2022 Annual Enrollment

October 25 – November 5, 2021
Today we’ll talk about…

- Introduction
  - What is Annual Enrollment?
  - What is new for 2022?
- Insurance options
- HSAs and FSAs
- Conclusion
Introduction

2022 Annual Enrollment
What is Annual Enrollment?

- The period of time during which faculty, staff and other eligible parties are able to make changes to their insurance plan elections*

- Generally, two weeks each fall; this year:
  - October 25 – November 5, 2021
  - for all benefit-eligible faculty, staff and retirees**

* Some changes may be made outside of Annual Enrollment if you have experienced an eligible family status change.

** Retirees are not eligible for some things discussed in this presentation, such as a pre-tax premium and some decision-making tools geared for employees’ insurance options. Retirees will receive their own decision-making guides and forms in the mail in October.
What’s new for 2022

- Minimal changes to health plan premiums
- Expanded eligibility for PPO Plan with Tiered Feature (also called Tiered PPO).
- Custom Network, PPO and Tiered PPO Plan Changes
  - Durable Medical Equipment changed to deductible and coinsurance
  - Increase prescription out-of-pocket maximums
- Increase to Healthy Savings Account (HSA) Contribution limit
- No changes to premiums or plan design for
  - Dental
  - Vision
  - Life (including spouse and dependent)
  - Accidental Death and Dismemberment
  - Long Term Disability
Medical insurance options and premiums

<table>
<thead>
<tr>
<th>Medical plan option</th>
<th>Coverage level</th>
<th>You pay in 2021 (monthly premium)</th>
<th>You will pay in 2022 (monthly premium)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Healthy Savings Plan</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Lowest premium</td>
<td>Self</td>
<td>$58</td>
<td>$58</td>
</tr>
<tr>
<td>• Combined medical and R deductible</td>
<td>Self and spouse</td>
<td>$160</td>
<td>$164</td>
</tr>
<tr>
<td>• HSA w/ University contribution</td>
<td>Self and children</td>
<td>$133</td>
<td>$141</td>
</tr>
<tr>
<td>• Broad network</td>
<td>Self and family</td>
<td>$258</td>
<td>$273</td>
</tr>
<tr>
<td><strong>Custom Network Plan (Columbia and St. Louis area)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Mid-level premium</td>
<td>Self</td>
<td>$84</td>
<td>$84</td>
</tr>
<tr>
<td>• Medical deductible; separate R deductible</td>
<td>Self and spouse</td>
<td>$232</td>
<td>$236</td>
</tr>
<tr>
<td>• Focused network</td>
<td>Self and children</td>
<td>$203</td>
<td>$212</td>
</tr>
<tr>
<td>• Columbia: MU Health providers</td>
<td>Self and family</td>
<td>$366</td>
<td>$383</td>
</tr>
<tr>
<td>• St. Louis: Mercy health providers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Other providers are considered out-of-network, even if they accept UHC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>PPO Plan (includes Tiered PPO)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Highest premium</td>
<td>Self</td>
<td>$176</td>
<td>$176</td>
</tr>
<tr>
<td>• Medical deductible; separate R deductible</td>
<td>Self and spouse</td>
<td>$417</td>
<td>$426</td>
</tr>
<tr>
<td>• Broad network</td>
<td>Self and children</td>
<td>$374</td>
<td>$391</td>
</tr>
<tr>
<td>• Tiered Feature: In-network providers are divided into categories with different price points.</td>
<td>Self and family</td>
<td>$632</td>
<td>$661</td>
</tr>
</tbody>
</table>
Expanded Eligibility for Tiered PPO Plan

- Newly available to those living and/or working in Rolla area
- Expanded eligibility to those living in Kansas City area
- Eligible counties

**Kansas City:** There are eligible counties in both Missouri and Kansas.
  - **Missouri counties:** Cass, Clay, Jackson, Johnson, Lafayette, Platte and Ray.
  - **Kansas counties:** Johnson and Wyandotte.

