



Seeing your doctor every year for a checkup is one of the best things you can do to stay healthy. See what's recommended, and check out resources designed to help women stay healthy.

Get screenings that are recommended for you

Preventive screenings are designed to help catch health issues early, when they may be easier and less expensive to treat. At your annual physical exam, ask your doctor about the screenings that are right for you.

Your health plan covers preventive care 100%. That includes annual exams, routine screenings and immunizations. If you need diagnostic care, you may need to pay based on your coverage.



When you complete your annual exam, you'll earn \$25 for your Personal Care Account (PCA). Each of your covered dependents can also earn \$25 for your PCA. Your PCA can be used to cover health care expenses, including medical care, prescription drugs, dental and vision care, and more.

Recommended screenings

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Years of age	18	25	30	35	40	45	50	55	60	65	70	75+
Annual physical	Every year											
Blood pressure screening	At each annual physical											
Breast cancer screening (mammogram)	Every 1 to 2 years starting at age 40, or as recommended by your doctor											
Cervical cancer screening, including Pap smear	Every 3 years for ages 21-65, or as recommended by your doctor											
Cholesterol screening	Every year											
Colorectal cancer screening	Regular screenings recommended starting at age 45 Ask your doctor about screening methods and intervals											
Diabetes screening	Every year											

These guidelines are provided for informational purposes only and do not constitute medical advice. Individuals with symptoms or at high risk for disease may need additional services or more frequent interventions. Discuss with your doctor how these guidelines may be right for you, and always consult your doctor before making any decisions about medical care. These guidelines do not necessarily reflect the vaccines, screenings or tests that will be covered by your benefit plan. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on the back of your health plan ID card.

What's on your mind?

Ask your doctor about any health-related issues on your mind. They may answer your questions or refer you to a specialist if needed. Please note that further diagnostic exams or tests will not be covered as preventive care.

Here are a few of the topics you may be wondering about. Growing your family

Back pain and prevention

screening

- Birth control Most prescriptions are covered 100%.
- Weight loss or maintaining a healthy weight If your doctor recommends lifestyle changes,

specialties. Wait times are less than 2 hours.

you may want to get a membership to One Pass Select™. Learn more at OnePassSelect.com.

Expanding your family? Check out these resources, available at no additional cost.

Maternity support

Maternity support is designed for all mothers, no matter what their pregnancy journey looks like.

Start by taking a short maternity support assessment. Based on your responses, a maternity nurse may reach out to you. They'll connect you with the care you need, answer your questions and support you every step of the way. You'll also get 24/7 access to online maternity courses ranging from preconception to postpartum, nutrition and exercise, and breastfeeding. Visit myuhc.com/maternity to complete the assessment, watch videos and learn more.

Maven[®]

Babies can bring a whole lot of joy — and so many questions. Feel more confident through it all with Maven. It offers:

Virtual video appointments and messaging with top-rated providers spanning 35+

- Your own dedicated Care Advocate. They can answer your questions, help you find the right
- Maven provider based on your needs, review your benefits and give in-person referrals. On-demand content and virtual provider-led classes covering topics like childbirth, infant
- CPR and breastfeeding. Join drop-in groups and community forums to connect with other members going through similar experiences too. Visit <u>mavenclinic.com/join/apwuhp-2024</u> or download the Maven Clinic app.



Visit myuhc.com®, download the UnitedHealthcare® app or call 1-800-718-1299.

Have questions or need to find a doctor?





Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. UnitedHealthcare also covers other routine services, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details. Maven is an independent company contracted to provide maternity benefits, including care advocacy, virtual consultations, coaching and education. Maven is not intended to replace your in-person providers. Maven is a registered trademark of Maven Clinic Co. All rights reserved.

The information provided under Maternity Support is for general informational purposes only and is not intended to be nor should be construed as medical

and/or nutritional advice. UnitedHealthcare makes no representation or warrant with regard to the accuracy of the information presented. If you believe that you may have any emergency medical condition you should immediately call 911. Participants should consult an appropriate health care professional to determine what may be right for them. If you have questions about the information presented or questions about health care services, supplies or treatments, you should consult your health care provider before making any health care decisions. Employers are responsible for ensuring that any wellness programs they offer to their employees comply with applicable state and/or federal law, including, but not limited to, GINA, ADA and HIPAA wellness regulations, which in many circumstances contain maximum incentive threshold limits for all wellness programs combined that are generally limited to 30% of the cost of self-only coverage of the lowest-cost plan, as well as obligations for employers to provide certain notices to their employees. Employers should discuss these issues with their own legal counsel.

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