



UnitedHealthcare Select

2026 UHC Select Plan

2026 Plan Year

Montgomery County Government

Medical plan coverage details

UnitedHealthcare Select Plan www.whyuhc.com/mcg	
Premium	Your employer will provide your premium amounts
Annual medical deductibles and out-of-pocket limits	Network
Deductible amounts	
Individual	No Deductible
Family	No Deductible
Out-of-pocket limits	
Individual	\$1,100
Family	\$3,600
Medical copays (\$) and coinsurance (%)	Network
Doctors and other professionals	
Primary care visit (illness or injury)	\$5 copay
Specialist	\$10 copay
Mental health visit (outpatient)	\$5 copay
Preventive care visit	\$5 copay
Virtual, urgent and emergency care	
24/7 Virtual Visit (online doctor)	\$5 copay
Urgent care visit	\$15 copay
Emergency room	\$25 copay

The above is only a summary. It is not intended to be a complete listing of all plan details. Please see the Summary of Benefits and Coverage on the website www.whyuhc.com/mcg.

Common health care terms — good info to know

Coinsurance

The percentage of costs you pay for a covered health care service after your deductible is reached.

Copayment

Also called a copay, this is a fixed amount of money you may pay for certain covered health services, like a doctor's appointment.

Deductible

The amount you pay before your plan starts sharing costs for covered services.

Out-of-pocket limit

The most you could pay for covered services in a plan year.

Premium

A routine payment that's typically taken out of your paycheck and helps keep your plan active, so you can stay covered.

[justplainclear.com](https://www.justplainclear.com)

For thousands of health care terms defined simply and clearly, this is your site.



UnitedHealthcare plan:
Visit <https://www.whyuhc.com/mcg>
Call 1-800-638-0014

United
Healthcare®



The company does not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.

We provide free services to help you communicate with us. Such as, letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the member toll-free phone number listed on your ID card.

ATENCIÓN: Si habla español (**Spanish**), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文 (**Chinese**)，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

These plans have exclusions, limitations and reduction of benefits. For costs and complete details contact your employer.

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