



# September Broker Blast

UnitedHealthcare New Jersey Health Plan

**5,600**

New Jersey Employees

**\$478,693,135**

UnitedHealthcare annual financial investment in New Jersey

Contributed more than **\$1.3million** to philanthropic activities across the State and employees volunteered nearly **56,000 hours**

**New Jersey Strong**

**1.6 million**

New Jersey residents served by UnitedHealth Group

**28,306**

New Jersey Physicians

**94**

New Jersey Hospitals

**Over \$1,000,000**

In Corporate donations in support of multiple community organizations within New Jersey due to the COVID-19 pandemic.

**Over \$1,000,000**

Donated to the Food Banks in NJ





# You're Invited New Jersey Gala

Thursday • September 23 • 2021 • 6-9 PM

[Click Here to Join Us](#)

Tip: Use Google Chrome for best results



**Liberty House**  
RESTAURANT AND EVENTS  
76 Audrey Zapp Dr. • Jersey City, NJ 07305

## Helping Kids, Changing Lives!

UnitedHealth Group's senior leadership and staff welcome you and your prestigious guests to enjoy scenic views as we dine, drink, and socialize - all while celebrating an evening of raising funds to support UHCCF medical grant funding in the Northeast Region.

All Proceeds benefit the UnitedHealthcare Children's Foundation to provide medical grants for children in the Northeast region.



# SPONSORSHIP OPPORTUNITIES

Celebrate your team and entertain clients, colleagues, and friends.

## **Presenting Sponsor - \$7,500**

- Admission for 12 at a reserved table
- Food & wine
- Logo on event signage & registration site
- Two-minute remarks

## **Platinum Sponsor - \$5,000**

- Admission for 8 at a reserved table
- Food & wine
- Logo on event signage & registration site
- Recognition during remarks

## **Grant Family Sponsor - \$3,500**

- Admission for 6 at a reserved table with a grant family
- Food & wine
- Logo on event signage & registration site
- Recognition during remarks

## **Gold Sponsor - \$2,000**

- Admission for 6
- Food & wine
- Logo on event signage & registration site

## **Silver Sponsor - \$1,500**

- Admission for 4
- Food & wine
- Logo on event signage & registration site

## **Bronze Sponsor - \$1,000**

- Admission for 2
- Food & wine
- Logo on event signage & registration site

## **Individual ticket - \$125**

- Admission, food, & wine

For event and registration questions, contact Kim Gellman • [kim\\_gellman@uhc.com](mailto:kim_gellman@uhc.com) • 732-623-1956

For sponsorship opportunities, contact Shelly Rucks • [shelly.rucks@uhc.com](mailto:shelly.rucks@uhc.com) • 763-361-9085

# Help us reach our next goal to award the 50,000th grant in 2030!

The United Healthcare Children's Foundation (UHCCF) is a 501(c)(3) charitable organization that provides medical grants to help children get health-related services not covered, or not fully covered, by their family's health plan. Since 2007, UHCCF has awarded more than 22,500 grants and more than \$50 million to children and families across the United States. With your help, we continue to grow, giving hope to more and more children and families each year! Visit [UHCCF.org](http://UHCCF.org) for more information about our mission and its impact.



## Join us for a webinar

Stay up to date on what's new at UnitedHealthcare in New Jersey. Our team will provide high impact 3-minute product drills designed to help you flex your UnitedHealthcare and Oxford knowledge with clients and prospects.

For your convenience we are offering 2 webinars. Please register for the date that best fits your schedule.



**Wednesday, Sept. 22**  
10 a.m.

**Register Now**



**Thursday, Sept. 30**  
2 p.m.

**Register Now**

Questions? Contact your UnitedHealthcare Representative.

## Employer eServices® Training

**This class is designed for Groups with over 100 eligible employees**

Looking for an easier way to administer your UnitedHealthcare benefits?

Whether you need to make an eligibility change, complete open enrollment changes in real time, submit an online payment, or want financial and claims data reports to help you make informed decisions about your health care benefits, UnitedHealthcare's Employer eServices is there to help you streamline your benefits administration.

This **60-minute** introductory training session is designed to complement online tutorials, quick reference guides and Help you can find within Employer eServices.

