

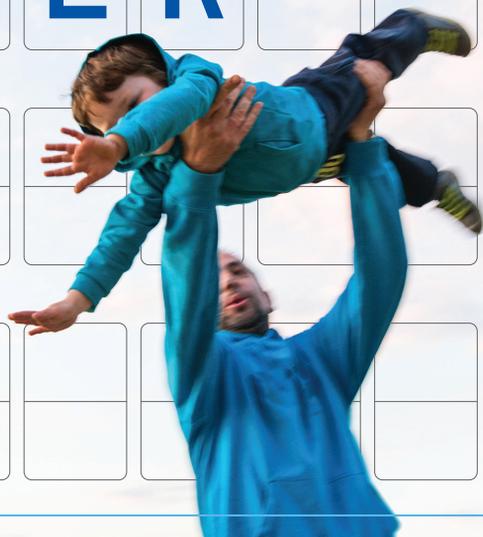
N O W

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# You spoke. We listened.

We heard your requests for more affordable options and meaningful choices when it comes to your healthcare, and we've redesigned our 2022 benefits as a direct result of feedback from United employees like you. Every change we've made is with one goal in mind: To make your healthcare benefits better for you and your family.

The information contained here offers a preview of what's next when it comes to your 2022 benefits, including what's changing, how to learn more and what support is available to help you make the decision that's best for you. More details about your 2022 benefits will be in the *2022 Benefits Guide* posted on **Your Benefits Resources (YBR)** beginning October 25.



## **A look at your 2022 benefits > 03**

Simplified plan options, new quality-based networks and better support for your health

## **Your plan options > 06**

PPO, EPO and HMO options to choose from—designed with varying levels of coverage to meet your unique needs

## **Higher quality healthcare > 11**

Having a relationship with a higher-quality doctor can lead to better health and lower costs, learn how

## **Support for you > 13**

New programs, tools and resources to help you find your 2022 plan and become your best self

THE TIME

IS NEAR

ANNUAL

ENROLLMENT

11/01/2021

THROUGH

11/19/2021

Make the most of this extra time to understand your coverage options (including options you may have available to you outside of United) and make the best choice for you and your family.

# Now arriving: Your 2022 benefits

## New plans, easier-to-compare options



The medical plans United offers today are best-in-the-industry, and we're always evaluating ways to make them even better. That's why we're streamlining our medical plans for next year and offering refreshed plan options that will make it easier to choose the plan that's right for you and your family.

### What this means for you

Some of the medical plans that exist today will be replaced with new plans. You'll still have a choice of the same types of plans (PPO, EPO and HMO), but we've made them easier to compare. Core plans and some existing HMO plans will continue into 2022. You may also have a new insurance carrier for your medical plans (Blue Cross Blue Shield or Aetna, for example) depending on where you live and which plan you choose.

## New quality-based networks and services



All the changes we are making for 2022 are in the interest of improving employee health. And there's an added benefit: Higher-quality care is ultimately more affordable care because it results in better health outcomes. To help improve these health outcomes, we've implemented new standards for some of our networks of doctors and hospitals. In addition, we're adding some new programs to our already extensive list, including services for joint conditions, diabetes, mental wellness and more.

**What goes into quality?** Quality can be a subjective term, but when it comes to the standards used to determine quality doctors for our medical plan networks, our carriers use data to guide decisions. The doctors and facilities in these networks meet key metrics and have been board certified as providing high-quality care. This puts you at the center of your healthcare experience and is intended to provide you with treatment and outcomes that you can feel good about. The goal is for you to be healthier and to prevent larger, more costly treatments down the road.

## What this means for you

You still have a choice of best-in-class medical plans, but for some, the network size may vary—from broad networks to more exclusive, higher-quality networks. While this means that some existing specialists and facilities may no longer be in-network depending on your plan choice, it also means that the providers who are in-network (especially on plans with smaller networks) meet or exceed set quality measures for the care they deliver.

**It also means a more affordable health plan longer term.**

## Better support for your health—and health plan



Managing healthcare can be complex. That's why you'll have access to a benefits concierge to help guide you through the enrollment process, as well as new tools and programs to support you in your healthcare journey.

## What this means for you

Whether it's making sure that your care is covered, choosing the right doctor or understanding your treatment options, we want to make it less complicated for you to use your benefits.

**What could you save?** With the adjustments we're making, compared to the amounts employees would have paid in 2022 under the prior plans, employees will see an average of \$400 annual reduction in their premiums and out-of-pocket costs—at a time when overall healthcare costs continue to rise at 2-3 times the rate of inflation.

