



# August Broker Blast

UnitedHealthcare New Jersey & Pennsylvania Health Plans



## Out-of-area network change for Oxford Liberty members

Effective for new business and upon renewal for existing business, beginning with **September 1, 2022** plan effective dates, Oxford members of a Liberty Network plan will have the **UnitedHealthcare Core Network** for out-of-area coverage.

They will no longer use the UnitedHealthcare Choice Plus Network for national network access.

This change applies to our fully insured, self-funded and level funded Liberty members when seeking care outside of the Oxford tri-state service area.<sup>1</sup> UnitedHealthcare Core Network is a focused network of providers designed to achieve savings, while still offering broad access to care.

### What this means for New York and New Jersey Oxford members enrolled in a Liberty Network plan

- The out-of-area network for New York and New Jersey situs businesses with Oxford Liberty Network plans **will change** from the UnitedHealthcare Choice Plus Network to the UnitedHealthcare Core Network effective **September 1, 2022** for new business and upon renewal for existing business.
- In states where the UnitedHealthcare Core Network is not available,<sup>2</sup> Oxford Liberty network members will have access to the full network that mirrors the UnitedHealthcare Choice Plus Network.
- The UnitedHealthcare Core Network includes **895,806** physicians and health care professionals and **5,001** hospitals.<sup>3</sup>
- **Liberty network access within the Oxford tri-state service area<sup>1</sup> remains unchanged.**

### What this means for Connecticut Oxford members enrolled in a Liberty Network plan

- The Oxford Liberty Network will now provide national network access for all Connecticut Liberty Network plans effective **September 1, 2022** for new business and upon renewal for existing business.
- With the addition of the national UnitedHealthcare Core Network, your Connecticut clients' employees can feel confident about having access to care if traveling outside of the tri-state service area<sup>1</sup>
- In states where the UnitedHealthcare Core Network is not available,<sup>2</sup> Connecticut Oxford Liberty network members will have access to the full network that mirrors the UnitedHealthcare Choice Plus Network.
- **Liberty network access within the Oxford tri-state service area<sup>1</sup> remains unchanged.**

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## Out-of-area network change for Oxford Liberty members con't

### Provider search

- As always, please encourage members to confirm a provider's participation in the health plan network prior to seeking care. They can do this online, on [myuhc.com](https://myuhc.com), or by calling the phone number on their health plan ID card.
- Members should sign in to [myuhc.com](https://myuhc.com)® to search for Oxford Liberty Network providers. Upon renewal, beginning with **September 1, 2022** plan effective dates, Core Network providers will appear in the provider search tool when Oxford Liberty members look for out-of-area providers.
- Non-members and affected members whose plan has not yet renewed will also be able to perform a search for Liberty with Core providers prior to **September 1, 2022**.

### Communications

- New York, New Jersey, and Connecticut employers with Oxford Liberty Network plans will be notified of this change through their renewal packages.
  - [Oxford Liberty Network Change for New York Large Group Employers](#)
  - [Oxford Liberty Network Change for New York Small Group Employers](#)
  - [Oxford Liberty Network Change for New Jersey Large Group Employers](#)
  - [Oxford Liberty Network Change for New Jersey Small Group Employers](#)
  - [Oxford Liberty Network Change for Connecticut Employers](#)
- New York and New Jersey Oxford Liberty Network members who have visited a provider in the past 12 months, who is no longer available for out-of-network coverage effective upon their renewal on or after **September 1, 2022**, will receive a letter notifying them of this change.
- All Oxford Liberty Network members will receive new member ID cards indicating UnitedHealthcare Core for out-of-area network access.

### Questions?

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



## **UnitedHealthcare statement on Supreme Court decision of Dobbs v. Jackson Women's Health Organization**

We are aware of the [Supreme Court's decision on Dobbs v. Jackson Women's Health Organization](#). We respect and realize there are differing opinions on this important issue. This decision will affect our employees and the people we serve in different ways, depending on where they live, what type of insurance coverage they have and their specific plan details.

Our teams have been actively preparing for this decision. We are reviewing the court's opinion now and will communicate more information as soon as possible. We remain committed to helping members and patients get access to their plan benefits and services.

