

Volume 4 | Issue 6 | June 2020

## **June Broker Blast**

UnitedHealthcare New Jersey Health Plan



## **General Updates**

### **Sweat Equity Program during COVID-19**

Eligible members may continue their participation in the Sweat Equity program. To help make participation easier during this time when many gyms have closed and organized in-person fitness classes and events have been canceled, beginning March 1, 2020 through the end of your state's declared emergency, members may record their home-based exercise activities (one per day: virtual fitness (app, video), walk, run, bike ride, home workout equipment, etc.) on their Sweat Equity reimbursement form.

We are temporarily waiving the following program requirements, which would not apply to home-based exercise activities:

- submission of documentation supporting the cardio benefits of the equipment, class, facility or event used by the member;
- · receipts for fitness-related expenses incurred;
- facility/instructor attestation as a qualification for reimbursement of eligible exercise-related expenses.

When recording home-based workouts on the reimbursement application (claim form):

- Under Fitness Events, Facility Visits and Classes, indicate "home" for Session Type or leave blank;
- Under Fitness Event, Class, Session, Facility Information, indicate "home" for Organization name or leave blank:
- Under Fitness Facility/Instructor Information, indicate "home" for Facility employee/Class instructor name or leave blank.

All other program requirements will continue to apply.

\*Pending approval by the NYS Department of Financial Services.

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

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

Want to learn more about what
UnitedHealthcare is doing for COVID-19?
Employer FAQ
Broker FAQ
Consultant FAQ
UHC COVID-19 Updates



### **Oxford Enhancements**

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

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

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

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

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

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

Included are the following attachments:

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

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

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

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

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



### Motion-Take steps to healthier

The UnitedHealthcare Motion® program is designed to help you to do more of what you already do: walk. It promotes a healthier lifestyle through positive habits and rewards participants with deposits into your health savings account (HSA).

#### You may get healthier and wealthier.

Oxford members with an HSA may earn up to \$3 per day if all 3 FIT (Frequency, Intensity, Tenacity) goals are met, for up to \$1,095 per calendar year.

Three ways to earn <sup>1</sup>		HSA
F	Frequency 300 steps in 5 minutes; 6 times a day, at least 1 hour apart.	\$1
0	Intensity 3,000 steps in 30 minutes.	\$1
T	<b>Tenacity</b> 10,000+ total daily steps.	\$1
		\$3/day \$1,095/year

#### How Motion works.

- 1 Visit unitedhealthcaremotion.com to register and activate your UnitedHealthcare Motion account.
- Next, you can select your fitness tracker and apply your registration credit toward the purchase of a compatible tracker, which will be shipped directly to you.
- 3 Once you receive your fitness tracker in the mail, you can download the UnitedHealthcare Motion app on the App Store® or Google Play™ to sync your device.
- Wear your activity tracker every day and begin walking to reach your daily goals. And go online to unitedhealthcaremotion.com to view detailed information on your progress, FIT goals and credits earned. Your fitness tracker will record and upload your daily physical activity and provide real-time feedback to help you keep track of your walking goals.
- You will receive quarterly deposits into your HSA based on the credits you have earned in the previous quarter. You can then use these deposits to reimburse eligible medical expenses.

**Please Note:** Credits earned throughout the quarter can be used to purchase or buy up new devices or accessories within the quarter, until the credits are placed into your HSA.

### Registration credit.

To make sure you're off to a great start, we'll give you a **\$55 credit** right away—just for getting set up. You can use your credittoward the purchase of a compatible activity tracker, some of which are offered at noadditional cost to you.

### How does Motion work with your HSA?

Rewards earned from Motion are deposited into your HSA once a quarter, and can be used to help cover eligible out-of-pocket medical or pharmacy expenses accrued during the plan year. You can sign in to **myuhc.com**® at any time to view your HSA balance or submit a claim form online or via mail or fax. Check to ensure that your contributions do not exceed IRS limits and be sure to monitor your HSA contributions against the annual HSA contribution guidelines.

### Participating in Motion may help improve well-being by:

- · Aiding weight loss.
- Improving cholesterol and blood sugar.
- Reducing the risk of type 2 diabetes and heart disease.

#### Motion really works.

On average, participants take

12,000 steps daily.2

**60%** of participants sustain engagement over 6 months.<sup>3</sup>

**45%-65%** of those eligible to participate

in Motion registered for the program.4

# Why walking may matter.

Those who have a sedentary lifestyle are at an increased risk for heart disease, stroke, cancer, type 2 diabetes and other serious health conditions.

#### 85%

of annual health care costs are for people with chronic conditions.<sup>5</sup>

#### \$117<sub>b</sub>

is spent annually on health care costs associated with physical inactivity.<sup>5</sup>

- · Decreasing symptoms of depression and anxiety.
- · Increasing energy and productivity



### **New Jersey Small Group Plan Grid**

We have updated our NJSG plan grid for 2020. Please review the attached full grid with our product offerings as well as the attached grid outlining the changes made from 2019 to 2020.

