



# March Broker Blast

UnitedHealthcare New Jersey & Pennsylvania Health Plans



## OTC COVID-19 at-home tests, preferred retailers and communications

On Jan. 10, the U.S. Departments of Health and Human Services, Labor, and Treasury (“the Tri-Agencies”) [issued guidance in the form of an external FAQ](#), providing that group health plans must cover – without cost-sharing – over-the-counter (OTC) COVID-19 at-home tests.

- The rule requires coverage of diagnostic OTC COVID-19 at-home tests without imposing cost-sharing, prior authorization or other medical management requirements.
- UnitedHealthcare will cover claims for U.S. Food and Drug Administration (FDA)-approved OTC COVID-19 at-home tests purchased on or after Jan. 15 throughout the public health emergency (PHE) as directed by the Tri-Agencies.
- This OTC COVID-19 at-home test coverage will include up to eight tests per member per month.
- Some coverages **not in-scope** include Medicare Advantage plans and retiree-only plans.

### Preferred Retailers

Preferred Retailers are available to UnitedHealthcare customers with pharmacy benefits administered by OptumRx.

**Note:** Additional Preferred Retailers will be added to this list as they join; access the [complete list of Preferred Retailers on uhc.com](#).

- At a Preferred Retailer, eligible members can obtain an OTC COVID-19 at-home test without an upfront cost, or they may pay out of pocket and submit a claim for reimbursement.
- If the member purchases an OTC COVID-19 at-home test at any in-store or online retailer other than a Preferred Retailer’s pharmacy counter, they may submit purchase receipt(s) for reimbursement at the UnitedHealthcare member portal for a maximum reimbursement of \$12 per test.

### COVID-19 OTC testing resources

The following resources have been updated for external use, as appropriate:

- [Preferred Retailers: OTC COVID-19 at-home testing](#)
- [COVID-19 Resource Center page on uhc.com](#)
- [uhc.com home page alert banner](#)
- [OTC COVID-19 at-home test external FAQ](#)
- [OTC COVID-19 at-home testing coverage page on uhc.com](#)

### ASO customers with integrated pharmacy (OptumRx)

Member will have two ways they can receive reimbursement for OTC at-home test kits:

1. **Preferred Retailers:** UnitedHealthcare has developed and deployed a solution of Preferred Retailers for coverage of OTC COVID-19 at-home test kits. A Preferred Retailer is a pharmacy that UnitedHealthcare has made arrangements with to provide OTC COVID-19 at-home tests at no cost to the member at the time of purchase or later.

The current [Preferred Retailers list](#) is available on uhc.com. UnitedHealthcare is working to add additional Preferred Retailers.

2. **Other retailers or online:** If the member purchases an OTC COVID-19 at-home test at any in-store or online retailer other than at the Preferred Retailer in-store pharmacy counter, they may submit purchase receipt(s) for reimbursement at the UnitedHealthcare member portal for a maximum reimbursement of \$12 per test. Many COVID-19 tests are sold as a two-pack. The test pack would be reimbursed at \$24 (\$12 for each test).

A member **must** be a UnitedHealthcare commercial individual or group health plan member **and** have UnitedHealthcare Pharmacy with the integrated OptumRx solution benefit to purchase OTC COVID-19 at-home tests at the UnitedHealthcare Preferred Retailer at no cost using their UnitedHealthcare member ID card.



## OTC COVID-19 at-home tests, preferred retailers and communications Con't

In addition, members have the option to purchase tests at the retail location of their choice and then submit a receipt online to UnitedHealthcare at [myuhc.com](https://myuhc.com)<sup>®</sup> or use the [OTC COVID-19 at-home test reimbursement form](#)

### ASO customers with carve-out pharmacy to a non-Optum PBM

As the health plan, you must decide which of the following approaches you wish to follow starting Feb. 1. **Notify your UnitedHealthcare representative and broker/consultant of your election by Friday, Jan. 21.** *Additional fees and charges from your PBM vendor may apply.*

- **Option A – PBM only (default solution if no choice elected by Jan. 21: You decide to administer the OTC COVID-19 at-home test benefit exclusively through the PBM.**
  - Member will use the process and reimbursement guidelines established by you and your PBM.
  - After Jan. 31, any receipts submitted to UnitedHealthcare will refer the member to the pharmacy vendor for payment.
- **Option B – Medical only: You decide to administer the OTC COVID-19 at-home test benefit exclusively through the UnitedHealthcare Medical benefit.**
  - There will be an administrative charge of \$2 per claim received by UnitedHealthcare beginning Feb. 1.
  - Member purchases the OTC COVID-19 at-home tests at any retailer and submits the receipt on UnitedHealthcare online at [myuhc.com](https://myuhc.com) or via the [OTC COVID-19 at-home test reimbursement form](#).
  - Reimbursement to the member will be at the retail price of the receipt submitted.
  - The Preferred Retailer solution is not available.
- **Option C Both PBM and Medical: You decide that member may purchase the OTC COVID-19 at-home test benefit both through the PBM *and* through the UnitedHealthcare Medical benefit.**
  - There will be an administrative charge of \$2 per claim received by UnitedHealthcare.
  - Member purchases the OTC COVID-19 at-home test kits and is reimbursed through their pharmacy benefit.
  - Member purchases the OTC at-home tests at any retailer and submits the receipt online to UnitedHealthcare at [myuhc.com](https://myuhc.com) or via the [OTC COVID-19 at-home test reimbursement form](#).
  - Reimbursement to the member will be at the retail price of the receipt submitted unless the customer attests that the PBM has a Preferred Retailer program established.
  - If you attest that your PBM has a Preferred Retailer program, beginning Feb. 1, receipts submitted to UnitedHealthcare for payment under the medical benefit will be reimbursed up to \$12 per test (\$24 per test kit with two tests).
  - UnitedHealthcare cannot commit to accumulation of OTC COVID-19 at-home testing claims with carve-out PBMs under this arrangement.