**Instructor-Led Webcast Training Schedule for Groups with over 100 eligible employees.**  
**Register to sign up for the session that best meets your schedule.**

DATE	TIME	REGISTRATION
Thurs. Sept. 16, 2021	1 to 2 p.m. ET	<a href="#">Register for Sept. 16, 2021</a>
Wed. Sept. 29, 2021	1 to 2 p.m. ET	<a href="#">Register for Sept. 29, 2021</a>



# Medical Updates

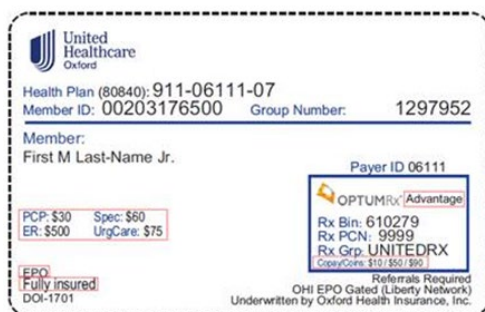
## ID Cards – New York

### NY State Regulatory Changes:

- “FULLY-INSURED” or “SELF-FUNDED” will be printed on the front of the card.
- Logo on back which will indicate the plan’s network.
- Product tag (POS, EPO, or HMO) to the end of the product name
- Rx Copays and PDL name also needed

All **NY** Situs fully insured renewals need a full extract of ID cards at renewal  
UHC/Oxford will re release cards to all 5/1/21 renewals forward in September  
ASO full extract **NOT** needed

#### Fully Insured

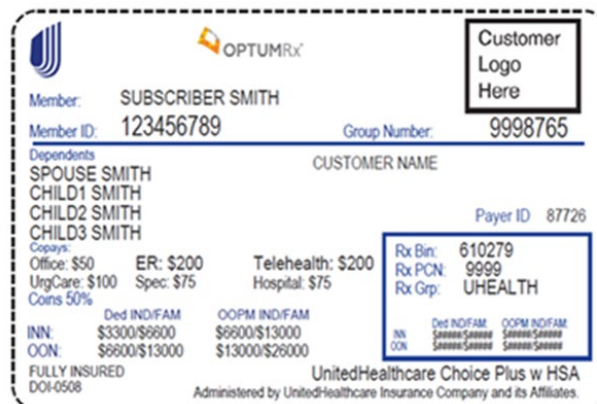


## ID Cards – CAA

- UHC/Oxford will NOT proactively issue new cards to all members just for the CAA changes
- Existing members that wish to have a new ID card will be able to download an electronic version via myuhc.com or request a new card by contacting Customer Care.
- A customer may request a full reissuance of ID cards if they so choose.

### WHAT's NEW?

- Plan deductibles for network and out-of-network deductible amounts.
- Maximum limits on out-of-pocket costs including network and out-of-network limits, as applicable.
- Phone number and web address for a member to get assistance including help to find a network provider



# Medical Updates

## Educational videos

Follow this link to three short [educational videos](#) now available on [uhc.com](#) to share with brokers, consultants and customers. The videos, which feature UnitedHealthcare leaders, offer an inside look at UnitedHealthcare's approach to innovation and the latest offerings coming to market.

Topics included in the video series include:

- **UnitedHealthcare product innovation:** Hear Phil Kaufman, Chief Operating Officer, UnitedHealthcare Employer & Individual, summarize the thought process behind what drives UnitedHealthcare's innovation agenda.
- **Virtual care:** Pat Keran, Vice President, Product and Innovation, UnitedHealthcare Employer & Individual, discusses advancements in virtual care, as well as enhancements UnitedHealthcare is planning to bring to this space in the future.
- **Consumer affordability:** Listen to Kelly Matsouka, Product Director, UnitedHealthcare Employer & Individual, highlight Care Cash™ as one of the programs UnitedHealthcare offers to help employees manage health care costs and encourage behavior change for optimal health care usage.

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## Performance Funding Program

Performance Funding is a retro-rated, fully insured program designed to allow employers to participate in their medical claims experience.

Our Performance Funding program is designed to allow fully insured customers to share in the value of their plan's positive medical claim experience, without having to self-fund their benefit plan.

Now you can receive premium credits in the years when your claims performance meets certain criteria. And you don't have to pay more when claims fluctuate because we assume the risk.

### A program that's easier to participate in

With the Performance Funding program, you continue to pay your monthly plan premiums each year, and unlike self-funded plans, there are no separate bank accounts. Then, after the normal renewal rating process is over (usually about 15 months from the original effective date), we perform a full year plan accounting to determine the potential premium credit.

- If your plan's total expenses are lower than expected, you will receive an experience refund in the form of a premium credit to your subsequent year's premium
- Even if your plan's total expenses are greater than the premium you paid for the year, there is no deficit to carry forward or deficit accumulation
- For groups with 100+ enrolled you will receive a monthly claim reporting package for insight into the utilization performance of the group. Groups with 75–99 enrolled will receive claim reporting on an annual basis.

