Save on labs, imaging services and surgical procedures by using freestanding facilities

A freestanding facility performs outpatient services and submits claims separately from any hospital affiliation. Depending on your type of plan benefits, you may have a lower copayment, or no copayment[1] at all, when you visit a freestanding network facility or provider office[2] instead of a hospital.

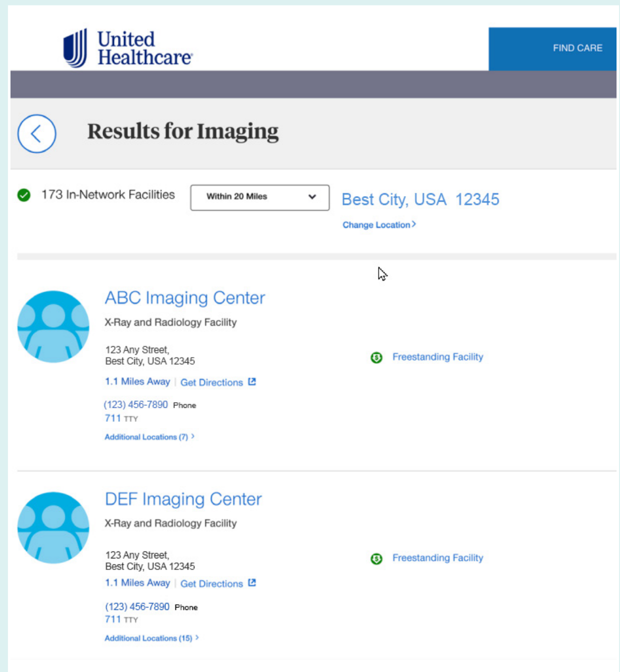
Talk to your doctor

When you need lab tests, radiology or outpatient surgery, discuss your options with your doctor to choose the best option for you:

- Do you know the cost of the tests you are ordering?
- Can you recommend a freestanding facility in the UnitedHealthcare network?

Find a freestanding network facility

To find freestanding facilities near you, sign in to your member portal at **umr.com**. From the **Find costs and care** drop-down menu, select **Find a provider**. You can then search for providers using various tools.



(Fictionalized data)

For more information call the customer service phone number on your UMR ID card.

[1] Copayments are the charge or set dollar amount that members are required to pay for certain services per their benefit plans. In addition to office visit copayments, members may also be responsible for copayments when they visit a facility or hospital. These facility and hospital copayments are in addition to the calendar-year/policy-year deductible and coinsurance. Facility and hospital copayments do not apply toward the deductible and continue to apply after the deductible is met. These copayments may be referred to in plan documents as "per-occurrence copayments" or "per-occurrence deductibles." All member cost share for eligible expenses will apply to the out-of-pocket limit.

[2] Freestanding facilities include any of the following: outpatient facility, diagnostic or ambulatory center or independent laboratory. At a freestanding facility, plan deductible and coinsurance may still apply. See plan benefit information for further details.