

HBP PLAN INFORMATION FOR EMPLOYEES - *SELECT WHAT PERTAINS TO YOUR COVERAGE!*

Register on myuhc.com and get full access to information and tools designed to help you manage your health plan.

To register:

1. Enter the number on your health plan ID card.
— Don't have your ID card? Use your Social Security number and ZIP code.
2. Choose a username and password.
3. Enter an email address.
4. Enter a phone number or choose security questions.

For your security, we'll send a confirmation email and a letter via the U.S. mail to the name and address on file.

For help call: [1-866-414-1959](tel:1-866-414-1959) / TTY 711 for general information
[1-877-844-4999](tel:1-877-844-4999) / TTY 711 for technical issues all day, every day

MEDICAL/PHARMACY AND DENTAL ID CARDS

Always have the provider call the numbers on the back of your medical and dental ID cards to verify eligibility and benefits

Medical/pharmacy ID cards contain the name of the employee and each dependent.
Two medical/pharmacy ID cards are mailed to the home of each employee.

Dental ID cards contain the name of the employee only.

Two dental ID cards are mailed separately from the medical/pharmacy ID cards to the home of each employee.

ID cards can only be printed from UHC's website after you have been entered into the system. If you follow any of the steps below and you are not found, then you have not yet been entered into the system.

To print your ID card prior to your effective date

1. Go to <https://www.myuhc.com/member/prewelcome.do?>
2. Under Common Questions on the right-hand side of the web page click on "What if I don't have my ID card?"
3. You can proceed on-line by entering your SSN and zip code.
4. Or you can call for help at 1-877-844-4999, 8 a.m.-10 p.m. ET, Monday to Friday.

If your ID card has not arrived and it is on or after your effective date you may want to print a temporary ID card. Google Chrome seems to work much better for registering than Internet Explorer.

1. Members would need to register on myuhc.com. It will ask for your alt ID, but you can bypass that and register with your social security number and date of birth.
2. Once in myuhc.com, you can print your ID cards, medical/drug and/or dental.
3. Members that don't use the internet may call customer service at 866-633-2446, for your ID card information.

Need additional medical or dental ID cards

1. To print a temporary card or request a replacement go to www.myuhc.com.
2. Once logged in, click on "Account Settings" and then "Temporary Card."
3. On the Request ID Card page, you can print a temporary card or request that an ID card be mailed to you.
If a mailed ID is requested, UHC will send two more ID cards.
Only one request for additional ID cards can be made in a 24-hour period
4. Or from a supported smartphone, you can view, fax or email your health plan ID card.
5. Or call customer service at 866-633-2446 to request additional ID cards.

VISION ID CARDS

UHC Vision

The UHC group # is 0731474 – You may never need this number, but you have it if needed.

To print an ID card, go to www.myuhcvision.com. Click on Register Now on the left side of the page. You will not have a Subscriber ID. Enter the last 4 digits of your SSN. Complete the rest of the page. Once you have established your user name, password, and pin, you may use the website to print an ID card.

When making a vision visit without an ID card, provide your vision provider the vision plan name (UHC), your date of birth, and the last 4 digits of your SSN. The information will be used to look up your plan benefits.

VSP Vision

The VSP group # is 12163315 – You may never need this number, but you have it if needed.

Vision ID cards are not available. When you go for a visit, provide the name of your plan and the necessary social security number(s), employee and/or dependent. The provider will contact the plan to determine your benefits.

LOCATING IN-NETWORK PROVIDERS

To locate in-network Medical Providers

1. Go to www.welcometouhc.com to look for in-network providers.
2. Use the down arrow on “What do you want to do,” to choose “find a network doctor or hospital”
3. The next page asks for the plan name. Select Choice Plus.
4. On the next page, change the location if it does not display the location you want. Then you can type a specific name in the search box or search by one of the category choices.

To locate in-network Dental Providers

1. To locate in-network dental providers go to www.welcometouhc.com/openaccess.
2. On the left-hand side of this page under “What would you like to do” select Find a Network Dentist.
3. The network is National Options PPO30.
4. Choose to search by location, dentist name, or practice name.
5. Complete the necessary information and hit search.

To locate in-network UHC Vision Providers

Go to <https://www.myuhcvision.com/MWP/Landing> or call 800-839-3242.

To locate in-network VSP Vision Providers

Contact VSP Vision at 800-877-7195 or go to www.vsp.com and select VSP Signature for the network.

To Nominate Medical or Dental Providers for the UHC Network

To nominate a medical provider, send the request to HBP Marketing at hbp@callhsa.com.