Please reach out to your Small Business Account Executive with any questions.



### All Savers Virtual Training.

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

#### Learn more through online training.

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

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





As part of UnitedHealthcare's effort to continue improving access to care, Optum Behavioral Health has executed a contract with Talkspace, a new behavioral health virtual visit provider.

Talkspace is a provider group that offers members access to thousands of licensed therapists – 24 hours a day, seven days a week – who are fluent in over 30 languages across all 50 states. Talkspace utilizes technology to deliver behavioral therapy using virtual capabilities (e.g., live audio, video and in-app messaging).

Effective May 1, UnitedHealthcare Employer & Individual self-funded (ASO) customers with Behavioral Health Solutions or Standard Behavioral Care administered on the UNET platform will have access to this provider, which is being added to customers' existing Optum Behavioral Health virtual network; no buy-up is required.



Members can search for a virtual visit provider using UnitedHealthcare's current online virtual network provider search on either myuhc.com® or liveandworkwell.com. Talkspace and other behavioral health virtual visit provider options will be displayed to the member.

Members looking to use Talkspace should register at <u>talkspace.com/connect</u>, which will allow them to enter their insurance information during registration. Once registered, members can:

- Easily find a therapist with an online matching tool
- Start therapy within hours of choosing a therapist
- Receive daily responses
- Schedule live video sessions (when needed)
- Download the Talkspace app via mobile phone or desktop computer

Talkspace is scheduled to launch for fully insured customers in first quarter 2021. Additional details will be provided when they become available.

Please see attached flier for additional information.

### **Total Cost of Care: Health care costs by the numbers**

When building health plan strategies, it can pay to look deeper than network discounts to help lower the total cost of care.

#### The numbers

Health care spending is rising at a rate of about 6% year over year since 2015<sup>1</sup> with the top 3 health care cost drivers being high-cost claims, specialty pharmacy costs and specific diseases. Looking closer at the rise in health care spending, 25% of health care spending is wasteful<sup>2</sup> and stems from overtreatment or delivery of low-value care.

#### The opportunity

Upfront costs are just the tip of the iceberg. Our Total Cost of Care approach may uncover hidden cost savings below the surface. Working with employers, UnitedHealthcare customizes a full suite of design, clinical and engagement strategies built to help them take advantage of cost-saving opportunities inside their organization and across their workforce.

#### The results

Savings can increase by looking beneath the surface and using a Total Cost of Care approach to evaluate all costs. See how this approach can help build a health plan with purpose.

To find out more, **download (pdf)** our Total Cost of Care infographic.

Craig Kurtzweil, UnitedHealthcare Vice President of Healthcare Economics and self-proclaimed "data guy", looks deeper at the data behind Total Cost of Care in a <u>new video</u> to provide a compelling story around the company's ability to deliver quality care at a competitive cost.

Kurtzweil details cost implications in three areas of an employer's health care benefits strategy:

Plan design

Network solutions

**Engagement strategies** 

## For more information about UnitedHealthcare's approach to managing total cost of care Contact your UnitedHealthcare Representative

Footnotes

PwC Health Research Institute medical cost trends 2007-2020. June 2019. Available: https://www.pwc.com/us/en/industries/health-industries/assets/pwc-hri-behind-the-numbers-2020.pdf. William H. Shrank, MD, MSHS; Teresa L. Rogstad, MPH; Natasha Parekh, MD, MS. "Waste in the US Health Care System: Estimated Costs and Potential for Savings." JAMA. 2019;322(15):1501-1509.

## Pharmacy Benefit Update Effective: September 1, 2020

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

We are pleased to share our PDL and pharmacy benefit updates for **September 1**, **2020** with you. Please see the attached Advantage PDL and pharmacy benefit updates for September 1, 2020. If your client is on a different PDL than Advantage, please reach out to your representative for more information.

#### **Member Notification**

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

Click here to watch the recorded webcast discussing the PDL updates.



# **UnitedHealthcare and Cancer Treatment Centers of America Establish New Agreement**

UnitedHealthcare has reached an agreement with the Cancer Treatment Centers of America (CTCA) that will bring its five hospitals, six outpatient care centers and more than 650 physicians, nurses and other clinicians into the network for our commercial members. CTCA's hospitals and outpatient centers are located in Atlanta, Philadelphia, Chicago, Tulsa and Phoenix. The 3-year agreement is effective May 15, 2020.

This agreement gives our members battling cancer new options for in-network treatment from a provider that's committed to delivering high-quality care to its patients. Founded in 1988 on a personalized, patient-centered approach to cancer care, CTCA is dedicated to tailoring a combination of cancer treatments to the needs of each individual patient.

CTCA currently participates in the American Society of Clinical Oncology's Quality Oncology Practice Initiative (QOPI). All CTCA hospitals and outpatient centers have met QOPI standards and earned QOPI certification. QOPI is a quality program designed to help outpatient oncology practices foster a culture of self-examination and improvement. Participating practices can report on over 150 evidence-based quality measures and receive individual performance scores by practice, site and provider, as well as benchmarked scores aggregated from all participating practices. Practices use this performance data to identify, develop and implement quality improvement initiatives leading to better care and better outcomes for their patients.

