THE BENEFIT

Housing Benefits Plan (HBP) is the medical plan provided to you by your housing authority. It is directed by housing authority Executive Directors from across Southeast and Southwest NAHRO for the benefit of housing authorities.

Please share this with all of your HBP employees, retirees, and COBRA

IMPORTANT NOTICE TO MEMBERS OF HOUSING BENEFITS PLAN

You should have received an email on July 27, 2022, regarding this important enrollment, termination, and billing information. Your housing authority has one or more of the following benefits offered by Housing Benefits Plan: medical, dental, vision, life, or long term disability. Effective July 1, 2022, housing authorities that fail to pay their bill within the 60-day grace period will be terminated for non-payment. Also, enrollments and terminations cannot be processed further back than 60 days. The state of Texas is an exception. Texas law does not allow retro terminations. The employee is terminated at the end of the month in which his/her termination form is submitted.

Your billing comes from Mercer. Although email notices are usually sent when the monthly invoices are prepared, some notices are not going out. Therefore, please check the website, <u>IBA 2.0 Login</u>

(mercer.com), each month starting on the 10th. Payments are due on the 25th. It is very important that you <u>check your bill now</u> to insure that all employees and covered dependents are listed. Make sure that each member is enrolled in each coverage as applicable. For those on the medical plan, be sure each member is on the correct medical plan with the correct premium being charged. If anything is incorrect, please contact Mercer's Client Services **immediately** at ClientSer-

vices_Billing3@mercer.com. Please review your bill <u>monthly</u>, examining it carefully each time a change is made, to assure that members are correctly enrolled or terminated. <u>Any mistakes found can only be cor-</u> rected up to 60 days back, no matter when the error occurred or who made it.

Please contact Client Services at ClientServices_Billing3@mercer.com if you need help accessing the website or have any billing related questions.

Pharmacy Benefit Update Effective: September 1, 2022

UnitedHealthcare updates its Prescription Drug List (PDL) to keep pace with current market trends, price changes, and new clinical information. Impacted employees should have received letters 30-60 days prior to the effective date. Please see updates to the prescription benefits attached. Please review this in case you discarded your letter inadvertently. Members may visit <u>myuhc.com</u> to find lower-cost medications with greater health care value.

Upcoming Webinar Trainings

Tues, Sept 20, 10am (EST) Topic: Creating Passion & Motivation at Work

Tues, Oct 18, 10am (EST) **Topic:** Addressing Performance Concerns Find previous webinar recordings at https://www.housingbp.com/links-2



August 2022



VIMLY BENEFIT SOLUTIONS

As mentioned in the May newsletter, we have a new benefits enrollment and billing partner, Vimly Benefit **Solutions**. Their industry-leading benefits administration platform will deliver an improved experience for Housing Benefits Plan members. This year employees will have an active enrollment period, which means everyone will need to fill out a form - whether you want to keep the same benefits, change to a different plan, or decline benefits. As you have done in the past, you will fill out a form and hand it to your housing authority contact. More to come as we get closer to our enrollment period in November.

Housing Authority contacts will experience a more modern-day streamlined process for managing employee enrollment and billing. While the platform is built for ease of use, training will be provided for you in October. Post training, you will have a dedicated **Vimly** customer success team to assist you with additional questions and support needed. Details are coming soon.

Upcoming Conferences The Marketing Team will be attending the following conferences as a vendor and would love for you to come by our booth and say "hi". August 16-18 THA August 17-19 MAHRO August 21-24 CCHRCO August 22-24 AAHRA September 18-21 GAHRA September 25-28 KHA/TAHRA

COVID-19 Resources

Click on the link for the **most current UHC COVID-19 information**. <u>https://www.uhc.com/health-and-wellness/</u> health-topics/covid-19 Visit www.myuhc.com/covid for up-to-date plan and benefit information.

The HBP website at <u>www.housingbp.com</u> provides more information and helpful links. Questions or comments? Email us at <u>hbp@callhsa.com</u> or call 1-800-288-7623, option 5.



Updates to your prescription benefits

Effective September 1, 2022

Access 3-Tier PDL update summary

Within the Prescription Drug List (PDL), prescription drugs are grouped by tier. The tier indicates the amount you pay when you fill a prescription. Please reference the chart to the right as you review the following updates to the PDL.



Prescription drugs with new benefit coverage

The following drugs were previously not covered under most benefit plans and are now eligible for coverage.

Therapeutic Use	Medication Name	Tier Placement	Alternative Treatment Option(s)
High blood pressure	Thalitone 15 mg	Tier 3	chlorthalidone (generic Hygroton)
Mental health	Loreev XR sprinkle	Tier 3	lorazepam (generic Ativan)
Mental health	Sertraline 150 mg, 200 mg capsules	Tier 3	sertraline tablets 25 mg, 50 mg, 100 mg (generic Zoloft)



Prescription drugs excluded from benefit coverage^{1, 2}

We evaluate prescription drugs based on their total value, including how a drug works and how much it costs. When several drugs work in the same way, we may choose to exclude the higher-cost option. Effective September 1, 2022, the drugs listed below may be excluded from coverage or you may need to get a prior authorization. Sign into your online account to check which drugs your plan covers and if there are any actions you need to take.

