

# MEMBER GUIDEBOOK



## Go Paperless!

To receive your Member Guidebook (or other available documents) electronically, simply update your accounts settings on our website or mobile app. Register or login at [UniveraHealthcare.com/login](https://UniveraHealthcare.com/login)



Free Well-Child  
Visits Keep  
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## This Is Your 2020 Guide

This guidebook is published yearly for members in our Direct Pay Metal/Individual, Large Group, Small Group products. The information contained here is not intended to provide medical advice or to take the place of medical care.

It does not contain all the specifics about your plan. Please check your member handbook or member contract for other details or create/login to your account on our website, [UniveraHealthcare.com](http://UniveraHealthcare.com).

Any questions you have should be brought to the attention of your health care provider. We welcome your comments and suggestions.

### Please send letters to:

#### Editor, Member Guidebook

#### Univera Healthcare

205 Park Club Lane  
Buffalo, NY 14221

## We Speak Your Language

We offer a service that translates members' questions and medical providers' answers into more than 150+ languages. To talk to an interpreter:  
Commercial/ Group members - 1-800-499-1275  
Direct Pay/ Metal members - 1-877-687-6651  
(TTY/ TTD for both - 1-800-662-1220)



## Keep Your Contact Information Current



Have you moved or changed your phone number?

Don't forget to keep your health plan informed of address and other contact information changes, so that all important correspondence and health care follow-up calls can occur to enable you to get the most from your health plan.

- If your coverage is through a group or employer: Keep them informed of changes so they have your most current address and phone information - they manage the files we use to communicate with you.
- Commercial direct pay members: Please contact us, either through [UniveraHealthcare.com](http://UniveraHealthcare.com) or through the telephone number on your Member Card.

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## Your Online Wellness Resource

When you sign up for our email newsletter, you'll get valuable information to help you stay healthy and informed about your health insurance. We'll send you healthy recipes, fitness tips, and nutrition advice. You'll also get access to interactive tools and videos to help you make better health care decisions for you and your family.

Here are a few things that will help you get the most of your health plan. On our website you can find tools and resources to help you get the most out of your health plan.

Visit [Univerahealthcare.com/Login](http://Univerahealthcare.com/Login) to get started.

When you register for a new account or login with an existing one you will gain anytime access to your benefits and coverage 24/7.

### Plus, you can:

- View or Order Member Cards
- Find a Doctor, use our 24/7 nurse call line, or setup a Telemedicine visit
- View deductibles, spending and claims
- Access statements, forms and documents (you can even opt-in for paperless delivery for some) ....and more.

Also, the Univera Healthcare mobile app offers on the go convenience and access. All you have to do is login to get started and access to your health plan online!

**MAKE THE MOST OF YOUR MEMBERSHIP TODAY. SIGN UP AT  
[UNIVERAHEALTHCARE.COM/EMAIL](http://UNIVERAHEALTHCARE.COM/EMAIL)**



Our Marketplace plans are accredited by the National Committee for Quality Assurance



Our Medicaid and Medicare PPO plans are accredited by the National Committee for Quality Assurance



Our Medicare HMO and Commercial plans are accredited by the National Committee for Quality Assurance

## Important Information About Your Contract

Each year, we notify our members of certain disclosure information as required by law. To find more information and documents related to the following topics, please go to our website at [UniveraHealthcare.com](https://www.univerahealthcare.com), sign in as a member, select "Resources," then "Compliance Notices." You may also request a copy by contacting us by mail at the address on your Member Card, or by calling us at the telephone number listed on your Member Card.

**Privacy Notice:** This describes how medical information about you may be used and disclosed and how you can get access to this information.

**Women's Health and Cancer Rights Act:** Your plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prosthesis, and complications resulting from a mastectomy, including lymphedema.

**Third Party Designation:** If you are 65 or older and enrolled in a direct payment product or Medicare supplement plan, you have the right to designate another person (family or friend), known as a "third party," to receive notices of nonpayment of premium and notices of cancellation due to nonpayment of premium. To do so, you must fill out our Third Party Designee form available as described above.

**Provider Directory:** A current and searchable list of providers is available on our website, or you can request a printed copy.

**New York State Consumer Guide to Health Insurers:** The current guide is available from the New York State Department of Financial Services. The guide provides important consumer information on the performance of health maintenance organizations and other insurers. To view a copy of the guide online, visit [https://www.dfs.ny.gov/system/files/documents/2019/08/cg\\_health\\_insurers\\_2019.pdf](https://www.dfs.ny.gov/system/files/documents/2019/08/cg_health_insurers_2019.pdf). You can request a hard copy of the guide by calling New York State Department of Financial Services at **1-800-342-3736**. Find us in this guide under the name "Excellus (Univera Healthcare)."

## Surprise Bills: What You Need To Know

For members in these products: Direct Pay HMO and Indemnity, Group HMO, PPO, POS, EPO, Indemnity and Child Health Plus.

A New York state law protects health plan members from unexpected or "surprise" bills. These are bills for out-of-network health care services. Out-of-network means the health care provider has not agreed to accept the payment rate set by your health plan.



A surprise bill is an unexpected bill for:

**1) Non-emergency services by an out-of-network physician at an in-network hospital or ambulatory surgery center when:**

- An in-network physician is unavailable,
- An out-of-network physician provides the services without the member's knowledge, or
- A need for unforeseen medical services arises.

**2) An out-of-network referral. For example:**

- You received care by an out-of-network provider in an in-network doctor's office during the same visit,
- An in-network doctor sent a specimen taken from you in his or her office to an out-of-network laboratory or pathologist, or
- You received any other service by an out-of-network provider after being referred by an in-network physician, if referrals are required by your health plan.

### What should you do if you receive a surprise bill?

Complete an Assignment of Benefits form and send it to Univera Healthcare and the provider. You will only be responsible for your in-network copayment, coinsurance, or deductible.

Univera Healthcare will review your inquiry to ensure that the bill in question meets the state definition of a surprise bill. If it does and we initially denied your claim, we will send your health care provider a payment. If the provider is not satisfied with our payment, he/she may submit the claim to an independent dispute resolution entity (IDRE). The IDRE will determine if our payment or the provider's charge is the most reasonable. The IDRE's determination is binding on us and the provider.

Another way you can submit a dispute is by completing an IDR Patient Application. Send it to NYS Department of Financial Services, Consumer Assistance Unit/IDR Process, One Commerce Plaza, Albany, NY 12257.