For Options A, B and C – given the short time period required to understand and implement the federal guidelines and the importance of creating a positive consumer experience – UnitedHealthcare will administer any receipts received by the medical plan for the amount submitted through Jan. 31 regardless of the customer selection

### Public Sector customers

Public Sector customers should discuss options with the broker/consultant and UnitedHealthcare representative.

### Bind customers

For customers with Bind, the Bind team will be communicating with them directly.



## Optum Store program updates; COVID-19 OTC at-home testing guidance

### Optum Store

The Optum Store is a new direct-to-consumer eCommerce platform that provides members with affordable access to OTC products, including COVID-19 at-home tests. The Optum Store is open to all consumers.

- For customers with UnitedHealthcare Medical and OptumRx Pharmacy (carve-in or carve-out), eligible members can order COVID-19 OTC at-home antigen tests online through the Optum Store for \$0 cost-share by using their myuhc.com® account.
  - Eligible members must sign in to [myuhc.com](https://myuhc.com). Members will be requested to enter their Health Safe ID, which will take them to a login page. Members should click on the COVID-19 Resources banner and select the “At-home tests FAQ” button to follow the instructions on how to order a COVID-19 at-home antigen tests for \$0 cost-share.
- Customers with OptumRx Pharmacy coverage, but without access to myuhc.com, can obtain COVID-19 at-home antigen test kits for \$0 cost-share at the Optum Store by visiting [optumrx.com](https://optumrx.com).
  - Members must visit [optumrx.com](https://optumrx.com) and sign-in or register for an account. Members can then click on the “Get at-home tests for \$0 cost-share” button at the bottom of their screen to order a COVID-19 OTC at-home antigen test.

### Member experience details

The myuhc.com member experience is personalized when the member signs on to order a COVID-19 OTC at-home test. Members will only see options based on their employers' choices.

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## Apple Fitness+ for Level Funded, All Savers available Jan. 1, 2022

Effective Jan. 1, 2022, members on the All Savers® and Level Funded platforms may receive a 12-month subscription to Apple Fitness+ at no additional cost as part of their plan benefits.

UnitedHealthcare and Oxford Level Funded members must be registered on myuhc.com® to take advantage of this offer. All Savers members will be offered Apple Fitness+ through [UnitedHealthcare Motion®](#), building on existing work with Apple through the wearable device well-being program, which is embedded within All Savers.

After using the new 12-month subscription, UnitedHealthcare Motion enrollees may be able to apply program incentives earned by meeting daily activity program goals, such as walking, running, cycling, swimming or strength training (among dozens of others), to cover the ongoing Apple Fitness+ monthly subscription cost (\$9.99).

UnitedHealthcare Motion members are also able to apply program earnings, which may total more than \$1,000 per year\*, toward the purchase price of an Apple Watch. This enables participants to own – with a zero balance – an Apple Watch after approximately six months of meeting daily activity program goals.

Once activated, UnitedHealthcare members gain access to an on-demand library of over 1,200 workouts, including High-Intensity Interval Training (HIIT), Strength, Yoga, Dance, Core, Cycling, Treadmill (for running and walking), Rowing, Mindful Cooldown, Pilates, and Guided Meditation.



## Wage and tax documentation requirements for Oxford small group business

We are aligning the new business and renewal review process for Oxford small groups to ensure compliance with Full-time Equivalent Total Number of Employees (FTE) preceding calendar year requirements. Beginning with groups that have an **April 1, 2022** policy effective date, please follow these guidelines to help ensure timely processing of applications and renewals<sup>1</sup>:

- For employers **enrolling up to 2 subscribers**: Submit the group's payroll/wage and tax information for the 4 quarters of the prior calendar year, as well as the group's most recent quarterly payroll/wage and tax records.
- For employers **enrolling more than 2 subscribers**: Submit the group's most recent payroll/wage and tax records.

These guidelines apply to **new and renewing business** applications for Oxford fully insured small group coverage (New York: 1-100, New Jersey: 2-50, Connecticut: 1-50). The additional full prior calendar year's payroll/wage and tax records are meant to verify the group's eligibility for small group coverage.

### What this means to you

When uploading supporting documentation with your client's application in the small group Sales Automation Management tool, **SAMx**, please be sure to upload the appropriate payroll/wage and tax information as outlined above. Without this information, applications will be incomplete and remain in a pending status.

### Additional communications

- Our Risk Management team will contact any renewing client and the client's broker as part of the standard audit process should additional information be needed prior to renewal.

The instructions sheets for submitting wage and tax documentation with new and renewing Oxford fully insured small group applications have been updated according to the new guidelines.

### See attached

**Connecticut Oxford small group wage & tax document submissions – instructions sheet**

**New Jersey Oxford small group wage & tax document submissions – instructions sheet**

**New York Oxford small group wage & tax document submissions – instructions sheet**

The instructions sheets are included with small group renewal packages and you may also find them on [uhceservices.com](http://uhceservices.com) in the Producer Resources and Group Administration sections.