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## **Care Cash**

Care Cash® is a prefunded debit card program that supports first-dollar coverage and is available to use for specific health care expenses. Members can use the card for the following UnitedHealth Group network providers:

- UnitedHealth Premium® Care physicians
- 24/7 Virtual Visit providers (now including Optum Virtual Care providers)
- Urgent care facilities
- Primary care physicians
- Outpatient behavioral health care providers

### **About the Care Cash card**

The Care Cash card offers the following:

- Awards employees \$200 (single) or \$500 (family) for the year
- Is designed to help pay for out-of-pocket costs for eligible health care expenses
- Is reloadable each year for eligible employees

In addition, any remaining card balances are accessible in future years for eligible employees. Unused rewards accumulate toward a \$2,000 maximum, but do not expire unless a member's Care Cash medical plan eligibility expires.

Care Cash is available on Oxford new and renewing medical business:

- Oxford fully insured (51+) in Connecticut & New Jersey
- New Jersey available for Oxford Metro; expanded for 51+ (Case effective dates Nov. 1, 2022)

See attachment for additional information



## **New videos explain benefits of virtual care and advocacy programs**

In this [first video](#), Phil Kaufman, Chief Growth Officer and CEO for UnitedHealthcare Individual & Family Plan, delves into the ways virtual care has grown to make healthcare more accessible, simple and convenient for everyone.

A 2,500% increase in virtual visits (compared to pre-pandemic levels) has pushed virtual care to evolve and improve access not only to primary care, but also specialty, chronic and behavioral care as well.

In this [next video](#), UnitedHealthcare Chief Consumer Officer, Rebecca Madsen, discusses the ways advocacy programs aim to help members make smarter care decisions. As a result, members receive higher-quality, lower-cost care that helps support whole-person health. In fact, in 2021 alone, advocacy programs led to \$72 million in savings!

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## **What cost trends are affecting your region?**

We know cost management is top of mind for every customer, every broker, really every relationship in the marketplace. We also know there's regional nuance when it comes to cost management and cost trends.

This [new video](#) takes a closer look at what's happening on a more local level with interviews featuring UnitedHealthcare Employer & Individual regional leaders: Greg Reidy, CEO, Southeast Region; Elizabeth Winsor, CEO, Northeast Region; Brett Edelson, CEO, Minnesota, South Dakota, North Dakota; and Kristen Rivers, Vice President, Key Accounts, West Region.

They cover strategies that tackle cost drivers in the health system including high performance networks, virtual care and wellness programs that offer rewards.



## EeS third quarter 2022 external training options for Key Accounts, National Accounts, and Public Sector customers available

**Funding type: Fully Insured**

**Brokers and Groups with More Than 100 Eligible Employees**

The Employer eServices® (EeS) third quarter 2022 external training webcasts for Key Accounts, National Accounts, and Public Sector customers are scheduled as follows:

Date	Time	Registration
Wednesday, Aug. 3, 2022	2 p.m. to 3 p.m. ET	<a href="#">Register for Aug. 3, 2022</a>
Monday, Aug. 22, 2022	2 p.m. to 3 p.m. ET	<a href="#">Register for Aug. 22, 2022</a>
Wednesday, Sept. 14, 2022	2 p.m. to 3 p.m. ET	<a href="#">Register for Sept. 14, 2022</a>
Thursday, Sept. 29, 2022	2 p.m. to 3 p.m. ET	<a href="#">Register for Sept. 29, 2022</a>

Registration is required and space is limited.

These sessions are tailored to new users and designed to Provide an overview of the site

See attached flier

## Employer eServices external customer reporting third quarter 2022 webcast scheduled Sept. 1

**Funding Type: Fully Insured**

The Employer eServices® (EeS) third quarter 2022 external customer reporting (cost and utilization reporting) webcast for customers with 100+ employees is scheduled **Tuesday, Sept. 1, from 2 to 3 p.m.** ET.

Registration is required and space is limited.

Topics covered will include:

- Offer an overview of the tool's functionality and how to create common customer reports
- Explain how to export and print automated and custom reports
- Provide help on using the tool via the online training resource

See attached flier

Date	Time	Registration
Tuesday, Sept. 1, 2022	2 p.m. to 3 p.m. EST	<a href="#">Register for Sept. 1, 2022</a>





## UnitedHealthcare **extends** offer to provide members with year-long access to Peloton App, equipment discounts; Key Accounts fully insured reporting available

UnitedHealthcare is excited to announce we are extending our offer with Peloton® through June 2023. Millions of fully insured UnitedHealthcare new and existing Peloton members are eligible to enroll with Peloton as part of their plan benefits to obtain access to best-in-class classes, helping integrate exercise into their daily routines. This includes access to the Peloton App and a discount on Peloton equipment.