For more information on this process, or to request the forms listed above, please visit our website at [UniveraHealthcare.com](https://www.univerahealthcare.com). Login as a "Member," navigate to the footer to "Let Us Help," where you'll access the "Contact Us" link, and ask us about "Surprise Bills" or anything else. If you don't have internet access, you may call the Customer Care telephone number listed on your Member Card.

## How To Contact Us

To request a duplicate Member Card, check the status of a claim or referral, order a copy of your contract, learn more about your benefits, request an updated provider directory or primary care physician change request form, and more, you can go online any time day or night at [UniveraHealthcare.com](https://www.univerahealthcare.com).

### YOU CAN ALSO CALL THE APPROPRIATE NUMBER BELOW:

**For claims, benefits, and all other questions:**

- Call the number on your Member Card for personalized care.

**Don't have your card handy?**

- **Commercial/Group members - 1-800-499-1275**
- **Direct Pay/Metal members - 1-877-687-6651**  
Hours: Monday–Thursday, 8 a.m. to 7 p.m.,  
Fridays, 9 a.m. to 7 p.m.
- **For TTY/TDD: Call 1-800-421-1220**

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Register or login at [Univerahealthcare.com/login](https://www.univerahealthcare.com/login)  
**It's easy!**





## Free Well-Child Visits Keep Kids Healthy

Get in the habit of bringing your children to their doctor for routine checkups, even when they are well. Well-child visits give you and your child the opportunity to get to know the doctor, who can monitor your child's development and identify potential problems early on. Well-child visits are covered at no cost when you see a doctor in our network.

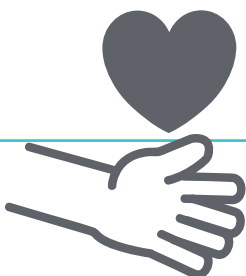
Your child's doctor will also advise you on injury prevention and healthy lifestyle issues appropriate for your child, including nutrition, exercise, dental health, tobacco use, alcohol and substance abuse, and prevention of sexually transmitted diseases. A school or sports physical does not qualify as a well-child visit.

The current clinical guidelines for preventive health recommendations for children are shown on the next page.

## Caring For You

Our plans have a process for reviewing health care services to ensure that they are evidence-based, medically necessary, and being performed at the right level of care by qualified professionals. This process is called utilization management (UM) and it is conducted by licensed health care professionals and practitioners.

UM decision-making is based solely upon the application of nationally recognized clinical criteria, transparent corporate medical policies, and the existence of coverage. We do not, in any way, encourage decisions that result in underutilization or reward UM decision makers for denials of coverage or limits on access to care.



## Give Your Baby The Right Start

When you're pregnant, your first concern is the health and welfare of your unborn baby. Getting complete prenatal care right from the start will help ensure that your baby is as healthy as possible. That's why regular prenatal visits are critical, even if previous pregnancies were problem-free.

Regular prenatal care visits provide you with childbirth education, counseling, and family support. It also includes a complete health screening and evaluation of risk factors that may affect your health and the health of your baby.

Details on the medical tests you'll have and the topics you'll discuss during your prenatal visits with your health care provider are available on our website.

Learn more about a healthy pregnancy. Visit [UniveraHealthcare.com](http://UniveraHealthcare.com). Choose "Health and Wellness" and then choose "Preventive Health," then "Screenings and Immunizations," then "Recommended Screenings," then "Healthy Pregnancy."

## Lead Poisoning: What Every Parent Needs To Know Lead is a very strong poison.

Children under age 6 are at the highest risk, but it can affect anyone. If you have questions or concerns, talk to your health care provider. Your physician may have asked you about the potential risk of lead exposure, but a blood lead test is the only way to know for sure. It was commonly used in gasoline and house paint. It has been banned in the United States for many years, but is still found in some older homes, toys from other countries and even old fishing sinkers.

The truth is that lead can be anywhere. New York State Public Health Law and Regulations require health care providers to:

- Assess all children ages 6 months to 6 years for risk of lead exposure at least annually as part of routine care, and obtain a blood lead test on all children found to be at risk.
- Obtain a blood lead test for all children at age 1 and again at age 2.

Learn more at [UniveraHealthcare.com](http://UniveraHealthcare.com) or [health.ny.gov/environmental/lead/](http://health.ny.gov/environmental/lead/).

## CDC Recommends HPV Vaccine For Preteens And Teens

HPV vaccination is recommended at ages 11-12 to protect against cancers caused by HPV infection.

Human papillomavirus (HPV) vaccine protects against cancers caused by HPV infection.

HPV is a common virus that infects teens and adults. About 14 million people, including teens, become infected with HPV each year. HPV infection can cause cervical, vaginal, and vulvar cancers in women and penile cancer in men. HPV can also cause anal cancer, cancer of the back of the throat (oropharynx), and genital warts in both men and women.

Talk to your child's health care provider to learn more about HPV vaccine and the other vaccines that your child may need. You can also find out more about HPV vaccine at [www.cdc.gov/hpv](http://www.cdc.gov/hpv).



# Preventive Health Visits Age In Years

Regular preventive health appointments with your child's health care provider help you track your child's development and give him/her an understanding of the importance of good health care. At each well visit age appropriate developmental/psychosocial/behavioral assessments, health screenings, and immunizations are completed. Compiled with information from the U.S. Centers for Disease Control and Prevention (CDC), 2019, [cdc.gov/vaccines/](https://cdc.gov/vaccines/) and American Academy of Pediatrics Bright Futures [brightfutures.aap.org/](https://brightfutures.aap.org/)

