



## **Broker Monthly Update October 2017**

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- Medicare Creditable Coverage Final Reminder
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- CT Market to Launch Liberty Network in 2018
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## **General Updates**

### **2017 IRS Health Coverage Reporting: Form 1095-B Customer Aggregate Status Validation: EeS Updates for Prime Public Sector, Key Accounts, Small Business Fully Insured Customers**

The Affordable Care Act (ACA) mandates that health insurance issuers submit reports annually to the Internal Revenue Service (IRS) and furnish statements to subscribers to document compliance with the shared responsibility provisions. For aggregate groups, the IRS requires reports and Form 1095-B to include the Employer Identification Number (EIN) of the business entity that is the actual employer of each subscriber.

#### **New Functionality on EeS<sup>®</sup> for Identified Prime Aggregate Customers**

Employer eServices (EeS) added functionality to allow Public Sector and Key Accounts UNET, ACIS aggregate fully insured customers to select the associated subscriber EINs when entering employee eligibility data, effective March 20, 2017. This functionality will now be available for identified Prime aggregate customers, effective Sept. 25, 2017. Note no changes to Oxford or NICE employer portals will be made.

For more information regarding the new data requirement, customers may access the EeS online tutorial and associated help content. They may also contact the EeS Help Desk at 800-651-5465.

**A customer that is not an aggregate group is not impacted by this enhancement**, as only identified aggregate customers will see the new

### **Third Quarter Direct Marketing Campaign for Key Accounts, Small Business Fully Insured Customers Launching in Mid-September**

The national direct marketing campaign for third quarter 2017 is designed to generate leads for fully insured Key Accounts (7-250) and Small Business. Prospective customers will receive letters enticing them to respond to an offer for a handbook to learn more about plans, services and tools from UnitedHealthcare. They may call a specific toll-free number, visit a customized website or return a reply card to receive the handbook. They are also encouraged to call their broker. For Key Accounts prospects, a separate insert with an invitation to find out more about UnitedHealthcare Motion<sup>™</sup> is also included.

Prospective customers will receive a letter featuring the WIN-WIN theme with a business reply card in a standard #10 envelope. Prospects are asked to respond to an offer for a handbook, **“WIN-WIN Group Health Plans: Better for You, Better for Employees.”** The letter directs prospects to call a specific toll-free number or their broker, visit a customized website or return the business reply card

Messaging for the letters centers around a WIN/WIN theme: *“You (the employer) win with strategies for controlling costs and your employees win with a better experience from UnitedHealthcare.”* Prospects are directed to call a specific toll- free number or their broker, visit a customized website or return the business reply card to receive the handbook.

#### Campaign Markets

- |                      |                  |                    |
|----------------------|------------------|--------------------|
| • Alabama            | • Kentucky       | • Pennsylvania     |
| • Alaska             | • Louisiana      | • Rhode Island     |
| • Arizona            | • Maryland       | • South Carolina   |
| • Arkansas           | • Michigan       | • Tennessee        |
| • California         | • Mississippi    | • Texas            |
| • Colorado (100-250) | • Missouri (SW)  | • Utah             |
| • Connecticut        | • Nebraska       | • Virginia         |
| • Delaware           | • New Jersey     | • Washington       |
| • Florida            | • New York       | • Washington, D.C. |
| • Georgia            | (Downstate)      | • West Virginia    |
| • Illinois           | • North Carolina | • Wisconsin        |
| • Indiana            | • Ohio           | • Wyoming          |
| • Iowa               | • Oklahoma       |                    |
| • Kansas             | • Oregon         |                    |

- **Note: Oxford Small Business (7-99) markets in downstate New York and Small Business (7-50) in Connecticut and New Jersey will receive an Oxford letter with similar WIN-WIN messaging. Oxford New Jersey will also receive an additional insert.**

### **Medicare Creditable Coverage Final Reminder**

The Medicare Modernization Act mandates that certain entities offering prescription drug coverage, including employer and union group health plan sponsors, disclose to all Medicare-eligible individuals with prescription drug coverage under the plan whether such coverage is "creditable." Determining whether or not certain coverage is creditable is essential to an individual's decision whether to enroll in a Medicare Part D prescription drug plan.