**Rolla:** There are eligible counties in mid-Missouri.
  - **Missouri counties:** Crawford, Dent, Gasconade, Maries, Phelps, Pulaski and Texas.
Understanding the Tiered PPO Plan

- **Tiered Feature for Facilities**
  - Utilizing free-standing facilities or the designated network may help lower costs for services.

<table>
<thead>
<tr>
<th>Service</th>
<th>At free-standing facility, ambulatory surgical center or physician’s office (designated network)</th>
<th>At outpatient hospital facility (network)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lab and x-ray</td>
<td>10% after deductible</td>
<td>20% after deductible</td>
</tr>
<tr>
<td>Outpatient care</td>
<td>10% after deductible</td>
<td>20% after deductible</td>
</tr>
<tr>
<td>Inpatient care (includes maternity delivery)</td>
<td>10% after deductible</td>
<td>20% after deductible</td>
</tr>
<tr>
<td>Durable medical equipment</td>
<td>10% after deductible</td>
<td></td>
</tr>
</tbody>
</table>
Understanding the Tiered PPO Plan

- Tiered Feature for Providers:
  - Utilizing Tier 1 Providers may help lower costs for services.

<table>
<thead>
<tr>
<th>Rating by UHC</th>
<th>Tier Includes:</th>
<th>Primary Copay</th>
<th>Specialist Copay</th>
</tr>
</thead>
</table>
| Tier 1        | • Premium care physicians  
                 • High quality  
                 • Cost effective care | $15           | $35             |
| Tier 2        | • Certain types of specialists  
                 • Unrated providers  
                 • Providers who do not meet the criteria for designation | $25           | $40             |
Understanding the Tiered PPO Plan

**Tier 1 Specialties**

<table>
<thead>
<tr>
<th>Allergy</th>
<th>Endocrinology</th>
<th>Neurosurgery, Orthopedics and Spine</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Allergy</td>
<td>• Endocrinology, Diabetes and Metabolism</td>
<td>• Back &amp; Spine Surgery</td>
</tr>
<tr>
<td>• Allergy and Immunology</td>
<td></td>
<td>• Hand Surgery</td>
</tr>
<tr>
<td><strong>Cardiology</strong></td>
<td><strong>Gastroenterology</strong></td>
<td>• Knee Surgery</td>
</tr>
<tr>
<td>• Cardiac Diagnostic</td>
<td>• Digestive Diseases</td>
<td>• Neurology Surgery</td>
</tr>
<tr>
<td>• Cardiology</td>
<td>• Gastroenterology</td>
<td>• Orthopedic Surgery</td>
</tr>
<tr>
<td>• Cardiovascular Disease</td>
<td>• Hepatology—Liver Disease</td>
<td>• Shoulder Surgery</td>
</tr>
<tr>
<td>• Clinical Cardiac Electrophysiology</td>
<td></td>
<td>• Sports Medicine</td>
</tr>
<tr>
<td>• Interventional Cardiology</td>
<td></td>
<td><strong>ENT</strong></td>
</tr>
<tr>
<td><strong>ENT</strong></td>
<td><strong>General Surgery</strong></td>
<td><strong>Oncology</strong></td>
</tr>
<tr>
<td>• Head and Neck Surgery</td>
<td>• Abdominal Surgery</td>
<td>• Oncology</td>
</tr>
<tr>
<td>• Laryngology</td>
<td>• Colon &amp; Rectal Surgery</td>
<td><strong>Pulmonology</strong></td>
</tr>
<tr>
<td>• Otolaryngology</td>
<td>• Proctology</td>
<td>• Pulmonary Medicine</td>
</tr>
<tr>
<td>• Otology</td>
<td>• Surgery</td>
<td><strong>Rheumatology</strong></td>
</tr>
<tr>
<td>• Pediatric Otolaryngology</td>
<td></td>
<td>• Rheumatology</td>
</tr>
<tr>
<td>• Rhinology</td>
<td><strong>Nephrology</strong></td>
<td><strong>Urology</strong></td>
</tr>
<tr>
<td><strong>Neurology</strong></td>
<td>• Nephrology</td>
<td>• Urology</td>
</tr>
<tr>
<td>• Neurology</td>
<td>• Neurology</td>
<td></td>
</tr>
<tr>
<td>• Neurology &amp; Psychiatry</td>
<td>• Neuromuscular Disease</td>
<td></td>
</tr>
<tr>
<td>• Neuromuscular Disease</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Provider Lookup Options