Therapeutic Use	Medication Name	Alternative Treatment Option(s)	
Contraceptives	NuvaRing (brand only ³	etonogestrel/ethinyl estradiol vaginal ring [Eluryng (generic NuvaRing)]	
Elevated ammonia levels	Carbaglu (brand only) ⁴	carglumic tablets (generic Carbaglu) ⁴	
Eye conditions	Vuity ^{4,5}	Discuss alternative treatment options with your provider.	
Growth hormones	Skytrofa ^{4,5}	Nutropin AQ NuSpin ⁴	
High blood pressure	Bystolic	atenolol (generic Tenormin), bisoprolol (generic Zebeta), metoprolol (generic Lopressor)	
Hormone replacements	Vivelle-Dot (brand only)	estradiol transdermal patch (generic Vivelle-Dot)	
Infections	Lymepak⁵	doxycycline hyclate 100 mg (generic Morgidox, Vibramycin), doxycycline monohydrate 100 mg (generic Monodox)	
Mental health	Lybalvi⁵	aripiprazole (generic Abilify), olanzapine (generic Zyprexa), quetiapine (generic Seroquel), risperidone (generic Risperdal), ziprasidone (generic Geodon)	
Migraines	Qulipta ^{4,5}	Aimovig ⁴ , Emgality ⁴ , Nurtec ODT ⁴	
Migraines	Trudhesa nasal spray⁵	almotriptan (Axert), eletriptan (Relpax), frovatriptan (Frova), naratriptan (Amerge), rizatriptan (Maxalt/ Maxalt MLT), sumatriptan (Imitrex) nasal spray/tablets, zolmitriptan (Zomig) tablets, Zomig nasal spray	
Pain & inflammation	diclofenac potassium 25 mg tablet (generic Lofena) ⁵	OTC ibuprofen, OTC naproxen	
Pain & inflammation	Elyxyb solution ⁵	OTC ibuprofen (generic Motrin), OTC naproxen (Naprosyn), celecoxib capsules (generic Celebrex)	
Seizures	Eprontia solution ⁵	topiramate immediate-release (generic Topamax), topiramate sprinkle (generic Topamax sprinkle)	
Seizures	Qudexy XR ⁴	topiramate immediate-release (generic Topamax)	

Prescription medications with over-the-counter equivalents

Prescription medications containing the same active ingredient available in an over-the-counter product may be excluded from coverage.

Therapeutic Use	Medication Name	Alternative Treatment Option(s)	
Allergies	azelastine 0.15% nasal spray (generic Astepro)	azelastine 0.1% nasal spray (generic Astelin)	
Allergies	azelastine/fluticasone propionate nasal spray (generic Dymista)	fluticasone (generic Flonase), azelastine 0.1% (generic Astelin), OTC - Flonase, Nasacort, Rhinocort	
Allergies	Dymista	fluticasone (generic Flonase), azelastine 0.1% (generic Astelin), OTC - Flonase, Nasacort, Rhinocort	

¹ Exclusion includes brand, generic and authorized generic products unless otherwise noted. ² For benefits that do not exclude, step therapy (referred to as First Start in New Jersey) or prior authorization (sometimes referred to as precertification) may be required.

³ In accordance with HCR/ACA requirements, providers may request a zero dollar coverage exception review for preventive medications. Please access uhcprovider.com>Drug List and Pharmacy >Additional Resources>Patient Protection and Affordable Care Act \$0 Cost-share Preventive Medications Exemption Requests (Commercial members) or call the toll-free number on your member ID card.

⁴ Step therapy or prior authorization may be required prior to coverage.

⁵ Newly released medication which was excluded from coverage at the time of launch and will continue to be excluded from our benefit.

Access 3-Tier PDL clinical programs update summary

Some prescription drugs may have programs or limits that apply. Below are the changes that will be effective September 1, 2022.

MN Medical Necessity

Medical Necessity is a type of Prior Authorization that evaluates the clinical appropriateness of a medication, such as condition being treated, type of medication, frequency of use, and duration of therapy. The following medications will now require Medical Necessity for coverage.

Therapeutic Use	Medication Name
Diabetes	Fiasp ⁶
Diabetes	Levemir ⁶

⁶ Typically excluded from coverage. Prior authorization applies to groups that do not participate in the exclusion.

Nondiscrimination notice and access to communication services

UnitedHealthcare[®] and its subsidiaries do not discriminate on the basis of race, color, national origin, age, disability or sex in their health programs or activities.

If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator.

Online: UHC_Civil_Rights@uhc.com Mail: Civil Rights Coordinator UnitedHealthcare Civil Rights Grievance P.O. Box 30608 Salt Lake City, UT 84130

You must send the complaint within 60 days of your experience. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again. If you need help with your complaint, please call the toll-free phone number listed on your member ID card, TTY **711**, Monday through Friday, 8 a.m. to 8 p.m., or at the times listed in your health plan documents.

You can also file a complaint with the U.S. Dept. of Health and Human Services.

Online:	https://ocrportal.hhs.gov/ocr/portal/lobby.jsf Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html
Phone:	Toll free 1-800-368-1019 , 1-800-537-7697 (TDD)
Mail:	U.S. Dept. of Health and Human Services 200 Independence Avenue SW Room 509F, HHH Building Washington, D.C. 20201

We provide free services to help you communicate with us, including letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the toll-free phone number listed on your member ID card, TTY **711**, Monday through Friday, 8 a.m. to 8 p.m., or at the times listed in your health plan documents.

