



## United Healthcare Consumer Driven Health Plan (CDHP) Frequently Asked Questions

|                                     | Question   | Answer   |
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| <b>Consumer Accounts Card (CAC)</b> |  |  |
| <b>1.</b>                           | <b>What is the Consumer Accounts Card (CAC)?</b>               | <p>The CAC is a special purpose debit card you may use to pay for eligible health care expenses directly from your HRA or healthcare FSA without submitting paper claims. It also eliminates the need for you to pay out-of-pocket for certain expenses.</p> <p>Eligible expenses may include such things as: pharmacy prescriptions or office co-payments. You may also use the card to pay for coinsurance amounts when using UHC network providers. However, you shouldn't pay for these expenses until your claim has been processed by UHC and you know your final patient responsibility.</p>  |
| <b>2.</b>                           | <b>Who is eligible for a Consumer Accounts Card (CAC)?</b>     | <p>If you enroll in the United Healthcare Consumer-Driven Health Plan (CDHP) or elect a Flexible Spending Account (FSA) for the first time in 2011, you will receive a CAC. If you are enrolled in both the CDHP and an FSA, both amounts will be loaded to one card.</p> <p>If you were enrolled in an FSA or the CDHP in 2010, you will continue to use your current CAC. The CAC has a 4-year expiration and should not be discarded between plan years. You may continue to use the card as long as you re-enroll in the CDHP or FSA each plan year. New cards will automatically be issued 45 days prior to the card expiration date.</p> <p>If you have lost or misplaced your CAC, contact CAC Customer Service at 1-866-755-2648 to request replacement cards.</p> |
| <b>3.</b>                           | <b>What expenses can be paid from the HRA? Healthcare FSA?</b> | <p>The Health Reimbursement Account (HRA) under the CDHP is part of the medical plan and may only be used to cover eligible medical plan expenses (including prescriptions).</p> <p>The healthcare FSA can be used to pay for eligible medical, prescription, dental and</p>   |

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|    |  | <p>vision expenses as well as eligible over-the-counter health care items (may require a prescription).</p> <p>Expenses that are eligible under both the HRA and FSA will be paid from the HRA first.</p>   |
| 4. | <b>Can I use my CAC for dependent care expenses?</b>   | Dependent care FSA money is loaded to the CAC on a contribution basis (as dollars are deducted from your paycheck). The provider you use must be set up with the MCC code (the Mastercard device code) that indicates child care services. If not, you will need to pay for services out-of-pocket and submit a claim to UHC for reimbursement.   |
| 5. | <b>How soon can I begin using my CAC after I receive it?</b>                                 | Activate your card as soon as you receive it. Your card can be used immediately after activation.   |
| 6. | <b>Where can I use my CAC for prescriptions and over-the-counter (OTC) healthcare items?</b> | <p>Starting Jan. 1, 2011, you will no longer be able to use your health care flexible spending account (FSA) to pay for many over the-counter (OTC) medications at a pharmacy, supermarket or other retail store without a prescription. This change is part of the Affordable Care Act passed in 2010. Insulin, prescription medicines and some OTC supplies – such as bandages, crutches, blood sugar test kits and contact solution – will continue to be eligible, if your health care FSA plan allows. If you buy the medicine off the shelf you will need to submit an FSA claim form, copy of your receipt and your provider's prescription. <b>OTC medications cannot be purchased with your CAC card as of January 1, 2011.</b></p> <p>The IRS has approved the Inventory Information Approval System (IIAS) as a method for retailers to identify and substantiate eligible expenses for debit card transactions. The Inventory Information Approval System (IIAS) enables participants to purchase eligible expenses from a broad range of retailers increasing the use of the card and reducing manual claims processing requirements. A retailer's point of sale system identifies eligible healthcare FSA/HRA purchases by comparing the inventory control information (UPC or SKU number) against the list of restricted eligible medical expenses as described in IRS Section 213(d).</p> <p>The IRS states merchants need to be able to identify 213(d) eligible items, however, it is not required that merchants break out the eligible items by Prescription and General Healthcare (OTC). While most merchants will break this out, there are some that do not. To determine if a merchant separates prescriptions, look for a "check mark" in the</p> |