See attached flier for detailed information



## **UnitedHealthcare Launches New Adolescent and Teen Mental Health Resources**

Adolescence (ages 10-19) is a crucial period for developing and maintaining social and emotional habits important for mental well-being. It's a unique and formative time – multiple physical, emotional and social changes can make adolescents vulnerable to mental health problems. Compounding an already-increasing need, research has shown the COVID-19 pandemic has exacerbated existing emotional health issues for many adolescents.

### **New adolescent and teen mental health resources**

To help address community mental health in teens and adolescents, UnitedHealthcare has launched a variety of new resources to assist customers in starting and continuing this important conversation with their employees. These materials aim to allow customers to share UnitedHealthcare resources targeted toward the mental health needs of teens and adolescents

Resources include:

- [Teen Mental Health Member Flier](#)
  - This member flier describes a variety of challenges youth may be experiencing and lists several UnitedHealthcare resources and programs available that provide potential ways to improve mental health and well-being in adolescents.
- [Teen Mental Health Employer Flier](#)
  - This external flier introduces the current state of adolescent and teen mental health and its importance, along with the resources UnitedHealthcare offers to help support this population.
- [Teen Mental Health Employer Email Template](#)
  - This email template reinforces the importance of adolescent and teen mental health and describes the resources UnitedHealthcare offers to help address this problem.
- [EAP Core Member Flier](#)
  - This flier explains the benefits of the Employee Assistance Program (EAP Core) to members, which is the former EAP component of Care24®.
- [Sanvello™ Behavioral Health App Member Flier](#)
  - This member flier promotes the Sanvello behavioral health app, a self-care mobile resource for members age 13+.
- [Behavioral Health Virtual Visits Member Flier](#)
  - This member flier promotes Behavioral Health virtual care options for eligible Employer & Individual members for those with behavioral health benefits. Virtual care options represent a quicker way for members to get care and may be an option for adolescents to set up an appointment to speak with a provider about their mental health needs.

# Medical Updates

## August Digital Experience Enhancements

### Emotional Health Support resources

Released on Aug. 13, on myuhc.com, a dashboard carousel tile will link members to a landing page where they can learn about the Employee Assistance Program (EAP), the Sanvello app, and Virtual Behavioral Health. This landing page provides a single destination for members to learn more about behavioral resources available to them. There are four versions of the landing page, based on member's eligibility for Optum Behavioral Health and EAP. *Impacts Employer & Individual members with Optum Behavioral Health and EAP*

### Coming soon! New Digital Experience employer video, updated marketing materials

A new digital experience employer video, which highlights the personalized and convenient experience members have using myuhc.com and the UnitedHealthcare app, will be available soon to share with brokers and consultants.

### OON claim submission update

Targeting fourth quarter 2021, a direct medical reimbursement PDF will be available for members to submit out-of-network (OON) medical claims for online reimbursement. This functionality is currently being piloted with select customers. This enhancement will ensure members can submit OON claims, allowing for an improved experience.

## 24/7 Virtual Visits to Add Optum Virtual Care in Select Markets in Mid-September

Optum Virtual Care (OVC) is joining UnitedHealthcare's 24/7 Virtual Visits provider groups in select markets in mid-September and will continue to expand to additional states in phases through January 2022. OVC will become the integrated 24/7 Virtual Visit provider on myuhc.com® and on the UnitedHealthcare mobile app.

Phase 1 includes:

- |            |                 |             |                 |
|------------|-----------------|-------------|-----------------|
| • Arkansas | • Kansas        | • Michigan  | • Oklahoma      |
| • Delaware | • Massachusetts | • Minnesota | • Pennsylvania  |
| • Illinois | • Maryland      | • Nebraska  | • Virginia      |
|            |                 |             | • West Virginia |

**Note: Teladoc® will remain the integrated provider for those states not launched.**

Teladoc, Doctor On Demand® and Amwell® will continue to be available providers for UnitedHealthcare's 24/7 Virtual Visits on myuhc.com and can be accessed through the FAQ section. **Customers not using UnitedHealthcare's virtual visit provider network are not impacted.**

### Benefits of OVC

OVC will expand access to care virtually by leveraging the strengths of both UnitedHealthcare and Optum, working together to better serve individuals and the whole of the health care system. OVC will also increase consumer utilization of Virtual Visits through provider expansion, modality expansion and consumer-centric multi-point consumer access enhancements.

Members in the Phase 1 markets with the 24/7 Virtual Visits benefit will access OVC through myuhc.com HealthSafe ID single sign-on (SSO) and will find OVC on the Virtual Care landing page. All members, including dependents, will be automatically registered when the member clicks "get care now" or "schedule a visit". Visits will be video (with audio) and can be both on-demand or scheduled.