# How your health plan works

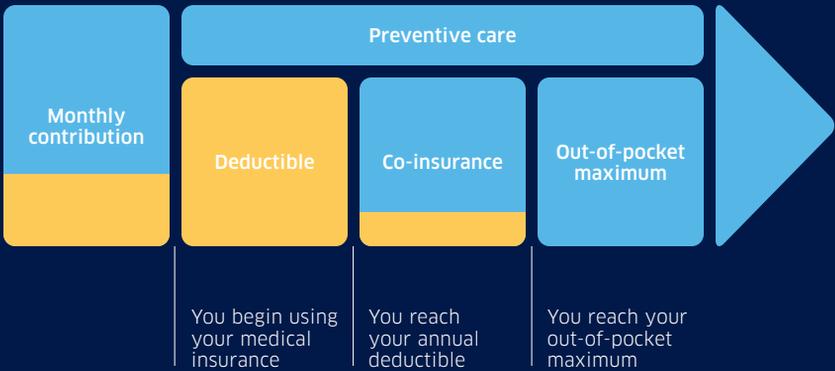
The best way to choose a plan that's right for you is to first understand how all health plans work.

## Terms and plan specifics

- Deductible** The amount you are responsible for paying before the plan begins to pay a percentage of covered expenses. Typically, if you select a higher deductible plan, it means you'll pay a lower monthly premium.
- Out-of-pocket maximum** The most you'll have to pay for covered medical expenses in a plan year; after you meet this amount, the plan will cover any additional eligible expenses at 100%.
- Co-insurance** The percentage you pay for a covered service or prescription drug after you have met your deductible.
- Co-pay** A fixed amount you pay for covered services or prescription drugs, typically at the time you receive the services.
- Preventive care** Preventive visits and age-appropriate screenings are always covered at 100% for all plan options.

