. MRI, CT, etc. | I/P & O/P Surgery | Type |
| | | | Single | Family | Single | Family | Single | Family | Single | Family | | | | | | | | | | | |
| Choice Plus Premier PROformance Insurance | | | | | | | | | | | | | | | | | | | | | |
| AX-Q7 | 80% | 50% | \$2,000 | \$4,000 | \$5,000 | \$15,000 | \$7,150 | \$14,300 | \$10,000 | \$20,000 | \$0 | \$15 | \$0 | \$50 | \$100 | \$25 | \$300+Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| AX-Q8 | 80% | 50% | \$3,000 | \$6,000 | \$7,500 | \$15,000 | \$7,150 | \$14,300 | \$15,000 | \$30,000 | \$0 | \$15 | \$0 | \$50 | \$100 | \$25 | \$300+Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Emb |
| AX-Q9 | 80% | 50% | \$5,000 | \$10,000 | \$10,000 | \$30,000 | \$7,150 | \$14,300 | \$20,000 | \$40,000 | \$0 | \$15 | \$0 | \$50 | \$100 | \$25 | \$300+Ded+Coin | Ded+Coin | Ded+Coin | Ded+Coin | Emb |

Pharmacy Plans

Standard Rx Plans

| Rx Plan Code | Copays | | | | Deductible | | Mail Order Ratio |
|--------------|--------|--------|--------|--------|-----------------|-----------------|------------------|
| | Tier 1 | Tier 2 | Tier 3 | Tier 4 | Single | Family | |
| | | | | | | | |
| 0I | \$10 | \$35 | \$70 | N/A | N/A | N/A | 2.5 |
| 0I* | \$10 | \$35 | \$70 | N/A | Same As Medical | Same as Medical | 2.5 |

Primary Advantage Rx Plans

| Rx Plan Code | Copays | | | | Tier 3 and 4 Deductible | | Mail Order Ratio |
|--------------|--------|--------|--------|--------|-------------------------|--------|------------------|
| | Tier 1 | Tier 2 | Tier 3 | Tier 4 | Single | Family | |
| | | | | | | | |
| 454 | \$0 | \$50 | \$100 | \$250 | \$250 | \$500 | 2.5 |

* Combined Rx plan. HSA plans can only be paired with Combined Pharmacy plans.

Footnotes

- 1.Primary Care Physicians include General Practice, Family Practice, Internal medicine, Obstetrics-gynecology, and pediatrics.
- 5.“Embedded” deductible means once an individual meets their portion of the deductible, services are paid for that person without the entire family deductible being met.
“Non-Embedded” deductible means no covered family member will satisfy an individual deductible until the entire family deductible is met.
- 9.Copayments on HSA plans will be required after the deductible has been met and will continue to be required until the annual out-of-pocket maximum is met.
- 11.EPO and Navigate plans exclude coverage for services provided by Out-of-Network Providers with the exceptions of 1) Services performed in a Network Facility by hospital-based providers; and 2) Services performed under the Emergency Care benefit.



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