



Your guide to understanding your 2020 plan options.

Small Business Health Options Program (SHOP) Guide 2020, Washington, D.C.

Welcome

UnitedHealthcare is bringing you this guide to help you understand the plans we offer in Washington, D.C., through the DC Health Link.

What's Inside:

- 1 | **How to choose health care coverage**
- 2 | **Compare plans**
- 3 | **What comes next?**

1 How to choose health care coverage.

See if your business is eligible.

You'll need to meet 4 requirements before buying a SHOP group health plan.

1. Principal employee worksite.

Your business must have an employee office or worksite in the District of Columbia (D.C.).

2. Number of employees.

You must have 50 or fewer full-time equivalent employees (FTEs). Get help calculating how many FTEs you have at dchealthlink.com/smallbusiness/eligibility-calculator.

3. Offer health care coverage to all full-time employees.

You'll need to offer coverage to any employee that works an average of 30 or more hours per week.

4. Valid federal employer ID.

You must have a valid federal employer identification number (EIN).

Choose coverage options.

Effective July 1, 2016, small businesses in D.C. that purchase health coverage began purchasing their coverage through the DC Health Link. You can offer your employees one plan or a choice of plans. There are 4 categories (metal levels) of plans.

	Bronze	Silver	Gold	Platinum
Monthly Premium	\$	\$\$	\$\$\$	\$\$\$\$
Copay (cost per visit/drug)	\$\$\$\$	\$\$\$	\$\$	\$
Is this plan category right for you?	Employees rarely see a doctor, and are willing to pay a higher copay when they do.	Employees want to balance monthly premium, copay and deductible costs. There are several choices in between the Bronze and Platinum plans.		Employees see doctors more often and are willing to pay higher monthly premiums to lower their copay. Platinum plans offer the most rich benefit coverage.

Choose how to offer coverage.

In D.C., you can choose one of 3 ways to offer coverage to your employees:

- 1 Choose all plans from one carrier.
- 2 Choose all plans from one metal tier across all carriers.
- 3 Choose a single plan from a single carrier.

How to choose health care coverage.



Narrow down your plan options.

To help narrow down plan options, consider what is most important to you and your employees.

Choice Plus Insurance Plans.

Broad, national access to physicians and hospitals, out-of-network coverage, no referrals needed to see a specialist.

Choice Insurance Plans.

Broad, national access to physicians and hospitals, network coverage only and no referrals needed to see a specialist.

OCI HMO Plans.

Regional access only to physicians and hospitals, network only coverage and a primary doctor to coordinate care and refer specialist services.

Core Essential Plans.

Tailored local access only to physicians and hospitals, network only coverage and no referrals needed to see a specialist.

UnitedHealthcare Navigate® HMO Plans.

Tailored local access only to physicians and hospitals, network only coverage and a primary doctor to coordinate care and refer specialist services.

Choose plan features.

With many plans to choose from, give your employees the control to pick deductible levels, health savings account (HSA) compatibility and cost-share levels that are right for them.

- UnitedHealthcare Primary Advantage® is available with a variety of plans and is designed to help encourage employees to access services through their primary care physician (PCP), while helping employers save money. With easier-to-understand benefits for employees and competitively priced plans for employers, Primary Advantage can work to everyone's advantage.
- UnitedHealthcare 20-20 plans are designed to help members obtain care at a lower cost-share when and where they need it for the services they are most likely to use. These Platinum plans include \$20 copays for Virtual Visits as well as PCP and specialist appointments, plus \$20 copays for urgent care, lab and X-rays. Coinsurance is 20% for ER, inpatient and outpatient hospital care and for all tier medications. That's a plan that's easy for members to understand.

UnitedHealthcare provides health benefits and coverage services for nearly 50 million medical members.¹

Get lower rates.

With lower rates for 2020, compare UnitedHealthcare rates to your current coverage. You might be surprised by how much you can save.

Additional considerations.

See if you qualify for a tax credit.

If you have fewer than 25 full-time equivalent employees (FTEs), you could be eligible for the small business health care tax credit worth up to 50% of your premium costs (up to 35% for nonprofit organizations). Plus, for-profit organizations could also deduct the remaining part of their premium on their taxes.

Great coverage in every plan.

These plans cover 10 essential health benefits, preventive care and pre-existing conditions.

Preventive care.

Checkups, flu shots and vaccinations.

Essential benefits.

Prescriptions, ER care and lab tests.

Easy access to care.

