UNITEDHEALTHCARE INDIVIDUAL PRODUCT AVAILABILITY ON E-STORE All Plans Available Year-Round

SHORT TERM MEDICAL (STM)

	AK A	L AR	AZ	CA C	o c	T D	C DE	FL	GA	н	IA	ID	IL	IN	KS	КҮ	LA	MA	MD	ME	МІ	MN	мо	MS	МТ	NC	ND	NE	NH	NJ	NM	NV	NY	ОН	ОК	OR	РА	RI	SC	SD	ΤN	тх	UT	VA	VT	WA	WI	WV	WY
Enhanced STM	٧	< ✓	\checkmark				+	~	\checkmark				\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark		+	\checkmark	\checkmark	\checkmark		\checkmark				\checkmark		+	\checkmark				\checkmark	+	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark	\checkmark
Max Term Length ¹ (in months)	2x	12 12	2x12				<3 ² mo.	ZXI	2 2 x 1 2	2			6 ²	2x12	6	2x12	2x12	2			6 ²		2x6	2x12	6	2x12		2x12				6 ²		12	2x12				11	2x6	12	2x12	2x12				12 ²	2x12	2x6
Short Term Medical	٧	< ✓	~				\checkmark	~	\checkmark				\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark				\checkmark					\checkmark		\checkmark		\checkmark	\checkmark		√ ³			\checkmark	\checkmark	\checkmark
Max Term Length ¹ (in days unless noted)	3(60 360	184				<3 ² mo.	300	360				180 ²	184	123	360	184				184 ²	6 ² mo.	6 mo.	360	184	360		360				184 ²					360		337		360	360		184		5	360 ²	360	184
Network	C	Р СР	С				С	С	СР				С	С	С	СР	С				С	СР	С	С	СР	СР		С				С		СР	СР		С		С	СР	С	С	СР	СР			С	С	С
Association Group (FACT) ⁴		•	•					•					•	•							•			•				•						•			•				•	•		•			•	•	
																		Unde	rwritter	n by Go	lden Ru	ile Insu	rance	Compa	any (GF	RIC)																							

TRITERM MEDICAL (3-TERM MEDICAL)

	AK	AL	AR	AZ	CA	со	СТ	DC	DE	FL	GA	HI	A I	D IL	1	N KS	КҮ	LA	MA	MD	ME	МІ	MN	мо	MS	MT	NC	ND	NE	NH	NJ	M	NV	NY	ОН	ОК	OR	ΡΑ	RI	SC	SD	TN	тх	UT	VA	VT	WA	WI	WV	WY
TriTerm Medical		+	✓	\checkmark						√	+	•			,		\checkmark	\checkmark						\checkmark	\checkmark		\checkmark		✓							\checkmark				\checkmark		\checkmark	✓	\checkmark					\checkmark	
Network		СР	СР	С						С	СР		С		(С	СР	С						С	С		СР		С							СР				С		С	С	СР					С	
Association Group (FACT) ⁴		•	•	٠						•			•			•									٠				•													•	•						•	
																			Under	writton	hu C	aldon D	do Incu	ranco	Comp	any ICE																								

Underwritten by Golden Rule Insurance Company (GRIC)

HOSPITAL & DOCTOR (FIXED INDEMNITY)

	AK	AL	AR	AZ	CA	0	ст р	C DE	FL	GA	ні	IA ID	IL	IN	KS K	Y	LA N	1A MD	ME	МІ	MN	мо	MS M	тг	NC ND NE	NH	NJ	NM	NV	NY	он	ОК	OR	ΡΑ	RI	SC	SD	TN	тх	UT \	VA	vт v		WI	wv wy
Health ProtectorGuard	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark	\checkmark	✓	\checkmark	\checkmark	\checkmark	✓	/	\checkmark		 ✓ 				\checkmark		✓	\checkmark	\checkmark	✓	\checkmark	\checkmark		\checkmark	\checkmark	√	\checkmark		1	\checkmark	√ √						
Core Access⁵ (not a UHC product)							~	/															V	-				\checkmark									✓								

Health ProtectorGuard underwritten by Golden Rule Insurance Company (GRIC) Core Access underwritten by Independence American Insurance Company (IAIC)⁵

