

Medical Administration Guide

2 to 99 employees



Thank you for selecting UnitedHealthcare as your company's health benefits provider. To make the administration of benefits easy, fast and accurate for you and your employees, we provide Employer eServices®, your Web site for secure online benefit administration.

We also ask that you promote myuhc.com® to your employees. myuhc.com is an essential resource for all of your employees' health and benefit information and transaction needs.

Both Web sites help you and your employees save time, make informed decisions about health care and maximize resources – all leading to a better health care experience for everyone.

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Please note that this administration booklet is merely a guide and under no circumstances, does it take the place of your group contract. For specific legal guidelines and requirements, please refer to your group contract with UnitedHealthcare.

If you need to clarify information provided in this guide, require information not covered in this guide, or want help resolving a situation that arises, please contact us.

Contacts

Resource	Web Site / Address	Phone / Fax
Benefit Administration <ul style="list-style-type: none"> ▶ Enrollment / Eligibility* ▶ Billing information and payment ▶ Medical benefit information ▶ Pharmacy drug card services ▶ Physician / Health professional status ▶ Notification status <p>*Make eligibility changes online at www.EmployereServices.com. If you don't have access to the Internet, please fax or mail eligibility changes to us.</p>	<p>www.EmployereServices.com</p> <p>Enrollment / Eligibility address UnitedHealthcare PO Box 30964 Salt Lake City, UT 84130-0964</p> <p>Overnight mail UnitedHealthcare Prime eligibility 4050 South 500 West Salt Lake City, UT 84123</p> <p>Claims address Please mail claims to the address on the member's ID card.</p> <p>Billing address For billing address, please see your invoice remittance stub or call customer service.</p>	<p>Technical support 1-800-651-5465</p> <p>Customer service 1-888-842-4571 Fax 1-248-733-6062</p>
UnitedHealthcare Benefit ServicesSM <ul style="list-style-type: none"> ▶ COBRA Administration ▶ Flexible Spending Accounts ▶ Pre-Tax Premium 	<p>uhcservices.com</p>	<p>1-800-318-5311</p>
Member Service <ul style="list-style-type: none"> ▶ Medical claims ▶ Benefits and eligibility ▶ Care24[®] nurses and specialists ▶ Physicians and facilities ▶ Notifications of hospital admissions 	<p>myuhc.com</p>	<p>Technical support 1-877-844-4999</p> <p>Members simply call the toll-free phone number on their ID card.</p>
UnitedHealthcare Specialty BenefitsSM <ul style="list-style-type: none"> ▶ Dental ▶ Life and Disability Insurance ▶ Vision 	<p>myuhcspecialtybenefits.com</p>	<p>1-888-866-3192</p> <p>1-877-816-3596</p> <p>1-888-299-2070</p> <p>1-800-638-3120</p>
U.S. Department of Labor COBRA Hotline	<p>dol.gov/ebsa</p>	<p>1-866-444-3272</p>
Individual Conversion Unit Questions about conversion coverage		<p>1-866-747-1019</p>
UnitedHealthOneSM Offers individual and family coverage		<p>1-800-291-2632</p>

Employer eServices®

www.EmployereServices.com allows you to manage virtually every aspect of your benefits administration online and in real time, increasing efficiency and saving time and money.

- ▶ Enroll, verify or change status of employees and dependents immediately
- ▶ Enter Coordination of Benefits information
- ▶ Request medical ID cards
- ▶ View, sort, and search current and prior month's invoices
- ▶ Request adjusted invoices after adding/changing employee eligibility
- ▶ Authorize payments online; choose when to view and pay bills

If you don't have Internet access or temporarily lose Internet access, please follow the steps outlined on page 14 and refer to page one for contact information.

Setting up and managing your Web site access

When you provided your e-mail address on the employer application, you were automatically:

- ▶ Registered on the Employer eServices Web site;
- ▶ Set up to receive your invoices online, our standard billing method; and
- ▶ A Client Master Administrator (CMA) was designated from your company.