Real-time eligibility and benefit verification are available upon visit request, including display of a member's cost-share





## UnitedHealthcare to provide millions of members with year-long access to Peloton app

On Tuesday, July 20, UnitedHealthcare and interactive fitness brand Peloton (Nasdaq: PTON) [announced](#) a new program to provide millions of Americans with access – at no additional cost to them – to fitness classes that can help improve their overall health and well-being. This is the first such relationship between Peloton and a health plan.

Starting Sept. 1, as part of their plan benefits, millions of fully insured UnitedHealthcare members can enroll with Peloton to obtain access to Peloton's best-in-class, multidiscipline fitness classes, helping integrate exercise into their daily routines. New and existing Peloton members are eligible to enroll.

Eligible UnitedHealthcare members will receive details via email about activating their Peloton membership starting Sept. 1 or thereafter, depending on the health plan's effective date. Eligible members will be able to receive their personalized code by visiting [myuhc.com/peloton](https://myuhc.com/peloton). Once eligible UnitedHealthcare members receive a personalized code, they can use it to activate their 12-month subscription to a Peloton Digital Membership or a four-month subscription to a Peloton All-Access Membership at no additional cost to them.

At the end of the 12-month membership, UnitedHealthcare plan participants will have the opportunity to renew the Peloton Digital Membership at the market rate directly through Peloton; UnitedHealthcare members will not be automatically enrolled beyond the 12-month offer.

Eligible UnitedHealthcare members with an existing paid Peloton Digital Membership will be given the option to cancel their existing membership before claiming the UnitedHealthcare-subsidized one, while members with an existing Peloton All-Access Membership will be provided a four-month waiver covering the same value.

Expanding access to Peloton's best-in-class connected health community builds on UnitedHealthcare's commitment to offering digital health resources and consumer-centric health benefits to help people live healthier lives.

The UnitedHealthcare offer is the first of its kind between Peloton and a health plan, helping both organizations achieve their joint goal of making fitness and overall wellness more attainable and accessible.

### Availability

Beginning Sept. 1, access to the Peloton Digital Membership will be available to UnitedHealthcare members enrolled in eligible fully insured, employer-sponsored health benefit plans at no additional cost to them:

- **Existing business:** Available Sept. 1
- **New business:** Available on effective date

**Note:** Self-funded (ASO), All Savers®, UMR, Harvard Pilgrim and plans sold on private exchanges are out of scope for the initial launch.



# Medical Updates

## UnitedHealthcare Motion

It is important for members to stay active during this time for both their physical and mental health, so please continue to encourage members to work towards achieving their FIT goals. The CDC recommends exercising regularly to help manage stress and anxiety. With that recommendation in mind, we are:

- providing members with tips to stay active such as walking in place while watching their favorite TV show, enjoying some fresh air and taking their steps outside while following recommended social distancing guidelines.
- encouraging members with children at home to take the opportunity to get the whole family engaged with different games such as a scavenger hunt or hide and seek.

### Motion Overview

UnitedHealthcare rewards members for taking ownership of their healthy habits, which may result in healthier employees and lower medical claim costs. Motion promotes physical activity through the use of activity tracking. It provides financial incentives, helps foster strong partnerships with our broker/consultant partners, and is a critical step toward promoting and motivating health ownership. A key component of this program is physical activity (walking, riding an indoor or outdoor bike, using an elliptical, running or swimming). The list of activities is constantly evolving which means there are more and more ways to hit goals. Fitness activities are supported based on the device used.

### Motion expands list of eligible activities

Motion is constantly evolving its list of eligible activities to include any activities that can be tracked on a member's device or smartphone. Effective Aug. 15, the current list of activities – walking, riding an indoor or outdoor bike, using an elliptical, running and swimming – is expanding to include any activity a user's Fitbit®, Garmin® or Apple® Watch can track.

### Motion now supports all Fitbit devices

Member feedback shows they already have a preferred device for tracking their movement – and UnitedHealthcare is listening. Members can now use any Fitbit tracker to earn with Motion. This expands the list of devices to Fitbit favorites like Versa™ and Sense™.