### Peloton App Membership details

This program provides UnitedHealthcare members access to fitness classes that can help improve their overall health and well-being – at no additional cost. The UnitedHealthcare offer was 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.

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.

### Availability

One-year access to the Peloton App is extended to UnitedHealthcare members enrolled in eligible fully insured, employer-sponsored health benefit plans at no additional cost to them for new and existing business.

### Existing Peloton memberships

UnitedHealthcare members with an existing paid Peloton App Membership will be given the option to cancel their current membership before claiming the UnitedHealthcare-subsidized one.

UnitedHealthcare members with an existing Peloton All-Access Membership will be provided a three-month waiver, beginning July 1.

### Member communications

Beginning in September, eligible UnitedHealthcare members will begin receiving emails on how to activate or extend their one-year Peloton membership.

### How the Peloton App Membership works

Eligible UnitedHealthcare members can obtain their personalized code by visiting [myuhc.com/peloton](https://myuhc.com/peloton). Once they receive a personalized code, they can use it to activate their **12-month subscription** to Peloton App or a three-month waiver to a Peloton All-Access Membership at no additional cost.

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



## Announcing Real Appeal Success Kit changes for 2023

UnitedHealthcare is refreshing its Real Appeal Success Kits beginning with program start dates after Jan. 1, 2023, to help improve the overall member experience, allow for more individualized support, and continuing taking part in its go-green/paperless initiatives. Each member who participates in the Real Appeal program receives a Success Kit sent to them after their first group-coaching session with tools to help kickstart their weight loss journey.

### Success Kit changes

Current contents	Contents as of Jan. 1, 2023	Comments
Smoothie Blender	No – Not utilized for intended purpose	Coincides with green initiative to reduce size of box
Nutrition/Fitness Guide	Yes – Replaced with PDF	Coincides with green initiative to go paperless
Body weight scale	Yes	
Food scale	Yes	
Balanced Portion Plate	Yes	
Workout DVDs	No – Replaced with Fitness on Demand app options	Offers hundreds of premium workout/fitness options to match their goals
Exercise Bands	No – Not utilized	

### About Real Appeal

Real Appeal takes an evidence-based approach to support weight loss. The program helps people make small changes necessary for larger long-term health results, based on weight-loss research studies commissioned by the National Institutes of Health. Real Appeal is a year-long lifestyle program that uses clinically proven research and an engaging online experience to drive scalable disease prevention and lasting behavior change, resulting in weight loss.

The program is designed to support members who are obese (body mass index or BMI over 30), overweight (BMI of 25 to 29.9) or simply ready to lose weight.

### Program components

Key program components include:

- Coach led online live, virtual group sessions
- One-on-one coaching available to those who qualify
- Privately reach out to their coach via messaging
- Success Kit to remove barriers and provide weight loss tools
- Digital tools to help lose weight and inspire healthy habits
- Content backed by science





## CAA pharmacy benefits, costs reporting instructions available to ensure fully insured, ASO customers meet Dec. 27 deadline

Under the Consolidated Appropriations Act (CAA), health insurers offering group or individual health coverage and self-funded (ASO) group health plans are required to report data annually regarding prescription drugs and health care spending to the Departments of Health and Human Services, Labor, and Treasury (Tri-Agencies). This information must be submitted through a web portal set up by the Centers for Medicare & Medicaid Services (CMS).

- The Dec. 27, 2021, report date had a delayed enforcement until Dec. 27, 2022. The report must include active and canceled customer data from Jan. 1, 2020, through Dec. 31, 2021, if the customer canceled anytime during that period.
- Beginning in 2023, these reports will be required by June 1 each year. Reports submitted for June 1, 2023, require the 2022 data.

### Approach to submitting data

UnitedHealthcare will submit all data for **fully insured customers** to support CAA pharmacy benefits and costs reporting. In addition, UnitedHealthcare will submit data on behalf of UMR customers with integrated OptumRx, Federal Employee Health Benefits Plan (FEHBP) and select ASO groups.

For UnitedHealthcare ASO Key Accounts, National Accounts, and Public Sector customers, and for customers with the Empire Plan and Bind, UnitedHealthcare will share responsibility for filing with the customer.

### ASO customers

There are two standard approaches and one additional approach for submitting data for ASO customers. Refer to the attached [\*UnitedHealthcare Approach to ASO Pharmacy Benefits and Costs Reporting Guide for more detail\*](#).

### Reporting for fully insured and ASO groups where UnitedHealthcare/UMR submits report

UnitedHealthcare will provide the data as requested per the CMS documented instructions.