www.myuhc.com

https://www.whyuhc.com/universitymissouri
Provider Lookup Options

**Providers**

- **Andra, Kelly M, MD**
  - Internal Medicine
  - 10787 Nall Ave Ste 310
  - Overland Park, KS 66211
  - 2.2 Miles Away | Get Directions
  - (913) 945-6900 Phone
  - Premium Care Physician
  - Accepting All Patients
  - In-Network Provider

- **Abbott, Rebekah J, DO**
  - Family Practice
  - 5405 W 151st St
  - Leawood, KS 66224
  - 7.4 Miles Away | Get Directions
  - (913) 323-8830 Phone
  - Quality Care Physician
  - Accepting All Patients
  - In-Network Provider

**Facilities**

- **Ku Medwest Amb Surg Center Indian Creek**
  - Ambulatory Surgery Center
  - 10720 Nall Ave
  - Overland Park, KS 66211
  - 2.1 Miles Away | Get Directions
  - (913) 574-1900 Phone
  - Freestanding Facility
  - Accepting All Patients
  - In-Network Provider

- **Quest Diagnostics**
  - Laboratory
  - 9361 W 75th St Bldg 5
  - Overland Park, KS 66204
  - 2.6 Miles Away | Get Directions
  - (913) 236-6303 Phone
  - 711 TTY
  - Preferred Lab
  - Freestanding Facility
  - Accepting All Patients
  - In-Network Provider
Tiered PPO Plan in myHR

- If eligible, Tiered PPO will be a plan option in myHR during Annual Enrollment
  - If currently enrolled in the PPO Plan in 2021, your enrollment will automatically update to the Tiered PPO Plan
- Some faculty & staff will see both PPO and Tiered PPO options
# Side-by-side comparison of medical plans

## What you pay for in-network coverage

<table>
<thead>
<tr>
<th></th>
<th>Healthy Savings Plan</th>
<th>Custom Network Plan (Columbia &amp; St. Louis)</th>
<th>PPO Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical deductible</strong></td>
<td>$1,750/self</td>
<td>$200/self</td>
<td>$500/self; $1,500/family*</td>
</tr>
<tr>
<td></td>
<td>$3,500/family*</td>
<td>$600/family*</td>
<td>$800/self; $2,400/family*</td>
</tr>
<tr>
<td></td>
<td>(combined med. &amp; Prescription)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Prescription deductible</strong></td>
<td>Retail: $50/person</td>
<td>Retail: $75/person</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mail-order: $0/person</td>
<td>Mail-order: $0/person</td>
<td></td>
</tr>
<tr>
<td><strong>Medical plan out-of-pocket limit</strong></td>
<td>$3,500/self</td>
<td>$3,500/self</td>
<td>$3,500/self</td>
</tr>
<tr>
<td></td>
<td>$7,000/family*</td>
<td>$7,000/family*</td>
<td>$7,000/family*</td>
</tr>
<tr>
<td></td>
<td>(combined med. &amp; Prescription)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Prescription drug out-of-pocket limit</strong></td>
<td>$5,200/self</td>
<td>$5,200/self</td>
<td>$5,200/self</td>
</tr>
<tr>
<td></td>
<td>$10,400/family*</td>
<td>$10,400/family*</td>
<td>$10,400/family*</td>
</tr>
<tr>
<td><strong>Prescription drug: Retail</strong></td>
<td>▪ Formulary generic</td>
<td>▪ Greater of:</td>
<td>▪ $7 copay or 20% coinsurance</td>
</tr>
<tr>
<td></td>
<td>▪ Formulary brand</td>
<td>▪ $15 copay or 25% coinsurance</td>
<td>▪ $15 copay or 25% coinsurance</td>
</tr>
<tr>
<td></td>
<td>▪ Non-formulary brand</td>
<td>▪ $30 copay or 50% coinsurance</td>
<td>▪ $30 copay or 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td>15% after deductible</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Prescription drug: Mail</strong></td>
<td>▪ Formulary generic</td>
<td>▪ Greater of:</td>
<td>▪ $15 copay or 20% coinsurance</td>
</tr>
<tr>
<td></td>
<td>▪ Formulary brand</td>
<td>▪ $15 copay or 25% coinsurance</td>
<td>▪ $30 copay or 25% coinsurance</td>
</tr>
<tr>
<td></td>
<td>▪ Non-formulary brand</td>
<td>▪ $30 copay or 25% coinsurance</td>
<td>▪ $60 copay or 50% coinsurance</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
* "Self" and "family" are different for the Healthy Savings Plan than the other plan options.  
** 90-day fill/refill for mail orders; includes MUHC pharmacies.
## Side-by-side comparison of medical plans

