UnitedHealthcare FlexWork® Limited Medical Plan Frequently Asked Questions (FAQs)
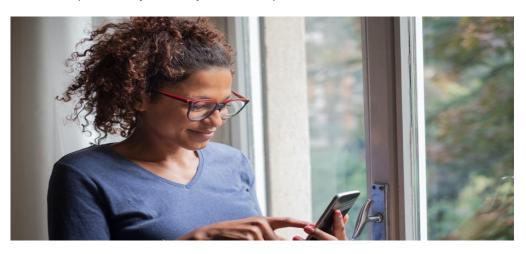
Find answers to common questions about health plans and coverage

Whether you're new to your health plan or have been a member for years, from time to time, it's natural that questions may pop up. We've gathered common health plan and coverage questions below to help you get started with finding the answers you may be looking for. If you're looking for answers about your specific health plan benefits and coverage, the first step is to **sign in to your account.** There, you can find details that are specific to you and your health plan.

A. Accessing the FlexWork member portal www.flexwork.uhc.com

1. **What will I find on the FlexWork member site?**
   When you log onto the FlexWork member portal, you'll find ways to view your personalized information and manage the details of your plan. Here are a few things you can do when you set up your account[1] and use your member site:
   - Coverage start date
   - Find network doctors and pharmacies
   - Find and estimate costs
   - View claims
   - Check your visit limit balances for covered outpatient and ambulatory services
   - Learn about what services are covered
   - Learn about $0 copay preventive care

2. **Is there a phone number to call if I want to ask a question?**
   - Enrolled members can call UnitedHealthcare FlexWork member services at 1-855-892-2401 Monday–Friday 7:30 a.m.–8 p.m. CT
   - Employees in their benefits election window who are not yet enrolled can call the UnitedHealthcare FlexWork pre-member call center at 1-855-892-24 7am-7pm CST Monday - Friday

B. Your member ID card (health plan ID card)

1. **What if I can't find my member ID card (health plan ID card) or don't have it with me?**
   - Sign in to your member account to view your member ID card online.

2. **How can I request a new member ID card?**

- If you have lost your member ID card, **contact us** by clicking the link or by calling member services at 1-855-892-2401 Monday–Friday 7:30 a.m.–8 p.m. CT
- If your card is damaged, or if you find a mistake on your member ID card, call the number on your card to request a new card, or you can order a new ID card online by signing in to your member account and selecting Order ID Card.

3. **I'm a new member. Is there anything I can do before I receive my member ID card?**
While waiting for your health plan ID card to arrive in the mail, you can:
- Bookmark flexwork.uhc.com. Once you have your ID card, you can activate your online account. Here you can search for network doctors, find and estimate costs and see what's covered — all in one spot.
- Explore the UnitedHealthcare Choice provider network (and the United Healthcare Standard Select Pharmacy network if your plan includes the FlexWork limited pharmacy benefit). Check who's in the network by using the Find a Doctor directory . You'll also see what clinics and hospitals are in your network.
- Schedule a doctor appointment. Plan ahead by scheduling an appointment with your PCP before your coverage starts. Just remember that the appointment date must be after your coverage effective date. Many preventive screenings and immunizations are covered at no cost to you when you see network providers, so it's a good idea to get them on the calendar.

4. **I am a new member and just received my member ID card. What should I do now?**
- When you have your member ID card, read the accompanying flyer and store your ID card in a purse, billfold or other safe place where you can access it easily when you visit a provider.

C. Finding care

1. **How can I find a network doctor, clinic or hospital?**
- Your FlexWork limited medical MEC or limited MVP plan provides coverage only when care is rendered through a United Healthcare Choice network provider. Services received out-of-network are not covered unless otherwise required by law.
- If you're already a member and have your member ID card, sign in to your member account at flexwork.uhc.com to view network doctors, clinics and providers for your health plan.
- If you don't have your member ID card yet or if you're shopping for a health plan, you can still use the provider search tool to learn which doctors, clinics and providers are in network.

2. **How do I set up a virtual visit (telehealth visit)?**
- The ID card you receive in the mail will have an insert with important information you should review prior to using your plan, including a QR code you can scan to register for $0 virtual care visits with HealthiestYou™.
- Enrolled FlexWork members also can register at **healthiestyou.com** or call 1-866-703-1259.

D. Benefits and coverage

1. **Why is the FlexWork Limited medical plan referred to as Minimum Essential Coverage?**
- All FlexWork limited medical plans qualify as Minimum Essential Coverage (sometimes called "qualifying health coverage") plans which mean they are employer / job-based, have no annual or lifetime dollar limits, no pre-existing

exclusions or limitations and provide $0 cost-share coverage for preventive services and medications as required by the Patient Protection and Affordable Care Act.