AGE	IMMUNIZATIONS	WELL VISIT SCHEDULE	ANTICIPATORY GUIDANCE
Birth	Hepatitis B: Dose 1	3 to 5 days	<p><b>ALL AGES</b></p> <ul style="list-style-type: none"> <li>Perform age-appropriate risk assessments, immunizations and medical screenings (blood pressure, head circumference, length, height, weight, depression, vision, hearing, lead, tuberculosis, anemia, oral health, blood pressure, dyslipidemia, HIV, alcohol/substance abuse and sexually transmitted infections) and measure and plot BMI percentile based on age and gender, metabolic syndrome, hypertension</li> <li>Social determinants of health</li> <li>Living situation and food security</li> <li>Family relationships and support</li> <li>Parenting skills/ parent and family well-being/ family adjustment/ functioning</li> <li>Healthy nutrition and feeding</li> <li>Overweight, obesity and eating disorders</li> <li>Oral/dental health: brush teeth/regular visits to dental provider</li> <li>Effects passive smoking, anti-tobacco message</li> <li>Media exposure and uses</li> <li>Safety seat (under 8 years), lap shoulder belt, child in back seat/ smoke detector/carbon monoxide detectors</li> <li>Safe storage of drugs, toxic substances, firearms and matches</li> <li>Poisoning prevention/ activated charcoal, poison control number/ violence prevention</li> <li>Sun exposure/ sunscreen use/ heatstroke</li> <li>Measure and plot weight for length until 24 months and body mass index (BMI) beginning at 24 months</li> <li>Perform developmental/ behavioral/ psychosocial and autism screening and follow-up</li> </ul>
1 to 2 months	Hepatitis B: Dose 2	1 month	
2 months	DTaP: Dose 1, Polio: Dose 1, Hib: Dose 1 PCV13: Dose 1, Rotavirus: Dose 1	2 months	
4 months	DTaP: Dose 2, Polio: Dose 2, Hib: Dose 2 PCV13: Dose 2, Rotavirus: Dose 2	4 months	
6 months	DTaP: Dose 3, Hib: Dose 3, PCV13: Dose 3 Rotavirus: Dose 3, Influenza	6 months	
6 to 18 months	Polio: Dose 3 Hepatitis B: Dose 3		
12 to 15 months	Influenza, Hib: Dose 4, PCV13: Dose 4 MMR: Dose 1, Varicella: Dose 1	1 year	
12 to 23 months	Hepatitis A: Dose 1, Hepatitis A: Dose 2- 6 months after 1st dose		
15 to 18 months	DTaP: Dose 4	15 months 18 months	
2 years	Influenza	2 years	
3 years	Influenza	30 months 36 months	
4 to 6 years	Influenza, DTaP: Dose 5, Polio: Dose 4 MMR: Dose 2, Varicella: Dose 2	Yearly	
7 -10 years	Influenza	Yearly	
11 to 12 years	Influenza, Tdap, MenACWY: Dose 1 HPV: Dose 1, HPV: Dose 2- 6 to 12 months after 1st dose	Yearly	<p><b>IMMUNIZATION GUIDE</b></p> <p>DTaP: Diphtheria, Tetanus, Pertussis IPV: Polio Hib: Haemophilus influenzae type b Tdap: Tetanus, Diphtheria, Pertussis MenACWY: Meningococcal Disease HPV: Human Papillomavirus PCV13: Pneumococcal Disease MMR: Measles, Mumps, Rubella Varicella: Chickenpox</p>
13-15 years	Influenza	Yearly	
16 years	MenACWY: Dose 2, Influenza	Yearly	
17 years	Influenza	Yearly	

## When It's An Emergency



In an emergency medical situation, you should go directly to the nearest emergency room or **call 911** for help.

You do not need prior authorization for treatment of emergency medical conditions.

However, it is best if you can have someone telephone your doctor/primary care physician (PCP) as soon as possible so that he or she knows you are being treated.

Even if you can't make the call when you are being treated, please have someone notify your PCP that you were treated for an emergency medical condition as soon as possible, preferably within 48 hours. This will ensure that your PCP can help manage your health care.

If you are treated for an emergency medical condition while out of the service area, please refer to your contract for follow-up care coverage information.



## Urgent Care Is Convenient Care

When a non-emergency medical issue doesn't require an emergency room visit, or if you can't get in to see your physician, you can visit an urgent care center and get the care you need.

No appointment is necessary. A physician is always on duty, supported by other medical staff. Pharmacy services may also be available.

For Univera Healthcare members, the cost of a visit is the usual copay for a physician at many area urgent care facilities.

Please ensure the provider you select is participating with your benefit plan. Contractual rules still apply. For benefit information, call Customer Care at the phone number on your member card.

To learn more or find your nearest urgent care facility, go to **UniveraHealthcare.com/urgentcare**, or call the telephone number on your member card.

## Adult Preventive Care



### Take Charge of your Health

For all adults it is important to schedule routine check-ups with your primary care physician to help identify risk factors and problems before they become serious.

These preventive care visits may include health services like age and gender specific health screenings, counseling discussions used to prevent illnesses, disease, and other health problems, or to detect illness at an early stage when treatment is likely to work best, for example, screening for hepatitis C for individuals born between 1945 and 1965, cancer screenings, immunizations and detection or management of chronic conditions such as diabetes, hypertension or cardiovascular disease.

Getting recommended preventive services and making healthy lifestyle choices are key steps to good health and well-being.

### Breast Cancer Screening

The CDC defines how screening can help find breast cancer early, when it is easier to treat.

All women need to be informed by their health care provider about the best screening options for them. When you are told about the benefits and risks of screening and decide with your health care provider whether screening is right for you—and if so, when to have it—this is called informed and shared decision-making.

Although breast cancer screening cannot prevent breast cancer, it can help find breast cancer early, when it is easier to treat. Talk to your health care provider about which breast cancer screening tests are right for you, and when you should have them. The USPSTF (U.S. Preventive Services Taskforce) recommends that women who are 50 to 74 years old and are at average risk for breast cancer get a mammogram every two years. Women who are 40 to 49 years old should talk to their health care provider or other health care professional about when to start and how often to get a mammogram.

### Colon Cancer Screening

**Facts about Colon Cancer Screening:** Tens of thousands of adults in upstate New York are choosing not to be screened for colon cancer. Colon cancer is the second-leading cause of cancer death among adults in the United States.

CDC Colorectal Cancer Screening Fast Facts

- If you are age 50 to 75 years old, you should get screened for colorectal cancer.
- The U.S. Preventive Services Task Force recommends screening beginning at age 50. Some groups recommend starting earlier, at age 45.

**The vast majority of new cases of colorectal cancer (about 90 percent) occur in people who are 50 or older.** Millions of people in the United States are not getting screened as recommended. They are missing the chance to prevent colorectal cancer or find it early, when treatment often leads to a cure.

- Less than half of adults aged 50 to 54 are up-to-date with colorectal cancer screening.
- Screening rates are much lower among adults who are 50 to 64 years old than among those 65 or older.

If you think you may be at increased risk for colorectal cancer, learn your family health history and ask your health care provider if you should begin screening before age 50.

## "Hey, There's An App For That!" - Wellframe™

Wellframe is a mobile app for your smartphone or tablet that connects you to your Univera Healthcare Member Care Management team. Whenever you have a question about your health, use Wellframe to ask your care manager. Wellframe turns your care manager's instructions into an easy health checklist. With Wellframe, you'll know what to do each day, and your care team will be there to help along the way.