### What you pay for in-network coverage

<table>
<thead>
<tr>
<th></th>
<th>Healthy Savings Plan</th>
<th>Custom Network Plan (counties near Columbia &amp; St. Louis)</th>
<th>PPO Plan</th>
<th>Tiered PPO Plan (counties near Kansas City and Rolla)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical deductible</strong></td>
<td>$1,750/self</td>
<td>$200/self</td>
<td>$800/self</td>
<td>$500/self</td>
</tr>
<tr>
<td></td>
<td>$3,500/family*</td>
<td>$600/family*</td>
<td>$2,400/family*</td>
<td>$1,500/family*</td>
</tr>
<tr>
<td><strong>Co-insurance</strong></td>
<td>15% after deductible</td>
<td>10%</td>
<td>20% after deductible</td>
<td>Designated Network: 10% coinsurance after deductible</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Network: 20% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Primary care visit</strong></td>
<td>$15 copay/visit</td>
<td>$20 copay/visit</td>
<td>Tier 1 (ใจ♥): $15 copay/visit</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(incl. Mizzou Quick Care)</td>
<td></td>
<td>Tier 2 (♥): $25 copay/visit</td>
<td></td>
</tr>
<tr>
<td><strong>Specialist office visit</strong></td>
<td>$40 copay/visit</td>
<td>$40 copay/visit</td>
<td>Tier 1 (❤️): $35 copay/visit</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Tier 2 (❤️): $40 copay/visit</td>
<td></td>
</tr>
<tr>
<td><strong>Urgent care</strong></td>
<td>$50 copay/visit</td>
<td>$50 copay/visit</td>
<td>$50 copay/visit</td>
<td></td>
</tr>
<tr>
<td><strong>Lab and x-ray</strong></td>
<td>$5 copay/basic</td>
<td>$100 copay/advanced</td>
<td>20% after deductible</td>
<td>Designated Network: 10% coinsurance after deductible</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Network: 20% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Outpatient visit</strong></td>
<td>10% co-insurance</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
<td>Designated Network: 10% coinsurance after deductible</td>
</tr>
<tr>
<td>(includes maternity delivery)</td>
<td>after deductible</td>
<td></td>
<td></td>
<td>Network: 20% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Inpatient visit</strong></td>
<td>10% co-insurance</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
<td>Designated Network: 10% coinsurance after deductible</td>
</tr>
<tr>
<td>(includes maternity delivery)</td>
<td>after deductible</td>
<td></td>
<td></td>
<td>Network: 20% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Emergency room</strong></td>
<td>$250 copay/visit</td>
<td>$250 copay/visit</td>
<td>$250 copay/visit after deductible</td>
<td></td>
</tr>
</tbody>
</table>
Virtual visits

- Lower cost than urgent care or emergency room
  - Talk to a doctor from your mobile device or computer without an appointment, any time
  - Great option when your doctor is not available or if you get sick while traveling with a non-emergency health situation

- Accessing virtual visits
  - Columbia CNP can access through MUHC’s video visits portal
  - All other plans can access through myuhc.com or the United Healthcare App

- Conditions commonly treated:
  - Cold, flu, bronchitis, pink eye, rash, sinus problems, sore throat, etc.