### Questions?

Please contact your Oxford sales representative or call our Client Services team during normal business hours at 1-888-201-4216.

We appreciate your support of these guidelines and your continued business

For New Jersey business, we are not using collected information for counting until the State of Emergency is lifted.



## New coverage determinations for Vitamin D testing

**Starting March 1, 2022**, we will only cover Vitamin D screening CPT® codes **82306, 82652 or 0038U** for UnitedHealthcare commercial and Individual Exchange plan members diagnosed with one of the listed diagnosis codes in the [coverage determination guidelines](#). The state of Rhode Island is excluded from this requirement. Medical policies are viewable on [www.uhcprovider.com](http://www.uhcprovider.com).

Vitamin D testing is unproven and not medically necessary for routine preventive screening due to insufficient evidence of efficacy. Vitamin D testing is proven and medically necessary for a condition or medical diagnosis associated with Vitamin D deficiency or risk of hypercalcemia; Please refer to the medical policy to see the Vitamin D diagnosis codes list under Applicable Codes.

Our Network providers were notified of this upcoming change on January 1<sup>st</sup>. Here is the link: [New coverage determinations for Vitamin D testing | UHCprovider.com](#)

Please remind your clients that Vitamin D testing as part of preventive routine screening will no longer be covered.

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## Health Score experience to replace Rally Age

UnitedHealthcare has developed a patented, robust and personalized Health Score tool after listening to customer feedback. Health Score is a dynamic, intuitive measure designed to support and engage members in building a healthier lifestyle.

Health Score increases transparency and education across members' entire health journey and offers personalized recommendations, encouraging members to engage in health actions that matter. In addition, the tool changes as members take different actions and provides continuous feedback on how each action impacts their overall health and wellness.

### Timing

The Health Score experience will replace Rally® Age in the coming months and will launch in two phases:

- **Phase one:** Health Score will replace Rally Age for customers with Rally Base only March 1, 2022.
- **Phase two:** Health Score will replace Rally Age for customers with Simply Engaged® April 1, 2022.

**Note:** The most recent health survey data will be used to translate members' Rally Age to Health Score. As members log in to the platform, they will see the new Health Score experience in their profile page. A member FAQ will be posted on the Health Score website and details about the new experience will be posted in members' profiles to help streamline questions.



## Rally Biometrics Dashboard Enhancements

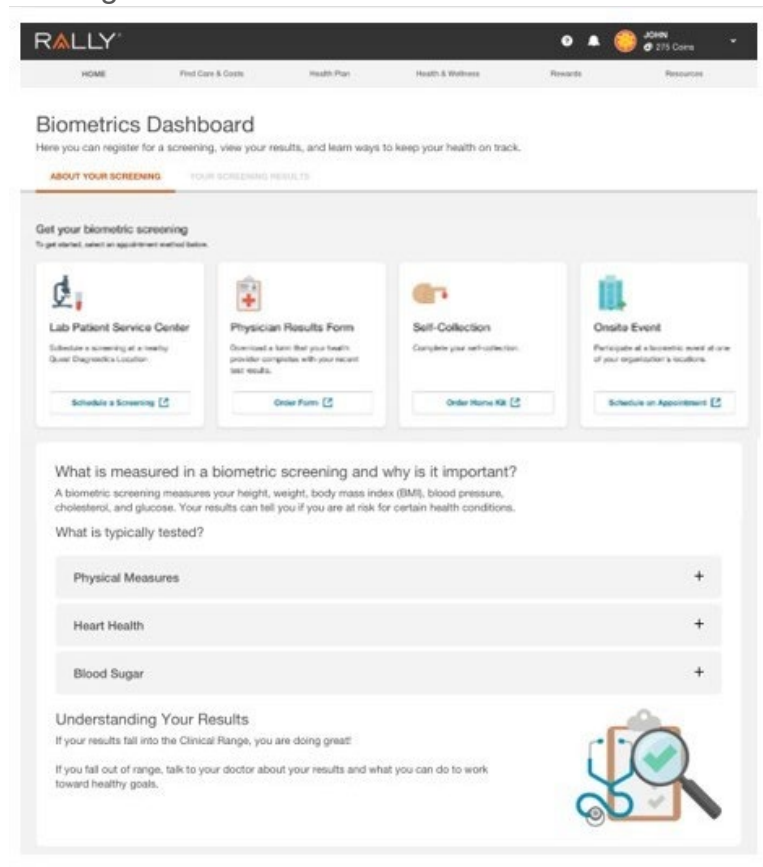
Rally Biometrics Dashboard update aims to increase health literacy, make personalized recommendations for members

Effective Jan. 11, the screening modalities determined by an employer plan will now be visible directly from the Rally® Biometrics Dashboard. By choosing their preferred screening option on the Rally Biometrics Dashboard, the new feature allows members to easily access Quest Diagnostics™ for screening registration and scheduling.