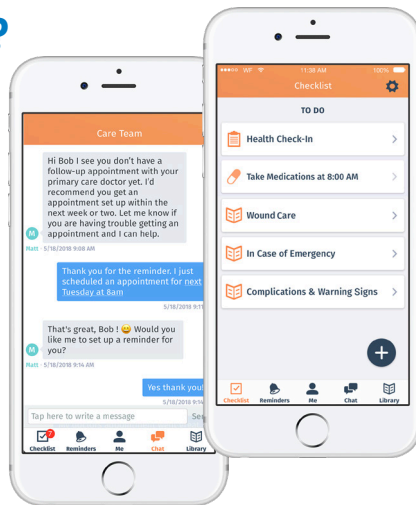
### How Does Wellframe Work?

You can **Chat** with your **Care Team**, a nurse care manager who can answer medical questions about your health conditions or help you manage your medications. Your **Univera Healthcare Health Advocate**, who helps you stay on track with your health goals by providing support and encouragement whenever you need it.

Your **Checklist** will have a daily list of tasks to complete and helpful articles to read about your health. You can set up **Reminders** on your phone to help you keep track of your medications and appointments. The **Me** tab shows a summary of your progress. Learn more about managing your health in your **Library**, where you will find helpful articles and videos.

For more info, go to [UniveraHealthcare.com](http://UniveraHealthcare.com), login as a "Member," then click [Univerahealthcare.com/Wellframe](http://Univerahealthcare.com/Wellframe).

\* Talk to your employer or benefits administrator to see if this program is available to you



## Managing Chronic & Complex Conditions\*

No one should have to face managing their health conditions alone. If you or a family member are dealing with an existing chronic condition (e.g., asthma, diabetes, heart disease or depression) or a complex chronic condition (e.g., HIV, cancer, stroke, spinal cord injury), we have resources to help you to better manage and understand your condition(s).

### UNIVERA HEALTHCARE MEMBER CARE MANAGEMENT - Single point of contact for your health care concerns

Care Management consists of a team of professionals that includes registered nurse care managers, registered dietitians, social workers, respiratory therapists and pharmacists. The team is available to support and guide you through the complexities of today's health care system.

Your care manager can assist with:

- Help and guidance to identify and reach your goals to maintain or improve your health.
- Finding answers to questions and providing education about a health condition, treatment, or keeping up with your treatment plan.
- Understanding your medications and taking them as directed by your health care provider.
- Finding services, resources, and care you may need.
- Talking with your health care provider to assist with arranging the best care for you.

Contact an experienced care manager for help in managing any chronic or complex condition by calling **1-800-860-2619** from 8 a.m. to 4:30 p.m. EST or email us at [Case.Management.Referral@univerahealthcare.com](mailto:Case.Management.Referral@univerahealthcare.com). TTY users may call **1-800-662-1220**. You can contact us at these numbers at any time if you would like to opt in or out of our programs. For assistance in managing a behavioral health condition, call **1-800-277-2198**. TTY users may call **1-800-662-1220**.

Your care manager will contact you the next business day.

\* Talk to your employer or benefits administrator to see if this program is available to you

## Quitting Smoking

It's not easy to quit smoking but once you do there are immediate health benefits. Take the first step with our educational resources and programs. Our award winning Quit for Life® program provides support to help you quit for good. Sign up online or call **1-800-442-8904**.



### New York State Smokers' Quitline

If your plan doesn't include Quit For Life, the New York State Smokers' Quitline offers useful and proven resources to help people who want to quit smoking. Call the Quitline at **1-866-NY-QUIT (1-866-697-8487)** or visit their website at: [www.nysmokefree.com](http://www.nysmokefree.com)

**Not in New York state?** Quitline services in all U.S. states can be accessed through a toll-free national portal number provided by the National Cancer Institute at **1-800-QUIT NOW (1-800-784-8669)**.

Callers can access additional, language-specific quitline services via **1-855-DÉJÉLO-YA** for service in Spanish (**1-855-335-3569**), other languages are also available.

## We Emphasize Quality For You

For every journey in life, we're here for you each step of the way. We have a plan to meet your needs.

Our Health Plan's mission is to improve the quality of life in the communities that we serve. We strive to empower members to become active participants in their personal health across their life's journey through educated and informed decision making.

We collaborate with hospitals, primary care practitioners and specialists in all the communities we serve striving to ensure the safe, high quality and cost-effective care for you, our members. We routinely evaluate the quality of health care services and your experience/satisfaction rating of the health care services you received across our provider network.

You can find information about our Quality Improvement Program and the progress made toward meeting its goals by visiting us at **UniveraHealthcare.com** or by calling Customer Care at the phone number on your Member Card.

## After Office Hours

If you get sick or hurt and need care after regular office hours, call your doctor's office first, unless it is an emergency medical condition. Your doctor/primary care provider (PCP) knows your medical history and is the best person to help you. Your PCP may use an answering service or another doctor who is on call to make sure you can get medical care when you need it.

Your PCP or the on-call doctor will decide if you need treatment right away or if you can wait for regular office hours. If you do need care, your doctor may see you at his or her office, send you to his or her on-call doctor, send you to an urgent or after-hours care center, or send you to an emergency room.

## If Your Doctor is Not Available, Telemedicine May Be an Option for You

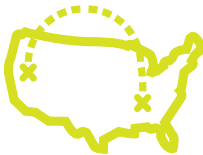


Telemedicine gives you fast and convenient access to medical and behavioral health care from the comfort of your home, desk, or hotel room through your phone, tablet, or computer.

Physicians are Board-Certified and available throughout the United States, 365 days of the year, 24 hours a day, to care for your non-emergencies. Schedule an appointment or see the first available provider.

Video conference with a licensed therapist or psychiatrist by scheduling an appointment on your time. You can even schedule reoccurring appointments with the same provider.

## Going Away To College Or On Vacation?



Don't forget to bring a copy of your Member Card. Your health plan can help you and your family obtain emergency care when needed. To request a duplicate Member Card, call Customer Care at the number on your Member Card or log on to [UniveraHealthcare.com](http://UniveraHealthcare.com). or through our mobile app.

### Non-Emergency Medical Common Conditions Treated:

- Cold & flu
- Nausea, constipation, diarrhea
- Rashes
- Aches and pains
- And more

### Behavioral Health Common Conditions Treated:

- Anxiety
- Depression
- Loneliness
- Grief
- And more

## Need To Find A Doctor?



Our website can help you. You'll find:

- Doctors
- Dentists
- Hospitals
- Urgent Care Centers
- Centers of Excellence

Search by specialty, location, hours, language spoken, credentials, and more. Our printed provider directories are updated every three months, and the online lists are current.