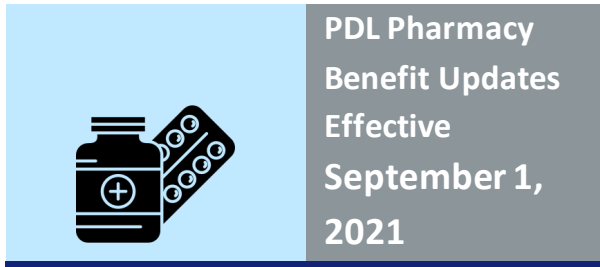
### New mobile shopping experience with Best Buy

Targeting fourth quarter 2021, eligible Motion members will be able to use the Motion mobile app to shop for certain devices. Motion members can continue to shop via the Motion website or mobile app with an ever-expanding list of items that will be fulfilled through Best Buy.



# Medical Updates

## PDL Pharmacy Benefit Update



Hear about the strategic drivers behind UnitedHealthcare's Formulary, and Advantage or Traditional PDL updates.

Learn why these drivers are beneficial in delivering cost-effective solutions for customers and members.

### Client Facing September 1, 2021 Benefit Update Presentation

- [Client facing Brainshark recording](#)

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## New Sales Bonus

For agents who sell new UnitedHealthcare or UnitedHealthcare subsidiary fully insured and Oxford level-funded group medical products

Agents in New Jersey have advised us that some of their customers are concerned that their current carrier may be exiting the group health insurance market in New Jersey. UnitedHealthcare is prepared to assist agents who, in direct response to customer requests, move their concerned customers to UnitedHealthcare or UnitedHealthcare subsidiary fully insured and Oxford level-funded group medical products. Additional compensation of \$75 for each enrolled employee will be paid to agents who enroll such customers with UnitedHealthcare or UnitedHealthcare subsidiaries from August 1, 2021, through January 1, 2022, up to a maximum amount of \$7,500 per group.

Groups eligible for the additional compensation are medical groups with 2 to 100 eligible employees in New Jersey that move directly from a carrier that may be exiting the group medical insurance market to UnitedHealthcare or UnitedHealthcare subsidiary fully insured or Oxford level-funded group medical products with effective dates from August 1, 2021, through January 1, 2022. The additional compensation will be paid based on the January 1, 2022, enrolled employee count of the eligible groups.

See attached flier for more details





# Medical Updates

## Announcing UnitedHealthcare's 2021-2022 Flu Shot Campaign

Flu shots help keep employees protected and productive. Each flu season, nearly 111 million workdays are lost due to the flu. That equals approximately \$7 billion per year in sick days and lost productivity.

A flu shot is the best defense against the flu—and getting one can help protect the people around you. The Centers for Disease Control and Prevention (CDC) generally recommends annual flu shots for everyone 6 months and older.

Encourage your employees to help protect themselves and others by getting a flu shot.

### **Benefit coverage**

Members should review their benefit plan to determine coverage for flu immunizations.

Preventive services, including immunizations, are provided under the standard, fully insured UnitedHealthcare Certificate of Coverage (COC). Many ASO customer plans also include coverage for approved flu immunizations but are dependent upon benefit plan and may include member copayments or deductibles.

- Member cost for flu shots is the same for walk-in vaccine or customer-sponsored flu clinics. While most plans cover flu shots, in certain cases member copayments and deductibles may apply.
- Members also can obtain flu shots through their health care provider's office. When a member obtains a vaccine through their regular physician, it gives the physician an opportunity to engage the member in other prevention activities. Office copayments and deductibles apply.

### **Contracted flu shot providers**

UnitedHealthcare members may present their health plan ID cards to receive flu shots on a walk-in basis from a variety of national pharmacy chains and retail convenience care clinics. No appointment is necessary.

### **Additional information**

- For information from the Centers for Disease Control and Prevention (CDC) about the 2021-2022 flu season, including details about vaccines, recommendations and disease activity, visit: <https://www.cdc.gov/flu/season/>
- For an overview of high-risk groups, visit: <https://www.cdc.gov/flu/highrisk/index.htm>
- Watch for information regarding the 2021-2022 flu season member campaign in September.



# Medical Updates

## UnitedHealthcare Global

UnitedHealthcare and UnitedHealthcare Global are better together.

Our objective: creating a team approach that provides domestic and international benefits that are an incomparable value-add for customers. By having both a domestic and a global plan from one source, companies can count on:

- **Coordinated Account Management teams**
- **Truly global coverage through an international plan that includes the United States**
- **A single member portal**
- **Well-being solutions**

**Did you know:** UnitedHealthcare Global supports cross-border activity around the world, including expatriates, assignees, and travelers, regardless of where people are traveling and for any duration of time. We have industry-leading resources such as a best-in-class global network, 24/7 multilingual/multicultural member service, in-house evacuation and international EAP that can support your international exposure. Most importantly, with the UnitedHealthcare/UnitedHealthcare Global joint solution, there are program enhancements and savings that can result.