For reporting that is submitted by UnitedHealthcare/UMR, the reporting will be aggregated at the issuer/third-party administrator/state/market level, rather than separately for each plan.

The guidance provides uniform standards and definitions, including standards for identifying prescription drugs regardless of the dosage strength, package size, or mode of delivery so the Tri-Agencies may conduct meaningful data analysis and identify prescription drug trends.

- Data for fully insured groups will be organized separately by state for individuals, small groups and large groups.
- Data for fully insured groups must be reported for the state where the contract is issued.
- Data organization for ASO plans are differentiated by ASO small groups and ASO large groups.
- Data for ASO plans must be reported for the state where the plan sponsor has its principal place of business.
- For multiple employer welfare arrangements (MEWAs), data must be reported for the state where the employer has its principal place of business or where the association is incorporated.



## **CAA pharmacy benefits, costs reporting instructions available to ensure fully insured, ASO customers meet Dec. 27 deadline – con't.**

### **ASO customers planning on submitting report data themselves**

ASO customers can request that UnitedHealthcare provide the 2020 and 2021 data required for the report categories so they can submit to CMS by the required date. UnitedHealthcare anticipates customer requests will be limited, particularly for this first reporting year. When requested, UnitedHealthcare provides the customer with their own specific data, as required in CMS instructions. The customer may be required to sign a non-disclosure agreement (NDA).

**Note:** ASO groups will need to obtain and then submit other service provider data from organizations, if applicable.

### **Deadline to notify UnitedHealthcare if filing independently: Aug. 1, 2022**

Customers must notify UnitedHealthcare/UMR about the decision to file themselves by **Aug. 1, 2022**.

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## **SIC Code requirement in SAMx when shopping for and enrolling Oxford small groups**

When using SAMx, the online tool for quoting and enrolling Oxford small group business, please be aware that the Standard Industrial Classification (SIC) Code is now a required field, effective immediately, when entering a New York-situs client's information. You will see a red asterisk next to the SIC Code field and a corresponding footnote about the requirement. Beginning next month, the requirement also will be in place when entering New Jersey-situs and Connecticut-situs Oxford small group client information in SAMx. This update is meant to support the combined experience when processing a client's medical and specialty products coverages.

### **What this means for producers**

When preparing an Oxford small group quote or a renewal in SAMx for a New York (1-100), New Jersey (2-50) or Connecticut (1-50) customer, you will need to indicate a SIC Code in the designated field within the **Employer Information > General Information** and **Products to Quote** sections in order to proceed. If you know the Code, enter it in the field and then click on it in the list that will appear to confirm selection. If you don't know the Code for a group, start typing the group's industry name in the SIC Code field (e.g., construction, manufacturing, retail trade) and click the corresponding code from the list that will appear.

**Additional information:** Contact your Oxford sales representatives or contact our Client Services team at **1-888-201-4216** or [oxfordgroupservices@uhc.com](mailto:oxfordgroupservices@uhc.com) with questions.



## Behavioral Health updates: Sanvello to change its name to Self Care by AbleTo, member campaign details and promotional resources

Effective Jan. 1, 2023, the Sanvello app will become Self Care by AbleTo, creating a more integrated, guided member experience. This change enables a simplified digital self-help experience that will connect the member, not only to the AbleTo family of products, but to those in the broader Behavioral Health portfolio. Self Care is an evidence-based resilience program for those looking to manage day-to-day stress or those who need but are not yet ready to seek treatment or are looking for an adjunct to treatment. Self Care delivers personalized, on-demand support that can be accessed anytime, anywhere to help members build resilience with new skills and daily habits. All available through myuhc.com

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## Transparency in Coverage - MRF

UnitedHealthcare's standard approach is to post machine-readable files (MRFs) on a UnitedHealthcare publicly available website starting July 1, 2022. ASO groups must link to the MRFs by adding the link to their publicly available website.

Transparency in Coverage email templates are provided under related links should you wish to share with your UHC and Oxford clients.

- For **fully insured customers**, UnitedHealthcare will create and post the machine-readable files (MRF). No action is required.
- For **ASO customers**, UnitedHealthcare will provide a live link for them to plan, upload and test on their publicly available site. Instructions are included within the customer email template.
- For **All Savers, Level Funded and Oxford Level Funded customers**, follow the ASO customer approach. UnitedHealthcare will provide a live link for them to plan, upload and test on their publicly available site. Instructions are included within the customer email template.

