



Volume 4 | Issue 10 | October 2020

# October Broker Blast

UnitedHealthcare New Jersey Health Plan



# General Updates

## Rapid adoption of telehealth greatly expands access to care

COVID-19 has fundamentally changed the way we live and work. And when you look at some of the numbers around telehealth since the pandemic, it's clear that how employees access care has changed dramatically.

In [this article](#), we learn that, in just the first 4 months of 2020, UnitedHealthcare experienced almost 3 times as many telehealth visits compared to all of 2019. With more and more employees utilizing telehealth benefits, they can access care more easily—often from the comfort of their own home. Are your clients' employees helping drive these trends?

I hope you take a few minutes to read through this article to learn more about telehealth since COVID-19.

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## Employers are considering these 7 strategies for a safer, healthier return to work

Attached is timely information on how your clients and their employees can more safely transition back to the workplace. I understand your clients are in different phases of their return-to-office planning, and these difficult decisions may bring big questions. That's why we've created a comprehensive guide that can help inform those strategies.

[This helpful guide](#) takes nearly the entire planning process into account, providing employers with 7 key strategies for a safer return to the worksite. It outlines communication plans. Building preparation tips. Supporting physical and mental health needs. Your clients can use these strategies as a framework to help develop return-to-work plans for their unique business and employee needs.

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## COVID-19 Renewal Details for groups of 2-499 eligible employees

- Groups renewing from May 1 through September 30, 2020 will renew at existing rates without rate increases.
    - Renewals occurring May through July 31, 2020 may require retro-active adjustments and customers may see a lower rate on their monthly invoice than what was reflected in their renewal.
  - Products in-scope for this short term COVID-19 renewal adjustment are fully insured Dental, Vision, Basic Life, Supplemental Life, STD and LTD, and Supplemental Health (Critical Illness, Accident, Hospital Indemnity).\*
  - This Includes the UnitedHealthcare and All Savers businesses
  - State regulatory guidelines may apply.\*
- \*WA groups in the 2-50 space will be subject to standard renewal rate strategy for Dental & Vision*
- \*FL groups in the 2-100 space will be subject to standard renewal rate strategy for STD and LTD*
- \*Supplemental Health (Critical Illness, Accident, Hospital Indemnity) available for groups of 51+ employees*

# General Updates

**The Field Account Management Team is here to support you and our customers in this virtual environment.**

**Below are some options that are available:**

- ❑ Monthly customer/broker Wellness Wednesday Webinars focused on UnitedHealthcare Value Added Program/Health Topic
- ❑ Monthly member Wellness Wednesday Webinars focused on UnitedHealthcare Value Added Program/Health Topic
- ❑ Support with Virtual Health Fairs
- ❑ Virtual Open Enrollment Meeting support
- ❑ Virtual member one-on-one sessions to address any claim inquiry or benefit question a member may have (recommended either monthly or quarterly depending on size of group)
- ❑ Recorded seminars on different topics that customers can upload to their intranet site for members to view on their own time
- ❑ Flu shot event support

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**UnitedHealthcare will discontinue the upfront waiver of cost share for Virtual Visits through Teladoc®, Doctor On Demand™ and AmWell® as of October 1, 2020.**

- Beginning October 1, 2020, members will pay the cost share for both COVID-19 and non-COVID-19 services up front.
- The Virtual Visit cost share will revert to client specific pre-COVID cost share.
- Non-COVID-19 Virtual Visit coverage at no cost share ends September 30, 2020.
- UnitedHealthcare will reimburse members for Virtual Visit cost-share (copayment, deductible, and coinsurance) for COVID-19 Virtual Visits through the public health emergency.
- No action is required to facilitate reimbursement to the member, the provider will be responsible for member reimbursement.
- Please note, the provider member reimbursement process may take up to 60 days.

On October 1, 2020, members accessing myuhc.com will see the following disclaimer based on employer cost share: "If your visit is related to COVID-19, your Virtual Visit provider may reimburse you according to your plan benefits."

**Want to learn more about what UnitedHealthcare is doing for COVID-19?**

**[Employer FAQ](#)**

**[Broker FAQ](#)**

**[Consultant FAQ](#)**

**[UHC COVID-19 Updates](#)**



# General Updates

## Medicare Estimation

Effective July 1, Oxford implemented Medicare Estimation for fully insured business in Connecticut and New York. Medicare Estimation is an administrative claim process Oxford uses to determine what the Medicare primary payment would have been had the member enrolled in Part B or if the provider accepted Medicare. Medicare estimation reduces the amount of Oxford payment by the amount Medicare Part B would have paid if the eligible member was enrolled in Part B coverage. This update aligns with the language in the member's certificate of coverage.