Please let us know if you would like to hear more about our global benefits capabilities.



# Medical Updates

## **2022 creditable coverage tool available Sept. 7**

The Medicare Modernization Act mandates that certain entities offering prescription drug coverage, including employer and union group health plan sponsors, must disclose to all Medicare-eligible individuals with prescription drug coverage under the plan whether such coverage is “creditable.” Determining whether certain coverage is creditable is essential to an individual's decision to enroll in a Medicare Part D prescription drug plan.

### **Important customer information**

If a UnitedHealthcare customer offers a prescription drug plan to Medicare-eligible individuals:

- Optum Insight determines if the plan provides “creditable coverage” based on the results of the bulk-testing.
- Once the plans are tested, the data becomes available on the UnitedHealthcare Medicare Part D creditable coverage website and on the Centers for Medicare & Medicaid Services (CMS) creditable coverage website.

<https://www.uhc.com/employer/health-plans/other-coverage/medicare-part-d-creditable-coverage>

<https://www.cms.gov/medicare/prescription-drug-coverage/creditablecoverage?redirect=/creditablecoverage/>

- Brokers will enter the information in the creditable coverage tool where the results will be displayed.
- Brokers will then communicate the creditable or non-creditable status of the plan to customers.
- This determination is mandatory at least once a year. The deadline for completion is Oct. 15, 2021.
- Customers – not UnitedHealthcare – send creditable coverage notices to their members.
- Self-funded (ASO) customers may pay UnitedHealthcare to send creditable coverage notices to their members on their behalf.





# Medical Updates

## Broker Renewal Packets for Oxford Small Group Business Go Green Option

The go green process (online delivery) for providing Oxford small group (NY: 1-100, NJ: 2- 50, CT: 1-50) renewal information to brokers is aligned with the process for our UnitedHealthcare small group business. It has been favorably received for providing quick access and convenience as more producers are working remotely. If, however, you prefer to receive your Oxford small group client's renewal information in paper format through the U.S. mail, please follow the steps below.

### Turn On/Off Go Green Option

- Sign in to [uhceservices.com](https://uhceservices.com)
- Go to the **Contact Information** section
- Next to **Go Green**, click the circle for "No" to receive your client's renewal information in paper format

**Contact Information**

Please note that this contact information will apply to the Broker ID and all associated users.

Go Green Yes ☐ No ☒

Business Email

Business Phone

Business Phone Ext

Business Fax

C/O

Save Cancel

You **do not** need to take any action if you wish to follow the go green process and access your client's renewal information online only.

Regardless of your preference for delivery, your client will continue to receive their renewal information in paper format through the mail.

### Reminder about online access to renewal information

To access your Oxford small group client's renewal information online, click **Oxford Renewal Packages** under **Quick Links** on the **Small Group Quoting & Renewals** tab. General Agents will see groups eligible for renewal 75 days before the group's renewal date. Non-General Agent brokers will see groups eligible for renewal 72 days before the group's renewal date. Employers can view their renewal information online 60 days prior to their policy renewal date.

### More information

Find details about the go green option and how brokers and clients access renewal information online in the [uhceservices.com Reference Guide for brokers](#).

Contact your Oxford sales representative or Client Services at **1-888-201-4216** with questions.



# Medical Updates

## Reminder about claim payments for NJ Oxford members eligible for Medicare

When Medicare is the primary coverage, the plan reduces claim payments. Once a member is eligible for Medicare Part B coverage, the amount Medicare would have paid as the primary payer for covered services is calculated and the member's benefits are reduced by this amount. This amount is not covered by the fully insured plan. Members not enrolled in Medicare Part B will be responsible for the costs that Medicare would have paid and, therefore, will incur a greater out-of-pocket expense.

The reduction is permissible under N.J.A.C. 11:4-28.5(a)(2), supported by our contract, and described in the member's Certificate of Coverage.

### What this means for members

This change affects members of our New Jersey situs Oxford fully insured large group (51+) plans. It will be implemented **beginning with July 1, 2021 policy renewal and effective dates**. Affected members will be responsible for the costs that Medicare would have paid and, therefore, will incur a greater out-of-pocket expense.

### Action required

- Ensure current and future Medicare-eligible employees know about how Medicare Part B affects their plan; for example, those who are approaching their early 60s, as well as those who elect coverage through COBRA.
- Review the enclosed [sample letter](#) we are mailing to members and share it with clients. This is a one-time courtesy letter to members who are currently active employees with Medicare Part A coverage only, informing them about the claim payment process change.

