

Relocation Benefits Summary

Below is a brief summary of the benefits you will be eligible to receive and is intended for information purposes only. The applicable UHG relocation policy and your relocation agreement govern the terms of your relocation benefits. Once you have returned this document signed to Global Mobility, you will be placed with UHG's preferred relocation vendor, Graebel, within 2 business days. Graebel will be handling your relocation benefits listed below on UHG's behalf. Please do not initiate any services before speaking with your Graebel Consultant.

Benefits: Silver Package

Relocation Allowance: An allowance of three thousand dollars (\$3,000 USD) will be provided for miscellaneous expenses incurred as a result of the relocation to the new location. Examples would be pet care, utility hookups, cleaning services, unexpired club or association membership dues, auto registration and driver's licenses.

Travel to the New Location: You and your accompanying dependents will be authorized travel to the new location in accordance with UHG's Global Travel and Expense Policy. Business class approved.

** If you are a foreign national, you should not move to the new location until all appropriate work authorization documents are in-hand.*

Household Goods Shipment: Your household belongings will be relocated to the new location with a moving company selected by UHG and directed by Graebel. You will be provided with an air shipment (up to one (1) D container).

Temporary Housing at the New Location: In the event your permanent housing is not available immediately upon relocation to the new location, UHG can provide 30 days of temporary accommodations for you and your family.

Destination Services: This benefit is for up to one-half day of area orientation and home finding assistance. This includes general area familiarization with information on local shopping, banking, transportation and the community.

Tax Briefing/Tax Prep: A pre-departure tax briefing will provide understanding on how your taxes may be affected after your move. Origin and destination country tax returns will be completed for the transfer year by UHG's designated Tax Services Provider (KPMG).

Immigration Assistance: Immigration services will be initiated by UHG and its designated Immigration Services Provider (Berry Appleman & Leiden) to advise you of the documents needed for the application process and work permit. UGH will also be providing you and your dependent a green card.

Language Training (Optional): UHG will reimburse you for language training for up to thirty (30) hours for you and your spouse/partner.

Cultural Training (Optional): UHG will provide you and your dependents with one (1) day of cultural training.

Important: Please note that you have 12 months from your transfer start date in the US to utilize all relocation benefits listed above.

AGREEMENT TO REPAY RELOCATION EXPENSES

This Agreement is between **(Name of Employee)** (“I,” “me” or “my”) and UnitedHealth Group, Inc. (“UnitedHealth Group”). UnitedHealth Group and I agree:

My Effective Date of Relocation is **(Date of transfer or hire)** or the date the relocation authorization is initiated with UnitedHealth Group’s relocation vendor (whichever date is later).

UnitedHealth Group will pay for or reimburse me for certain relocation expenses according to UnitedHealth Group’s Relocation Policy (“Relocation Expenses”).

If my employment is terminated within 24 months after my Effective Date of Relocation (a) voluntarily by me, or (b) by UnitedHealth Group for reasons that constitute a violation of UnitedHealth Group's Principles of Ethics and Integrity, I must repay to UnitedHealth Group a pro-rated portion of the relocation expenses based on the number of full months I was employed after my Effective Date of Relocation. For example, if my employment terminates six months following my Effective Date of Relocation, I agree to repay three-fourths of the relocation expenses.

To the extent permitted under applicable law, I authorize UnitedHealth Group to make deductions from my paychecks, or from any other amounts owed to me, for any amount that I owe UnitedHealth Group under this Agreement after I provide notice of my decision to terminate or after UnitedHealth Group has notified me of my termination.

If deductions from my paychecks or other amounts owed to me are insufficient to cover the relocation expenses that I owe, I agree to repay promptly the remaining amount due in response to UnitedHealth Group’s written request. If I fail to do so, I will be liable for UnitedHealth Group’s expenses incurred in connection with any legal action against me for collection, including attorneys’ fees and court costs.

NAME OF EMPLOYEE	EMPLOYEE NUMBER	DATE
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