As part of the agreement, CTCA has committed to working with us to establish a program to monitor their performance on key quality of care metrics, including appropriate follow-up with members following chemotherapy to minimize avoidable hospitalizations and ensuring members approaching the end of their cancer battles are appropriately transitioned to hospice care. CTCA will also participate in the UnitedHealthcare Cancer Therapy Pathways Program, which promotes the use of evidence-based and cost-effective treatment regimens. More information about the program is available on www.UHCProviders.com

In addition to enhancing access to quality care, we also focused on affordability for our customers and members throughout the negotiations process. The new agreement will reimburse CTCA at market-competitive rates when compared to nationally recognized cancer centers that are part of the National Comprehensive Cancer Network as well as hospitals that provide oncology care in the five markets where CTCA hospitals are located. CTCA will be reimbursed at 100% of Medicare rates for lab and pathology services as well as most chemotherapy drugs.

## Employer eServices® (EeS) second quarter 2020 training

Eligibility, Billing and Claims Customer Training -

Employer eServices® (EeS) second quarter 2020 training webcasts for National Accounts, Public Sector and Key Accounts customers with **Select or Expanded eServices access** and **100 or more** enrolled employees is available. The schedule is as follows:

Date Time

Wednesday, June 10 2 to 3 p.m. ET Register
Tuesday, June 23 1 to 2 p.m. ET Register

Registration is required and space is limited.

As a reminder, these sessions are designed to:

Complement existing training tools such as online tutorials and help, training-on-demand and quick reference guides

Describe the eligibility functionality in full detail

Offer an overview of the site

Provide help on using the tool via the online training resource

#### To Register:

Please click on the links above or register for the webcast via the training link on the EeS website.

## **Net Promoter Score Survey**

UnitedHealthcare cannot improve, grow, or lead the industry without listening to the voice of its customers and brokers. The Employer Net Promoter Score (NPS) Survey and the annual Broker NPS Survey will be distributed to Public Sector, Key Accounts, and Small Business fully insured and self-funded (ASO) customers and brokers beginning July 8th. The surveys will remain open for completion through August 3rd. UnitedHealthcare will target nearly 80,000 customers and over 32,000 brokers nationally to participate in this NPS Survey. We encourage you to respond to this quick survey if you should receive it, and encourage your clients to respond as well.

NPS, a customer loyalty metric developed by Fred Reichheld, Bain & Company and Satmetrix in 2003, is used by many major companies around the world. The survey seeks to measure the loyalty that exists between a company and customers through one ultimate question: "How likely are you to recommend us?" Customers that are extremely likely to recommend a company are considered "Promoters;" customers that are not likely to recommend are considered "Detractors." The difference between the proportion of Promoters and Detractors in the population yields the NPS.

## **Specialty Updates**

### A vision plan that's more than an exam and eyewear benefit.

We provide numerous valuable planfeatures and network choices for employees.

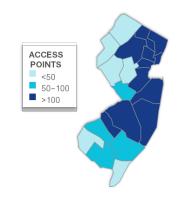
#### **Enhanced maternity and** pediatric benefits.

Vision changes during pregnancy and throughout a child's school years are common, so we've added more coverage without adding more cost.

Two eye exams are covered each plan year for mothers-to-be and children up to age 13. If their prescription changes 0.5 diopter or more, a new pair of eyeglasses are also covered. Copays apply.

#### A large, balanced network locally and nationwide.1

- 106,500 access points nationallyand growing. Our vision network has doubled in just 7 years.
- · 977 private and 1,166 retail access points in New Jersey, plus access to online providers Warby Parker and GlassesUSA.com
- · 94.8% of New Jersey members chose a network vision provider in 2019.2



48 of the top 50 vision retailers,3 with a wide variety of price points.

WARBY PARKER















**UnitedHealth Group** is invested in New Jersey.4 Employees:

4.873

Offices:

Members: 1,71M Annual community investment:

Annual financial investment:

### **Hospital Indemnity**

During these uncertain times, it's more important than ever for employees to have access to Hospital Indemnity Plans on either a voluntary or employer-paid basis.

Hospitalizations due to COVID-19 are a covered benefit under all UHC Hospital Indemnity Plans.

The UHC Benefit Assist program can ensure that all members who have UHC medical get their benefit payment as quickly as possible.

Our Artificial Intelligence (AI) is constantly sifting through the UHC/UMR Medical claims paying system.

When the system detects a Hospitalization, our Benefit Assist team is alerted and proactively reaches out to the member to help start the benefit payment process on their behalf.

To learn more today - please see the attached flyer



Contact your UnitedHealthcare Representative

## **Specialty Updates**

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 United Healthcare 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.



<sup>\*</sup>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.



### 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 August 1, 2020.

#### The guidelines:

Effective dates are January 1, 2019 – August 1, 2020.



- 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.