### Related links

[Transparency In Coverage MRF fully insured customer email template](#)

[Transparency In Coverage MRF ASO customer email template](#)

[Transparency In Coverage MRF combined fully insured and ASO email template](#)

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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.



## New reward program encourages pediatric COVID-19 vaccination

### *\$100 Target GiftCard for eligible NY dependent members*

COVID-19 vaccines are an important step in helping to lessen the spread of the disease. While many adult New Yorkers have been vaccinated, vaccination rates among children remain relatively low. To encourage pediatric vaccination, we are offering New York-situs subscribers whose dependents are enrolled in a fully insured UnitedHealthcare or Oxford plan a **\$100 pre-paid Target GiftCard**.

#### Action needed

We are sending a similar communication to those clients for whom we have an email address. Please make your eligible clients aware of this new member reward program. You may use the attached sample **client email**, **client-to-employee email** and informational member flier (**UnitedHealthcare member flier**, **Oxford member flier**) to facilitate outreach. Include the appropriate Pediatric COVID-19 Vaccination Reward Rider for your client's line of business: (see below documents attached)

- **Oxford Health Insurance, Inc. New York Large Group (101+) Rider**
- **Oxford Health Insurance, Inc. New York Small Group (1-100) Rider**
- **Oxford Health Insurance, Inc. New York Small Group Healthy New York Rider**
- **UnitedHealthcare Insurance Company of New York Large Group Rider – 2018 Certificate of Coverage**
- **UnitedHealthcare Insurance Company of New York Large Group Rider – 2007, 2011 Certificates of Coverage**
- **UnitedHealthcare Insurance Company of New York Small Group Rider**

#### Criteria for the New York UnitedHealthcare and Oxford Pediatric COVID-19 Vaccination Reward program

- Dependent child(ren) must be enrolled on an active subscriber's New York UnitedHealthcare or Oxford fully insured plan.
- Dependent must be eligible for the pediatric COVID-19 vaccine—aged 5 through 17 per the Centers for Disease Control and Prevention (CDC) guidelines.
- Dependent must receive the primary series of COVID-19 vaccinations (2 doses) with the second dose being administered on or after May 5, 2022, and before end-of-day on October 1, 2022.
- Subscribers and eligible dependents do not need to live in New York but must be actively enrolled on a New York-situs UnitedHealthcare or Oxford commercial small group or large group fully insured plan at the time of the second dose of the pediatric vaccination.

#### How the program works

The New York Pediatric COVID-19 Vaccination Reward program is in effect May 5, 2022, the date it was approved by the New York State Department of Financial Services (DFS), through October 1, 2022.

These dates are specified in the Pediatric COVID-19 Vaccination Reward Rider to the Group Policy, as approved by DFS.

- There is no action required of the subscriber other than ensuring their eligible dependent's pediatric COVID-19 vaccination course, with the second dose to be given according to the program timeline above, and they must show their health plan ID card to the vaccine provider.

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## NY Pediatric COVID-19 Vaccine Reward Prog con't

- Eligible subscribers and dependents do not need to contact us or submit a request to receive the Target **GiftCard**. The gift card will be mailed to the subscriber's address and should be received 8-to- 12 weeks after we receive the dependent's claim for the second dose of the vaccine.
- There is no additional cost to the subscriber for participation. The program is included as part of UnitedHealthcare and Oxford medical plans. Members continue to have \$0 cost-share (copays, deductibles, or coinsurance) on FDA-authorized COVID-19 vaccines no matter where they get the vaccine. This includes when 2 doses are required. Members should not receive a bill for the vaccine.
- Recipients may redeem their gift card toward the purchase of merchandise on Target.com or at a Target retail location of their choice.

### Additional information

The CDC remains the best resource for COVID-19 vaccine information. For COVID-19 vaccine coverage details and help finding vaccine resources, go to [uhc.com/COVID-19vaccines](https://uhc.com/COVID-19vaccines).

Please contact your UnitedHealthcare or Oxford sales representative or contact Client services at **1-888-201-4216** or [oxfordgroupservices@uhc.com](mailto:oxfordgroupservices@uhc.com) with questions.

UnitedHealthcare and Oxford members with questions about the New York Pediatric COVID-19 Vaccination Reward program may call us at the toll-free number on their health plan ID card.

### NOT FOR CONSUMER USE

Target is a registered trademark of Target Brands, Inc.

Participation in the New York Pediatric COVID-19 Vaccination Reward program is voluntary. The information provided is for general informational purposes only and is not intended to be nor should be construed as medical advice. Subscribers/members should consult an appropriate health care professional with questions and/or to determine what may be right for them.