This affects members that are Medicare eligible that have Medicare Part A, but not Medicare Part B and Medicare is Primary.

- Medicare is Primary in the below scenarios
  - Medicare due to Age & Group Size 19 or Less
  - Medicare due to Disability & Group Size is 99 or Less
  - Medicare due to End Stage Renal Disease (ESRD) & Medicare is Primary depending on what stage of dialysis treatment member is in.
  - Medicare Primary (regardless of reason or groups size) and Not Actively Working (COBRA, State Cont., Retiree).

Applicability: Medicare Estimation applies in any of the following scenarios:

- Member has Part A (primary) and no Part B
- Member has both Parts A and B (primary), but provider does not bill or participate in Medicare or has specifically opted out of Medicare
- Member has Part B only (primary) but provider does not bill or participate in Medicare or has specifically opted out of Medicare

Medicare Estimation does not apply in any of the following scenarios:

- Member has Part A and B, or B only, and provider is participating with Medicare
- Medicare (any part) is the member's secondary payer
- Member does not have any Medicare coverage and/or is not eligible for Medicare

Effective dates and scope

- Connecticut fully insured groups: Medicare Estimation will begin applying to claims on or after July 1 upon renewal
- New York fully insured groups: Medicare Estimation will be effective for claims with date of service July 1 and after
- New Jersey fully insured groups: Currently out of scope; will not have Medicare Estimation applied to claims

Member communications: Letters were mailed to active members with Medicare Part A only and Medicare Primary (Dec 2019 -Feb 2020).

Call to Action

- Remind your Oxford groups of this change.
- Encourage members who have not enrolled in Medicare Part B, to contact Medicare consider enrolling in Medicare Part B. You can find information about Medicare at [Medicare.gov](https://www.medicare.gov).

# Medical Updates

## Changes Coming to Oxford Garden State Network

There are 2 upcoming changes to the Oxford Garden State Network. These changes are being made in an effort to simplify the health care experience and provide more affordable health care services to your clients and their plan participants.

1. We are changing the name of the network from Oxford Garden State to Oxford Metro Network upon your client's renewal date in 2021. This change is designed to deliver a simplified experience for members and providers across the New Jersey and New York markets. Current member health plan ID cards will still be valid, and no new cards will be issued until plan renewal.
2. We are redesigning the New Jersey portion of the network. While the majority of our current providers will stay in network and new providers will be added, some current providers will be removed to focus on quality and affordable care. These network changes are effective January 1, 2021.

**Q:** How will my clients and their plan participants be notified of these changes?

**A:** All clients enrolled in an Oxford Garden State Network plan will be mailed a notification of these provider network changes in mid-September. Members who have received services from impacted providers within the last 12 months will be mailed a notification of the network change in late September. Letters will include instructions on how to search for a new network provider.

**Q:** What if a member is in the middle of getting treatment?

**A:** Members receiving an ongoing course of treatment on or beyond January 1, 2021, may be eligible for Transitional Care. Information regarding Transitional Care will be included in both group and member mailed notifications.

**Q:** What if members want to make an off-cycle change to their plan?

**A:** Groups that offered an Oxford Garden State Network plan alongside an Oxford Liberty or Freedom Network plan option will be able to decide if they want to offer a special enrollment period to employees who wish to switch plans. This special open enrollment opportunity will run through January 1, 2021.

**A:** A member's deductible and out-of-pocket-limit spend will not reset if they make an off-cycle plan change due to the network changes.



## Oxford Level Funded available for new business in select states, effective Dec. 1

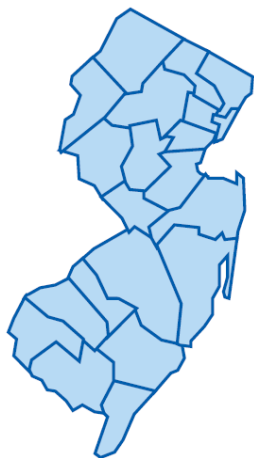
The Oxford Level Funded product is a level funded arrangement designed for small business (5-99) and mid-size Key Accounts (100-300) businesses. This product is the evolution of the All Savers® Alternate Funding product.

