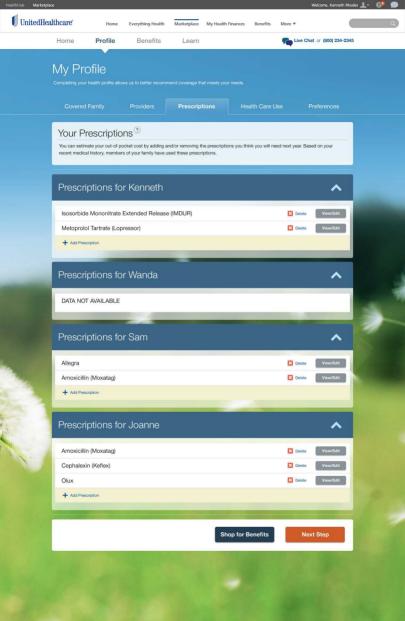
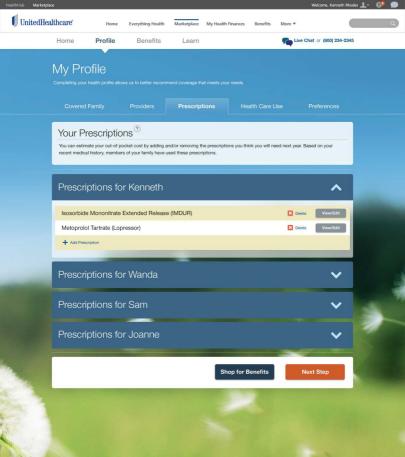


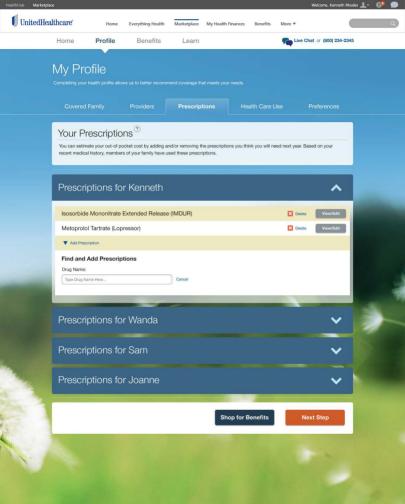


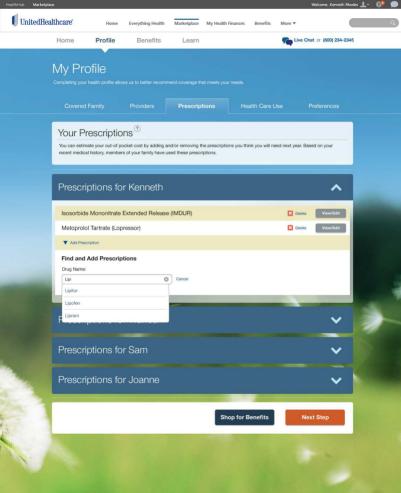
Shop for Benefits

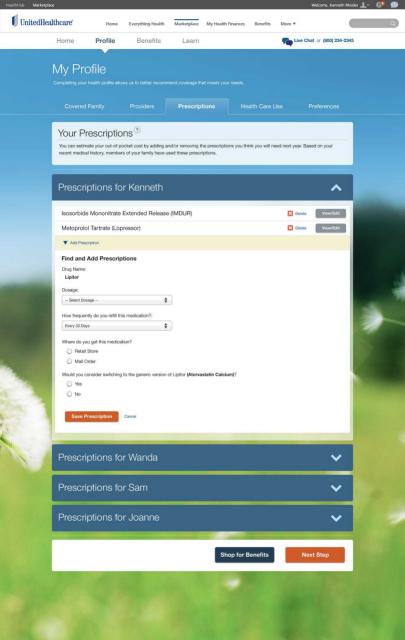
Next Step

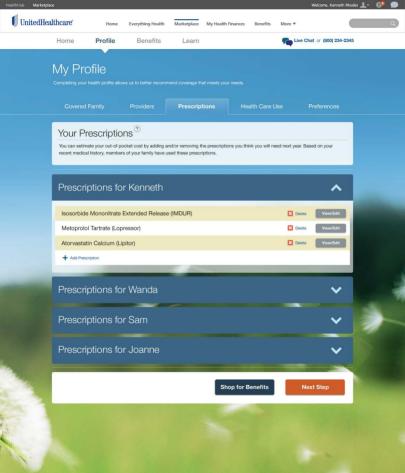












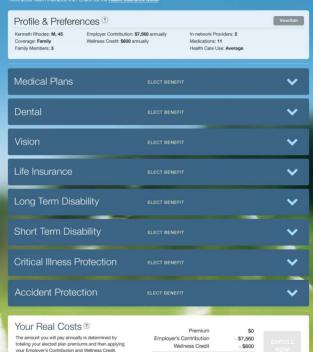


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Home Profile Benefits Learn Live Chat or (800) 234-2345