If a group offers a prescription drug plan to Medicare-eligible individuals, understand that:

- Annually, UnitedHealthcare engages Optum to perform bulk testing of UnitedHealthcare's standard benefit designs to satisfy the actuarial value test of the creditable coverage determination.
- Once the plans have been tested, the [data](#) becomes available online.
- Clients must communicate their creditable or non-creditable status to their members.
- This determination is mandatory at least once a year and the deadline for completion is prior to Oct. 15.
- Clients, **not** UnitedHealthcare, send creditable coverage notices members and perform the testing review from the above link.
- Your clients can pay UnitedHealthcare to send creditable coverage notices to members on their behalf.

If the group coverage is creditable, a group elects to pursue a subsidy called the Retiree Drug Subsidy (RDS) program. Under the Patient Protection and Affordable Care Act, subsidy payment to plan sponsors became taxable starting in 2013. This optional step requires additional testing and an application process. You can apply for the subsidy by visiting <http://www.rds.cms.hhs.gov/>.

Applications for the subsidy must be submitted 90 days prior to the beginning of an RDS plan year, which can mirror a benefit plan year. For example, if a benefit plan year begins Jan. 1, 2018, and the customer wants their RDS plan year to be the same, they would apply for the subsidy by Oct. 2, 2017. If they request an extension, the Centers for Medicare & Medicaid Services (CMS) can grant an additional 30 days to complete the application

## **Product**

### **UnitedHealthcare Preventive Plan Offers New Hospital Indemnity, Real Appeal and Other Optional Plan Features for ASO Customers**

The UnitedHealthcare Preventive Plan is a limited benefit plan for self-funded (ASO) customers that provides preventive care services (immunizations, routine physicals, etc). Designed originally to help customers and members meet Minimum Essential Coverage (MEC) requirements for the Affordable Care Act (ACA), it is gaining popularity as a low-cost solution with attractive, flexible product options:

- Primarily for hourly and/or part-time employees, but can also be offered to all employee
- Preventive services covered at 100 percent using Options Preferred Provider Organization (PPO) network
- Includes myuhc.com® and Advocate4Me™ resources
- Includes new hospital indemnity coverage and Real Appeal® options

#### **Optional benefits available:**

- **Hospital Indemnity: New**
  - Specialty product paying cash for hospital admission, hospital or intensive care confinement
- **Real Appeal: New**
  - Customers can now offer this weight-loss management program to all members
- **Two sick visits and an eye exam** (Plus plan); (Up to four visits; (UMR only has two-visit option)
  - Used for condition specific treatment, specialist visits and urgent care
- **Prescription drug discount card** (not available for UMR)
  - Average savings of 44 percent at participating pharmacies; present the card for savings
- **Critical Illness Protection Plan (CIPP)**
  - Specialty product that pays lump-sum benefits to the member (or covered dependent) for specific significant medical condition
- **Accident Protection Plan (APP)**
  - Specialty product insurance that pays lump-sum benefits to the member for experiencing an injury due to an accident

**Affordable Coverage:** Available since 2014, today UnitedHealthcare has over 29,000 members across 33 customers enrolled in the product. The base solution is affordably priced, and the drug card provides discounts at 62,000 participating pharmacies.

## **Pharmacy**

### **Coupon Initiative (Applies to Specialty medications filled through BriovaRX; target market groups with CDHP, but groups with Pharmacy OOPM can opt into initiative)**

Today, manufacturer copay card dollars are being counter towards a consumers deductible and applied to their OOPM and doesn't accurately reflect what the consumer is paying. (See example in flier attached)

As of 1/1/2018, we now have a new option which our ASO groups can opt into which provide a real-time solution to NOT include copay card dollars in a consumers deductible and out of pocket maximum. The deductible and out-of-pocket maximums are the consumers responsibility under their plan benefit. (See example in flier attached)

Although the new coupon strategy is targeting groups with CDHP (deductible and out of pocket maximum on the pharmacy benefit), this strategy can also be applied to groups with lower pharmacy deductible and Out of Pocket Maximums. I have attached a few slides from our training presentation above which provides additional details on this initiative and how it impacts how claims are processed.