ANCILLARY

	AK	AL	AR	٩Z	CA CC	СТ	DC	DE	FL	GA	HI	IA	ID	IL	IN	KS	KY	LA	MA M	DM	E MI	MN	мо	MS	MT	NC	ND	NE	NH	NJ [M	NV N	(ОН	ОК	OR	ΡΑ	RI	SC	SD	ΤN	ТΧ	UT	VA	VT	WA	WI	W	V
Enhanced Dental with Hearing & Vision Rider	\checkmark	\checkmark	~		 ✓ 	~	~	\checkmark	~	\checkmark	\checkmark	~	\checkmark	\checkmark	~	\checkmark	\checkmark	\checkmark	~	 ✓ 	 ✓ 	√ ⁶	~	\checkmark		~	\checkmark	~	\checkmark	\checkmark	~	\checkmark	\checkmark	~	\checkmark	~	✓ ⁶	~	\checkmark	~	\checkmark	\checkmark		\checkmark	√ ⁶	~	~	/
Senior Dental with Hearing & Vision Rider (age 64+)	\checkmark	✓	~	/	√ √	~	1	\checkmark	~	\checkmark	\checkmark	~	~	~	~	\checkmark	\checkmark	~	~	/ /	√	√6	~	~		~	\checkmark	~	√	✓	~	√	~	~	\checkmark	~	√6	√	\checkmark	~	~	✓		~	√ ⁶	\checkmark	~	/
Vision		\checkmark	\checkmark		√ √	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	√	 ✓ 	 ✓ 		\checkmark	\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	1
Critical Illness	\checkmark	\checkmark	\checkmark		√ √			\checkmark	\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	~	 ✓ 	✓	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark	/
Accident Pro Series	\checkmark	\checkmark	\checkmark	/	\checkmark	7	7 🗸	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	√7	\checkmark	\checkmark	\checkmark		\checkmark	~	 ✓ 	✓ ⁷	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark				\checkmark	\checkmark	\checkmark	\checkmark	✓ ⁷	\checkmark	\checkmark	\checkmark	✓ ⁷	\checkmark	\checkmark				\checkmark	~	1
Accident SafeGuard	\checkmark	\checkmark	\checkmark	/	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark	√ ⁸	\checkmark	√ ⁸	~	1	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark				\checkmark	\checkmark	\checkmark	\checkmark	√ ⁸		\checkmark	\checkmark	\checkmark	\checkmark		\checkmark			\checkmark	\checkmark	1
Term Life SafeGuard	\checkmark	\checkmark	\checkmark			×	9 🗸	\checkmark	√ ⁹	\checkmark		\checkmark		\checkmark	\checkmark	√ ⁸	\checkmark	√ ⁸	\checkmark	3,9	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark				\checkmark	\checkmark	\checkmark		√ ⁹		\checkmark	\checkmark	\checkmark	\checkmark		\checkmark			\checkmark	\checkmark	1
Hospital SafeGuard	\checkmark	1	~			~	 ✓ 	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark	\checkmark	√ 8	\checkmark	~	/	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark				✓	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark	\checkmark			√ ⁸		_	\checkmark	\checkmark	1

SUPPLEMENTAL N	ION-I	NSU	RAN	CE PR	ODUCT	S																																									
	AK	AL	AR	AZ	CA CO	о ст	r DC	DE	FL	GA	ні	IA ID) IL		N KS	КҮ	LA	MA M	D M	E M	и м	NM	10 MS	5 МТ	NC	ND	NE	NH	NJ M	M	NV I	NY	он	ОК	OR F	Ά	RI	SC	SD	TN 1	ГХ	UT	VA	VT V	VA V	VI V	NV V
HealthiestYou by Teladoc [®]																																															
Teladoc®	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark \checkmark	\checkmark	✓	\checkmark	\checkmark	\checkmark	\checkmark	✓	\checkmark	\checkmark	√	/ /	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark		\checkmark	\checkmark	 ✓ 		\checkmark	\checkmark	\checkmark	× 1		\checkmark	\checkmark		1		× 1
(not a UHC product)																																															

ACA OFF EXCHANGE (not available on E-store)

	AK AL	AR	AZ	са со	СТ	DC	DE	FL	GA	ні	IA ID	IL	IN	KS	КҮ	LA	MA	A MC) ME	МІ	MN	мо) MS	МТ	NC	ND	NE	NH	NJ	NM	NV	NY	ОН	ОК	OR	PA	RI	SC	SD	TN 1	гх и	JT V	A V	T WA	A W	ı wv	WY
Copay Plans ¹⁰																													\checkmark																		
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ACA Off Exchange Copay Plans underwritten by Oxford Health Insurance, Inc. (OHI)

+ = New product/plan option. Please check E-Store (www.UHOne.com/broker) for product availability by state and ZIP Code.

- = Existing product available in state
- = Requirements that correspond to product within a state
- **C** = UnitedHealthcare Choice Network
- **CP** = UnitedHealthcare Choice Plus Network

¹Minimum 1 month (or minimum 30 day where applicable) term length. (MN) minimum term length is 4 months. (LA) minimum term length is 2 months less 1 day (except IN, which is always equal to 364 days). 2x6 and 2x12 indicate that plans may be sold as consecutive 6-month and 12-month maximum term length plans, respectively.²(DE) Limited to one short term policy in 365 days; (IL) Must have 61 days between plans; (MI) Limited to 6 months total coverage in a 12 month time frame; (MN) Consecutive policies cannot exceed 365 days of total coverage in a 555 day period. (NV) no more than 185 days of coverage in any 365 day period; (WI) Consecutive policies are not available. Policies are consecutive if there is less than a 64-day gap between them. ³State specific product, see brochure for details. ⁴Plans are issued as association group plans and are available only to members of the Federation of American Consumers and Travelers (FACT). ⁵To offer products underwritten by IAIC a contract with GetHealthInsurance.com Agency is required. Core Access is not a UnitedHealthcare product. ⁶Vision rider benefit not available. ⁷Limited product brochure for details. ⁹Critical Illness rider benefit not available. ¹⁰These Off-Marketplace plans offer Minimum Essential Coverage but are not ACA tax credit eligible.

UnitedHealthOne® is a brand representing the portfolio of insurance products offered to individuals and families.

GetHealthInsurance.com Agency and Independence American Insurance Company are separate entities and are not responsible for each other's contractual or financial obligations.

Short Term Medical, TriTerm Medical, Fixed Indemnity, and Ancillary products are available to market year-round and are not affected by Open Enrollment time frames.

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