- Learn more at umurl.us/virtualvis
Prescription options

- **Retail Pharmacies**
  - Physical pharmacy you walk-in to.
  - Supply limited to 31 days

- **Mail-Order Pharmacy**
  - Send prescriptions directly to your home. Up to 90-day supply
  - Ideal for maintenance medications or long-term therapies
  - Receive a 90-day supply for the same cost as 60-day supply

- **Mizzou Pharmacy**
  - Treated as mail-order, meaning they are able to offer prescriptions at the same reduced, mail-order costs

- **Specialty Pharmacy Services**
  - Supplied by Accredo for all plans
  - PPO, Columbia CNP and HSP members may also use Mizzou Pharmacy
Other Benefits

- **Tuition Assistance***
  - Deadlines for requests are due mid-semester. Visit umurl.us/tuition for more.
    - Active employees: 75% of tuition/supplemental fees.
    - Spouse/dependents**: 50% tuition waived for UM System college-level credit courses up to the allotted limit.
    - Retirees: 100%

- **Employee Assistance Program**
  - Confidential, professional service provided to all faculty/staff, their families, retirees and organizational work units. Visit umurl.us/EAP for more.

- **Shared Leave Program**
  - Eligible employees can donate accrued vacation leave benefits to a pool for employees who have experienced certain catastrophic events and have exhausted other sources of paid leave. Visit umurl.us/shrdlv for more.

* Eligibility requirements apply; visit umurl/us/tuition for information on eligibility and other deadlines.
**Eligible employee must have one year of continuous full-time service in a fully benefit-eligible position before spouse/dependents are eligible
HSAs and FSAs

2022 Annual Enrollment
Health savings account (HSA)

About the account

- University contributes:
  - Employee: $400
  - Employee and Spouse: $800
  - Employee and Children: $800
  - Employee and Family: $1,200

- Use it for medical, prescription, dental and vision expenses

- Unused funds roll over from year to year

- Funds must be available prior to use

- If you’re switching from a Health FSA to an HSA in 2022, your FSA must have a zero balance by 12/31/21, or it will delay contributions to your HSA until 04/01/22.

About eligibility

- Eligibility requirements
  - Must be in a high-deductible plan
    (the Healthy Savings Plan is the University’s IRS-designated high-deductible plan)
  - Cannot be claimed as a dependent on someone else’s taxes
  - Other coverage may disqualify you

- IRS contribution limits for 2022:
  - $3,650 per individual
    ($1,000 additional catch-up for 55 or older)
  - $7,300 per family
    ($1,000 additional catch-up for 55 or older)

- If you leave, you take funds with you.
Flexible spending account (Health Care FSA)

About the account
- University does not contribute
- Use it for medical, prescription, dental and vision expenses
- Cannot roll over funds
  - 2.5 month grace period allows extra time to incur expenses through March 15 of following year
- ASI FlexCard option
- Enrollment does not automatically roll over from one plan year to the next.
  - If you wish to contribute funds in 2022, you must re-enroll during Annual Enrollment.

About eligibility
- Cannot be enrolled in the Healthy Savings Plan
- IRS contribution limits for 2022:
  - $2,750 for individual
- If you leave the university, you will no longer be eligible to participate in the FSA
  - Any remaining funds can only be used for expenses incurred prior to coverage end date

* If you have an FSA in 2021 and are changing to the Healthy Savings Plan with an HAS in 2022, your 2021 FSA must have a zero balance by December 31. A balance of any other amount will prevent you and the university from contributing to your HSA until April 1.
Flexible spending account (Dependent Care FSA)

About the account
- Use it for out-of-pocket childcare and/or elder care dependent expenses
- Funds must be available prior to use.
- Cannot roll over funds
  - 2.5 month grace period allows extra time to incur expenses through March 15 of following year
- Enrollment does not automatically roll over from one plan year to the next.
  - If you wish to contribute funds in 2022, you must re-enroll during Annual Enrollment.