The Oxford Level Funded product is being implemented on the new UnitedHealthcare strategic platform and will be made available to **new business only** in the states listed below for Dec. 1, 2020 effective dates.

- **Connecticut:** 51-300
- **New Jersey:** 5-300

### Why Level Funded?

Available at **lower rates**  
(in all New Jersey Counties)



Available to groups sized 5 - 300

### Help clients control costs through self-funding for small businesses

	Maximum Claims Liability Stop Loss Coverage
	Not subject to state mandates. Lower premium taxes
	Fixed monthly payments
	Surplus Refund No carryover deficit
	Unlimited plan selections
	Virgin groups eligible 1099 eligible* <small>*Cannot exceed 25% of total enrolled</small>
	Monthly Employer Claims & Utilization Reports
	Ancillary Products Packaged Savings

### Top 5 Reasons it may work for your clients

- 1 Level funded plans**  
giving employers more control over their costs.
- 2 Stop-loss coverage**  
Employers won't pay more than what's budgeted for higher than expected claims.
- 3 Year-round savings**  
Level funded plans are not subject to most state mandates or premium taxes\*
- 4 Surplus refund**  
Possible refund if claims are lower than expected at the end of the year.
- 5 More Choices**  
Unlimited plan design selections with wellness programs included.  
Ability to include specialty.



## New website to be available for New York and New Jersey Oxford business

We are pleased to make available our new business-to-business website, [uhceservices.com](https://uhceservices.com), to our New York and New Jersey Oxford fully insured employers and their brokers this fall. The new website will provide access to the same information as on [oxfordhealth.com](https://oxfordhealth.com), with an easier-to-use interface and new functionality. The new website is already being used with our Connecticut Oxford fully insured employers and their brokers.

### What this means for you

You will receive an email from us inviting you to register on the new website. Use the **Register Now** link within the email to access [uhceservices.com](https://uhceservices.com) for the first time. If you support Connecticut Oxford fully insured business, you may already be registered with the website. Please note that the invitation to the new website will be sent to the email address we have on file for you. If you wish to confirm an email address, contact your Oxford sales representative or call Client Services at **1-888-201-4216**.

While you will start using [uhceservices.com](https://uhceservices.com) to conduct the majority of your upcoming business administration in place of [oxfordhealth.com](https://oxfordhealth.com), New York and New Jersey small group employers and their brokers **will continue to use [oxfordhealth.com](https://oxfordhealth.com) to access IDEA** for new business quoting, renewals and enrollments.

In the coming weeks, our sales staff will be contacting you to answer any questions you may have on [uhceservices.com](https://uhceservices.com). We will also hold producer webinars and make communications available for your use and reference.

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## Pharmacy Benefit Update Effective: January 1, 2021

UnitedHealthcare updates its Prescription Drug List (PDL) to ensure we are able to keep pace with current market trends, price changes, and new clinical information.

We are pleased to share our PDL and pharmacy benefit updates for **January 1, 2021** with you. Please see the attached Advantage PDL and pharmacy benefit updates for January 1, 2021. If your client is on a different PDL than Advantage, please reach out to your representative for more information.

### Member Notification

Impacted employees will receive a letter 30-60 days prior to the effective date.

[Click here](#) to watch the recorded webcast discussing the PDL updates

## 2020 Real Appeal Info Session webcast schedule available

The Real Appeal® Info Session webcast schedule for the remainder of 2020 is now available. UnitedHealthcare fully insured and All Savers customers, brokers, and Account Management teams are invited to attend to learn more about the digital weight-loss program. As a reminder, Real Appeal is now available to All Savers policies.

### New information presented in 2020 Real Appeal Info Sessions

Participants are strongly encouraged to attend a 2020 session even if they attended a session in the past; the 2020 sessions feature new information about the program, including best practices for launch to drive maximum employee enrollment and how to register on the Real Appeal employer site ([engage.realappeal.com](https://engage.realappeal.com)) to start an automated email campaign that can help achieve employee enrollment rates of over 20%!

The webcasts will also cover how Real Appeal helps members lose weight through personalized coaching and engaging digital tools that may lead to behavior change and scalable disease prevention. Additionally, they will showcase weight-loss and cost-savings achieved to date.

### Real Appeal Info Session webcast schedule – *For brokers and Account Management*

Date	Time	Registration link
Thursday, Oct. 1	2 to 2:45 p.m. ET	<a href="#">Register</a>

### Real Appeal client support team assistance

The Real Appeal client support team is available to answer any questions about the program and launch process for customers. Contact [engage.support@realappeal.com](mailto:engage.support@realappeal.com) or call 844-944-REAL (7325).