If you would like the most recent directory, visit the website on your Member Card, or call the Customer Care telephone number listed on the card if you do not have internet access.

### Many ways to register and get started:

- Through your Univera Healthcare web portal – [MemberUnivera.com](http://MemberUnivera.com)
- Text Univera to 635-483 for a faster way to register your account
- Download the MDLIVE mobile application on your phone or tablet
- Call MDLIVE and speak to a Customer Care agent – 1 (866) 692-5045

### Cost of a Telemedicine Visit

- Payment accepted: Credit card, HRA, HSA or FSA cards
- Non-emergency medical visits will not exceed \$40 and can be less
- Payment responsibility varies by group and plan
- Behavioral health visits with a therapist will not exceed \$90 and visits with a psychiatrist will not exceed \$150 and can be less.
- MDLIVE will know the amount you owe when you register your account

### Some reasons to use your telemedicine benefit:

- Primary care physician is not available
- Instead of going to the emergency room or urgent care center for non-emergency medical conditions
- Traveling in the United States
- Have college aged children who are out of town
- Unable to leave work
- And more!

**Sign up today before using the service!**



## Enjoy PERKS 4 U and Wellness Savings\*



### Perks 4 U

Members receive exclusive discounts on services at participating massage therapy and acupuncture providers and physical fitness facilities.



### Wellness Your Way & Wellness Rewards – flexible rewards paid upfront

Get up to \$300 on a pre-loaded debit card that can be used for any wellness-related purchases, including healthy meal subscriptions, on-demand home workouts, kids' activities, gym memberships, and more.

### Information Online

Instant access to many health topics.



### Dental Rewards – go to the dentist, get cash

Just provide proof that you and your family made it to the dentist for your annual cleanings, and we'll pay you up to \$300 (\$100/person) to use as you wish.

\* Talk to your employer or benefits administrator to see if this program is available to you

## When You Visit A Specialist...

Please be sure to ask your specialist to send a report to your primary care physician (PCP). This will help your PCP manage your health care.

## Have Arthritis? Facing A Hip Or Knee Replacement? You Have Options.

Explore more at [UniveraHealthcare.com](http://UniveraHealthcare.com). Review expert decision-making tools targeted to support people considering hip/knee replacement surgery.

These tools can help you to better understand your treatment options when you talk with your physician.



## Establishing Care With A New PCP

Are you a new member or are you planning to change your primary care physician (PCP)? If so, it is important for you to know the steps to good care:

- Select a PCP from the directory provided to you, or use the "Find Your Doctor or Hospital" tool on [UniveraHealthcare.com](http://UniveraHealthcare.com).
- Call that PCP to determine if he or she is accepting new patients. Some physicians may also limit the ages of the patients they see.
- At that time, schedule an appointment to become established with the PCP. This initial visit provides your new PCP the opportunity to become familiar with you and your medical history. Ask your new physician's office to request records from your previous PCP in order to coordinate your care. This is especially true for children who need to follow recommended well-care visits and immunization schedules.
- Don't forget to ask your PCP about telemedicine:
  - Do they offer it now or are planning to do so?
  - If yes, how do I register and start using it? What are the office hours? Where can I get a consent form?

Likewise, chronic conditions, such as asthma, diabetes, and hypertension, which require regular medications and monitoring by your physician, can also be assessed at this visit.

Your PCP is an important partner in keeping you healthy. He or she is responsible for managing and coordinating your medical care, including diagnosis, treatment, referrals to specialists, hospitalization, and follow-up care. Moreover, every member under your policy is required to list a PCP with us if you have HMO or Point of Service coverage. Not listing a PCP can result in a claim denial or reduced payment on a claim.

It is a good idea to establish a relationship with your doctor. Be sure to call him or her whenever you feel you need medical care. Your doctor or his or her on-call physician is available to you 24 hours a day. If your doctor determines that you need to see a specialist for treatment, he or she will refer you to a participating specialist. You may contact Customer Care at the phone number on your Member Card if you need additional information.

## 24/7 Nurse Call Line

Your Health Plan wants to make sure you have the answers you need at the time you need them. Our nurse call line is available 24 hours a day, 7 days a week, and 365 days a year. It is offered to you at no additional cost because you are a member of our plan. Our experienced registered nurses are ready to help you any time of the day or night.

For questions about symptoms and care for you or a family member, call **1-800-348-9786**. The TTY number is **1-800-662-1220**. For additional languages, please ask for a translator when you are connected.





## Prescription Coverage

We are dedicated to providing our members with access to safe, effective drug therapy. Our Pharmacy and Therapeutics Committee, consisting of community doctors and clinical pharmacists, meets regularly to review prescription drugs, determine prescribing guidelines, and define coverage categories (formulary).

There are different types of prescription drug plans. If you have prescription drug coverage that includes different copayment or co-insurance amounts for generic and brand-name drugs, we encourage you to ask your doctor to prescribe generic drugs whenever possible to minimize your prescription drug costs.

You can fill your prescription at any participating pharmacy in our nationwide pharmacy network, including national chains and most independents. Just show your Member Card at any participating pharmacy; it identifies you as having prescription drug coverage. You may also have the opportunity to save money by ordering your medications through our mail-service vendors.

If your doctor wants you to use a medication that is not covered on our formulary, there is an exception process.

**Note:** Prescription drug coverage varies. Please check your contract or call the Pharmacy Member phone number on your Member Card. You can also log onto Univera Healthcare and click on the "Prescriptions" tab, to check your contract/group certificate, verify your prescription coverage, get information on your mail order options, check our updated formulary drug list and find information about our pharmacy management procedures, including how, with a prescriber's supporting statement, to request a formulary exception.

# 4 Steps To Better Health

## What Can You Do To Stay Well And Prevent Disease? Simple. Follow These Steps:



### Taking Medications

One of the most important things you can do to protect your health is to take your medications as directed by your health care provider. This is called medication adherence.

In addition, our members have access to licensed, clinical pharmacists to ask questions about their medications through our Ask the Pharmacist program.



### Nutrition

Eating healthy is about more than counting calories. From online tools to personal consults when needed from our nutrition experts, we'll help you feel your best with resources that help you make healthy eating a part of your lifestyle.



