

UnitedHealthcare

Benchmark SolutionsSM

& EDGESM

Colorado
Groups with 2-50
Eligible Employees

Benchmark Solutions, only from UnitedHealthcare, is a health plan portfolio featuring our highly proven plan designs with a special focus on the affordable, integrated Health Savings Account (HSA) and Health Reimbursement Account (HRA) consumer-driven plans for individuals and small businesses up to 50 employees.

UnitedHealthcare EDGE, a new suite of benefit plans designed to help fully insured customers (with 2-50 employees) provide affordable coverage for their employees at a time when rising costs have almost pushed that possibility out of reach.

EDGE plans include basic features like:

- ▶ Preventive care at 100%¹
- ▶ Calendar year or plan year basis
- ▶ \$100 urgent care copay
- ▶ \$250 emergency room copay
- ▶ \$500 inpatient per occurrence deductible
- ▶ \$250 outpatient per occurrence deductible
- ▶ Lifetime maximum of \$5,000,000
- ▶ Family deductible at 3x individual
- ▶ Family out-of-pocket maximum at 2x individual
- ▶ Embedded deductibles
- ▶ Separate pharmacy plan rider

All EDGE plans include health and wellness programs, services and discounts from UnitedHealth Wellness[®] – **at no additional charge**. In addition, members can maximize their benefits through a range of health and wellness discounts not covered under most health plans.

EDGE works two ways to deliver maximum health care value:

1. Exceptional access and outstanding discounts through the nationwide UnitedHealthcare network of 537,000 physicians and other health care professionals, 4,700 hospitals and 60,000 pharmacies. Every member can use the network to reduce employer costs and employee out-of-pocket expenses.
2. Reduces premiums² by guiding members to quality and efficiency designated specialty physicians through the UnitedHealth Premium[®] designation program. UnitedHealth Premium is maximizing health care value with a comprehensive national quality and efficiency designation program. EDGE features an enhanced benefit level for individuals who choose to visit quality and efficiency designated specialty physicians. UnitedHealth Premium is transforming health care values with a comprehensive national quality and efficiency designation program. Using physicians practicing in 16 different specialties who meet quality and efficiency criteria results in significantly lower costs.³