### More about who this applies to

We will apply this claims payment process with all existing and new members who are enrolled in Medicare Part A coverage but have not enrolled in Medicare Part B coverage, and Medicare is the primary payer. Medicare is the primary payer when:

- Member is eligible for Medicare due to age and the member's group size is 19 or fewer employees.
- Member is eligible for Medicare due to a disability and the member's group size is 99 or fewer employees.
- Member is eligible for Medicare due to End Stage Renal Disease and Medicare is the primary payer, depending on the member's stage of dialysis treatment.
- Medicare is the member's primary payer (regardless of reason or group's size) and the member is not actively working (e.g., COBRA, State Continuation, Retiree).

This claims payment process **does not** apply when:

- Member has Medicare Part B coverage.
- Medicare (any part) is the member's secondary payer.
- Member is not eligible for Medicare.

As previously communicated, we began applying this process with members of our New York fully insured groups in 2020. It does not currently apply to members of our New Jersey fully insured small groups (2-50).

### More information

Impacted clients should encourage members who have not enrolled in Medicare Part B to contact Medicare with questions and refer to [Medicare.gov](https://www.medicare.gov) for assistance.

You and your clients should also refer to [Medicare.gov](https://www.medicare.gov) for information or contact your Oxford sales representative with questions about this claims payment process.

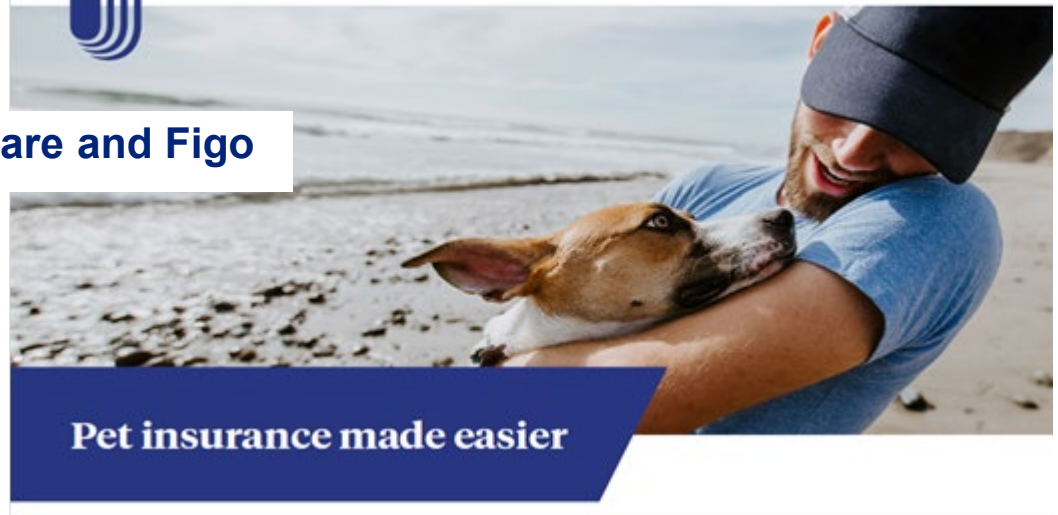


# Specialty Updates



Specialty Benefits | Pet Insurance

## Woof! UnitedHealthcare and Figo



UnitedHealthcare and Figo – an award-winning technology and service company offering a complete set of tools to help make pet owners' lives easier – are partnering to offer a group discount on pet insurance.

**This is only available for Key Account groups (100+) only effective 5/1/21. This can be implemented on a group's renewal date or off their renewal date.**

Approximately 66% of households have at least one pet\*, and 95% of pet owners consider their pets a part of their family\*\*. Pet owners want to take good care of their furry family members, but veterinary costs continue to rise.

### Advantages of pet insurance

Designed to help ease employee financial worries, pet insurance may also help employers increase retention, attract top talent and improve culture. In addition, pet-inclusive benefit policies can help create deeper connections, while increasing attraction, engagement, retention and reliability.\*\*\*

- **Satisfaction – 15%** have an increase in satisfaction with their employer.
- **Appreciation – 17%** have a higher appreciation for their employer benefits.
- **Retention – 14%** would decline a job offer unless pet insurance was offered.
- **Attraction – 19%** are more likely to recommend their employer to others.

\*Extensis, June 17, 2019

\*\*Pet Life Today, 2020

\*\*\*HABRI. 2018, "The Impact of Pets: At Work and Beyond"

### How it works

Figo offers three pet insurance plans, a wellness selection, and customizable deductible and reimbursement options. Since these plans are based on a reimbursement model, patients may visit any licensed veterinary practice, emergency hospital or specialist – anywhere in the world.

