

MEMBER SUPPORT

What is UnitedHealth Group doing to help members concerned with COVID-19?

UnitedHealthcare has a team closely monitoring COVID-19, formerly known as the Novel Coronavirus or 2019-nCoV. Our top priority is the health and well-being of the people we serve.

As with any public health issue, UnitedHealthcare will work with and follow all guidance and protocols issued by the [U.S. Centers for Disease Control and Prevention \(CDC\)](#), Food and Drug Administration (FDA), and state and local public health departments.

Does UnitedHealthcare provide any support services for those people who have been affected by the virus? Updated 3/27

While the CDC website is the best place to go to stay up to date on this still developing situation, Optum is offering a free emotional support help line for all people impacted. This help line will provide those affected access to trained mental health specialists. The company's public toll-free help line number, **866-342-6892**, will be open 24 hours a day, seven days a week for as long as necessary.

This service is free of charge and open to anyone. Trained Optum mental health specialists help people manage their stress and anxiety so they can continue to address their everyday needs. Callers may also receive referrals to community resources to help them with specific concerns, including financial and legal matters.

In addition, Optum and UnitedHealthcare members with EAP and behavioral health benefits can access ongoing resources including Critical Incident Response Services (CIRS). We recommend they access through their account-specific support numbers. Emotional-support resources and information are also available online at www.liveandworkwell.com.

Travel Assistance for UnitedHealthcare Life insurance customers (not available in NY):

The Travel Assistance Program, provided by UnitedHealthcare Global (UHCG), provides 24/7 assistance with pre-travel information, non-medical emergency services and medical emergency assistance when a member is traveling 100 miles or more away from home. This program is included at no extra cost for members enrolled in any UnitedHealthcare Life insurance plan (except in NY).

UNITEDHEALTHCARE PROPRIETARY AND CONFIDENTIAL

UnitedHealthcare's presentation materials and responses to your questions are intended to provide general information and assistance during this national emergency and do not constitute medical, legal or tax advice. Please contact your medical, legal and tax advisors on how to respond to this situation. The materials and discussion topics do not constitute a binding obligation of UnitedHealthcare with respect to any matter discussed herein. Please note, in addition to federal law, states may have additional or differing requirements.

Some of our products and networks have different features and as a result different guidelines and protocols are applicable to them. Please contact your UnitedHealthcare account representative for additional details.

For more information about these services, visit the Intelligence Center at www.members.uhcglobal.com.

What is UnitedHealthcare doing to help members with behavioral health needs during the Covid-19 emergency and what tele-mental health solutions are available? UPDATE 3/27

In order to make it easier for our members to receive appropriate treatment during this challenging time, Optum Behavioral Health is enabling providers to use popular applications for video chat or telephonic care immediately to effectively support the behavioral health needs of our members.

This means that for members or providers who do not have access to approved technology typically required to conduct a virtual visit, alternative technologies like telephone visits or video chat services – like Apple FaceTime, Facebook Messenger, Zoom, Google Hangouts or Skype – can be used immediately. This also applies to health care providers who are qualified and licensed in accordance with applicable regulations to provide ABA services. Standard cost-sharing and benefits policies will still apply.

This policy is in effect until April 30, 2020 and may be extended as necessary.

In addition, Sanvello is offering free premium access to its digital care delivery platform. This offer, available globally, makes Sanvello’s clinically validated techniques, coping tools and peer support free to anyone impacted by COVID-19 immediately for the duration of the crisis. Sanvello Health is a UnitedHealth Group company.

How can people access Sanvello free if they are impacted by COVID-19? New 3/29

Sanvello Health, Inc., a leading provider of digital and telephonic mental health solutions to individuals, businesses and payers will be providing free premium access to its digital care delivery platform.

This offer makes Sanvello’s clinically validated techniques, coping tools and peer support free for the duration of the crisis to anyone impacted by COVID-19.

To activate free premium access, anyone can download Sanvello for free from the App Store or Google Play and create an account to begin using the strategies, tools, and peer support.

Are there tools to help people understand their symptoms or find a testing site near them? New 4/6

Yes, UnitedHealthcare is committed to helping people protect their health by expanding access to care, support and resources during this unprecedented time. By going to the myuhc.com pre login

UNITEDHEALTHCARE PROPRIETARY AND CONFIDENTIAL

UnitedHealthcare’s presentation materials and responses to your questions are intended to provide general information and assistance during this national emergency and do not constitute medical, legal or tax advice. Please contact your medical, legal and tax advisors on how to respond to this situation. The materials and discussion topics do not constitute a binding obligation of UnitedHealthcare with respect to any matter discussed herein. Please note, in addition to federal law, states may have additional or differing requirements.

Some of our products and networks have different features and as a result different guidelines and protocols are applicable to them. Please contact your UnitedHealthcare account representative for additional details.

Last updated 4/7/2020

website people may use the online symptom checker to assess their risk for COVID-19 and get treatment options.

The Test Location tool helps individuals find a COVID-19 test location in their area. In most test locations they will ask for a script from a provider. Use the telehealth option to contact a provider for a script.

For members, by signing in to myuhc.com there are additional resources and care information access to member benefits.

Are there any plans to enhance the support materials available on liveandworkwell related to this crisis?

Yes - a COVID-19 portal went live on the liveandworkwell website on March 18.

If an individual is tested and the provider rules out COVID-19, does the employee need any documentation that they can provide their employer for return to work clearance?

This is a policy determined between the employer and employee.

Considering the current situation, is UnitedHealthcare delaying member communications related to preventive campaigns?