Your CMA sets up, manages and controls in real time who in your company has access to the various information and tools within Employer eServices. The CMA can:

- ▶ Create or deactivate users
- ▶ View a list of current users
- ▶ Assign or change data access levels and privileges e.g. designate your billing contact to receive the bills online
- ▶ Reset users' passwords

Your CMA should have received two e-mails from us that contain their user ID and password. They can simply go to www.EmployereServices.com, use their new ID and password to login and begin setting up company users' access. If your CMA has not received or cannot locate their ID and password, please call Employer eServices customer support at **1-800-651-5465**. If your CMA has questions, there's an easy-to-follow online tutorial on the Web site.

Online training resources to help you get started

Once your CMA has set up your employees with access to Employer eServices as appropriate, users can learn how to accomplish online benefit transactions through multiple online training resources:

- ▶ **Online tutorials:** General overview and self-starter introduction with step-by-step instructions for specific online transactions
- ▶ **Online help:** Online resource for obtaining answers to specific questions
- ▶ **Instructor-led webcasts:** Live, instructor-led webcasts offered to help guide you through the site
- ▶ **Automated webcasts:** An innovative self-service training tool that allows you to attend a webcast without pre-registering or trying to fit in a pre-determined time and day during your busy schedule. You decide when you have time to access these webcasts – anytime, any day, from anywhere.
- ▶ **Quick reference guides:** Reference cards that may be downloaded and printed for easy access to information

If users still have questions after trying the self-service online training resources, they can call Employer eServices at **1-800-651-5465**. The Employer eServices support staff are a user's best resource for help as UnitedHealthcare representatives do not have access to the Web site due to security and privacy issues.

Note: In the event that Employer eServices is unavailable due to an UnitedHealthcare outage, please refer to pages one and 14 for assistance.

Additional resources and tools

Employer eServices offers a full range of resources that make your job easier. We encourage you to explore them and learn more about how they can be tailored for your needs.

Network information

Directory: Search the online directory of physicians and other health care professionals in our network.

Network changes: Learn about network changes such as additions or terminations of a hospital, physician or other health care professional.

Network fact sheets: Find key local network information including number of covered individuals, accreditation status, reimbursement methods and much more.

Programs & Services

We're always looking for ways to enhance the value of your benefits plan. Check online frequently to learn more about new programs and services available to you.

Forms on the Web site

Here is a sampling of some of the forms that can be found on the Web site:

- ▶ Dental Claim Form
- ▶ Health Insurance Claim Form
- ▶ HIPAA Authorization for the Disclosure of Information
- ▶ Medicare Status Change Form for Enrollees and Dependents
- ▶ Prescription Drug Reimbursement Form

Group benefit plan documents online

Access, view, print or save your group benefit plan documents on your computer.

Employee communications

When you want help educating your employees about their UnitedHealthcare benefits, the **Communication Resource Center** on Employer eServices is your one-stop online resource. Click on the Communication Resource Center link and you'll find tools to help you communicate the value of UnitedHealthcare benefits to your employees.

- ▶ Build a custom newsletter in seconds, complete with your logo, a message from you, and pre-written articles that you select. Your professionally formatted newsletter is available immediately in PDF format, which you can then distribute to employees via e-mail, hard copy, or on your Intranet site.
- ▶ View and download posters, brochures, fliers, and a collection of electronic articles that you can e-mail, print, or use in company newsletters.
- ▶ Access health and wellness articles on a wide variety of important health topics, and leverage the planning tools to effectively promote workplace wellness.

The Communication Resource Center is filled with employee education materials that are easy to access, flexible to use, and completely free to you. To get there, simply log in to www.EmployeeServices.com and click the Communication Resource Center link.

Enrollment and eligibility information

Ongoing enrollment and eligibility management

Log in to www.EmployereServices.com and click on the Enrollment tab. Under this tab, you can add, terminate, reinstate, inquire or change your employees' eligibility information immediately.

Eligibility requirements

All newly hired eligible employees should be given the opportunity to apply for coverage within 31 days of date of hire or the waiting period. Please reference your group contract for your exact eligibility requirements. Please follow your own company eligibility policies for rehire and leave of absence situations.

Consistent with the effective date rules for new hires defined in your group contract, terminations of coverage are effective on the date of termination, or the first day of the month following the termination.

Effective date

New hires are effective on the date of hire, the first day of the month following the date of hire, or the first day following the completion of any designated waiting period. The waiting period is defined in your group contract. Changes on waiting periods can be made for future effective dates and only upon renewal.