About eligibility
- Any benefit eligible employee may enroll in a Dependent Care FSA, even those enrolled in the Healthy Savings Plan
- IRS contribution limits for 2022:
  - $5,000 for family
CONCLUSION

2022 Annual Enrollment
Confirmation emails and statements

- When you submit your enrollment in myHR, an email confirmation will be sent to your university email account.
  - If you don’t receive an email, you have not completed your enrollment.

- Confirmation statements will be available in myHR in mid-December.
  - The confirmation statement contains a summary report of your enrollments.
  - An email will be sent to your university email account once your confirmation statement is ready to be viewed and printed in myHR.
Evidence of insurability: Life and LTD plans

- Evidence of Insurability will be required for any increases to coverage during the Annual Enrollment Period.

- If coverage is elected that requires evidence of insurability:
  - Unum will email your University of Missouri account with a link to your personalized Evidence of Insurability application in early December 2021.
    - The Email will come from TheUnumClientServiceCenter@unum.com and the subject line will read: 'Your Recent Insurance Election - Action requested'.
  - If approved, coverage will become effective January 1, 2022, or upon approval by Unum if after January 1.
Proof of Relationship Requirement

- Proof of Relationship must be provided for any new dependents enrolled.
  - After Annual Enrollment ends, faculty and staff have 31 days to provide required documentation.
  - If documentation is not submitted by December 6, 2021, dependent(s) will be removed from coverage.

- Accepted documentation can be found at: http://umurl.us/proof
Insurance-related notices

- Notices will be made available during the enrollment process in myHR, they are also always available at umurl.us/notices
  - Women’s Health and Cancer Rights Act of 1998
  - Your Right to Receive A Notice of Privacy Practices
  - Notice to Employees of Coverage Options
  - Premium Assistance under Medicaid and the Children’s Health Insurance Program (CHIP)
  - Medicare Modernization Act (MMA)
  - Newborns’ and Mothers’ Health Protection Act of 1996
There’s help!

- Our university benefits website has many of the answers you’re looking for. Regularly check the Annual Enrollment webpage at: umurl.us/enrollment
  - Updates will always appear there
  - Schedule one-on-one meetings with your campus HR Generalist

- Contact your local HR Generalist or call the HR Service Center at (573) 882-2146 or (800) 488-5288

- UnitedHealthcare has tools available to help
  - Visit the Annual Enrollment webpage for a list

Remember to review and make changes between October 25 and November 5!
University of Missouri System
COLUMBIA | KANSAS CITY | ROLLA | ST.LOUIS

Visit umurl.us/benefits for more

HR Service Center
umurl.us/hrsc
(573) 882-2146
hrsservicecenter@umsystem.edu
About focused/narrow networks

- A narrow network offers a smaller pool of in-network providers in exchange for decreased premium or service costs.
- The narrow network of providers for the Custom Network Plan in Columbia and St. Louis are different.
- You only have in-network access to providers associated with the plan in which you enroll.
  - Enrolling in the Columbia CNP makes Columbia’s narrow network available.
    - Primarily providers affiliated with University of Missouri Health Care.
  - Enrolling in the St. Louis CNP makes St. Louis’s narrow network available.
    - Primarily providers affiliated with Mercy Health System.
- Visiting providers outside the narrow network will be billed at the out-of-network rate, even if they otherwise accept UnitedHealthcare.
Coverage for COVID-19

- UnitedHealthcare offers a number of resources:
  - Online symptom checker
  - Access to telehealth and virtual visits
  - Emotional support resources
  - And more

- If diagnosed, care or treatment for COVID-19 will be covered in accordance with your health benefit plan.
  - Copays, coinsurance, and deductibles will apply after the National Emergency ends (October 22, 2021, unless otherwise extended)

- Additional information is outlined in HR Policy Manual HR-702.
  - Full HR Policy Manual is available on the UM System website