One card per eligible member will be issued according to program guidelines.

The maximum reward will not exceed 30% of the cost of coverage for all programs combined, as applicable. Recipients should consult an appropriate tax professional to determine if they have any tax obligations under this program, as applicable.

UnitedHealthcare, including Oxford, is not responsible for lost or stolen cards.

Insurance coverage provided by or through UnitedHealthcare Insurance Company of New York. Oxford insurance products are underwritten by Oxford Health Insurance, Inc.



## New sales bonus

For New Jersey new fully insured, Oxford level-funded or Oxford self-funded medical cases with at least 25 enrolled employees

UnitedHealthcare and Oxford are offering a bonus to agents who sell new fully insured, Oxford level-funded or Oxfordself-funded medical plans with effective dates from March 1, 2022, through December 31, 2022, that have at least 25 enrolled employees and are **located in New Jersey**. Eligible agents will receive a bonus of \$75 for each enrolled employee in eligible fully insured, Oxford level-funded or Oxford self-funded medical groups sold during the bonus period. A maximum of 1,000 enrolled employees will be included in the bonus calculation for any case, or group of affiliated cases.

All eligible Oxford self-funded medical plans must also include UnitedHealthcare or OptumRx Carve-In Prescription Drug and Specific Stop-loss Coverage to be eligible for this bonus.

**Prescription drug and specific stop-loss coverage:** Coverage for prescription drugs on the eligible medical case must be provided by UnitedHealthcare Pharmacy or an UMR OptumRx Contract (also referred to as “OptumRx Carve-in”), and specific stop-loss coverage must be provided by UnitedHealthcare or a UnitedHealthcare subsidiary, in order to be eligible for the bonus.

Eligible cases are UnitedHealthcare and Oxford fully insured, Oxford level-funded or Oxford self-funded medical groups in New Jersey that have:

1. 51 to 5,000 eligible employees;
2. At least 25 employees enrolled in UnitedHealthcare and Oxford medical coverage; and
3. Effective dates from March 1, 2022, through December 31, 2022

**Bonus example:** An eligible agent sells 2 eligible UnitedHealthcare fully insured medical cases having a total of 250 enrolled employees, 1 eligible Oxford level-funded medical group with 400 enrolled employees, and 1 eligible Oxford self-funded medical group with 150 enrolled employees with effective dates during the bonus period. That makes the agent eligible for a bonus of \$75 for each enrolled employee in the 4 eligible medical groups. That results in a total bonus of or \$60,000 for the 4 eligible groups.

See attached flier for more details

Contact your UnitedHealthcare representative if you have any questions.





## New sales bonus

For Delaware, New Jersey & Pennsylvania new fully insured, level-funded or self-funded medical plans with at least 51 eligible and enrolled employees

UnitedHealthcare and Oxford are offering a bonus to agents who sell new fully insured, level-funded or self-funded medical plans with effective dates from July 1, 2022, through January 1, 2023, that have at least 51 enrolled employees and are **located in New Jersey, Pennsylvania or Delaware**.

**Special Per Case Bonus:** Agent is eligible to receive a one-time Special Per Case Bonus if UnitedHealthcare holds a direct capabilities meeting with the eligible medical case prior to the Request for Proposal being released, and the eligible case sells with an original effective date during the bonus period with a UnitedHealthcare or Oxford fully insured, level-funded or self-funded medical plan. If earned, the Special Per Case Bonus is determined by the number of enrolled medical employees and the type of medical plan sold as indicated in the following table:

Number of enrolled medical employees in eligible enrolling unit	Special Per Case Bonus for eligible fully insured or level-funded cases	Special Per Case Bonus for eligible self-funded cases with pharmacy carved in or specific stop-loss	Special Per Case Bonus for eligible self-funded cases — no pharmacy carve-in and no specific stop-loss
51 to 150 enrolled employees	\$3,000	\$3,000	\$1,500
151 to 299 enrolled employees	\$10,000	\$10,000	\$5,000
300 or more enrolled employees	\$15,000	\$15,000	\$7,500

The rows in the table are not cumulative, and the Special Per Case Bonus payable will be only the highest bonus indicated in the row of Table 1 for the number of enrolled medical employees in an eligible group for fully insured, level-funded or self-funded medical coverage as of the group's effective date.