## Who pays and when

● United pays    ● You pay



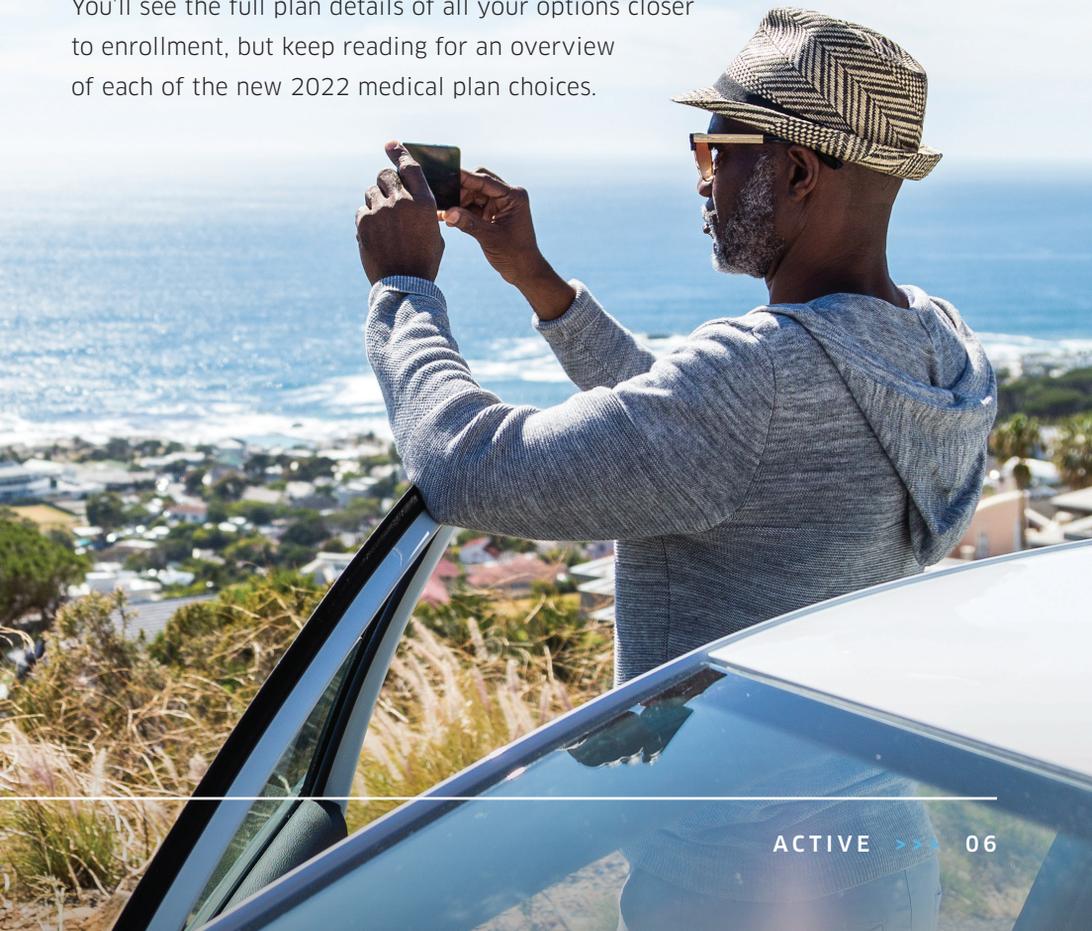
# Plans designed with you in mind

We understand that everyone's health needs are different, and for 2022 we'll continue to offer a full range of health plan options for you and your family.

You'll find new plans designed around:

- > **Varying levels of coverage**  
a range of deductibles, coinsurance and out-of-pocket costs
- > **Different ways to pay for your healthcare**  
either more up-front costs through higher premiums or more at the time of care
- > **Choice of plan type**  
with different-sized networks of quality doctors and hospitals

You'll see the full plan details of all your options closer to enrollment, but keep reading for an overview of each of the new 2022 medical plan choices.



**PREFERRED PROVIDER ORGANIZATION (PPO) PLAN OPTIONS**

# United PPO and United Savings PPO

A PPO plan is for people who want to see a provider of their choice and reduce their out-of-pocket medical expenses.

**Key features of a PPO plan**

- > PPO plans offer you the most freedom when it comes to choosing the doctors and hospitals you want to use with both in- and out-of-network coverage
- > You'll always pay less when you stay in-network
- > This type of plan generally has a wider network of quality providers compared to EPOs and HMOs

**United Savings PPO**

This plan offers the benefit of a Health Savings Account (HSA), which allows you to save money for your out-of-pocket healthcare costs.

<p><b>Broadest network of doctors</b></p> <p>and out-of-network coverage is available</p>	<p><b>Lower monthly premiums</b></p> <p>and higher deductible, (but offset with money from United)</p>	<p><b>Health Savings Account</b></p> <p>to pay for covered medical expenses—and the money is yours for life</p>
<p><b>\$800 or \$1,600</b></p> <p>United will make an annual deposit* into your HSA for completing an annual physical</p>	<p><b>Pre-tax contributions</b></p> <p>and you can also make your own deposits into your HSA account</p>	<p><b>Triple-tax savings</b></p> <p>contribute on a pre-tax basis, money grows tax-free, and money is withdrawn tax-free</p>

\* If you work at SFO, the maximum contribution to your HSA is \$2,000 for employee + dependent coverage when you and your covered family members complete your annual physicals by the deadline.

EXCLUSIVE PROVIDER  
ORGANIZATION  
(EPO) PLAN OPTIONS

## United Silver Plus, Centivo Platinum Plus\* and Bronze EPO

EPO plans are ideal for people who are willing to use only in-network providers, but want the coverage of a national network.

### Key features of an EPO plan

- > EPO options offer care exclusively through high-quality in-network providers
- > There is no out-of-network coverage, except in the case of an emergency
- > All providers in the United EPO network must meet rigorous quality and cost standards to participate, so you can choose your doctors with confidence
- > This type of plan generally offers lower premiums than many other options because of the high-quality care delivered by its carefully selected network

### Bronze EPO



This plan is an option if you're looking for a basic medical plan. Both the monthly premiums and the coverage amounts are very low, but it has the highest deductible. While it's a good plan for preventive care and catastrophic coverage, it does not provide an affordable coverage experience for everyday care.

**If you're looking for a low-monthly cost plan with more coverage for basic healthcare needs, you should consider the United Savings PPO, which comes with a savings feature.**

\* The Centivo Platinum Plus EPO is available to employees in select zip codes in parts of Connecticut, Florida, New Jersey, New York and Pennsylvania that surround EWR and MCO airports.

HEALTH MAINTENANCE  
ORGANIZATION  
(HMO) PLAN OPTIONS

## United offers a number of HMO plan options to choose from

HMO plans are designed for people within a defined service area, who are comfortable having one primary doctor for all services, and seek health services at an overall lower cost.

### Key features of an HMO plan

- > As their name suggests, HMO plans are designed for individuals who are willing to work closely with their primary care physician (PCP) to manage their health
- > Enrollees in HMO plans benefit from lower premiums and more predictable out-of-pocket costs
- > Because your care is led by your PCP, an HMO may be a good option if you have multiple or complex health issues that require coordinated care

HMO options are available to United employees and their families in select workgroups and select areas of California, Colorado, District of Columbia, Georgia, Hawaii, Illinois, Maryland, Ohio, Oregon, Texas, Virginia, Washington and West Virginia. If you have HMO options available to you, you'll see them in YBR during enrollment.