Your employees have access to top doctors, clinics and hospitals with all of our health plans. In fact, we screen all of our providers and facilities for care quality and cost-efficiency. If employees simply have a question or need advice, they can call the toll-free number on their health plan ID card.

Your employees can use tools to manage their health and costs.

Through online resources, the UnitedHealthcare® app and myuhc.com®, your employees have:

- Tools and programs to help manage health.
- Health care cost estimator.
- Health care provider search.
- 24/7 access to benefit information.

Virtual Visits.

- Access to health care providers for minor health issues from a computer or mobile device.*

*Data rates may apply.

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Compare plans.

Choice Plus insurance plans.

UnitedHealthcare Insurance Company.

Choice Plus offers broad, national access to physicians and hospitals, out-of-network coverage and there are no referrals needed to see a specialist.



**Members can receive services outside the network,
if they choose, without a referral**

How does it work?

Your employees have the choice to see any doctor or specialist without a referral, in or out of the network. Although the insurance coverage will pay for out-of-network services, it's important to know that employees save money when they use the network.

The Choice Plus Network.

National access to over 975,000 doctors, 6,000 hospitals and 67,000 pharmacies.²



Choice insurance plans.

UnitedHealthcare Insurance Company.

Choice offers broad, national access to physicians and hospitals with no referrals needed to see a specialist.



**Members can choose any doctor/specialist
in the network**

How does it work?

Your employees have the choice to see any doctor or specialist without a referral in the network. The insurance coverage will only pay for visits to network providers, so your employees will need to check their plan before they visit a doctor, clinic or hospital. If they see an out-of-network provider for non-emergency services, they will be responsible for all costs.

The Choice Network.

Choice insurance plans offer national access to over 975,000 doctors, 6,000 hospitals and 67,000 pharmacies.²



Compare plans.



Optimum Choice HMO plans.

Optimum Choice, Inc. (OCI)

OCI offers budget-friendly plans with a primary doctor to help coordinate care.



Members will need to choose a PCP



Members will not be covered if they receive out-of-network care

How does it work?

Your employees pick a primary care physician (PCP) to be their main doctor. Their PCP gets to know them, helps them manage their health care and refers them to specialists (if needed). The health plan will only pay for visits to network providers, so your employees will need to check their plan before they visit a doctor, clinic or hospital. If they see an out-of-network provider for non-emergency services, they will be responsible for all costs.

The OCI Network.

With almost 33,000 health care providers, 260 hospitals and 3,500 pharmacies in D.C., Delaware, Maryland, Virginia and West Virginia, the OCI network offers similar regional coverage as the Choice Plus network.³

Core Essential plans.

UnitedHealthcare of the Mid-Atlantic, Inc.

Core Essential offers budget-friendly plans with a locally tailored network and no referrals needed to see a specialist.



**Members can choose any doctor/specialist
in the network**

How does it work?

Your employees have the choice to see any doctor or specialist without a referral in the tailored network. The health plan will only pay for visits to network providers, so your employees will need to check their plan before they visit a doctor, clinic or hospital. If they see an out-of-network provider for non-emergency services, they will be responsible for all costs.

The Core Essential Network.

With nearly 11,000 health care providers and 37 area hospitals, the Core Essential network includes 75% of the physicians and 67% of hospitals in our broadest Choice Plus network in Maryland and D.C.³

Core Essential Pharmacy Coverage

New for 2020—Prescription drugs on all Core Essential plans are covered under a Prescription Drug List that features a 4 tiered design to deliver clinical value and competitive pricing. Tier 1 and Tier 2 medications have cost-share amounts that are lower than Tier 3 and Tier 4. This helps encourage members to use these more cost-effective options. Medications that aren't listed are excluded from coverage. Exclusions, while potentially disruptive, may help significantly to reduce costs. By covering only those drugs that offer both clinical value and competitive prices, we are able to provide coverage for treatment options with lower total pharmacy costs. Members who use an excluded medication have to meet criteria for review and approval for coverage.

Core Essential plans also feature a tailored pharmacy network that includes nearly 50,000 pharmacies across the United States. Major pharmacies, mass retailers and supermarkets make up a large part of the network. Popular pharmacy chains in the network include CVS, Walmart, Sam's Club, Costco and Safeway.

To locate pharmacies in the Standard Select Network visit myuhc.com. Start by selecting **Find a Pharmacy**. On the **Find a Network Pharmacy** page, you can search for pharmacies by name, ZIP code, city and state, or address. A list of pharmacies will show at the end of the page. The network participation status of each pharmacy is listed in the "Network participation" section after each pharmacy. Be sure to confirm that "Standard Select with CVS" is listed.