Eligible cases are UnitedHealthcare and Oxford fully insured, level-funded or self-funded medical groups located in New Jersey, Pennsylvania or Delaware that have:

1. 51 to 5,000 eligible employees;
2. At least 51 employees enrolled in UnitedHealthcare and Oxford medical coverage; and,
3. Have effective dates from July 1, 2022, through January 1, 2023

**Bonus example:** An eligible agent sells 1 eligible UnitedHealthcare fully insured medical case with 250 enrolled employees, 1 level-funded medical case with 400 enrolled employees and 1 self-funded medical case with no pharmacy carve-in and no specific stop-loss with 1,200 enrolled employees with effective dates during the bonus period. That makes the agent eligible for a total bonus of \$32,500 for the 3 eligible groups.

See attached flier for more details

Contact your UnitedHealthcare representative if you have any questions.



## New sales bonus

### For Pennsylvania new or converted UnitedHealthcare level-funded medical cases with up to 50 eligible employees

UnitedHealthcare is offering a bonus to agents who sell new UnitedHealthcare level-funded medical plans or who convert existing UnitedHealthcare fully insured medical plans to UnitedHealthcare level-funded medical plans in Central or Eastern Pennsylvania with up to 50 eligible employees, with effective dates from July 1, 2022, through January 1, 2023.

Eligible cases are new UnitedHealthcare level-funded medical groups or existing UnitedHealthcare fully insured medical groups (who convert to UnitedHealthcare level-funding) with up to 50 eligible employees that are located in Central or Eastern

Pennsylvania (please see Program Detail 1 for exact geography) with effective dates from July 1, 2022, through January 1, 2023.

**New sales bonus:** Agents will receive a bonus of \$100 for each enrolled employee in new eligible medical groups sold during the bonus period.

**Conversion bonus:** Agents will receive a bonus of \$500 for each existing eligible medical group that converts during the bonus period.

**Bonus example:** An eligible agent sells 3 *new* eligible medical groups having a total of 60 enrolled employees with effective dates during the bonus period. The same agent converts 2 *existing* eligible medical groups with effective dates during the bonus period. That makes the agent eligible for a bonus of \$100 for each enrolled employee in the 3 *new* groups, and \$500 for each of the 2 *existing* groups, and therefore they earn a bonus of \$100 times 60, plus \$1,000, for a total bonus of \$7,000.

See attached flier for more details

## New sales bonus

### For Pennsylvania level-funded medical cases with up to 50 eligible employees

UnitedHealthcare is offering a bonus to agents who sell new UnitedHealthcare level-funded medical plans in Western Pennsylvania with up to 50 eligible employees, with effective dates from July 1, 2022, through January 1, 2023. Eligible agents will receive a bonus of \$100 for each enrolled employee in eligible medical groups sold during the bonus period.

Eligible cases are new UnitedHealthcare level-funded medical groups with up to 50 eligible employees that are located in Western Pennsylvania (please see Program Detail 1 for exact geography) with effective dates from July 1, 2022, through January 1, 2023.

**Additional special bonus:** Eligible agents will receive an additional \$500 bonus for each eligible case that includes the UnitedHealthcare NavigateNow product at the time the medical coverage is written. At least 1 enrolled employee must be enrolled in NavigateNow for the additional special bonus to be payable.

**Bonus example:** An eligible agent sells 5 eligible medical groups having a total of 60 enrolled employees with effective dates during the bonus period, 2 of which include NavigateNow. That makes the agent eligible for a bonus of \$100 for each enrolled employee, and the additional special bonus of \$500 on 2 of the sold groups, and therefore they earn a bonus of \$100 times 60, plus \$1,000, for a total bonus of \$7,000.

See attached flier for more details

Contact your UnitedHealthcare representative if you have any questions.



## **Update:Wage and tax documentation requirements for Oxford small group business**

As part of the group enrollment process, Oxford fully insured small groups (New York: 1-100, New Jersey: 2-50<sup>1</sup>, Connecticut: 1-50<sup>2</sup>) must submit payroll/wage and tax documentation verifying the group meets the eligibility requirements for health care coverage under state and federal law. In addition to the group's most recent wage and tax records, you may be asked to provide additional supporting documentation for a client. This process remains the same for both new and renewing Oxford small group business.

### **What's new**

This communication supersedes our previous communications on this subject.

We are **not** requiring a group's wage and tax information for the four quarters of the prior calendar year at the time of application or renewal, as previously communicated. As noted above, we may, however, ask for such additional documentation to confirm group eligibility.