**New for this year: Eligible employees in Texas will now have an HMO option to choose from!**

If you're in a union-represented workgroup, you'll continue to have access to the following benefit plans in 2022: Core PPO, Core EPO, Core HDHP and Traditional PPO. You'll find more information about the cost and coverage for these plans closer to enrollment on YBR.

## Are you paying too much for your health insurance?

It's not surprising that most people tend to over-insure themselves, which means you're often paying for coverage you're not using. At United, data analysis shows that more than half of United employees could reduce their total costs by moving to a higher deductible health plan with a savings opportunity, like the **United Savings PPO**.

To ensure you're paying for the level of care that you truly need, take the time this year to evaluate the plan and level of coverage that's right for you and your family (including options outside of United, like a spouse's plan).



# The case for higher-quality healthcare

You've heard the saying before, and have probably even said it yourself, "You get what you pay for." And while that may be true for some things, the price you pay for your healthcare isn't always a predictable measure of its quality.

Think of it this way: If you need knee surgery, you're more likely to have a better outcome with a high-quality doctor. Then, not only will you recover sooner, but you'll ultimately pay less by avoiding complications or maybe even a second surgery down the road.

We've seen numerous cases in our healthcare costs around readmissions, infections or complications. That's why we're adjusting some of our provider networks to focus on high-quality doctors and hospitals.

**Building a relationship with a quality PCP and going to the best places for care the first time around is the best way to avoid potential complications that lead to higher premiums and out-of-pocket costs.**

**Watch your home mail in late October for a simple checklist of the key things you need to do during Annual Enrollment.**

## Who needs to enroll this year? You do.

Annual Enrollment is your once-a-year opportunity to make sure you have the coverage you and your family need for the year ahead. With new health plan options and new provider networks, it's more important than ever that you take the time to choose the right plan.

Since many of the 2022 plans are new, you will default into a plan if you don't take action during Annual Enrollment. Be sure to make an active election during enrollment to ensure you're picking the plan that best meets your needs.

This year, you must actively enroll in a plan to:

- > Elect to contribute to a Flexible Spending Account (FSA)
- > Receive your monthly wellness credit for avoiding tobacco
- > Avoid a surcharge for enrolling your spouse—even if they aren't eligible for coverage elsewhere



**Even if you've previously marked that you're tobacco free and/or it's not necessary to pay the spousal surcharge, if you do NOT actively enroll for 2022, these credits will reset.**



# Support that supports you

We have support resources available from now until the end of the year to make sure you feel good about the decisions you're making for 2022.

## Annual Enrollment timeline

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### OCTOBER 2021

- > **Now** Download the Alight Mobile app to access YBR and sign up for texting with the United Airlines Benefits Center (UABC) to receive important updates about your benefits.
- > **All of October** The educational series, "Now arriving: A better understanding," will help you understand your 2022 benefits enrollment.
- > **Mid-October** You'll have access to tools where you can confirm if your doctor is in-network with your plan choice. If you don't have a doctor, you'll be able to take advantage of these tools to find a quality doctor that's in-network with your new plan.
- > **October 25** You can visit YBR's "Price & Compare" tile where you can compare up to three plans side-by-side, including 2022 costs.

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### NOVEMBER 2021

- > **November 1** Annual Enrollment opens.
- > **November 1 - 19** Use the Enrollment Reimagined tool on YBR to receive a plan suggestion based on your healthcare needs. Answer a few simple questions about your healthcare usage, and the tool will recommend which 2022 medical plan is most likely to best fit your needs.
- > **During enrollment** Join benefits experts through virtual presentations to hear more about your 2022 benefits.
- > **November 19** Annual Enrollment ends.

## Now arriving: A new online tool just for you

Visit our new Annual Enrollment website to learn more and answer questions about your 2022 benefits plan.

1. Scan the QR code using the camera on our smartphone.
2. Make sure the QR code is inside the box on your screen.
3. Tap the pop-up notification that appears to open the link.



## Take advantage of quality programs

Once you have an idea of which plan you'll choose for 2022, switch your focus to the many quality programs you have available, including these:

- > Concierge service to help you manage your care
- > A new, free pain-management program for back, knee, hip, neck and shoulder pain through Hinge Health
- > Access to top-rated hospitals and renowned experts for certain non-emergency surgeries through Carrum Health
- > Free advice on conditions such as heart issues, knee/joint/back pain, cancer, digestive and stomach issues, and more, from Teladoc Medical Experts



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