Yes. UnitedHealthcare will temporarily delay certain preventive care reminders.

Certain *HealthNotes* and *HealthNote Reminders* to members have been paused for April since many of these messages direct members to seek care for services that would be considered non-emergent in this COVID-19 era.

COBRA

Is UnitedHealthcare able to offer help to employees who are losing their health insurance coverage after being laid off? New 4/4

UnitedHealthcare offers individuals a range of individual health insurance plans. Interested individuals may contact (800) 827-9990 to speak with an advisor who can assist.

They can also visit <https://www.healthmarkets.com> to apply directly.

UNITEDHEALTHCARE PROPRIETARY AND CONFIDENTIAL

UnitedHealthcare's presentation materials and responses to your questions are intended to provide general information and assistance during this national emergency and do not constitute medical, legal or tax advice. Please contact your medical, legal and tax advisors on how to respond to this situation. The materials and discussion topics do not constitute a binding obligation of UnitedHealthcare with respect to any matter discussed herein. Please note, in addition to federal law, states may have additional or differing requirements.

Some of our products and networks have different features and as a result different guidelines and protocols are applicable to them. Please contact your UnitedHealthcare account representative for additional details.

Last updated 4/7/2020

When a job situation has changed, can the impacted member get health insurance through COBRA? **New 4/4**

A person may qualify for COBRA coverage if their job situation has changed in one of these ways:

- They lost their job, either voluntarily or by the decision of the company (for any reason except gross misconduct) and they lost your health coverage
- They had the number of hours per week they worked reduced, so they no longer were eligible for benefits and lost their health coverage

If this happens, there is a timeline they can follow:

- Within 30 days the employer notifies the plan of the change.
- Within 14 days after the employer's notice is received, the individual will receive a letter from the COBRA administrator about the COBRA¹ continuation coverage that's available to them.
- Within 60 days, the individual needs to decide whether to sign up for coverage.

How can a person get health insurance if they don't qualify for COBRA? **New 4/4**

They may be able to get coverage through the [Health Insurance Marketplace](#). It may also cost less than COBRA continuation coverage. There are special enrollment periods available if when the job situation, such as loss of job or fewer hours resulting in no benefits, has caused the person to lose coverage.

Through the Marketplace they may qualify for free or low-cost coverage from [Medicaid](#) or the [Children's Health Insurance Program \(CHIP\)](#).

The person can also compare costs to see if a short-term insurance plan would work for their needs. Standard [short term health insurance plans](#) can help fill a gap in coverage from 1 month to just under a year.²

How does COBRA coverage work? **New 4/4**

COBRA is a short-term insurance that's usually available for up to 18 months after a person's job situation has changed. (In some situations, COBRA coverage may extend beyond 18 months).

Generally, a person can get COBRA coverage if they worked for a business that employs 20 people or more. There are exceptions to this, so the person should confirm with the employer.

With COBRA, persons can continue the same coverage they had when they were employed. That includes medical, dental and vision plans. They cannot choose new coverage or change plans to a different one. For example, if a person had a medical plan and a dental plan, they can keep one or both. But they wouldn't be able to add a vision plan if it wasn't part of the plan they had before COBRA.

UNITEDHEALTHCARE PROPRIETARY AND CONFIDENTIAL

UnitedHealthcare's presentation materials and responses to your questions are intended to provide general information and assistance during this national emergency and do not constitute medical, legal or tax advice. Please contact your medical, legal and tax advisors on how to respond to this situation. The materials and discussion topics do not constitute a binding obligation of UnitedHealthcare with respect to any matter discussed herein. Please note, in addition to federal law, states may have additional or differing requirements.

Some of our products and networks have different features and as a result different guidelines and protocols are applicable to them. Please contact your UnitedHealthcare account representative for additional details.

If an employee declined COBRA coverage in the last 30 days, does this re-open their ability to elect? **New 4/5**

If a COBRA eligible member declined COBRA coverage, they will no longer be eligible. They would need to consider one of the options available for individuals, such as the [Health Insurance Marketplace](#) or a short-term duration policy.

How do I pay for COBRA? **New 4/4**

The COBRA Administrator should communicate to the person within 14 days about the COBRA¹ continuation coverage that's available. The person then has 60 days to decide whether to sign up.

Under COBRA individual are required to pay the full premium for coverage, plus an administrative fee. When employed, the employer generally pays for some of the cost of your health insurance. That means individuals are likely to pay more for COBRA coverage.

[Learn more about COBRA coverage](#)

Footnote:

1. Read more about COBRA health coverage from the United States Department of Labor at COBRA Continuation Coverage. Personal insurance is not the same as COBRA, so review your COBRA information carefully. Your time to elect COBRA is limited by law. Failure to elect and exhaust COBRA will eliminate HIPAA eligibility. You may have additional rights under state law.
2. Product design and availability vary by state. Term lengths available vary by state.

UNITEDHEALTHCARE PROPRIETARY AND CONFIDENTIAL

UnitedHealthcare's presentation materials and responses to your questions are intended to provide general information and assistance during this national emergency and do not constitute medical, legal or tax advice. Please contact your medical, legal and tax advisors on how to respond to this situation. The materials and discussion topics do not constitute a binding obligation of UnitedHealthcare with respect to any matter discussed herein. Please note, in addition to federal law, states may have additional or differing requirements.

Some of our products and networks have different features and as a result different guidelines and protocols are applicable to them. Please contact your UnitedHealthcare account representative for additional details.

Last updated 4/7/2020