Select Your Benefits

elect from each benefit type below, and you're ready to enroll. Want to learn



\$0

ANNUALLY

Your Total Cost



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Select Your Benefits

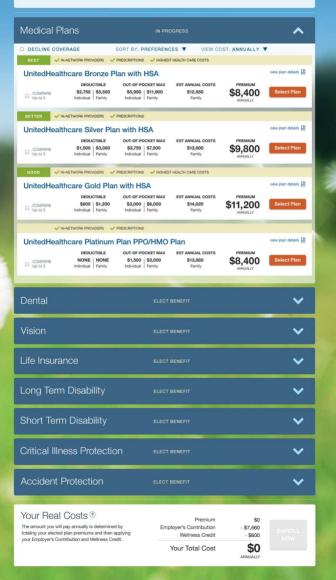


Profile & Preferences 2

Coverage: Family Family Members: 3

Kenneth Rhodes: M, 45 Employer Contribution: \$7,560 annually Wellness Credit: \$600 annually

In-network Providers: 2 Medications: 11 Health Care Use: Average View/Edit





Home Profile Benefits Learn Live Chat or (800) 234-2345

Select Your Benefits

Select from each benefit type below, and you're ready to enroll. Want to learn



Your Real Costs®

Accident Protection

The amount you will pay annually is determined by totaling your elected plan premiums and then applying your Employer's Contribution and Wellness Credit.

Premium Employer's Contribution Wellness Credit

Your Total Cost \$240

\$8,400

-\$7,560

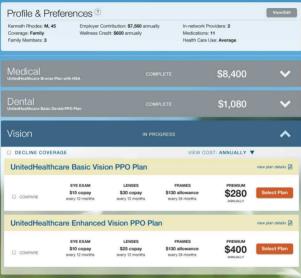
-\$600

NOW



Everything Health Marketplace My Health Finances Benefits Live Chat or (800) 234-2345 Home Profile Benefits Learn

Select Your Benefits





Your Real Costs®

The amount you will pay annually is determined by totaling your elected plan premiums and then applying your Employer's Contribution and Wellness Credit.

Premium Employer's Contribution Wellness Credit

\$9,480 \$7,560 - \$600

Your Total Cost

\$1,320

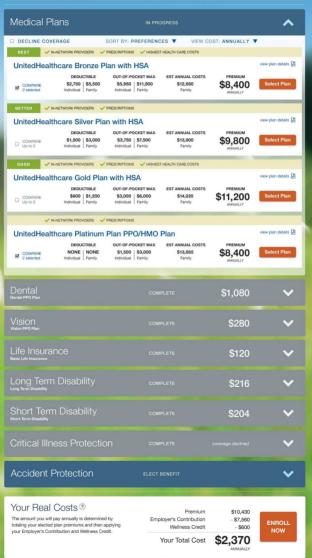


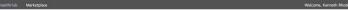
Home Profile Benefits Learn Live Chat or (800) 234-2345

Select Your Benefits

Select from each benefit type below, and you're ready to enroll. Want to learn nore about health insurance first? Check out the **Health Insurance Guide**.







UnitedHealthcare Everything Health Marketplace My Health Finances Benefits More ▼

Live Chat or (800) 234-2345 Home Profile Benefits Learn

Profile & Preferences ®			View/Edit
Kenneth Rhodes: M, 45 Employer Contribution: \$ Coverage: Family Wellness Credit: \$600 and Family Members: 3	nually Medication	: Providers: 2 ns: 11 e Use: Average	
Medical UnitedHealthcare Bronze Plan with HSA		\$8,400	~
Dental UnitedHealthcare Basic Dental PPO Plan	COMPLETE	\$1,080	~
VISION UnitedHealthicare Basic Vision PPO Plan	COMPLETE	\$280	~
Life Insurance UnitedHealthcare Basic Life Insurance	COMPLETE	\$120	~
Long Term Disability UnitedHealthcare Core: 60% of pre-Disability Earning	COMPLETE	\$200	~
Short Term Disability	COMPLETE	coverage declined	~
Critical Illness Protection UnitedHealthcare \$5,000 Benefit Covering 13 Critical Illnesses	COMPLETE	\$60	×
Accident Protection United Healthcare Stiver Plan (Base Plan Only)	COMPLETE	\$60	~
Your Real Costs ③ The amount you will pay annually is determined by	Premium Employer's Contribution	\$10,200 - \$7,560	ENROLL

totaling your elected plan premiums and then applying your Employer's Contribution and Wellness Credit.

Wellness Credit

Your Total Cost