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|    |                               | <p>Supporting Prescription Subtotal column of the Merchant List found on <a href="http://www.sig-is.org">www.sig-is.org</a>. If a member uses a merchant that does not break out Prescriptions and General Healthcare (OTC), there could be two potential issues with the CAC.</p> <ul style="list-style-type: none"> <li>• Issue 1 – If a member only has an HRA and the merchant does not break out the expenses (i.e., they pass a prescription over as General Healthcare), the card transaction will decline as the HRA is only set up to allow prescriptions and not OTC.</li> <li>• Issue 2 – If a member has an HRA and FSA and the merchant passes a prescription as General Healthcare, the prescription will pay out of the FSA (versus the HRA) as HRA is only set up to allow prescriptions and not OTC.</li> </ul> <p>Members can visit <a href="http://www.sig-is.org">www.sig-is.org</a> and select the IIAS Merchants List link to view a list of participating merchants. The Merchant List is updated every two days. The Merchant List includes four pieces of information – 1) Merchant Name; 2) Certification Status; 3) Planned Merchant Implementation Date; and 4) Supporting Prescription Subtotal.</p> <p><b>Note: Express Scripts is now an IIAS merchant.</b></p> <p>You may use your CAC at participating merchants based on the benefit plans you are enrolled in:</p> <ul style="list-style-type: none"> <li>• <u>FSA only</u> – you must use merchants that are certified and have a status of “Live” in the Planned Merchant Implementation Date column.</li> <li>• <u>HRA only or HRA/FSA</u> – you must use merchants that are certified, have a status of “Live” and a “check mark” in the Supporting Prescription Subtotal column.</li> </ul> <p><u>Exception</u></p> <ul style="list-style-type: none"> <li>• <u>Walgreen’s</u> – not available for purchasing prescriptions for employees enrolled in an FSA only. Employees enrolled in an HRA may use Walgreen’s to purchase prescriptions that are processed through Medco. However, the prescription must be purchased separately from other items.</li> </ul> |
| 7. | <b>How does the CAC work?</b> | It is swiped on a point of sale terminal that accepts MasterCard. Consumer expense information is transferred for validation through the MasterCard network. Authorized  |

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|     |  | <p>amounts transfer directly from the HRA/FSA to the provider/merchant. Unauthorized transactions are denied.</p> <p>There is no PIN required – choose “Credit” at the point of service.</p> <p><b>Important!</b> If you are purchasing prescriptions, be sure to present your UHC (for members enrolled in the CDHP) or Express Scripts (for members enrolled in the PPO) ID card first. Your CAC is not an insurance card – it is a form of payment like any other debit or credit card. You use your CAC for purchasing your prescriptions not for validating your coverage.</p> |
| 8.  | <b>Will I need to submit receipts to United Healthcare for expenses purchased with my CAC?</b>     | <p>No. United Healthcare only requests receipts for credit returns or forced transactions where the merchant did not receive an authorization from MasterCard. For example, if you returned an item and a credit is applied to your card, UHC would require a receipt to confirm the returned item is an eligible expense.</p> <p>You should hold on to any receipts for services or items paid for using your CAC in the event UHC does need copies. In addition, the IRS can require you to provide documentation of these expenses.</p>  |
| 9.  | <b>Can I pay for a prescription that is more than the remaining balance in my HRA with my CAC?</b> | <p>The pharmacy can process the amount remaining in your HRA from the CAC and then request a second form of payment for the remaining balance. You must use a merchant that is IIAS compliant and has a “check mark” in the Supporting Prescription Subtotal column on the Merchant List.</p> <p>If you are also enrolled in a healthcare FSA, the remaining balance will be paid from available FSA dollars.</p> <p>If no additional funds are available in your HRA or FSA, you will need to use another form of payment for your prescription.</p>                               |
| 10. | <b>How do I submit expenses for reimbursement from my FSA or HRA if I don’t use my CAC?</b>        | <p>Claims for medical, dental, vision and prescriptions are automatically fed to your FSA via electronic files. The timing varies, but most vendors submit an electronic file to UHC at least once a month. Therefore, no reimbursement claim form is required.</p> <p>In addition, you may set up direct deposit on <a href="http://www.myuhc.com">www.myuhc.com</a> for both the HRA (“Medical Reimbursement”) and FSA.</p>   |