## Oxford Enhancements

UnitedHealthcare has rolled out Oxford enhancements to its NJ/NY situated group that renew effective 10/1/19 and later for New York (100+) and New Jersey (51+). We will also begin implementing these enhancements beginning 5/1/2020 for our Oxford fully insured small group business in New York (1-100) and New Jersey (1-50).

Below is a sample of the verbiage/attachments SAE's will be releasing to our brokers along with the renewal.

We value our relationship with brokers and clients. Because of that we are continually working to improve service and make Oxford their top choice for health care for their employees.

We're now able to enhance members' experience with their Oxford benefits by providing a new advocacy customer service model, additional value-added features and a new member website. These enhancements will go into effect upon your client's new Oxford policy effective date. So for *ABC Company* this will be in conjunction with the upcoming renewal. Please share this great news with *ABC Company*.

Along with these enhancements, your client will receive a new Group ID and Plan Identifier (ID), formerly known as Contract Specific Package (CSP). We will supply that information to you before your client's new policy effective date. Please find attached the enhancement package that details what your client and their employees can expect as a result of these enhancements.

Please be advised that Oxford will be issuing new ID cards on the 15<sup>th</sup> of the month prior to the groups renewal date. This will ensure all members are receiving ID cards timely with their new ID numbers. Please be advised if the groups renewal is not received & processed by the 15<sup>th</sup> then members may not receive ID cards reflecting any plan changes. If this does occur, ID cards reflecting plan changes will be triggered once the groups renewal is processed.

Included are the following attachments:

- Oxford Enhancements: Employer Overview
- Oxford Enhancements: Employer Actions
- Oxford Enhancements: Frequently Asked Questions
- Oxford Enhancements: Employer Letter
- Oxford Enhancements: Employee Letter

**Oxford 2.0** Enhancements will be effective 1/1/2020 for *ABC Company*.

- a. New website and medical cards for members [www.myuhc.com](http://www.myuhc.com)
- b. Virtual Visits Telemedicine
- c. Real Appeal
- d. Advocate for Me model (Note there will be new medical cards mailed out to members due to a new member service line)

We strongly believe UnitedHealthcare is positioned to deliver the best health care coverage value for *ABC Company*. We are committed to delivering practical yet innovative solutions that meet their specific needs and will result in healthier employees and better cost management.

Thank you and please let us know if you have any questions.



# Medical Updates

## All Savers Virtual Training.

All Savers® Alternate Funding plans help give your small business clients more choices. Like multiple plan designs, wellness programs and alternate funding—designed to help employers find the right balance between managing costs and offering affordable, quality medical benefits.

### Learn more through online training.

In 5 short sessions,\*you'll learn about All Savers Alternate Funding product components, rates, renewals, reporting and wellness capabilities. You can easily access these training presentations 24/7 from anywhere. Each session takes just 10 to 15 minutes to complete. **Choose from:**

- [What Is Alternate Funding?](#)
- [Eligibility, Quoting and Taxes](#)
- [Real Appeal® and Wellness Programs](#)
- [All Savers Employer Monthly Reporting](#)
- [All Savers Alternate Funding DocuSign Training Guide](#)



## Specialty Updates

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 March 1, 2021.

The guidelines:

- Effective dates are January 1, 2019 – March 1, 2021.
- 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.**

## With Benefit Ally, relief is in sight.

Whenever employees experience a health crisis, their primary focus should be on their health—not on their medical debt. As their employer, you can help by offering UnitedHealthcare Benefit Ally™. A suite of supplemental health products bundled with your medical plan, Benefit Ally automatically pays out a financial benefit when an eligible medical event is identified. Here are some examples:



### Accidents

- Emergency room visits
- X-rays
- Physical therapy



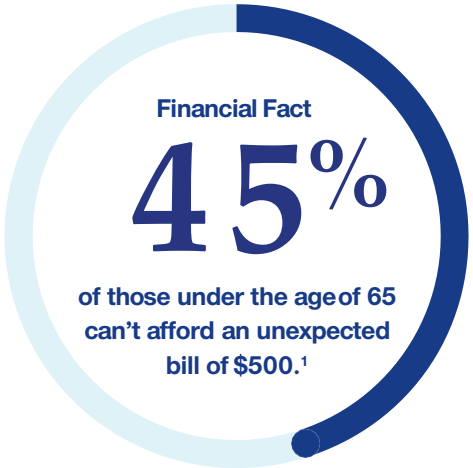
### Critical Illness

- Cancer
- Heart attack
- Stroke



### Hospital Indemnity

- Hospital or ICU admissions or stays



## Offering support that benefits both you and your employees.

### For you:

- Simplifies administration because it eliminates duplication of work.
- Helps you offer solutions built to lessen your employees' financial burden.
- May help attract and retain staff.
- Available at a competitive price.