To nominate a dental provider, use the “Nominate Dentist Form” on the Contact page of HBP’s website. Follow the directions on the form for completing and submitting it.

OTHER IMPORTANT INFORMATION

Virtual Visits

Virtual Visits offer 24/7 access to a doctor from a mobile device or computer to treat non-emergency medical conditions, at no additional cost to members when using one of the 3 in-network providers: AmWell, Teladoc, or Doctors on Demand. To get started with a Virtual Visit, go to www.uhc.com/virtualvisits and choose from provider sites where you can register for a Virtual Visit.

Real Appeal

Real Appeal is a weight loss program with lasting results, at no additional cost to members. To learn more visit www.realappeal.com

Complete and Return Forms

Please complete and return forms about claims as quickly as possible. Some claims automatically trigger forms to be sent to members. If the claim could be the result of an accident, an accident form will be sent to verify if coordination of benefits is required. A claim for a dependent 18 years or older may trigger a form about employment and other insurance. The first claim for each adult dependent each year may trigger a form as annual verification that other insurance is not involved is required. If a form is not returned, additional follow-up letters/forms will be automatically sent. It is critical that the forms be completed and returned as the claims cannot be processed and paid until these forms are returned.

Contact Your Employer message

When your information needs updating you may receive a message from UHC to contact your employer. This

means to contact Mercer. When you receive this message please contact Mercer at ClientServices_Billing3@mercer.com to get the needed changes made.

Prescription Drug List

The Prescription Drug List (PDL) is posted on the Plan Description page of HBP's website. It lists commonly prescribed drugs and identifies their tier levels which indicates the amount you pay. It is not intended to be a complete list of medications, and not all medications listed may be covered under your plan. Where differences are noted between this list and your benefit plan documents, the benefit plan documents will rule. Since the PDL may change, we encourage you to visit UHC's website at <https://uhc.welcometouhc.com/>. Click on benefits, go to pharmacy benefits, and midway down the pharmacy benefits page are links for all PDLs. HBP is covered under the "Access 3-tier PDL". This website is the best source for up-to-date information about the medications, possible lower-cost options, and cost comparisons. You can get information on lower cost options by using the pricing tool at www.myuhc.com or by calling customer service at 866-633-2446.

Dental Network

You may use in or out of network providers and the same benefits are paid. However, using in-network providers allows discounts in the program that saves you money. Even if you exhaust your annual benefits before the end of the year, the plan discounts still apply to additional dental charges.

Claim forms

Should you pay for a service that should be covered, please submit the appropriate claim form. The following claim forms are posted on the Notices/Forms page of HBP's website.

Medical Claim Form

UHC Vision Claim Form

Pharmacy Claim Form

International Claim Form

Dental Claim Form

VSP Vision Claim Form

EOBs

It's a good ideal to wait for your Explanation of Benefits (EOB) before paying a bill. The EOB shows the amount discounted, the amount paid and the amount you should pay.

Medicare Exception

For all housing authorities with less than 20 employees (total of full and part time) the Medicare Exception applies. Each participant in the medical plan that reaches the age of 65 must enroll in Medicare Part B in addition to Part A. Medicare will become the primary coverage and the HBP premium will be significantly reduced for this participant. Members will be contacted when this applies and walked through the steps of this process.

Life and Disability Benefits

Life and disability benefits are handled by The Standard. For long term disability (LTD) and short-term disability (STD) claims call 800-368-1135. For Life/AD&D claims call 800-628-2600. Information about conversion and portability of life policies is found on HBP's website. A death claim packet with instructions is also on the website.

COBRA

When an employee is leaving employment the housing authority submits the termination of coverage using the employee enrollment/change form. This is emailed to ClientServices_Billing3@mercer.com. Once the termination is processed at UHC, a Cobra letter will be mailed to the employee's address on file. An individual is given 60 days from date of the COBRA notification letter to elect COBRA and 45 days from the date of election to make the premium payment. Cobra coverage is retroactive to the date of termination. If Cobra is elected, the premium is sent monthly to UHC. If the employee opts for COBRA coverage after termination from HBP, the applicable medical and dental ID numbers will remain the same. The employee would use the same ID cards; new ones will not be issued. If the employee attempts to use an ID card before Cobra is in place the employee would be showing as terminated when a claim is submitted for processing. The claim will be denied. Once Cobra is in place the claim can be resubmitted. Providers may request payment upfront at the time of service if an individual is not showing active in the system if/when the provider attempts to confirm eligibility for the participant.

HBP's website – www.housingbp.com HBP's website provides more information and helpful links.