



Oxford Benefit Management

A guide to administering
UnitedHealthcare Specialty
Benefit plans



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Welcome

Thank you for selecting Oxford Benefit Management® (OBM), your packaged UnitedHealthcare Specialty Benefit plans. This guide contains important information that will help you administer your UnitedHealthcare Specialty Benefits, including:



Dental plans (non-contributory or voluntary)



Vision plans (non-contributory or voluntary)



Life plans (employee only or voluntary only)

It is important to note that OBM services will be billed and administered separately from any Oxford or UnitedHealthcare medical plan you may have.

If you have any questions, please contact Group Services at obm@ancillary-benefits.com or **1-888-200-1154**.

We appreciate your business and value our relationship with you.



Understanding your OBM administration and billing

A third-party administrator (TPA) provides certain billing and administrative services for your OBM plan.

The TPA is responsible for:

- Eligibility and enrollment functions
- Direct billing and collection of premiums
- Creation and distribution of group and member welcome kits
- Payment of commissions to brokers and general agents
- Maintaining our Online Member Maintenance tool



Monthly billing

On or around the 15th of each month, you'll receive a single invoice for all services provided through your OBM coverage. If you have any questions about your bill, please send an email to obm@ancillary-benefits.com or call Group Services at **1-888-200-1154**.

If you have Oxford¹ or UnitedHealthcare medical coverage, it's important to note that your OBM invoice is independent of your medical invoice, so separate payments for each product are required. There are 2 ways to manage and pay your OBM bill:

1 Online, using E-Bill: ww2.e-billexpress.com/ebpp/OBM/

E-Bill is a faster, easier way to access billing information and make premium payments. You will need your OBM Group Number to create an account. **Note:** E-Bill is only for your OBM Specialty Benefit plans.

2 By mail. You can send payments to:

Oxford Benefit Management

PO Box 568

West Long Branch, NJ 07764



Important

Payment is due and should be received by the first of the month to help ensure uninterrupted coverage. If your premium payment isn't received in full by the end of the month when payment is due, your policy is subject to termination. Please don't send other correspondence or materials with your payment.

Enrollment and eligibility information



Eligibility requirements

All newly hired eligible employees should be given the opportunity to apply for coverage within 31 days of the date the employee or dependent first becomes eligible. Please follow your own company eligibility policies for new hires, rehires and leave of absence situations.

Any employee and/or dependent who applies for OBM benefits more than 31 days after the date of eligibility is considered to be a late applicant. Late applicants may only be added to the plan upon your group's next open enrollment.



Evidence of insurability

If you've elected the optional life insurance product with your OBM plan, evidence of insurability isn't required.



Effective dates of coverage

Effective dates of coverage can only be on the first of the month. New employees must complete, sign and date the Member Enrollment form within 31 days from when the eligible person first becomes eligible to enroll. To get a copy of the Member Enrollment form:

- 1 Visit uhc.com/obm
- 2 Select "OBM for Employers"
- 3 The Member Enrollment form is included within the Employer Forms section near the bottom of the page

Please follow your own company eligibility policies for when a new hire will be eligible for coverage following the completion of any company-designated waiting periods.



Online Member Maintenance

You and your broker (if applicable) have the ability to perform most member transactions right from our website. You can also generate member listings at any time to show you all active OBM subscribers and members in your group.

To access Online Member Maintenance, go to uhc.com/obm, click on the "OBM for Employers" link on the right side of the page and then click on the "Online Member Maintenance" link toward the bottom of the page. Your username and password are provided in a separate letter within your group welcome package.

The first time you log in to this tool and agree to the "Online Transaction Agreement," you will be prompted to change your password and set security questions. Your "main page" is your member listing. This page displays a list of all employees in your group that have or have had OBM coverage through your group. There is an Action Column on the right side of the member names where you will find links to actions you can take for each member.

Please help ensure that all required fields are completed when performing member transactions. If you have any questions about using the tool or if you're unable to perform a transaction, please call Group Services at **1-888-200-1154**.



Requests for additions and terminations of coverage

All additions and terminations of eligibility must be made or submitted within 60 days of their effective date. For example, notification of a member termination effective on Nov. 1, 2021, must be made or received by Jan. 1, 2022.

Note: All termination requests are effective on the last business day of the month in which they are effective. We will continue to charge you for a terminated employee's coverage if you don't report the termination. If a covered employee uses services after the termination of employment and before we are notified, a premium must be paid up to and through the time in which services were used.

Additions and terminations can be made online using the Online Member Maintenance, by email at obm@ancillary-benefits.com, or by fax at **1-732-676-2655**.



Life insurance beneficiary designation

Basic employee life insurance is included with all OBM plans, except the Voluntary plan option. You are responsible for maintaining the most current employee beneficiary designations. A Beneficiary Designation form is available online at uhc.com/obm or by calling **1-888-299-2070**.