### Screenings & Immunization

We're committed to helping you stay healthy. Most preventive health screenings, such as mammograms and colonoscopies, as well as immunizations are covered at no additional cost to you. Not sure where to start? No matter which stage of life you're in, we'll help you determine which screenings are recommended.



### Fitness

Whether you've been exercising your whole life or just starting your fitness journey, we have the resources to help you keep moving. All our members have access to online fitness tools. Many of our plans reward you for staying active.

Details on recommended medical tests and other health information are available under "Health and Wellness" on the website listed on your Member Card.

**If you have any questions, contact your doctor.**



## HIV/AIDS/STI: What You Should Know



HIV (human immunodeficiency virus) is a virus that makes it hard for the body to fight infection and disease. AIDS (acquired immunodeficiency syndrome) is the last and most severe stage of the HIV infection. But having HIV does not mean you have AIDS.

New medications make it easier to manage the virus and can stop it from spreading. Keeping your viral load at an undetectable level can lead to a zero risk of passing the virus on to partners through sex. By taking care of yourself, you can also help to keep your partner safe and healthy. Remember: Undetectable = Untransmittable.

STI (sexually transmitted infection) symptoms and treatment may vary. People who are infected may not have any symptoms and may not know that they have an infection. The only way to know for sure is to get tested. STI Prevention screening is encouraged based on risk factors - contact the New York State HIV/STI Hotline for more information.

### HIV is spread by:

- Sexual contact with a person who is infected.
- Sharing needles, syringes, or works (for drug injection, piercing or tattooing) with a person who is infected.
- Contact between broken skin or wounds with HIV/STI-infected blood.
- HIV-infected women to their babies.
- Contact with HIV/STI-infected blood products on the job (such as in health care).
- Some STIs can also be spread through skin to skin contact.

### Lower Your Risk:

- Always use a condom when having sex.
- Limit the number of people with whom you have sex.
- Limit or refrain from using drugs and alcohol before and during sex.
- Know your partner's HIV/STI status before you have sex.

### Getting Tested

Everyone should know their HIV status. The only way to know if you have HIV is to be tested.

It is advised that everyone between the ages of 13 and 64 get tested for HIV at least once. Testing is safe and easy. You can have a blood test or an oral test. An oral test doesn't use needles. Most clinics, health departments, and health care providers can do the test for HIV. The testing can be confidential or anonymous.

To get a free and confidential test for HIV or STIs please call **1-800-541-AIDS (1-800-541-2437)**.

**Confidential testing** requires that you give your name, and your results can be sent to your health care provider.

**Anonymous testing** means that you do not give your name and that there is no record of the test. If your test shows that you have HIV, you can choose to give your name at that time so that you can receive medical care.

HIV testing and treatment are especially important for pregnant women. It is much better to know your status early. This can allow you to make important decisions about your health and the health of your baby.

- If you do have HIV or AIDS, it is important to get regular care. This can help you to manage your condition and decrease the risk of spreading the virus to your baby.
- If you do not have HIV but are at high risk of becoming infected, talk to your health care provider about pre-exposure prophylaxis (PrEP). PrEP involves taking a specific HIV medicine every day to reduce the risk of HIV infection.

For more information about HIV/AIDS/STI, contact the New York State HIV/STI Hotline toll-free at **1-800-541-AIDS (2437)** in English or **1-800-233-SIDA (7432)** in Spanish. Or go to the New York State HIV/STI Information Service website located at [nyaidline.org/](http://nyaidline.org/)

## Protecting Your Health Information



Protecting the privacy of your family's health information is important to us.

Regulations enacted under the Health Insurance Portability and Accountability Act (HIPAA) enhanced our procedures around the disclosure of our members' protected health information to anyone other than that specific individual, without prior written authorization, or as permitted by law.

Without a signed authorization on file with the health plan:

- Spouses cannot call and check on referrals for one another.
- A son or daughter cannot receive information about his or her elderly parent.
- Parents with dependent children ages 18 or older cannot get information about their child's claims.
- Parents with children younger than 18 can access their child's health information, although other privacy laws protect some specific medical information for children.

You can file an authorization form by accessing our website at [UniveraHealthcare.com](http://UniveraHealthcare.com), then log in, select "My Account," then under "My Information," select "Manage Privacy." If you do not have internet access, call the Customer Care phone number listed on your Member Card to request a paper authorization form.

## Save Money On Prescriptions



Learn more online by logging on to [univerahealthcare.com](http://univerahealthcare.com) and click on "save money on prescriptions" under the 'prescriptions' tab.

## Experimental And Investigational Procedures Are Not Covered

Because your safety is important to us, we don't cover treatments, procedures, drugs, devices, or any related hospitalization determined to be experimental or investigational.

We have a department of physicians and nurses who determine medical policy and coverage with a committee of regional board-certified physicians on new technology and new medical procedures. New drugs are reviewed by our Pharmacy and Therapeutics Committee.

We use a variety of sources, such as the Food and Drug Administration (FDA), clinical practice guidelines, and peer-reviewed professional journals, in researching new technologies. Our medical policy department will only allow new technology to become a part of our benefit package after it has been thoroughly investigated and determined to be safe and effective.

## Know The Facts

We have been working for many years to create a heightened awareness around critical health-related topics and conditions, and to educate and encourage people to make intelligent personal health decisions based on scientific studies and medical research.

To read more than 40 fact sheets on topics including diabetes, medications, fall prevention, and more, go to [UniveraHealthcare.com/FactSheets](http://UniveraHealthcare.com/FactSheets).

### Some of the recent postings include:

#### Empathy and Mental Illness – Bridging the Gap

In upstate N.Y., nearly 2/3 OF ADULTS feel that people are caring and sympathetic to individuals with mental illness. However, less than 1/2 OF ADULTS who have a depressive disorder believe there is empathy for people with mental health issues.

#### Sleep Tight – 6 Habits for Better Sleep

Not getting enough sleep is more than an inconvenience. It's associated with such serious health issues as obesity, diabetes, heart disease, and depression.

#### Mammogram – Be the Priority

Among women in New York state, breast cancer is the most common cancer and the second-leading cause of cancer-related death. Screening saves lives.

#### E-Cigarettes – What You Need to Know About Vaping

It is unsafe for young people to use any product containing tobacco or nicotine. Some e-cigarette cartridges have higher levels of nicotine than a pack of cigarettes.

#### Do you TAKE CHARGE of your diabetes?

Health experts recommend routine actions that people living with diabetes should take to protect their health. How are you taking charge of your diabetes?