1 Note: Not all preventive care is covered and preventive care for some EDGE plans is subject to a member cost share

2 Subject to specific plan design and coverage

3 UnitedHealthcare claims analysis, November 2005

UnitedHealthcare

Benchmark SolutionsSM

Colorado
Groups with 2-50
Eligible Employees

2007 COC Plan Code	Description	Deductible				Coinsurance		Out-of-Pocket Max				Copay						Savings % Relative to Plan 1A-L ²
		Network		Non-Network				Network		Non-Network		PCP	Spec	Urg Care	ER	OP Surg	IP	
		Ind.	Fam.	Ind.	Fam.	Ind.	Fam.	Ind.	Fam.									
1A-L	90%/\$250	\$250	\$750	\$500	\$1,500	90%	70%	\$2,500	\$5,000	\$5,000	\$10,000	\$25	\$50	\$75	\$200	90%	90%	0.0%
7A-A	80%/\$500	\$500	\$1,500	\$1,000	\$3,000	80%	60%	\$3,000	\$6,000	\$6,000	\$12,000	\$25	\$50	\$75	\$200	80%	80%	-12.4%
7A-E	100%/\$1000	\$1,000	\$3,000	\$2,000	\$6,000	100%	80%	\$1,000	\$3,000	\$5,000	\$10,000	\$25	\$50	\$75	\$200	100%	100%	-3.9%
7A-B	80%/\$1000	\$1,000	\$3,000	\$2,000	\$6,000	80%	60%	\$3,500	\$7,000	\$7,000	\$14,000	\$25	\$50	\$75	\$200	80%	80%	-23.8%
C1-E	70%/\$1000	\$1,000	\$3,000	\$2,000	\$6,000	70%	50%	\$2,000	\$4,000	\$5,000	\$10,000	\$25	\$50	\$75	\$200	70%	70%	-31.4%
7A-F	100%/\$1500	\$1,500	\$4,500	\$3,000	\$9,000	100%	80%	\$1,500	\$4,500	\$6,000	\$12,000	\$25	\$50	\$75	\$200	100%	100%	-17.9%
7A-C	80%/\$1500	\$1,500	\$4,500	\$3,000	\$9,000	80%	60%	\$4,500	\$9,000	\$9,000	\$18,000	\$25	\$50	\$75	\$200	80%	80%	-28.4%
C1-F	70%/\$1500	\$1,500	\$4,500	\$3,000	\$9,000	70%	50%	\$3,000	\$6,000	\$6,000	\$12,000	\$25	\$50	\$75	\$200	70%	70%	-32.9%
7A-M	100%/\$2000	\$2,000	\$6,000	\$4,000	\$12,000	100%	80%	\$2,000	\$6,000	\$8,000	\$16,000	100%	100%	100%	100%	100%	100%	-28.0%
7A-G	100%/\$2000	\$2,000	\$6,000	\$4,000	\$12,000	100%	80%	\$2,000	\$6,000	\$8,000	\$16,000	\$25	\$50	\$75	\$200	100%	100%	-24.8%
7A-D	80%/\$2000	\$2,000	\$6,000	\$4,000	\$12,000	80%	60%	\$4,000	\$8,000	\$8,000	\$16,000	\$25	\$50	\$75	\$200	80%	80%	-29.5%
C1-G	70%/\$2000	\$2,000	\$6,000	\$4,000	\$12,000	70%	50%	\$4,000	\$8,000	\$8,000	\$16,000	\$25	\$50	\$75	\$200	70%	70%	-34.2%
C1-C	70%/\$2000	\$2,000	\$6,000	\$4,000	\$12,000	70%	50%	\$4,000	\$8,000	\$8,000	\$16,000	\$25	\$25	\$50	\$100	70%	70%	-32.5%
2A-L	100%/\$2500	\$2,500	\$7,500	\$5,000	\$15,000	100%	80%	\$2,500	\$7,500	\$9,000	\$18,000	\$25	\$50	\$75	\$200	100%	100%	-28.3%
2A-Q	80%/\$2500	\$2,500	\$7,500	\$5,000	\$15,000	80%	60%	\$4,500	\$9,000	\$9,000	\$18,000	\$25	\$25	\$75	\$125	80%	80%	-29.3%
C1-H	70%/\$2500	\$2,500	\$7,500	\$5,000	\$15,000	70%	50%	\$5,000	\$10,000	\$9,000	\$18,000	\$25	\$50	\$75	\$200	70%	70%	-35.2%
2A-O	100%/\$3000	\$3,000	\$9,000	\$6,000	\$18,000	100%	80%	\$3,000	\$9,000	\$10,000	\$20,000	\$25	\$50	\$75	\$200	100%	100%	-29.8%
7A-W	100%/\$3000	\$3,000	\$9,000	\$6,000	\$18,000	100%	80%	\$3,000	\$9,000	\$12,000	\$24,000	N/A	N/A	N/A	N/A	N/A	N/A	-32.2%
2A-T	80%/\$3000	\$3,000	\$9,000	\$6,000	\$18,000	80%	60%	\$5,000	\$10,000	\$10,000	\$20,000	\$30	\$30	\$100	\$150	80%	80%	-31.1%
C1-I	70%/\$3000	\$3,000	\$9,000	\$6,000	\$18,000	70%	50%	\$6,000	\$12,000	\$10,000	\$20,000	\$25	\$50	\$75	\$200	70%	70%	-36.1%
W2-P	100%/\$4000	\$4,000	\$12,000	\$6,000	\$18,000	100%	80%	\$4,000	\$12,000	\$10,000	\$20,000	\$25	\$50	\$75	\$200	100%	100%	-31.8%
C1-K	70%/\$5000	\$5,000	\$15,000	\$6,000	\$18,000	70%	50%	\$9,000	\$18,000	\$10,000	\$20,000	\$25	\$50	\$75	\$200	70%	70%	-39.2%
M1-Q	100%/\$5000	\$5,000	\$15,000	\$6,000	\$18,000	100%	80%	\$5,000	\$15,000	\$10,000	\$20,000	\$25	\$50	\$75	\$200	100%	100%	-33.4%
Health Savings Account Plans																		
C3-A ⁴	80%/\$2000	\$2,000	\$4,000	\$4,000	\$8,000	80%	60%	\$4,000	\$8,000	\$8,000	\$16,000	80%	80%	80%	80%	80%	180%	-31.6%
7A-T ⁴	100%/\$2000	\$2,000	\$4,000	\$4,000	\$8,000	100%	80%	\$4,000	\$8,000	\$8,000	\$16,000	100%	100%	100%	100%	100%	100%	-27.5%
C3-B ⁴	80%/\$2850	\$2,850	\$5,600	\$5,000	\$10,000	80%	60%	\$5,000	\$10,000	\$10,000	\$20,000	80%	80%	80%	80%	80%	80%	-35.8%
7A-U ⁴	100%/\$2850	\$2,850	\$5,700	\$5,000	\$10,000	100%	80%	\$4,850	\$9,700	\$10,000	\$20,000	100%	100%	100%	100%	100%	100%	-32.4%
2A-G ⁴	100%/\$3500	\$3,500	\$7,000	\$7,500	\$15,000	100%	80%	\$5,500	\$11,000	\$10,000	\$30,000	100%	100%	100%	100%	100%	100%	-35.6%
2A-P ⁴	100%/\$5000	\$5,000	\$10,000	\$7,500	\$15,000	100%	80%	\$5,500	\$11,000	\$10,000	\$30,000	100%	100%	100%	100%	100%	100%	-43.3%