Important: Employees who are not actively at work may be at risk of losing their group life insurance coverage. The Employee Termination, Conversion Privilege and Waiver of Premium Provision of the Policy transactions should be reviewed carefully to determine what options are available when an employee is not actively at work.



Life insurance conversion privileges

Employees may convert all or part of their group term life insurance to an individual life policy when:

- 1 The employee's coverage ends as a result of termination of employment; or
- 2 The employee ceases to be eligible for the insurance; or
- 3 All or part of the group insurance amount is lost due to a reduction of insurance because of age

Written application and the first premium payment for the conversion policy must be received by the individual life insurance carrier within 31 days after the employee's life insurance terminates.

Note: If an employee is disabled before age 60, they should not request conversion, but should be kept on the existing policy until they qualify for Waiver of Premium. However, if the employee is not kept on the existing policy, the employee should be informed of the Conversion Privilege.

How to apply for a conversion policy

- 1 Employees should call Life Customer Service at **1-888-299-2070** to get a copy of the Individual Life Conversion Request for Information form; this form will let your employees get a quote for insurance
- 2 Employees may either fax the completed form to **1-800-980-0298** or mail it to:
HRMP Life Conversion Facility
5 Hutchinson Drive
Danvers, MA 01923
- 3 If an employee decides to apply for a conversion policy after receiving the quote, the Life Conversion Facility will send them the Application for Conversion form

How to access benefits online

The OBM website is the easiest way to find out more about your employee benefits.

- 1 Visit uhc.com/obm
- 2 Select “OBM for Employers”
- 3 From this page, you can find everything you need
 - Perform member level transactions through “Online Member Maintenance”
 - Add members (subscribers and dependents)
 - Change member information
 - Terminate member coverage (subscribers and dependents)
 - Use the “Helpful Links” section for convenient links to:
 - Dental service locations
 - Vision service locations

The personalized OBM member ID card

Your employees can use their personalized OBM member ID card at thousands of participating provider locations and retail locations nationwide. At the time of service — or product purchase — your employees need to present their OBM member ID card with any required payment to get the savings offered by their plan.

Front of card:

1. OBM logo
2. Employee name
3. Type of plan
4. Member ID number
5. OBM Member Services phone number
6. Website address

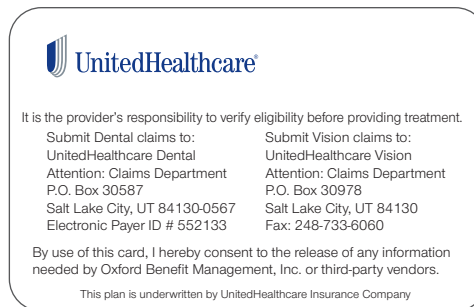
Back of card:

1. Product logo
2. Claims information
3. Disclaimer

OBM group services

If you have any questions about your OBM plan, you can call OBM Group Services at **1-888-200-1154** (8 a.m. to 5 p.m. ET) to get assistance with:

- Monthly invoices
- Renewals
- Eligibility updates
- Online Member Maintenance
- Any other questions you may have about your OBM benefits



ID card images for illustrative purposes.



¹ Oxford HMO products are underwritten by Oxford Health Plans (CT), Inc. and Oxford Health Plans (NJ), Inc. Oxford insurance products are underwritten by Oxford Health Insurance, Inc.

Legal Disclaimer: Oxford Benefit Management, Inc. acts as the distribution company for products. Oxford Benefit Management packages are not available in all states and state-specific requirements may cause limitations or variations to the plans. Packaged Savings is not available for this product. Benefit options may vary by group size. Components subject to change.

Oxford Benefit Management products are provided by: UnitedHealthcare dental coverage underwritten by UnitedHealthcare Insurance Company, located in Hartford, Connecticut, UnitedHealthcare Insurance Company of New York, located in Islandia, New York, or their affiliates. Administrative services provided by Dental Benefit Providers, Inc., DBP Services (NY only), United HealthCare Services, Inc. or their affiliates. The policies may include exclusions, limitations, reductions of benefits, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, call or write your insurance agent or the company.

UnitedHealthcare vision coverage provided by or through UnitedHealthcare Insurance Company, located in Hartford, Connecticut, UnitedHealthcare Insurance Company of New York, located in Islandia, New York, or their affiliates. Administrative services provided by Spectera, Inc., United HealthCare Services, Inc. or their affiliates. The policies may include exclusions, limitations, reductions of benefits, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, call or write your insurance agent or the company.

UnitedHealthcare Life products are provided by UnitedHealthcare Insurance Company and in New York by Unimerica Life Insurance Company of New York. Life products are provided on policy forms LASD-POL (05/03) et al. In New York, the Life Insurance product is provided on Form LASD-POL-LIFE NY (05/03). UnitedHealthcare Insurance Company is located in Hartford, CT, and Unimerica Life Insurance Company of New York in New York, NY. Participation requirements for Life Insurance may be different than those stated. These policies may include exclusions, limitations, reductions of benefits, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, call or write your insurance agent or the company.