#### **Important Notes:**

- It only applies to Specialty Medication filled through BriovaRX
- We do have some Specialty medications that are filled through outside vendors such as Infertility medications which goes through Fertility Solutions

**Action Required: ASO Groups contact your SAE if you would like to opt into this initiative**

## **Network**

### **Vision coverage – Members will be able to buy Warby Parker Glasses in 2018**

Members enrolled in UnitedHealthcare employer-sponsored and individual vision plans can access Warby Parker's designer prescription eyewear at affordable prices, online or at any of the more than 50 stores nationwide, beginning in 2018. This marks the first time Warby Parker is accepting vision insurance, and will enable millions of people to purchase prescription eyewear for only their copay. This collaboration bolsters our already robust network which includes more than 80,000 access points for eye care and it makes it easy to purchase prescription eye wear.

Eye health is important to overall health, as studies have shown there is a connection between the health of our eyes and the health of our overall bodies. That's why UnitedHealthcare is developing new and innovative collaborations that improve access to eye care and affordable prescription eyewear for all Americans, including the nearly 20 million with UnitedHealthcare Vision plans.

This enhancement will be highlighted during the upcoming Open Enrollment season.

Article from Fortune is below:

#### **Exclusive: You'll Finally Be Able to Buy Warby Parker Glasses With Insurance in 2018**

Sy Mukherjee

September 19, 2017

*Fortune.com*

One of the hippest eyewear startups around is teaming up with America's largest health insurer—and the partnership will slash costs for millions of potential customers.

Fortune has learned that Warby Parker, the New York-based sunglass and eyeglass retailer with a decisively 21st century tech-driven "try-before-you-buy" model for its flashy frames, will begin accepting UnitedHealthcare vision insurance in 2018—a first for Warby Parker, which hasn't accepted insurance up until this point. The partnership will affect about 20 million people with UnitedHealthcare employer-sponsored and individual insurance plans that include vision coverage.

Warby Parker frames typically cost about \$90 and upward depending on the model and prescription. So just how much could you save under the new deal? "It depends on the specific co-pay a customer has under his or her plan," Warby Parker co-founder and co-CEO Dave Gilboa told Fortune in an interview. "But based on the average UnitedHealthcare co-pay, a pair of Warby Parker glasses would be about \$30 out-of-pocket with insurance."

"We look forward to working with UnitedHealthcare, nationwide, to enable millions of Americans to purchase their glasses at a fraction of the price they might pay through

traditional channels," Gilboa added in a written statement.

Warby Parker has a reputation as a quintessential millennial startup. But the company's founders have always taken vision care needs very seriously, regularly pointing out that about a billion people around the world don't have access to the kind of eyewear they need, which takes a toll on their productivity and livelihoods. "We think it's really important to expand access," Gilboa said. That's one reason the firm has a broad nonprofit initiative to provide glasses to the less fortunate.

Tom Wiffler, CEO of UnitedHealthcare Specialty Benefits, said the company is "grateful Warby Parker selected [us] to be its first in-network vision plan" in a statement. Gilboa says that Warby Parker may take insurance from more plan providers down the line.

Analysts have estimated that Warby Parker brings in annual revenue of more than \$100 million.

Click for Article: <http://fortune.com/2017/09/19/warby-parker-insurance-unitedhealthcare/>

### **CT Market to Launch Liberty Network in 2018**

We are pleased to announce that effective 1-1-18 our Oxford CT market will be launching the Liberty network. Some additional details regarding the roll out can be seen below.