The new view has enhanced features, such as:

- Updated visual view of screening results to drive engagement and action
- Screening modalities for options determined by employer plan
- Educational content on screening results tests and how to prepare for a screening

A screen shot is provided below to show what a member now sees on their Rally Biometrics Dashboard before their biometric screening:

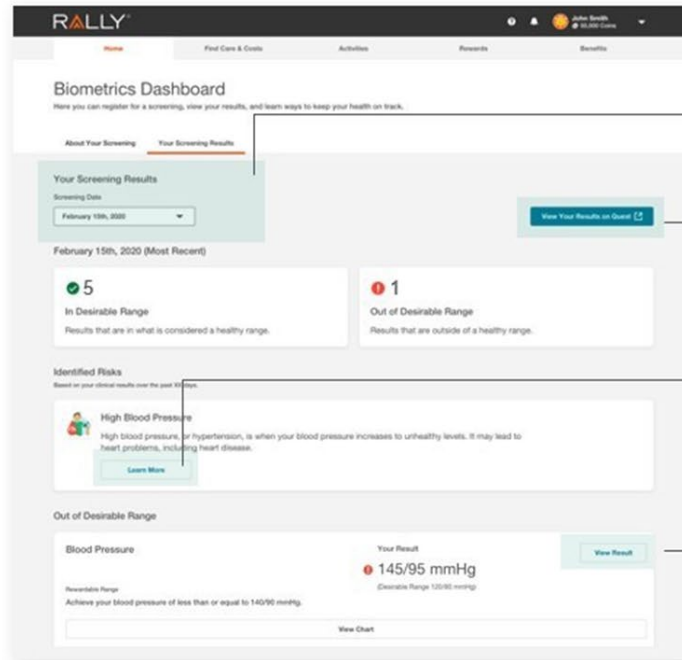


The following screen shots show what a member now sees on their Rally Biometrics Dashboard after their biometric screening

Con't on next page

## Rally Biometrics Dashboard Enhancements con't

### Member experience: Post-screening



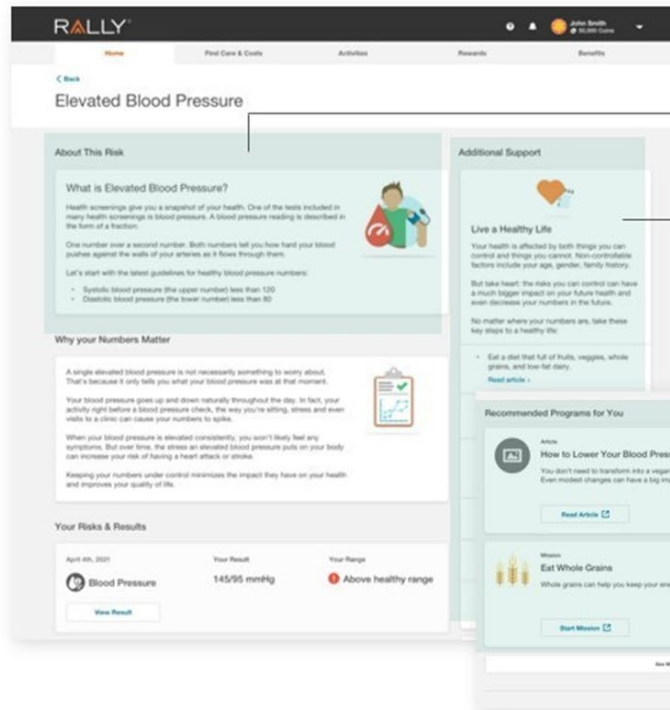
**Your screening results** elevates summary of results within range and out of range

**Return to Quest** for any additional details

**Educational pages** empowers member to learn more about their particular risks and results

**View result** button provides greater detail for each individual result

### Member experience: Education pages



**About risk** educates members on health and clinical info

**Support and resources** empowers member to address health with options

**Personalized recommendations** helps member get started on healthy habits

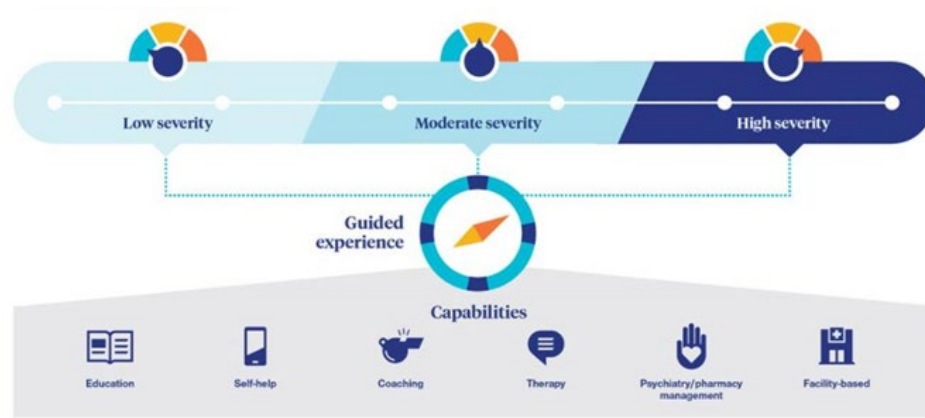




## Preventive mental health care to help avoid crises

Offering a continuum of care helps employees take proactive measures to help maintain their mental health and overall well-being similar to physical health.

This approach may help prevent a mental health condition from progressing in severity.



The behavioral health care continuum offered by UnitedHealthcare features solutions that help meet the needs of employees from low severity, moderate severity and high severity.

A guided experience, whether through an advocate or myuhc.com, helps employees determine what solution may help manage their behavioral health condition.

The solutions include education, self-help, coaching, therapy, psychiatry and pharmacy management, and facility-based treatment.