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|            |  | <p>If you need to submit a claim form for reimbursement, you will use the HRA/FSA claim form and submit it to UHC. You can obtain this form at <a href="http://www.myuhc.com">www.myuhc.com</a> or on the CenturyLink intranet or <a href="http://www.centurylinkbenefits.com">www.centurylinkbenefits.com</a>.</p>   |
| <b>11.</b> | <b>What are some reasons why a CAC transaction may be declined?</b>                    | <ul style="list-style-type: none"> <li>• The card is not activated.</li> <li>• You have an FSA only (no HRA) and are trying to use Walgreen's</li> <li>• You have both an HRA and FSA and are trying to use an IIAS merchant that does not have a "check mark" in the Supporting Prescription Subtotal column on the IIAS Merchant List.</li> <li>• The transaction is not for an eligible service or it does not match a pre-defined benefit co-pay amount.</li> <li>• The transaction is for a non-eligible charge.</li> <li>• The transaction cannot be substantiated in real time at the pharmacy.</li> <li>• The retailer does not accommodate partial authorization and the remaining funds in the account won't cover the expense.</li> <li>• There is a problem with the merchant's card terminal.</li> <li>• It is an invalid location, e.g. a gas station or electronics store.</li> <li>• You have a zero balance in your HRA/FSA account.</li> </ul> <p>If you have a question about a declined transaction, call the number on the back of your card and attempt to resolve the issue with customer service.</p> |
| <b>12.</b> | <b>Will my 2010 HRA balance be added to my CAC in 2011?</b>                            | <p>Yes. Any remaining HRA balance at the end of the calendar year will remain on your CAC. For example, if you have \$500 remaining in your HRA on December 31, 2010 and receive a new allocation of \$1,000 on January 1, 2011, the amount available on your CAC on January 1, 2011 will be \$1,500.</p>   |
| <b>13.</b> | <b>Can I view my card transactions online?</b>   | <p>Online access to account information and card transactions is available via <a href="http://www.myuhc.com">www.myuhc.com</a>. You can view your current account balance as well as view account transactions that have been processed using your CAC.</p>  |
| <b>14.</b> | <b>What if I have been enrolled in a United Healthcare FSA, but can't find my CAC?</b> | <p>Contact CAC customer service at 1-866-755-2648 to request a new Consumer Accounts Card.</p>  |

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| 15.                             | <b>Does my CAC include both my HRA and FSA dollars?</b>  | Yes. If you are enrolled in the CDHP and an FSA, both the HRA and FSA balances are loaded to one CAC. The HRA and FSA balances are tracked separately and can be viewed on <a href="http://www.myuhc.com">www.myuhc.com</a> . Remember, if an expense is eligible under both the HRA and FSA, the HRA funds will be used first until the account is exhausted; then the FSA funds will be used.   |
| 16.                             | <b>What is the difference between my United Healthcare ID card and my CAC?</b>                     | Your UHC ID card is used to show proof of your CenturyLink group health plan coverage. The CAC is a form of payment only – just like your own debit or credit card. The CAC is not an ID card. You will need to show your UHC ID card to your provider/pharmacy and then pay using your CAC.  |
| <b>CDHP General Information</b> |  |   |
| 17.                             | <b>Can I choose to have claims paid from my healthcare FSA first rather than my HRA?</b>           | All eligible claims are paid from the HRA first (medical and prescription expenses only). If there are out-of-pocket costs for you, the claim will be submitted to your FSA and you will be reimbursed. You do not have the option to change the order of claims payment. If a claim is an eligible medical/prescription expense, it falls under the medical plan and would be paid from the HRA.   |
| 18.                             | <b>When I exceed my \$2,000 HRA balance (family coverage) in the CDHP, how does the plan work?</b> | <p>You will receive an annual HRA allocation based on the coverage level you elect (employee only, employee + spouse/domestic partner, employee + child(ren) or employee + family). A \$2,000 HRA allocation is provided to employees who enroll in the CDHP and elect “employee + family” coverage.</p> <p>All eligible expenses (up to the allowable amount) are paid from the HRA first (after network discounts when using network providers). The deductible under the CDHP is equal to your HRA allocation PLUS your member responsibility. For “employee + family” coverage, your network deductible is equal to \$3,000 (\$2,000 HRA allocation and \$1,000 member responsibility).</p> <p>In this example, once the HRA is exhausted, the member is responsible for the next \$1,000 in expenses at the full cost. If you contributed to a healthcare FSA, you may use your FSA dollars to cover your member responsibility. When the member responsibility is met, the deductible has also been met. After the deductible is met, the plan begins paying 80% of network expenses and 60% of out-of-network eligible expenses (up to allowable amount). You are then responsible for 20% of a network expense or 40% of an out-of-network expense. You continue paying your 20% or 40% until you reach the out-of-pocket maximum. Once you reach the out-of-pocket</p> |