### For your employees:

- Helps lessen the financial burden of critical care for employees — and their covered family members, too.
- Saves time because cash payments are automatically sent to the employee when an eligible medical event is identified.
- May lead to greater employee satisfaction.

## Here's an example of Benefit Ally at work.

Say your employee, Jack, fractures his leg and needs emergency care and crutches. Even with his health plan, the injury sets Jack back because of his deductible expenses. See how a Benefit Ally plan can help.\*

Initial care/hospital care		Follow-up care/common injuries	
Emergency room visit	\$100	Crutches	\$100
Diagnostics: X-ray	\$50	Follow-up physician visit	\$50
Initial physician visit	\$50	Fracture benefit	\$750
Total payment to Jack:		Total payment to Jack:	\$900

Jack receives a check for

**\$1,100**

and he can use it however he chooses.

## Contact your UnitedHealthcare representative for more information.

\*For illustrative purposes only. Example is based on a Value plan design. Cost varies based on packages. For more information, refer to plan benefit materials. Payout from member's Benefit Ally coverage will be triggered when UnitedHealthcare identifies a qualifying medical event.

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



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 51-300 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 will begin 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.



## Specialty Benefits General Agent Bonus Program

You help us inspire healthier by giving your clients more ways to live well. We think that deserves a reward. When you sell our specialty benefits, you can earn a bonus on the received premiums for all of your active business.

Meet these minimum requirements for a bonus of:

New specialty coverages	+	Enrolled employees in eligible coverages with 2020 effective date	
68	+	1,200 to 1,599	1%
136	+	1,600 to 2,399	2%
176	+	2,400 to 3,199	3%
220+	+	3,200+	4%

Then, multiply your bonus by the growth modifier:

Enrolled employee growth percentage	
120%+	1.15
110% to 119.9%	1.1
90.0% to 109.9%	1.0
85.0% to 89.99%	.90
Less than 85.0%	No bonus

The enrolled employee growth modifier is calculated by dividing the enrolled employees as of December 2020 by the enrolled employees as of December 2019. If it is less than 85%, there is no bonus.

### Let's look at an example.

#### New business

New business coverages	175
New enrolled employees	2,100
New business and renewal received premium	\$3,000,000

#### Growth

Enrolled employees (December 2019)	12,000
Enrolled employees (December 2020)	13,350
Employee growth	111.3%
Growth modifier	1.1



**\$66k Bonus**

See program terms and conditions on back.

See attached flier for more details





## Specialty Benefits Broker Bonus Program

Earn bonuses on new and renewing sales of:

- Dental
- Supplemental life
- Critical illness
- Vision
- Short-term disability
- Accident
- Basic life
- Long-term disability
- Hospital indemnity

## How to earn a new business bonus.

### Effective dates

Jan. 2, 2020, through Jan. 1, 2021  
For groups with up to 3,000 eligible employees and at least 5 enrolled employees.

- Includes UnitedHealthcare Key Account groups.
- Excludes UnitedHealthcare National Account groups.

1 Meet these minimum requirements for a bonus on annualized premium and fees of:

New lines	+	Annualized premium & fees	
20	+	\$100K	4%
10	+	\$750K	
25	+	\$200K	5%
10	+	\$1.0M	
30	+	\$300K	6%
10	+	\$1.5M	

2 Have a net change in premium and fees of at least 90% to qualify for a bonus.

3 Qualify for a new business bonus, and renew at least 25 lines with \$750K in received premium and fees for groups with up to 3,000 eligible employees and at least 5 enrolled employees.

- Includes UnitedHealthcare Key Account groups.
- Excludes UnitedHealthcare National Account groups.

Then, meet these minimum requirements for a bonus on received premium and fees:

Coverage persistency	
<80%	0%
80.0% to 84.99%	2%
85.0% to 89.99%	3%
>90%	4%

See attached flier for more details