## Advance Care Planning



### Conversations change lives. Start your conversation.

Advance Care Planning (ACP) is a process for planning for future medical care in case you are unable to make your own decisions. Your health plan has developed two successful programs to help make the ACP process easier.

- **Community Conversations on Compassionate Care (CCCC)** combines storytelling with "Five Easy Steps" to promote conversations that help all adults complete a Health Care Proxy and Living Will.
- **The Medical Orders for Life-Sustaining Treatment (MOLST) Program** is designed to improve the quality of care seriously ill people receive at the end of life.

For further information on CCCC and MOLST and to obtain free educational resources, visit [CompassionAndSupport.org](http://CompassionAndSupport.org) or call this toll-free number: **1-877-718-6709**.

## Health Plan Medical Policies Available Online

Each month, your health plan's website is updated with new and revised medical policies that may affect the care you and your family receive. Medical policies are based on a systematic review of scientific evidence to determine the scientific merit of a medical technology. All medical policies are reviewed and finalized by the Corporate Medical Policy Committee, which includes your health plan's medical directors and practicing physicians.

Medical policies are used as a guide. Coverage decisions are made on a case-by-case basis and in accordance with your contract. While a service may be medically appropriate, it may be excluded from your benefit plan. Always refer to your particular benefit plan to determine if a service may be considered for coverage under that plan and if a specific limitation or exception exists.

Be aware that these medical policies are written for health care practitioners and include medical and technical language. That's why it's important for you to review these policies with your health care provider.

To see the medical policies, visit the website address listed on your Member Card and search for "medical policies." If you don't have internet access, you may also call the phone number on your Member Card and ask for a printed copy of a particular policy.

## Get Updates Throughout The Year—Online

Throughout the year, we post updates to many of the topics in this guidebook. Please log in at [UniveraHealthcare.com](http://UniveraHealthcare.com) periodically to get interactive updates and details on items such as:

- Your health plan benefits and copayments.
- How to submit a claim or grievance.
- How to find a doctor, specialist, or hospital.
- Resources for managing your health and wellness.
- Your rights and responsibilities.
- Privacy practices for your personal health information.
- Pharmacy directions and medication lists.

## Behavioral Health Care Management Program\*

Single point of contact for your behavioral health care concerns



Our Behavioral Health Care managers are experienced health care professionals who are available to support and guide you through the complexities of today's health care system. They can assist with:

- Identifying barriers preventing health care goals from being met.
- Arranging quicker access to care.
- Finding answers to questions and providing education about a health condition, treatment, or maintaining your treatment plan support.
- Obtaining referrals to programs or community resources to assist with your illness.
- Medication and treatment education and compliance.
- Education and support for self-care and decision-making.
- Evaluating your progress toward your goals using regular telephone contact.
- Navigating through your insurance benefit information.
- Additional support that you and your family may need during your illness.
- A link between you and your doctor's office to assist with arranging the best care for you.

Access to your Behavioral Health Care manager is easy! Call toll-free **1-800-277-2198**, Monday through Friday, from 8 a.m. to 5 p.m. EST. If you call after hours, leave a voice mail and your call will be returned the next business day.

\* Talk to your employer or benefits administrator to see if this program is available to you.

## How To Submit A Complaint Or Grievance

A grievance or complaint applies to any issue not related to a medical necessity or experimental or investigational determination made by the health plan. You can contact us by phone, in person, or in writing to file a complaint or grievance.

- **Commercial/Group members - 1-800-499-1275**
- **Direct Pay/ Metal members - 1-877-687-6651**

Monday–Thursday, 8 a.m. to 6 p.m.  
Friday, 9 a.m. to 6 p.m.  
TTY toll free at 1-800-421-1220

**Written complaints or grievances can be mailed to:**

**Univera Healthcare**  
CAU P.O. Box 4717  
Syracuse, N.Y. 13221  
Fax: 315-671-6656



## You Have The Right To Appeal



Insured health plan members in New York state have the right to request an independent external review when health care services are denied by an insurer as not medically necessary, or as experimental or investigational.

To request an external appeal, members must complete a New York State External Appeal Application for Health Care Consumers and send it to the New York State Department of Financial Services.

Members will receive an application along with the notice of final adverse determination when their internal appeal has been denied. To obtain additional information regarding this process, members should refer to their Member Handbook, the New York State Department of Financial Services website at [https://www.dfs.ny.gov/complaints/file\\_external\\_appeal](https://www.dfs.ny.gov/complaints/file_external_appeal) or contact Customer Care at the phone number on your Member Card.

Self-insured members may also have external appeal rights available under the Patient Protection and Affordable Care Act (PPACA). For more information about this process, members can call Customer Care at the number on your Member Card.

## Consider Taking A Health Risk Assessment

Please take a few minutes to complete your confidential Health Survey. You'll receive a Health Profile that will give you a snapshot of your health. Have your Member Card handy for quick and easy registration to the survey site.

1. Visit **UniveraHealthcare.com** and log in "Member."
2. Click the "Health and Wellness" drop down along the top.
3. Under "Health & Wellness Programs", select "Health Risk Assessment."
4. Click the "Begin Health Risk Assessment" button to start.

## You Should Know

As a member of our plan, you have certain rights and responsibilities, which are outlined below.

### You have the right to:

- Receive all the benefits to which you are entitled under your contract.
- Receive quality health care through your providers in a timely manner and in a medically appropriate setting.
- Considerate, courteous, and respectful care.
- Be treated with respect and recognition of your dignity and right to privacy.
- Information about services, staff, hours of operation, and your benefits, including access to routine services as well as after-hours and emergency services, practitioners and providers, and members' rights and responsibilities.
- Participate in decision-making with your physician about your health care.
- Refuse treatment as allowed by law, and be informed by your physician of the medical consequences.
- Refuse to participate in research.
- Confidentiality of medical records and information, with the authority to approve or refuse the re-disclosure by us of such information, to the extent protected by law.
- Receive all information needed to give informed consent for any procedure or treatment.
- Access your medical records as permitted by New York state law.
- Express concerns and complaints about the care and services provided by physicians and other providers, and have us investigate and respond to these concerns and complaints.
- Candid discussion of appropriate or medically necessary treatment options for your condition, regardless of cost or benefit coverage.
- Care and treatment without regard to age, race, color, sex, sexual orientation, religion, marital status, national origin, economic status, or source of payment.