- CT Liberty = CT Freedom network minus Stamford providers, there is no hospital impact!
- Currently, members enrolled on a NY/NJ Liberty plan may use CT Freedom Directory to search for INN providers
  - **As of 1/1/18, they will need to use Liberty directory for NY, NJ & CT**
- Impacted members will be notified of the change via mailing in October 2017
  - Letter will include Transitional Care information

For any additional inquiries please reach out to your UHC sales or renewal representative

### **Behavioral Providers Available in the myuhc.com Search Capability**

Effective Sept. 14, behavioral providers will be integrated with the search capability for myuhc.com®. This will replace the current behavioral search experience supported through Live and Work Well for UnitedHealthcare members. Please note that a member's ability to access a medical or behavioral directory is still dependent on their eligibility and benefits.

### **Frequently Asked Questions (FAQ):**



### **What has changed in the new redesigned experience?**

Members will be able to perform a keyword search across the medical and behavioral directories and will be able to use the guided search feature for behavioral providers within the same tool.

### **Will there still be a provider search experience on Live and Work Well? Yes.**

Users that access Live and Work Well and perform a behavioral search will be directed to a myuhc.com pre-login search. They will receive the same results that they have received historically on Live and Work Well, but within the new experience.

### **Is the provider search experience the same for both legacy myuhc.com and the redesigned myuhc.com?**

Yes

## **Wellness**

### **2018 Member Welcome Guides Now Available in Print and Electronic Version**

UnitedHealthcare's 2018 welcome guides for fully insured and self-funded (ASO) members are now available for distribution. The welcome guides are designed to:

- Welcome new members to UnitedHealthcare;
- Explain the programs and services available to members in a language that is easy to understand; and
- Act as an ongoing resource tool for members about UnitedHealthcare's programs and services.

The welcome guides communicate about the things members say matter most, based on consumer research and operations data. They address key pain points and Net Promoter Score (NPS) goals to increase member satisfaction. **Note that welcome guides should only be used for post-enrollment.** They should not be used for Open Enrollment since they do not contain any benefit information

### **Versions Available**

- **Standard Fully-Insured Welcome Guide:** The standard FI welcome guide includes information on getting started with your plan, digital tools such as myuhc.com and Health4Me, where to go for care, OptumRx, understanding claims and statements, and health and clinical programs.
- **Standard ASO Welcome Guide:** The standard ASO welcome guide does not include OptumRx pharmacy information or language about health and clinical programs.
- **Spanish Language Welcome Guides:** The standard fully insured and ASO welcome guides are also available in Spanish.
- **PCP-Centered Welcome Guides:** Primary care provider (PCP)-centered welcome guides contain specific information about choosing a PCP and how to obtain an online referral. There are fully insured and ASO versions available.
- **Harvard Pilgrim Joint Venture Welcome Guides:** Harvard Pilgrim welcome guides are co-branded and contain specific information for customers that have a Harvard Pilgrim Joint Venture plan. There are fully



insured and ASO versions available.

**NexusACO Welcome Guides:** NexusACO welcome guides feature language for choosing a PCP as well as the value of having a PCP. They focus on Tier 1 network providers and the need to obtain an online referral from the PCP, if applicable to the plan. There are fully insured and ASO versions available

## **Flu Shots**

In an effort to remind our UHC members to obtain a flu shot, automated calls are launching on Oct. 10 to members. Flu shots are available to members at their doctor's office or at most pharmacies in their community.

Members for this outreach were selected due to their age and their coverage under the majority of our services states.

In addition, members were selected due to having a diagnosis that fell under the following high-risk health conditions:

- Asthma
- Chronic lung disease, including congestive heart failure and chronic obstructive pulmonary disease
- Diabetes

We also conducted an outbound call campaign for Oxford members in September.

Finally, we are able to offer flu shots on site at employer locations (minimum 20 shots). Our locate tri-state preferred partner is HealthFitness Concepts and they can be reached at [tryhfc.com](http://tryhfc.com) or you can arrange events through your Field Account Manager.

## **October – Account Management Webinar**

In an effort to educate our mutual clients on our tools, resources, and innovative programs available at no cost, our monthly account management client webinar will be held on Wed October 18th at 10am. Invitations were released to clients (and associated broker partners) electronically. October's agenda will share enhancements on our member tools, where to go to for care, and updates on specialty.