Compare plans.



UnitedHealthcare Navigate® HMO plans.

UnitedHealthcare of the Mid-Atlantic, Inc.

Navigate offers budget-friendly plans with a primary doctor to coordinate care.



Members will need to choose a PCP



Members will not be covered if they receive out-of-network care

How does it work?

Your employees pick a primary care physician (PCP) to be their main doctor. Their PCP gets to know them, helps them manage their health care and refers them to specialists (if needed). The health plan will only pay for visits to network providers, so your employees will need to check their plan before they visit a doctor, clinic or hospital. If they see an out-of-network provider for non-emergency services, they will be responsible for all costs.

The Navigate Network.

With nearly 11,000 health care providers and 37 area hospitals, the Navigate network includes 75% of the physicians and 67% of hospitals in our broadest Choice Plus network in Maryland and D.C.³

Navigate Pharmacy Coverage

New for 2020—Prescription drugs on all available Navigate plans are covered under a Prescription Drug List that features a 4 tiered design to deliver clinical value and competitive pricing. Tier 1 and Tier 2 medications have cost-share amounts that are lower than Tier 3 and Tier 4. This helps encourage members to use these more cost-effective options. Medications that aren't listed are excluded from coverage. Exclusions, while potentially disruptive, may help significantly to reduce costs. By covering only those drugs that offer both clinical value and competitive prices, we are able to provide coverage for treatment options with lower total pharmacy costs. Members who use an excluded medication have to meet criteria for review and approval for coverage.

Navigate plans also feature a tailored pharmacy network that includes nearly 50,000 pharmacies across the United States. Major pharmacies, mass retailers and supermarkets make up a large part of the network. Popular pharmacy chains in the network include CVS, Walmart, Sam's Club, Costco and Safeway.

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3 What comes next?

Set up.



Make sure you're eligible.

Visit DChealthlink.com



Choose coverage for your employees.*

Need help? Call us at **1-866-469-9226**.

Visit uhc.com/shopdc to compare sample policies and search providers.



Learn about tax credits.

See if you can get a tax credit at DChealthlink.com/tax-credits



Enter employee information.

Use this simple sign-up checklist. Have everything ready for every employee you're covering.

- First and last name
- Date of birth
- Social Security number
- Date of hire
- Full- or part-time status
- Email address

Please note, if you are offering dependent coverage, you will need to have this information for all covered dependents as well.

Sign up.



Employee enrollment period.

Tell employees about coverage and dates.

Let them know what's offered, and when and where to sign up.

Your employees choose the health plan that fits their needs.



Employer finalizes enrollment.

Log on to DChealthlink.com to review your employees' enrollment. Submit your application to finish signing up.



Pay the first month's premium.

Be sure to pay your bill online to start your employees' coverage. The first month's premium must be paid by the 12th day of the month prior to the coverage effective date.



Before your employees' coverage starts.

You can choose how long you'd like your employees to wait before their coverage starts. However, a waiting period cannot exceed 90 days from enrollment.

Choosing your small business health plan just got simpler.

3 easy ways to sign up:

Sign up and pay the first month's premium by the 12th to start coverage on the first of the following month.

1. **Work with us.** **1-866-469-9226**
2. **Contact your broker.**
3. **Shop on your own.** DChealthlink.com

*UnitedHealthcare policies may have exclusions or limitations or terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact your broker, consultant or UnitedHealthcare representative.



Questions?

Call us at **1-866-469-9226**.



¹ United Health Group 2017 Annual Performance Review.

² UnitedHealth Networks Internal Analysis, as of July 2019.

³ UnitedHealth Networks Internal Analysis, as of October, 2018.

All UnitedHealthcare members can access a cost estimate online or on the mobile app. None of the cost estimates are intended to be a guarantee of your costs or benefits. Your actual costs may vary. When accessing a cost estimate, please refer to the Website or Mobile application terms of use under Find Care & Costs section.

Virtual Visits and video chat with a doctor are not an insurance product, health care provider or a health plan. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times or in all locations.

Certain preventive care services are provided as specified by the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services are based on your age, gender and other health factors. UnitedHealthcare also covers other routine services that may require a copay, coinsurance or deductible.

The UnitedHealthcare® app is available for download for iPhone® or Android™. iPhone is a registered trademark of Apple, Inc. Android is a trademark of Google LLC.

Health plan coverage is provided by or through UnitedHealthcare Insurance Company, Optimum Choice, Inc., or UnitedHealthcare of the Mid-Atlantic, Inc., depending on the coverage purchased.