For more details on our Behavioral Health strategy, please reach out to your Sales and Account Management team or visit [Behavioral health | UnitedHealthcare \(uhc.com\)](https://www.uhc.com/behavioral-health).

## Social Determinants of Health services now available to all Advocate4Me Members

We would like to make you aware of some additional enhancements we have made to our Advocate4Me model. UnitedHealthcare is deeply invested in supporting people's health and well-being by connecting them to needed services, while striving to treat medical, social, and behavioral issues holistically. Effective Dec. 6, UnitedHealthcare advocates have the ability to proactively assist and connect all Advocate4Me® members with local programs and resources that can help with food, housing, and more. Social Determinants of Health (SDOH) services will also be available via myuhc.com® to members in late December.

### What are SDOH?

SDOH are conditions in which people are born, grow, live, work, and age – and they affect a wide range of health, functioning, quality-of-life outcomes, and risks. Working in partnership with findhelp.org (formerly known as Aunt Bertha), this offering modifies the way in which UnitedHealthcare advocates can assist members with resources that may be outside the realm of traditional health care needs. Advocates are now able to view new opportunities for SDOH on their dashboard, ask additional questions to assess the member's needs and use the findhelp.org Community Resources website to help them connect with resources within their community. This service aligns with UnitedHealthcare's broadening initiatives to redefine access and address needs that include access to food, financial resources, homelessness, social isolation, and more. For more information, please see the attached brochure.



## **New UnitedHealthcare Behavioral Health Material**

Did you know that UnitedHealthcare has one of the nation's largest networks of behavioral health care providers? Along with an extensive network and comprehensive solutions that cover a range of mental health conditions, our guided experience is key to helping employees find the care that they need.

This visual [2-page summary](#) (also see attached- behavioral health solutions placemat) demonstrates how we help guide employees to care more quickly, whether through a behavioral health advocate, on myuhc.com® or crisis line. Examples show how we support employees experiencing mental health conditions such as anxiety and depression, or a crisis that requires facility-based care.

As you may already know, the pandemic worsened mental health conditions already affecting millions of Americans – 4 in 10 adults reported feeling anxious or depressed during this time.

Given these trends, it's become increasingly important for employers to reassess what behavioral health benefits they provide and communicate these offerings to employees and their families.

This recent [white paper](#) (also see attached- behavioral health solutions whitepaper) offers employers 5 tips to help employees find the behavioral health care they may need, which include:

- Promoting virtual care to help improve access
- Building a benefits strategy that includes a full continuum of care
- Offering a guided experience to support employees
- Trying to reduce stigma, especially for at-risk populations
- Reinforcing the connection between physical and behavioral health

The third attachment is our [Behavioral Health products-at-a-glance](#), which is a one-page overview highlighting the capabilities and attributes of UnitedHealthcare's core Behavioral Health solutions.

The articles below can be shared with customers about different aspects of behavioral health:

- [Expanding the network to meet member needs](#)
- [Integrating medical and behavioral for a better experience](#)
- [Digital solutions support a spectrum of behavioral health needs](#)

Our approach is designed to help employees access the right care at the right time – leading to a better overall experience. Please let us know how we can help.



## **New Standard Select Pharmacy Program in New York & New Jersey, Effective Jan. 1, 2022**

All Oxford Metro Network® and small group Liberty Network medical plans in New York (1-100) and New Jersey (2-50) are moving to our Standard Select Pharmacy program. The Standard Select Pharmacy network comprises 50,000 retail pharmacies nationwide, including major chains, mass merchants and supermarkets.

The change will take place for new clients and upon renewal for existing clients beginning **January 1, 2022**. The Standard Select Pharmacy network may be paired with the Access, Advantage or Essential formulary.

### **What this means for impacted members**

- Oxford members of a Metro Network plan will have access to an additional 15,000 participating pharmacies nationwide, including **Duane Reade™**, **Walgreens®** and **Walmart®**.
- Prescriptions **cannot** be filled at CVS® or many non-chain pharmacies.
- To search for a network pharmacy before January 1, 2022, members can go to [myuhc.com](https://myuhc.com), select **Find a Pharmacy** and enter their search criteria (e.g., pharmacy name or ZIP code). To confirm network participation, the pharmacy should have **Standard Select with Walgreens®** listed in its description.

### **Communications**

- Impacted members (e.g., members who have filled a retail script at CVS within the past 90 days) will be notified by mail about the pharmacy network change ([sample member letter](#)).
- A Standard Select Pharmacy program flier will be included in the small group renewal packages for impacted clients, beginning with the January through end-of-year 2022 renewal packages. The flier also will be included in the January through December 2022 renewal packages for any impacted key account Oxford Metro Network clients.
- Information will be posted, post-login, on the Oxford broker and employer website, [uhceservices.com](https://uhceservices.com).

### **Action required**

Please help ensure your affected Oxford clients are aware of this change. Please see the attached [Standard Select Pharmacy network flier](#) and this link to the [sample member letter](#).

### **Questions**

For more information, contact your Oxford sales representative. You and your clients may also contact Client Services at **1-888-201-4216** or [groupservices@oxfordhealth.com](mailto:groupservices@oxfordhealth.com) with questions.



## **Local Market Hub**

Brokers and consultants have a new and improved way to engage with health plans through the launch of the [Local Market Hub](#) experience on uhc.com. The local pages are an extension of the national broker and consultant website launched in early 2021.