- Voice complaints or appeals about care the organization provides and recommend changes in benefits and services to staff, administration and/or the New York State Department of Financial Services or Department of Health, without fear of reprisal.
- Formulate advance directives regarding your care. To obtain a Health Care Proxy form, contact us, or download the form from our website, [UniveraHealthcare.com](http://UniveraHealthcare.com).
- Contact us to obtain the names, qualifications, and titles of providers who are responsible for your care.
- All information about your health plan, its services and its providers and procedures.
- Make recommendations regarding the organization's members' rights and responsibilities.

### You have the responsibility to:

- Be an active partner in the effort to promote and restore health by:
  - Openly sharing information about your symptoms and health history with your physician.
  - Listening.
  - Asking questions.
  - Becoming informed about your diagnosis, recommended treatment and anticipated or possible outcomes.
  - Following the plans of care you have agreed to (such as taking medicine and making and keeping appointments).
  - Returning for further care if any problem fails to improve.
  - Accepting responsibility for the outcomes of your decisions.
- Participate in understanding health problems and developing mutually agreed upon treatment goals.

- Have all care provided, arranged, or authorized by your primary care physician (PCP).
- Inform your PCP if there are changes in your health status.
- Obtain services authorized by your PCP.
- Share with your PCP any concerns about the medical care or services that you receive.
- Permit us to review your medical records in order to comply with federal, state, and local government regulations regarding quality assurance and to verify the nature of services provided.
- Respect time set aside for your appointments with providers and give as much notice as possible when an appointment must be rescheduled or canceled.
- Understand that emergencies arise for your providers and that your appointments may be unavoidably delayed as a result.
- Respect staff and providers.
- Follow the instructions and guidelines given by your providers.
- Show your Member Card and pay your visit fees to the provider at the time the service is rendered.
- Become informed about our policies and procedures, as well as the office policies and procedures of your providers, so that you can make the best use of the services that are available under your contract.
- Abide by the conditions set forth in your contract.
- Inform the plan of changes in your residence, telephone, or other information affecting your health care.

# Notice of Nondiscrimination

Our Health Plan complies with federal civil rights laws. We do not discriminate on the basis of race, color, national origin, age, disability, or sex. The Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

## The Health Plan:

Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, please refer to the enclosed document for ways to reach us. If you believe that the Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

## Advocacy Department

Attn: Civil Rights Coordinator  
PO Box 4717  
Syracuse, NY 13221  
Telephone number: 1-800-614-6575  
TTY number: 1-800-421-1220  
Fax: 1-315-671-6656

You can file a grievance in person or by mail or fax. If you need help filing a grievance, the Health Plan's Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

## U.S. Department of Health and Human Services

200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
1-800-368-1019

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

**Attention:** If you speak English, free language help is available to you. Please refer to the enclosed document for ways to reach us.

**Atención:** Si habla español, contamos con ayuda gratuita de idiomas disponible para usted. Consulte el documento adjunto para ver las formas en que puede comunicarse con nosotros.

注意: 如果您说中文, 我们可为您提供免费的语言协助。请参见随附的文件以获取我们的联系方式。

Внимание! Если ваш родной язык русский, вам могут быть предоставлены бесплатные переводческие услуги. В приложенном документе содержится информация о том, как ими воспользоваться.

Atansyon: Si ou pale Kreyòl Ayisyen gen èd gratis nan lang ki disponib pou ou. Tanpri gade dokiman ki nan anvlòp la pou jwenn fason pou kontakte nou.

주목해 주세요: 한국어를 사용하시는 경우, 무료 언어 지원을 받으실 수 있습니다. 연락 방법은 동봉된 문서를 참조하시기 바랍니다.

Attenzione: Se la vostra lingua parlata è l'italiano, potete usufruire di assistenza linguistica gratuita. Per sapere come ottenerla, consultate il documento allegato.

שידיא טדער ריאה ביוא, זיא מאקורעמפיווא זייא ראפ לבעליעווא פליה ראפיש עטסיזמוא וצ טנעמוקאד וטגייילעגייב מוצ טרירעפער עטיב זנוא טימ ודניבראפ וצ ריז מינפוא וצז.

নজর দনি: যদি আপনার বাংলা ভাষায় কথা বললে তাহলে আপনার জন্য সহায়তা উপলভ্য রয়েছে। আমাদের সঙ্গে যোগাযোগ করার জন্য অনুগ্রহ করে সংযুক্ত নথি পড়ুন।

Uwaga: jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Patrz załączony dokument w celu uzyskania informacji na temat sposobów kontaktu z nami.

עדיבערלא דעללל טדחת טנא אדז: עדיבט נת, כה עחאמ עדינאמלא עדיועללא דעאסמלא נאפ. עפרעמל עפרמלא עדיטולא לל עוורלא כגרי עיל ל עק טופירט עק ענרק מטיבאר עס עיל ל לוטולא עדיפיק.

Remarque: si vous parlez français, une assistance linguistique gratuite vous est proposée. Consultez le document ci-joint pour savoir comment nous joindre.

עק בא וט טיה עטלוב ודרא בא רגא: טוונ מה. עה באיטסד דדמ טפמ טק נאבז עיל עיל עק טופירט עק ענרק מטיבאר עס עיל ל לוטולא עדיפיק.

Paunawa: Kung nagsasalita ka ng Tagalog, may maaari kang kuning libreng tulong sa wika. Mangyaring sumangguni sa nakalakip na dokumento para sa mga paraan ng pakikipag-ugnayan sa amin.

Προσοχή: Αν μιλάτε Ελληνικά μπορούμε να σας προσφέρουμε βοήθεια στη γλώσσα σας δωρεάν. Δείτε το έγγραφο που εσωκλείεται για πληροφορίες σχετικά με τους διαθέσιμους τρόπους επικοινωνίας μαζί μας.

Kujdes: Nëse flisni shqip, ju ofrohet ndihmë gjuhësore falas. Drejttojuni dokumentit bashkëlidhur për mënyra se si të na kontaktoni.



Univera Healthcare  
**UniveraHealthcare.com**  
 205 Park Club Lane  
 Buffalo, NY 14221

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## WE'RE ONLINE

-  [facebook.com/UniveraHealthcareWNY](https://facebook.com/UniveraHealthcareWNY)
-  [twitter.com/Univera\\_WNY](https://twitter.com/Univera_WNY)
-  [youtube.com/UniveraHealthcare](https://youtube.com/UniveraHealthcare)
-  [linkedin.com/company/Univera-Healthcare](https://linkedin.com/company/Univera-Healthcare)
-  [instagram.com/Univera\\_Healthcare](https://instagram.com/Univera_Healthcare)



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