Making choice simpler



Small business health care plans designed to fit your budget and your employees' health care needs

Effective Jan. 1, 2027

United Healthcare® | Massachusetts Health Connector for Business

Welcome

to UnitedHealthcare Massachusetts Small Business Health Options Program (SHOP) plans

This guide is designed to help you understand the plans we offer in Massachusetts through Massachusetts Health Connector for Business.

What's inside

- How to choose coverage
- Compare plans
- What comes next?

How to choose coverage

See if your business is eligible

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

◯ Principal employee worksite

Your business must have an employee office or worksite in Massachusetts.

◯ Number of employees

You must have 50 or fewer full-time equivalent employees (FTEs).

◯ Offer health care coverage to all full-time employees

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

◯ Valid federal employer ID

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

Choose coverage options

You can offer your employees 1 plan or a choice of plans. There are 4 categories (metal levels) of plans.

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

Choose how to offer coverage

In Massachusetts, you can choose 1 of 3 ways to offer coverage to your employees:

1. Choose all Bronze, Silver, Gold or Platinum plans from 1 carrier
2. Choose all plans from 1 metal level across all carriers
3. Choose 1 single plan from 1 carrier

Narrow down your plan options

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

UnitedHealthcare Navigate® plans

Broad, national access to physicians and hospitals, no out-of-network coverage. Primary care physician selection and referrals are required to see a specialist.

UnitedHealthcare Choice plans

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

UnitedHealthcare Choice Plus plans

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

Next, 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.

Additional considerations



See if you qualify for a tax credit

If you have fewer than 25 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.



Coverage in every plan

These plans cover 10 essential benefits, preventive care services like annual wellness exams and flu vaccinations, pre-existing conditions and include prescriptions and lab services.



Easier access to care

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



Your employees can use tools to manage their health and costs

Through online resources, mobile apps and **myuhc.com®,** your employees will find:

- Apps, tools and programs to manage health
- Health care cost estimator
- Health care provider search
- 24/7 access to benefit information



24/7 Virtual Visits

Offers access to behavioral and medical health care providers from a computer or mobile device.* Employees can sign in to myuhc.com, select a participating 24/7 Virtual Visits provider, and they will pay $0 out-of-pocket when covered by either HSA and non-HSA plans.**

*Data Rates may apply.

**The Designated Virtual Visit Provider's reduced rate for a 24/7 Virtual Visit is subject to change and may apply after the deductible according to plan design. Individuals should check their benefit documents for specific coverage details.

Compare plans

UnitedHealthcare Navigate plans

UnitedHealthcare Insurance Company

Navigate offers quality health plans with a primary doctor to coordinate care.

How does it work?

Your employees pick a primary care physician (PCP) to be their main doctor. This doctor gets to know them, manages their health care and refers them to specialists (if needed). The health plan will only pay for visits to network providers with a referral from their PCP, so your employees will need to check network status and that a referral has been completed by their PCP before they visit another doctor, clinic or hospital. If they see an out-of-network provider for nonemergency services, they will be responsible for all costs.

Your employees can search for a list of network providers at **uhc.com/shopdocfind**

UnitedHealthcare Choice plans

UnitedHealthcare Insurance Company

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

How does it work?

Your employees have the choice to see any doctor or specialist in the network — without a referral. 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 nonemergency services, they will be responsible for all costs.

Your employees can search for a list of network providers at **uhc.com/shopdocfind**

UnitedHealthcare Choice Plus plans

UnitedHealthcare Insurance Company

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

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 stay in the network.

Your employees can search for a list of network providers at **uhc.com/shopdocfind**

What comes next?

Set up

◯ Make sure you're eligible

Visit **MAhealthconnector.org/business/employers.**

◯ Choose coverage for your employees*

Need help? Call Massachusetts Health Connector for Business at **1-877-623-6765** or TTY **711.** If you have specific questions for UnitedHealthcare, call us at **1-866-469-9226.**

◯ Learn about tax credits

To see if you can get a tax credit, visit **MAhealthconnector.org/business/employers/small-business-tax-credit.**

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 as the relationship to the employee.

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 **business.MAhealthconnector.org/users/sign_in** 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 the23rd 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.

*UnitedHealthcare policies have exclusions, 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.

Choosing your small business health plan just got simpler

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

3 easy ways to sign up

Work with us by calling **1-866-469-9226,** TTY **711**

Shop on your own by visiting **business.MAhealthconnector.org/users/sign_in** or by calling **1-888-813-9220**, or TTY: **711** for people who are deaf, hard of hearing or speech disabled.

Contact your broker

Plan numbers* in this document:

31779MA0100010-01
31779MA0100013-01
31779MA0010032-01
31779MA0100001-01
31779MA0100004-01
31779MA0100007-01
31779MA0100022-01

*All plan numbers include the variations of the policies such as cost-share reduction plans. For costs and complete details of the coverage, call (or write) your insurance agent or the company.

Questions?

Call **1-866-469-9226,** TTY **711** visit **uhc.com/shopMA** or contact your broker

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Employee benefits including group health plan benefits may be **taxable benefits** unless they fit into specific exception categories. Please consult with your tax specialist to determine taxability of these offerings.

Find Care and Benefits & Cost: Where available, 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. Please refer to the Website or Mobile application terms of use under Benefits & Cost to access a cost estimate, and under Find Care to search for care. Level Funded and Neighborhood Health Partnership members can access average cost data online or on the mobile app. None of the average costs are intended to be a guarantee of your costs or benefits. Your actual costs may vary. Please refer to the Website or Mobile application terms of use under Benefits & Cost to access average cost data, and under Find Care to search for care. The UnitedHealthcare plan with **Health Savings Account (HSA)** is a qualifying high deductible health plan (HDHP) that is designed to comply with IRS requirements so eligible enrollees may open a Health Savings Account (HSA) with a bank of their choice or through Optum Bank, Member FDIC. The HSA refers only and specifically to the Health Savings Account that is provided in conjunction with a particular bank, such as Optum Bank, and not to the associated HDHP. **24/7 Virtual Visits** is a service available with a Designated Virtual Network Provider via video, or audio-only where permitted under state law. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 24/7 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, or for all members. Check your benefit plan to determine if these services are available. Certain **preventive care** items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. Other routine services may be covered under your plan, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

Insurance coverage provided by or through UnitedHealthcare Insurance Company.

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