The Local Market Hub pages promote health plan priorities within local product portfolios and highlight the impact health plan teams are making in communities nationwide. The pages are designed to support conversations Sales and Account/Client Management have with their brokers and consultants, while providing them with easy access to state-specific product information, marketing materials, local news, and more.

### **Product highlights**

Learn about product updates, launches and announcements impacting each market.

### **Local statistics**

Get statistics on how many members each market serves, how many providers or hospitals are in each market, and find out how many dollars each market donates to local communities annually.

### **Latest news**

Explore local news in each market to stay up-to-date on what is happening in your state.

### **Health plan teams**

Health plan leaders are featured on the page, and visitors can download contact sheets to connect with local UnitedHealthcare representatives.

The Local Market Hub is live now with market-specific content on uhc.com for many states, and the content will continue to be expanded so please be sure to check out uhc.com regularly for more great content.

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## **Broker Appointment Required for Oxford Level Funded Quotes**

As of 8/1/2022, we will no longer release preliminary underwritten rates for Oxford Level Funded quotes to brokers who are not yet appointed with Oxford Level Funded.

Please work to get your paperwork processed and your appointment approved, to avoid delays in obtaining quotes and selling Level Funded!

Contracting paperwork is attached.



## Legacy oxfordhealth.com broker website decommissioned

Previously, we communicated that transactional access was suspended on oxfordhealth.com and provided information about our new health plan websites for conducting Oxford business. Brokers and group customers now use [uhceservices.com](https://uhceservices.com) and Oxford members use [myuhc.com](https://myuhc.com).

We are writing today to inform you that, in **March 2022, the legacy oxfordhealth.com broker portal will be decommissioned and no longer accessible, as with the other oxfordhealth.com constituent portals (i.e., Employer, Member, Provider).**

### What this means for brokers

- **Website registration:** By now, you're using [uhceservices.com](https://uhceservices.com) for your fully insured Oxford medical business, as well as any Oxford self-funded and Level Funded business. As group customers transitioned to the enhanced online experience at [uhceservices.com](https://uhceservices.com), we sent an email to the customer's broker of record with website registration information. If you need assistance with registration or have questions about the new website, please contact Client Services at [oxfordgroupservices@uhc.com](mailto:oxfordgroupservices@uhc.com) or 1-888-201-4216.
- **Small group quoting and enrollment tool:** As with oxfordhealth.com, the legacy Oxford small group quoting and enrollment tool, Idea Management System (IDEA), accessible from oxfordhealth.com, has been decommissioned and replaced by the next-generation SAMx tool. Access SAMx through [uhceservices.com](https://uhceservices.com).
- **Legacy commission statements:** As previously communicated, commissions information pertaining to your Oxford clients who now use [uhceservices.com](https://uhceservices.com) is included on the UnitedHealthcare commission statement, which is accessible online, twice monthly.

We are working to complete any remaining group and member retroactivity and billing reconciliations that occurred for some Oxford customers before they began using [uhceservices.com](https://uhceservices.com). Commission statements will be adjusted, as appropriate, and statements reflecting adjustments will be mailed to impacted brokers at the address we have on file.

Please direct all commission-specific questions to our Commission Department at [OxProducerComp@uhc.com](mailto:OxProducerComp@uhc.com) or 1-888-666-6844.

### What this means for group customers

- **Website registration:** Please remind your Oxford customers to register on [uhceservices.com](https://uhceservices.com), if they have not already done so, and their covered employees should activate their [myuhc.com](https://myuhc.com) accounts for a personalized online member experience.
- **Legacy billing information:** Oxford customers with billing-specific questions may contact their Oxford billing representative directly or Client Services at [oxfordgroupservices@uhc.com](mailto:oxfordgroupservices@uhc.com) or 1-888-201-4216.

We hope you and your clients have become familiar with [uhceservices.com](https://uhceservices.com) and are finding it useful.

Thank you for your continued business.



## 2022 Q1 Member and Customer Webinar Series

We are excited to kick off our 2022 UnitedHealthcare Wellness Wednesday webinar series for UnitedHealthcare and Oxford members and separate sessions for our customers. So far, we have already covered Fitness and Weight loss as well as a completed HSA workshop. Please join and share the remaining Q1 Webinars below!

### Member Webinar Series:



#### Nutrition

Wednesday, March 23

Noon EST

[Register Now](#)

### Customer Webinar Series (not for members):



#### Nutrition

Wednesday, March 16

10 a.m. EST

[Register Now](#)

## UnitedHealthcare Wellness Weekends

UnitedHealthcare is proud to collaborate once again with Chelsea Piers Fitness for UnitedHealthcare Wellness Weekends, a series of group exercise classes available for only **\$5** a class at Chelsea Piers Manhattan and Brooklyn locations. Classes include yoga, Pilates mat, barre, strength 3-D, adult gymnastics and the fan favorite, adult ice skating.

Participants do not need to be a UnitedHealthcare or Oxford member but must be at least age 16 to participate. Register today at [www.chelseapiers.com/newsfeed/uhc-wellness-weekends](http://www.chelseapiers.com/newsfeed/uhc-wellness-weekends).