- FlexWork limited medical plans also cover many Essential Health Benefits as defined by the U.S. Department of Health and Human Services including:
  - PPACA preventive services and medications
  - Ambulatory / outpatient coverage (PCP and specialist office visits)
  - Maternity/newborn coverage (PCP and specialist office visits)
  - Pediatric coverage (PCP and specialist office visits)
  - Limited pharmacy (if included in your FlexWork limited medical plan
  - Laboratory / pathology
- FlexWork limited medical plans comply with the Mental Health Parity and Addiction Equity Act.

2. What are the most common limits used by FlexWork Limited medical plans?

- To help keep premiums affordable, all FlexWork limited medical plans place visit limits on all covered outpatient and ambulatory services, such as four doctor office visits per year, two urgent care visits per year and one date of service for diagnostic laboratory testing with coverage for unlimited tests ordered on the same date of service.
- If you have a FlexWork limited medical plan with hospital coverage, the plan provides a maximum benefit of $10,000 per admission, with no limits on annual admissions. Note that UHC provider network discounts apply to covered hospital stays.
- Services which exceed the annual visit limits (or the inpatient maximum benefit per admission if your plan covers hospitalizations) are considered non-covered and are the responsibility of the member.
- Some FlexWork plans also include fixed indemnity coverage which pays a limited, fixed cash benefit per covered service. Check your plan documents for additional detail if your FlexWork plan includes indemnity coverage.
- Checking your benefits prior to seeking care may help you avoid cost surprises, so it's good to review what's covered and what's not before you make an appointment.
- Sign in to your member account at flexwork.uhc.com to review what's covered under your plan.
- To obtain a more detailed summary of your benefits, you can access a copy of your Summary Plan Description (SPD) and/or Summary of Benefits and Coverage (SBC) by either contacting your employer or by logging onto the member portal at flexwork.uhc.com
- If you want a copy of your coverage documents mailed to you, call the phone number on your member ID card to request a copy

3. How do I know what services are covered by my health plan?

- Checking your benefits prior to seeking care may help you avoid cost surprises, so it's good to review what's covered and what's not before you make an appointment.
- Sign in to your member account at flexwork.uhc.com to review what's covered under your plan.
- You can also ask your employer for a copy of your Summary Plan Description (SPD) and Summary of Benefits and Coverage (SBC) which contain a summary of covered services.
- If you want a copy of your coverage documents mailed to you, call the phone number on your member ID card to request a copy

4. **If I want to see a specialist, do I need a referral from my PCP or do I need to obtain a prior authorization from UHC?**
   - No, FlexWork limited medical plans do not require PCP referrals or prior authorizations before you can get access to medication or services.
5. **Can I sign up for paperless delivery of my health plan documents and communications?**
   - Yes — you can enjoy less paper and less clutter. Sign up to get your required communications online instead. Just sign in to your health plan member account to get started.

E. Managing costs and claims
1. **How do I find out if my claim has been processed or paid?**
   - You can find your claims information when you sign in to your member account at flexwork.uhc.com.
   - You can also call the number on your member ID card to talk with a representative about your claims.

F. Pharmacy and prescriptions
1. **Does my FlexWork plan include coverage for prescription drugs?**
   - All FlexWork medical plans include limited $0 copayment coverage for certain preventive medications as required by the Patient Protection and Affordable Care Act (PPACA) such as tobacco cessation medicines, vaccines and immunizations to prevent certain illnesses in infants, children and adults and contraceptives for women.
   - Your FlexWork limited medical plan may or may not include a separate FlexWork Limited Pharmacy benefit – check your plan coverage information for to learn more.
   - If your plan does include a separate FlexWork Limited Pharmacy benefit, covered prescriptions must be obtained through a pharmacy which participates in the UnitedHealthcare Standard Select network. Covered medications are broken out into four tiers with either copayment or coinsurance cost sharing.
2. **How can I find a network pharmacy**
   - Members can log onto flexwork.uhc.com to access a list of pharmacies that participate in the UnitedHealthcare Standard Select network
3. **How do I find what prescription medications are covered by my plan?**
   - Members can log onto flexwork.uhc.com to access the list of PPACA $0 cost preventive medications
   - If your plan includes a separate FlexWork Limited Pharmacy benefit, members can log onto flexwork.uhc.com to access the FlexWork Prescription Drug List (PDL). Note that the FlexWork PDL is a limited list of covered medications, does not cover specialty drugs and covers up to a 30 day retail supply only with no mail order.
   - If your plan includes a pharmacy benefit which is not the FlexWork Limited Pharmacy benefit, please check your plan materials for coverage and cost-sharing details.
4. **How do I know how much my prescription medication will cost?**
   - PPACA preventive medications are always $0 copay and can be obtained at any pharmacy. You can access the PPACA Prescription Drug List at flexwork.uhc.com.
   - If your plan includes a separate FlexWork Limited Pharmacy benefit, the FlexWork Prescription Drug List (PDL), you can access the PDL at flexwork.uhc.com. where you will be able to see the coverage tier for each

covered drug and the associated copayment or coinsurance cost-share amount.

More questions? We're here to help.

[Contact us](#) or call the phone number on your member ID card to talk with a representative.

Footnotes

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