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|            |  | <p>maximum, you and your covered dependent's claims will be paid at 100% for the remainder of that calendar year.</p> <p>HRA dollars remaining at the end of 2010 will be rolled into 2011 (assuming you elect the CDHP for 2011). Any remaining HRA dollars at the end of a plan year roll into the next plan year and can be used to satisfy the member responsibility and co-insurance.</p>   |
| <b>19.</b> | <b>Are prescriptions costs included in my deductible and out-of-pocket maximum?</b>  | Yes. Prescription expenses apply towards the deductible and out-of-pocket maximum just like any other medical expense under the CDHP.  |
| <b>20.</b> | <b>How does UHC track employee out-of-pocket expenses? Deductible?</b>   | As claims come in to UHC, they check to see what medical plan you are enrolled in and pay claims according to that plan. If you are enrolled in the CDHP, UHC applies covered medical and pharmacy expenses (non-preventive) to the calendar year deductible and out-of-pocket. When there is patient responsibility, UHC checks to see if you have HRA dollars available. If so, the claim will be paid from HRA dollars after applicable network discounts. Each time a claim comes in, your HRA, deductible and out-of-pocket maximum balances are updated. As your HRA balance goes down, you will see the deductible and out-of-pocket maximum amounts increase. You can track all of these balances on <a href="http://www.myuhc.com">www.myuhc.com</a> once you are a registered member.  |
| <b>21.</b> | <b>Once the employee meets the out-of-pocket maximum, the plan pays 100% of "eligible expenses." Does this mean the insurance covers 100% of the costs or the "reasonable and customary" amount?</b> | Yes, the plan will pay 100% of eligible expenses (or the reasonable and customary amount) submitted for out-of-network providers once a member has met the out-of-pocket maximum. Allowable/reasonable and customary expenses apply when using out-of-network providers only. The reasonable and customary amount is the average fee being charged for that particular service in your area. If you go in for an office visit and the provider charges \$200, but the "reasonable and customary" fee for an office visit in your area is \$150, UHC will pay \$150 and you would be responsible for the difference (\$50). Charges above the reasonable and customary amount are not covered under the plan benefits and do not apply towards the deductible or out-of-pocket maximum. However, if you have contributed to a healthcare FSA, the \$50 charge above reasonable and customary can be reimbursed from your FSA. |
| <b>22.</b> | <b>My UHC ID card says it is the Options PPO plan, but I thought I was enrolled in the CDHP?</b>   | Options PPO is the provider network you participate in as a member of the CDHP. Employees in the CenturyLink PPO plan participate in a different network called Choice Plus. If you are enrolled in the CDHP, you should see "Options PPO – Definity HRA" at the bottom of your ID card. You also would have received a Consumer Account Card (CAC).   |

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| <b>23.</b>                  | <b>Where can I view my HRA and/or FSA balances?</b>   | You can track your HRA and/or FSA balance on <a href="http://www.myuhc.com">www.myuhc.com</a> . You will need to register as a member on the UHC website. This only takes a few minutes. Once you are a registered user, you have access to view your claims online, check your HRA or FSA balances, set up direct deposit of your HRA/FSA, print temporary ID cards, find network providers, etc.   |
| <b>24.</b>                  | <b>Once I meet the out-of-pocket maximum do all covered dependents receive 100% coverage?</b>   | Yes. Once the out-of-pocket maximum is met, all covered family members receive 100% coverage for the remainder of the plan/calendar year. Charges above the “reasonable and customary” amount would still be the member’s responsibility even after the out-of-pocket maximum has been met.  |
| <b>25.</b>                  | <b>Can I pay dental or vision expenses from my HRA?</b>   | No. Only eligible medical and prescription expenses can be paid from the HRA. Refer to the SPD for a list of covered services. Dental, vision and over-the-counter medications (may require a prescription) can be reimbursed from your healthcare FSA.  |
| <b>26.</b>                  | <b>Is my HRA pro-rated if I enroll in the plan mid-year or add a new dependent mid-year? What if I remove a dependent, such as a spouse due to a divorce?</b> | Yes. The HRA, deductible and out-of-pocket maximum are pro-rated if you enroll in the plan mid-year, for example, an employee hired in June. In addition, if you add a new dependent during the year that changes the HRA amount, you will receive additional dollars in your HRA and your deductible and OOP maximum will increase. If you remove a dependent during the year and your coverage level changes, your HRA will not be reduced. In addition, your deductible and OOP maximum will remain the same. |
| <b>Additional Questions</b> |   |  |
| <b>27.</b>                  | <b>Where do I find more details on the CDHP?</b>  | You can find detailed plan information in the CDHP Summary Plan Description (SPD) located on the CenturyLink intranet under HR/Benefits.   |
| <b>28.</b>                  | <b>Who should I contact if I have questions about other CenturyLink healthcare or life insurance benefits?</b>  | Contact Benefits Administration toll-free at 1-888-722-4372 or by e-mail to <a href="mailto:benefits@centurylink.com">benefits@centurylink.com</a> . The toll-free number is available Monday – Friday between the hours of 7:00 am – 5:00 pm CT.  |