Date	Venue	Class Type	Times	Location
Saturday, March 19	Chelsea Piers Fitness (NYC)	Barre	10:00 am – 11:00 am (60 min)	Loft Studio
Sunday, March 20	Chelsea Piers Fitness (Brooklyn)	Pilates Mat	12:00 pm – 1:00 pm (60 min)	Main Studio

**CHELSEA PIERS**  
fitness

#### Locations:

##### Manhattan

Chelsea Piers Fitness (CPF - NY) Pier 60, Chelsea Piers  
New York, NY 10011

##### Brooklyn

Chelsea Piers Fitness 265  
Schermmerhorn Street  
Brooklyn, NY 11217



## Teledentistry

It can be hard to prioritize dental care right now, but you shouldn't have to choose between feeling safe and getting relief. UnitedHealthcare Dental has made it possible for you to get the care you need without visiting the dentist's office.

### DialCare Teledentistry

24/7 access to a licensed dentist — via phone or web\* — for an array of oral health issues.

You'll get access to a network of licensed, credentialed dentists for diagnosis and consultation on:

- Oral pain
- Broken, chipped and sensitive teeth
- Gum swelling and bleeding
- Orthodontia needs
- Second options on oral health diagnosis or treatment options
- Clinically-appropriate, non-DEA controlled prescriptions when needed

Visit [uhc.dialcare.com](http://uhc.dialcare.com) to receive 2 virtual visits per plan year at a \$0 out of pocket.

DialCare is available now and open to all fully insured groups. ( RI, ME are pending)

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## National Discount - Quip

Health habits start at home. United Healthcare is offering a national discount to all United Healthcare Specialty Benefits members. A 30% discount is offered for kids and adults Quip smart toothbrush or smart toothbrush bundles. Each toothbrush comes with an app that:

- Tracks brush
- Teaches better brushing habits
- Allows users to earn points
- Offers rewards such as an exclusive Quarterly Brush Head Refill

Discounted Prices:

- \$45 kids smart brush
- \$45 adult plastic smart brush
- \$60 adult metal smart brush (black)
- \$60 adult metal smart brush (pink)

The discount can be redeemed at [www.uhcspecialty.benefithub.com](http://www.uhcspecialty.benefithub.com)



## Highest in Customer Satisfaction with Dental and Vision Plans

. Thank you for rating us #1 in customer satisfaction



Your commitment to giving your employees the best inspires us to be the best for you. You encourage us to be better listeners and communicators as we pave the way to providing personalized care that moves health forward.

Thank you for your confidence, your trust and your business. Because of you, UnitedHealthcare has been ranked #1 in Customer Satisfaction with Vision and Dental Plans, achieving the highest ranking in communication, cost, coverage and customer service by J.D. Power.

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## Treatment Plan Calculator

The new Treatment Plan Calculator is designed to help members make more informed decisions about their dental treatments. The calculator empowers providers to give their patients real-time care plan estimates during their in-office visits, leading to greater cost transparency.

Voice of the Customer: Members, Providers, Calls & Claims, Appeals

- Improving the member and provider experience
- Real Time Benefit Eligibility
- Real time treatment plan cost estimator
- Smart prompts and clinical review alerts



## Consumer MaxMultiplier

Awards benefit dollars for getting regular checkups and helping keep costs low.



### Highlights

- Carry over a portion of unused benefits for future dental services.\*
- Rewards never expire.
- Claims for coverage period cannot exceed threshold amount.
- PPO members get a bonus for in-network-only claims.
- At least one dental claim must be made during coverage period.
- Consumer MaxMultiplier is administered at the member level.

\*Members will not actually earn cash that they can access or withdraw. UnitedHealthcare adds the award dollars to the member's annual maximum for the following plan year and applies them to qualifying claims. Dollar amounts will vary based on the specific plan.

## Select Managed Care

Our managed care product suite is **innovative and convenient**

### Unique Managed Care delivery model.

- No dentist assignments
- Members can switch offices at any time .
- Referrals required for specialty care
- No waiting periods.
- No maximums.

A network free of the typical **pain points** associated with traditional DHMO options

Open access: **freedom to choose** anyone in our network

### Comprehensive benefits.

- Savings on implants with specific fee, abutments, prosthesis removal and crowns.
- More than 450 procedures covered at a copayment level.
- Prenatal benefits.
- Oral cancer screening.
- Cosmetic benefits at specific copayments / discounts.
- Pediatric dentistry up to age 16.
- Discount on procedures not listed on the Schedule of Benefits.
- SmileDirectClub is included in the SMC network

For more information Contact your UnitedHealthcare representative



## Benefit Assist

Designed for faster, easier benefit payouts  
Available on UNET, UMR & Oxford platforms for groups with 250+ eligible.

With Benefit Assist, employees enrolled in a health plan and a supplemental health plan (Accident, Critical Illness or Hospital Indemnity) from UnitedHealthcare have an advocate on their side.

A Benefit Assistant can help ensure your employees receive a benefit payout when they need it most. Submitting claims early and accurately may speed up the benefit payout process by weeks. A Benefit Assistant can help with this by:

- Reviewing eligible medical claims
- Notifying employees if any claims qualify for a benefit payout from their supplemental plan
- Connecting employees to a claim specialist who helps them submit a supplemental plan claim



[Learn more](#)

Contact your UnitedHealthcare representative

## Customers can save even more when they bundle their plans.<sup>1</sup>

Help customers get a 5% second year rate cap when they add a dental plan by December 15, 2022.



The guidelines:

- Effective dates are January 1, 2021 – December 15, 2022.
- Group size 2 – 100 eligible lives.
- Offer not available to groups situs in RI, WI, WA, FL (2-50), ACEC groups.