Benchmark Solutions Pharmacy Plans

Plan Code	Deductible		Tier 1	Tier 2	Tier 3	Tier 4	Mail Service Ratio (90-day supply)	Savings % Relative to Rx Plan 5Y ³
	Ind.	Fam.						
5Y	\$0	\$0	\$10	\$30	\$50	\$250	2.5x retail	0.0%
6B	\$0	\$0	\$10	\$35	\$60	\$250	2.5x retail	-1.6%
DS	\$0	\$0	\$15	\$45	\$80	\$200	3x retail	-4.6%
CG	\$250	\$750	\$15	\$45	\$80	\$160	3x retail	-5.3%

Any two plans on the above grid are available for dual option¹.

1 Plans available as Dual Option with a minimum of five eligible and five enrolled employees.

2 Pricing Relativities are estimates for 2-50 groups only. These relativities are based on the pharmacy plan pairings of H9 for all non-EDGE plans and CG for all EDGE plans. Final rates will be based on exact plan selection and the group's census information.

3 Rx relativity is assuming a 85/15 Med/Rx split

4 Combined medical and pharmacy deductible and out-of-pocket maximum. After deductible is met, any coinsurance and pharmacy copayments (\$10/\$30/\$50) apply.

For all plans listed, deductible applies toward out-of-pocket maximum. All plans have \$5,000,000 lifetime maximum.

In 2008, maximum HSA contribution is \$2,900 individual/\$5,800 family.

These amounts are subject to change by IRS and do not include catch-up contributions for subscribers age 55 and over.

Please Note: The information in this grid is provided for informational purposes only and is not intended for use as a contract. For a complete listing of coverage and exclusions please refer to the Certificate of Coverage or talk to your UnitedHealthcare representative for additional details that could impact the benefits. Different UnitedHealthcare plans may have varying approaches to whether pharmacy costs are included or excluded from the medical deductible, whether preventive services are covered at 100%, and other benefit details.

The DefinitySM Health Savings Account (HSA) high deductible health plan (HDHP) is designed to comply with IRS requirements so eligible enrollees may open a Health Savings Account with a bank of their choice or through Exante Bank. "Definity HSA" refers generally to the DefinitySM HSA product, which includes a HDHP, although at times "Definity HSA" may refer only and specifically to the Definity Health Savings Account, and not to the associated HDHP. Services supplied by Exante Bank, Inc. are not available in Hawaii, Alaska or the U.S. Virgin Islands. UnitedHealthcare's DefinitySM Health Reimbursement Account, or HRA, combines the flexibility of a medical benefit plan with an employer-funded reimbursement account.