### **Upload wage and tax documentation**

Please provide us full documentation with your clients' application and renewal requests to help ensure timely processing. When uploading supporting documentation with a client's application in the small group Sales Automation Management tool, SAMx, remember to include the wage and tax information. Without this information, applications will be incomplete and remain in a pending status.

We have updated the instructions for submitting wage and tax documentation to us on behalf of your clients and are working to have the new versions included with the small group renewal packages, replacing the previous versions. In the meantime, you may find the new versions on [uhceservices.com](https://uhceservices.com) in the Producer Resources section and they are also attached:

- **Connecticut Oxford small group tax instructions**
- **New Jersey Oxford small group tax instructions**
- **New York Oxford small group tax instructions**

### **More information**

Our Risk Management team will contact any client and the client's broker if additional information is needed in order to complete an application or a renewal.

### **Questions?**

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

Thank you.



## United Healthcare - UHCGlasses.com

### Easy online ordering eyewear options

Whether they wear glasses, contacts or both, UnitedHealthcare Vision offers members 2 quick and easy ways to order what they need and get the most out of their vision benefits.

At [uhcglasses.com](https://uhcglasses.com) and [uhccontacts.com](https://uhccontacts.com), members have access to a wide selection of their favorite brands of eyeglasses, sunglasses and contacts lenses — all at competitive prices.

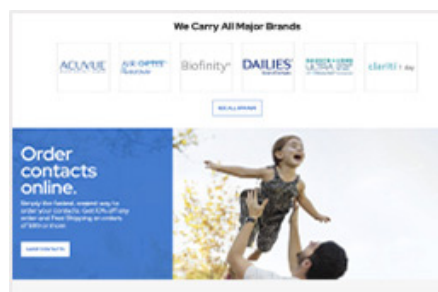
Get glasses



#### [uhcglasses.com](https://uhcglasses.com) features:

- 7,000+ styles from popular brands
- Thousands of frames to fit every budget with free shipping and easy returns
- Free anti-reflective, smudge- and scratch-resistant and UV-protective lens treatments when you use your UnitedHealthcare Vision benefits
- Virtual Try-On

Get contacts



#### [uhccontacts.com](https://uhccontacts.com) features:

- All major contacts brands, including Acuvue®, Bausch & Lomb and Biofinity®
- 10% off any order
- Free shipping on orders of \$99 or more

By making the experience easier, [uhcglasses.com](https://uhcglasses.com) and [uhccontacts.com](https://uhccontacts.com) helps members take control of their vision health



## 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](#)

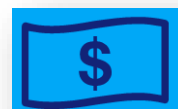
Contact your UnitedHealthcare representative

## 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.**



## Save a bundle on specialty benefits

Bundled Pricing | Groups 2–50 (2–100 in CA and CO)

You want benefits that help protect the health and well-being of employees at the lowest possible cost while keeping benefit administration, billing and customer service simple. Now UnitedHealthcare is helping make it easier and more affordable to add specialty coverage for employees with bundled pricing.

### Earn administrative credits by adding 2 or more new lines of specialty coverage, including:

- Dental
- Vision
- Supplemental Life (when coupled with Basic Life)
- Basic Life
- Short-Term Disability
- Long-Term Disability

### More reasons to bundle

Bundling specialty benefits together under a single provider helps simplify your health care experience:

- One point of contact
- Consolidated billing
- Simplified administration



### Already carry UnitedHealthcare medical?

You may qualify for [both](#) Packaged Savings® and specialty-only savings


## Here’s how it works

Administrative credits\* are awarded based on the annualized premium from eligible specialty benefits lines of coverage.

Premium	Credit
\$7,500–\$9,999	\$500
\$10,000–\$19,999	\$750
\$20,000–\$29,999	\$1,000
\$30,000–\$49,999	\$1,500
\$50,000+	\$3,000

## Program terms and conditions

1. Program effective dates: May 1, 2022, through December 31, 2022.
2. UnitedHealthcare retains sole and complete discretion to revise or terminate the savings program at any time.
3. Business underwritten or administered by Oxford Health Plans and Sierra Health Services Inc. are currently excluded from the savings program. ACEC and Oxford Benefit Management are currently excluded from this savings program.
4. Not available in New York, Rhode Island, Vermont and Washington.
5. UnitedHealthcare Preventive Plans are not eligible for the savings program administrative credits.
6. Specialty benefit plans and the savings program may not be available in all states or for all group sizes.

 Contact your broker or UnitedHealthcare sales representative for program availability.

## 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.



1Minimum 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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