**Earn big smiles  
with guaranteed dental rates.**



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<sup>1</sup>Minimum participation requirements may apply for bundling programs. Bundling programs are not available for all group sizes. Please consult your UnitedHealthcare representative for more details.

## The more you bundle, the more you save

With Packaged Savings®, when fully insured customers bundle their medical, dental, vision, life and/or short-term disability plans with UnitedHealthcare, they may save money in administrative credits. Credits are earned based on the number of enrolled medical employees and the number of eligible specialty plans offered.

Purchase a fully insured medical plan below	And receive the following credits per enrolled medical employee per month
Dental	\$3
Vision	\$2
Life <sup>1</sup>	\$1
Short-term disability <sup>2</sup>	\$1
Life <sup>1</sup> and short-term disability <sup>2</sup>	\$2
Dental and vision	\$5
Dental and life <sup>1</sup>	\$4
Vision and life <sup>1</sup>	\$3
Dental, vision and life <sup>1</sup>	\$6
Dental, vision, life <sup>1</sup> and short-term disability <sup>2</sup>	\$7

<sup>1</sup> Requires a minimum of \$25,000 benefit.

<sup>2</sup> Short-term disability must be fully insured.

See the back for complete program terms and conditions.

### More reasons to bundle

When our medical and specialty plans are purchased together, you get a simpler, service-focused experience with:

- ✓ One dedicated account team
- ✓ One streamlined administration process and self-service website
- ✓ One integrated and simpler claims process

### Program terms and conditions

1. The Packaged Savings program is available to customers with 2–99 total eligible employees. New fully insured medical customers purchasing fully insured specialty products or existing medical customers adding new fully insured specialty products may qualify.
2. The applied savings are available for as long as eligible medical and specialty benefits remain in-force and meet eligibility requirements. Credits will be withdrawn when any medical or specialty coverages terminate. Program is subject to change at any time.
3. Per-employee per-month (PEPM) savings is given as a monthly credit based on the number of enrolled UnitedHealthcare medical subscribers.
4. Employer-paid plans require an employer contribution level of 50% or greater of the employee premium. Voluntary plans and plans where employees contribute 51% or greater do not qualify for the program.
5. Employee enrollment in qualifying dental and vision plans must be 75% or greater of total eligible medical employees for Packaged Savings to be activated.
6. Fully insured vision and dental plans qualify subject to the terms above.
7. Short-term disability plans must be fully insured.
8. Life insurance plans qualifying for Packaged Savings must have a minimum life benefit of \$25,000. Life insurance plans qualifying for Packaged Savings must completely replace existing life plans or be added to customers with no prior coverage; adding an additional life policy to an existing life benefit does not qualify for Packaged Savings.
9. Customers who have existing basic and supplemental life plans with another carrier must place both the basic and supplemental life insurance plans with UnitedHealthcare to qualify for Packaged Savings.
10. Any combination of life products counts as one product for the purpose of the program. Any combination of disability products counts as one product for the purpose of the program. Long-term disability does not qualify alone; it must be packaged with life or short-term disability.
11. Customers who add UnitedHealthcare medical products to existing dental, vision, life and/or disability lines of coverage qualify for Packaged Savings (a.k.a. Reverse Packaged Savings).
12. UnitedHealthcare retains sole and complete discretion to revise or terminate the Packaged Savings program at any time.
13. Business underwritten or administered by Oxford Health Plans in New York and Sierra Health Services, Inc. are currently excluded from the Packaged Savings program. Oxford Benefit Management (OBM) bundled specialty plans are not eligible for Packaged Savings credits.
14. UnitedHealthcare Preventive Plans are not eligible for Packaged Savings administrative credits.
15. Specialty benefit plans and the Packaged Savings program may not be available in all states or for all group sizes. Contact your broker or UnitedHealthcare sales representative for program availability.



## See more health plan savings with uBundle for groups of 51 plus lives



As a fully insured customer you can save up to 4 percent on medical premiums when bundling your UnitedHealthcare medical plan with UnitedHealthcare dental, vision, life, disability and supplemental health plans. Bundling also helps simplify the administrative experience and provides your employees with a more competitive benefits package.



\*For new business effective Jan. 1, 2019 or later. Ask for details.

Add to that simpler administration and dedicated support — plus **Bridge2Health®** integration, which gathers actionable data to close gaps in care, reduce costs and improve productivity.



**Dental**  
11M+ members<sup>2</sup>  
104K+ unique network providers<sup>2</sup>



**Vision**  
19M+ members<sup>2</sup>  
100K+ network private practice and retail chains<sup>2</sup>



**Life, Disability and Supplemental Health**  
1.5M+ members<sup>2</sup>  
20+ years of experience<sup>2</sup>

<sup>1</sup>Subject to uBundle rules, coverage and participation requirements. uBundle and certain specialty plans may not be available in all states or for all group sizes. Components subject to change. Ask your UnitedHealthcare representative for details. <sup>2</sup>UnitedHealthcare internal membership and network reports, October 2018.

## uBundle Medical Cost Savings

uBundle medical cost savings will apply to new qualifying ancillary lines of coverage if the group is in the 51-3000 segment based on state counting methodology (in-force specialty lines of coverage are not eligible for uBundle medical cost savings). For group sizes 51-100 this began on 9/1/2020 and for key accounts on 12/1/2020.



<sup>1</sup>Minimum participation requirements may apply for bundling programs. Bundling programs are not available for all group sizes. Please consult your UnitedHealthcare representative for more details.  
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