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



Plan Code	Deductible				Coinsurance					Out-of-Pocket				Copays						Prev. Care ⁵	Savings % Relative to Plan 1A-L ⁷	
	In		Out		PCP ¹	INN SPEC ²	INN SPEC Prem. Des ³	INN Non-phys ⁴	Out	In		Out		PCP ¹	SPEC ²	SPEC Prem. Des ³	UC	ER	OP			IP
	Ind.	Fam.	Ind.	Fam.						Ind.	Fam.	Ind.	Fam.									
Y3-A	\$1,000	\$3,000	\$2,000	\$6,000	100%	70%	100%	70%	50%	\$5,000	\$10,000	\$10,000	\$20,000	\$30	\$60	\$30	\$100	\$250	100%	100%	PVY	-27.5%
Y3-D	\$1,000	\$3,000	\$2,000	\$6,000	80%	60%	80%	60%	50%	\$5,000	\$10,000	\$10,000	\$20,000	\$30	\$60	\$30	\$100	\$250	80%	80%	PVN	-35.0%
Y3-B	\$1,500	\$4,500	\$3,000	\$9,000	100%	70%	100%	70%	50%	\$5,500	\$11,000	\$11,000	\$22,000	\$30	\$60	\$30	\$100	\$250	100%	100%	PVY	-33.7%
Y3-E	\$1,500	\$4,500	\$3,000	\$9,000	80%	60%	80%	60%	50%	\$10,000	\$20,000	\$20,000	\$40,000	\$30	\$60	\$30	\$100	\$250	80%	80%	PVN	-38.3%
Y3-C	\$2,000	\$6,000	\$4,000	\$12,000	100%	70%	100%	70%	50%	\$6,000	\$12,000	\$12,000	\$24,000	\$30	\$60	\$30	\$100	\$250	100%	100%	PVY	-35.8%
Y2-A	\$2,000	\$6,000	N/A	N/A	80%	50%	80%	50%	N/A	\$6,000	\$12,000	N/A	N/A	\$30	\$60	\$30	\$100	\$250	80%	80%	PVY	-40.0%

All EDGE plans have embedded deductibles.

All EDGE plans have a \$500 Inpatient per occurrence deductible and a \$250 Outpatient per occurrence deductible.

EDGE/Traditional Plan Dual Option Pairings (Case effective 5/1/08)⁷

		Traditional Plans													
Plan Code		7A-B	C3-A	7A-C	2A-Q	7A-D	2A-T	C3-B	C1-E	C1-F	C1-G	C1-H	C1-I	C1-K	
EDGE Plans	Y3-A	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	
	Y3-B	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
	Y3-C	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
	Y3-D	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
	Y3-E	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	

EDGE Pharmacy Plans

Plan Code	Deductible		Copay				Mail Order (90-day Supply)	Savings % Relative to Rx Plan DS ⁷
	Ind.	Fam.	Tier 1 ⁶	Tier 2	Tier 3	Tier 4		
DS	\$0	\$0	\$15	\$45	\$80	\$200	3x retail	0.0%
CG	\$250	\$750	\$15	\$45	\$80	\$160	3x retail	-0.7%

Please Note: The information in this grid is provided for informational purposes only and is not intended for use as a contract. For a complete listing of coverage and exclusions please refer to the Certificate of Coverage or talk to your UnitedHealthcare representative for additional details that could impact the benefits. Different UnitedHealthcare plans Max have varying approaches to whether pharmacy costs are included or excluded from the medical deductible, whether preventive services are covered at 100%, and other benefit details.

EDGE plans footnotes:

All EDGE plans have embedded deductibles. All EDGE plans have a \$500 Inpatient per occurrence deductible and a \$250 Outpatient per occurrence deductible.

- 1 Primary Physicians include Family Practice, Internal Medicine, Obstetrics-Gynecology and Pediatrics.
- 2 This tier of benefits applies to physicians in specialties where there is no UnitedHealth Premium® designation program and for specialty physicians that are not quality and efficiency designated.
- 3 This tier of benefits applies to UnitedHealth Premium quality and efficiency designated specialists. Please visit myuhc.com® for details.
- 4 These benefits apply to all categories in which deductible-coinsurance cost-sharing applies, except physician fees for surgical and medical services. This is the in-network plan coinsurance.
- 5 PVY = Preventive care at 100%. PVN = Preventive care is subject to member cost share.
- 6 Tier 1 copays for plan CG do not apply to the individual or family deductible.
- 7 If selecting a traditional plan/EDGE plan dual option pairing, the pharmacy plan selected must be one of the EDGE Pharmacy plans, either CG or DS. Pricing Relativities are estimates for 2-50 groups only and final rates will be based upon the exact plans selected and the group's final census information.

UnitedHealth Premium® designation program uses claims data to create a multi-dimensional view of physician and facility performance. Not all specialties or physician types are eligible for designation. This designation is intended as a resource for informational purposes only and does not guarantee the quality of care being rendered. UnitedHealthcare does not provide health care services or practice medicine. Physicians are solely responsible for medical judgments and treatments. For a complete description of the UnitedHealth Premium® designation program, including details on the methodology used, geographic availability, and program limitations, please see myuhc.com®.

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