If the employee is on leave and covered under the Family Medical Leave Act, the coverage begins on the date the group policy becomes effective even if he/she was on leave at that time.

Retroactive eligibility adjustments

All requests for additions, changes and terminations of eligibility must be submitted immediately or within 31 days of the effective date. The 31-day limit is used unless prohibited by state law, COBRA or by UnitedHealthcare contract. If COBRA coverage is part of a new enrollment or if terminating coverage for

a COBRA participant, notification must be received within 60 days of the effective date. There are no limitations for retroactive COBRA reinstatements that have no lapse in coverage.

Identification (ID) card

Enrollees will receive two ID cards. Each card includes basic benefit information, employee and dependent name(s), identification number(s) and important telephone number(s) and Web site addresses.

If enrollees lose their ID cards, they can go to myuhc.com and print a temporary card and also order a new replacement ID card. Employers can also request a new ID card on the enrollee's behalf at www.EmployereServices.com.

Transition of care

If new enrollees are concerned about transitioning their care from a non-network physician to a network physician, they may request and qualify for our Transition of Care program for certain health conditions. Enrollees should call the toll-free phone number on their ID card for more information.

Claims Estimator

Physicians can process online, real-time pre-determination of benefits to check if procedures they suggest for your employees will be covered and at what amount, all within seconds. Physicians can access the Claims Estimator tool on UnitedHealthcareOnline.com.

Treatment Cost Estimator

Members can receive personalized, comprehensive estimates on myuhc.com. Estimates help members understand the costs associated with their treatment options so they can make more informed choices. Both network and non-network estimates are available.

UnitedHealthcare Benefit ServicesSM

UnitedHealthcare medical plans include Flexible Savings Account, Pre-Tax Premium and COBRA administration services to employer groups with **20 to 99 employees**. These programs are designed to help you save administrative time and money.

► Flexible Spending Accounts

The Flexible Spending Account portion of Section 125 allows for employee contributions to a dedicated savings account be made on a pre-tax basis, resulting in savings to both employers and employees. Your company's total taxable payroll is reduced, directly lowering payroll-related taxes and your employees reduce their taxable income and pay less in federal, state, Social Security and Medicare taxes.

► Pre-Tax Premium

A Pre-Tax Premium plan reduces your total taxable payroll and your payroll-related taxes. Employee Pre-Tax Premium contributions are not considered taxable income under Section 125 resulting in an increase in take-home pay.*

► Continuation of coverage/COBRA

COBRA, Consolidated Omnibus Budget Reconciliation Act, allows an employee to continue on the company's health care coverage for a period of time under certain circumstances, such as termination of employment.

Federal and some state governments have mandated employers to provide certain continuation rights to employees and eligible dependents. Continuation of coverage under COBRA is available only to employees of enrolling groups that are subject to the terms of COBRA.

Any continuation rights are described in the Certificate of Coverage. It is the employer's responsibility to determine which legislation is applicable.

* Your company's legal arrangement determines whether you can pay your own premiums on a pre-tax basis.

UnitedHealthcare and its affiliated companies will not assume the obligations of an Employee Retirement Income Security Act (ERISA) Plan Administrator.

Qualifying events and termination of continuation provisions are listed in the Certificate of Coverage.

Activate your accounts

To take advantage of these services, activate your accounts at **uhcservices.com**. You will need a user name and password. If you do not have your user name and password, please contact us at **1-800-318-5311**.

Once activated, you can manage enrollment and view activities on the same Web site. Your employees can also use the site to view their FSA balance, make COBRA premium payments and file eclaims for FSA reimbursements.

Conversion/Individual coverage

At the end of the continuation period, an employee and other persons whose coverage has been continued may be eligible for conversion to an individual conversion health contract. These individuals should be **notified of the conversion option** before the end of their continuation period. Refer to your group contract to determine if conversion is offered.

Employees must exhaust any COBRA or state continuation benefits prior to conversion. Notification should come from the COBRA administrator or UnitedHealthcare depending on state regulatory laws. All employees should refer to their group contract and state law to determine when notice of their conversion rights should be sent and whether the employer or UnitedHealthcare must send the notice. If an employee or other person has questions about conversion coverage, please direct them to our Individual Conversion Unit at **1-866-747-1019**.