Every pet insurance policy includes access to chat with a live veterinarian 24 hours a day, seven days a week via the Figo Pet Cloud® mobile app with no copay or limit to usage. When an urgent pet medical question arises, they can connect with a licensed veterinary professional anytime, anywhere. This benefit is included with all policies.

**Please feel free to share with your Key Account (100+) groups and contact your Account Executive and Field Account Manager if you have any questions or to move forward!**





## 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.

### 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

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

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

For more information Contact your UnitedHealthcare representative



## Savings on blue light protection

Excessive screen time on computers, tablets and cell phones may affect vision and cause digital eye strain due to the blue light they emit.<sup>1</sup> And since the onset of COVID-19, people are spending an average of 13 hours per day on digital devices.<sup>2</sup> That's why we're providing savings on blue light blocking screen filters with UnitedHealthcare Vision plans.

Save

**20%**

off of the retail price on blue light blocking screen filters from Eyesafe.

## Help employees reduce eye strain.

UnitedHealthcare Vision members have access to discounts on blue light blocking screen filters for select smartphones, tablets and laptops from Eyesafe®.

Eyesafe screen filters are designed to:

- Reduce exposure to high-energy blue light
- Help maintain color quality and luminance
- Offer a simple, lower cost option to filter blue light on existing devices
- Be easily applied to your device



Members can access the discount through **myuhcvision.com**

**Learn more.** Contact your UnitedHealthcare representative.

United  
Healthcare  
Vision

eyesafe®

<sup>1</sup> National Institutes of Health. Research progress about the effect and prevention of blue lights on eye. 2018 ncbi.nlm.nih.gov/pmc/articles/PMC6288536/. Accessed March 29, 2021.

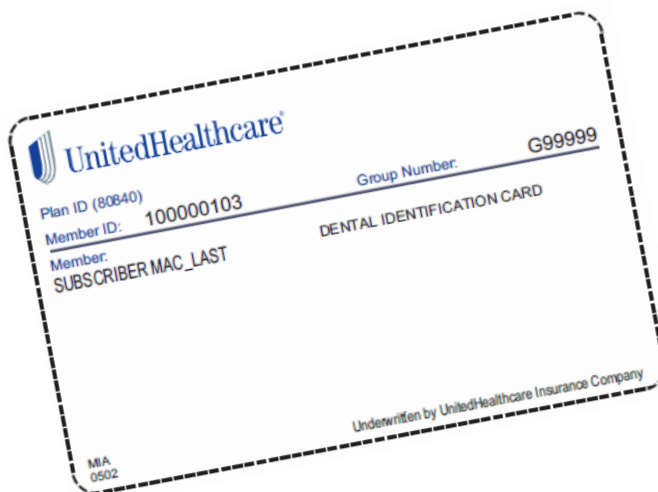
<sup>2</sup> Eyesafe, 2020, <https://eyesafe.com/covid-19-screen-time-spike-to-over-13-hours-per-day>

All trademarks are the property of their respective owners.

UnitedHealthcare vision coverage provided by or through UnitedHealthcare Insurance Company, located in Hartford, Connecticut, UnitedHealthcare Insurance Company of New York, located in Islandia, New York, or their affiliates. Administrative services provided by Spectera, Inc., United HealthCare Services, Inc. or their affiliates. Plans sold in Texas use policy form number VPOL.06.TX or VPOL.13.TX and associated COC form number VCOC.



## Dental ID cards to transition to digital-only for new business, effective July 1, 2021



Effective July 1, printed dental ID cards will sunset and be replaced with digital ID cards as a part of UnitedHealthcare's continuous efforts to go "digital first." Members will be able to access the digital ID cards through myuhc.com® or the UnitedHealthcare app.

New groups with effective dates on or after July 1 will fall under this new standard, and existing groups will transition effective Oct. 1.

This change applies only to Public Sector and commercial PPO (Preferred Provider Organization) and in-network only (INO) lines of business for both fully insured and self-funded (ASO) groups:

- National Accounts
- Key Accounts

Members participating in one of UnitedHealthcare's Dental Health Maintenance Organization (DHMO), Dental Corps (DC) or managed care dental plans will continue to receive a physical ID card.

In addition, individual members across all segments will continue to have the option to request a physical ID card through customer service or via myuhc.com.

Members will receive a welcome letter in place of the printed ID cards with instructions on how to access their ID card on myuhc.com or through the UnitedHealthcare app. The welcome letter will also contain instructions on how to request a printed card.



## 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, 2021.

The guidelines:

- Effective dates are January 1, 2021 – December 15, 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.**



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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	
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 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 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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