

# 2025 CA 1-100 UnitedHealthcare Fully Insured

Choice Simplified = One Package (mix/match any or all plans across any available network)

Online Portal = [www.uhceservices.com](http://www.uhceservices.com)

## Underwriting Highlights

- Participation:**  
25% participation for groups of 5+ enrolled or more  
60% participation for groups 1-4 enrolled employees
- Staff Model Wrap PROMO 10/1/24 – 7/1/25:** 2 staff model carriers permitted –need 5 enrolled with UHC with 25% participation between UHC & 2 staff model carrier(s). **No CA minimum required. 51% CA eligibles required.**
  - Note: May not write alongside CalChoice or Covered California
  - Kaiser composite rates: We will now sell UnitedHealthcare Small Group plan alongside Kaiser composite rates
- Employer contribution:** At least 50% of EE premium or a minimum of \$100 dollars of EE premium
- Groups with 3 or more enrolled employees** can submit participation certification form in lieu of DE9-C
- Start-Up groups:** require 2-weeks of payroll; group needs to be in business 6 weeks prior to effective date; all other guidelines apply
- OOS guidelines:** UHC can write groups *without* 51% eligible employees in CA. Situs state is based on majority of enrolling employees. Multi-Site Guidelines apply (no more than 25% of the group can be in Vermont)
- SAMx Group submissions** 1-2 "eligible" employees require electronic payment (EFT); binder check is not an option. *Also applies to groups of 3+ eligible with only 1 enrolling employee!*
- Owner-Only groups:** C & S-corps and LLC groups permitted\* (*non-spouse related*) - with at least two owners (non-spouses) and have at least one enrolling owner actively working the minimum required hours

**NOTE:** UHC will no longer write or renew groups that have only the Owner enrolling while their common-law employee(s) are waiving coverage. These groups will be required to have at least one eligible enrolled common law employee (w2) (*non-spouse*)

- Cigna + Oscar:** Relaxed UW promo including Kaiser wrap groups and OOS EEs through Dec 2025 effective dates. Contact local AE for full details.

## Renewal Highlights

- Risk management:** Effective 8/1/23, only small groups with less than 3 enrolled employees (micro groups) will be subject to recertification. Groups of 3 or more enrolled employees will be excluded from the automated selection process and only subject to recertification on a case-by-case bases

## Product Highlights

**Virtual Office Visits** – included in all plans; with AmWell, Doctors on Demand, and TelaDoc visits. \$0 member cost share *excluding HDHP members*.

### Pharmacy Info:

- Broad Network For All Plans** - includes all UHC contracted pharmacies
- Specialty Medication Cost Share (SMCS)** – specialty Rx cost share tiers; designated Optum Specialty Pharmacy
- Vital Medications program** – No cost to members (*Insulin, Glucagon, Albuterol, Epinephrine, etc.*)

**Chiro/Acu** - included in all HMO & PPO plans (*excluding HMO state-package*)

**EAP** – PPO enrollees only; 3 free counseling sessions per incident, per year

**Optional Infertility benefit:** PPO 4.9% ; HMO 3.4%

**Prior authorization requirement:** UHC reduced PA requirements starting Sept. 2023

## Wellness / Rewards / Care-Cash

**UHC Rewards Program** – Enrolled EE & Spouses can earn up to:

- Core up to \$300 max (All PPO & HMO plans)
- Premium up to \$1,000 max (All PPO HSA plans, Bronze 5500 & Bronze 7500)
- Electronic visa gift card; reward \$ can be used for any expenses not just medical

**CareCash** – Available on 7 PPO Choice Simplified plans

- Preloaded debit card: PCP, Virtual visits, Urgent Care & Behavioral Health, Minor Diagnostic Lab Services for In-Network
- \$200 EE only coverage; \$500 family coverage (*non-taxable*)

**One Pass Select**- subscription based fitness network of gyms and studios. 4 packages to choose from.

*Enrolled EE, Spouse, & Dependents 18+ are eligible to participate*

**Quit For Life** – Smoking cessation program to help members quit smoking for good. Free online courses, quit coaching support, online support and mobile app.

## Quarterly Rate Action

- 2025 Q1**
  - North CA: PPO 0.3%, HMO -2.4%
  - South CA: PPO 0.5%, HMO -2.4%

## Networks

**Select Plus** = Full PPO national network

**Core** = Narrow PPO national network (*excluding Idaho ee's*)

**Signature** = Full HMO

**Alliance** = High Performance Narrow HMO

Fresno, Kern, Kings, LA, Madera, Orange, Riverside, San Bernardino, San Diego, San Luis Obispo and Ventura Counties

**Harmony** = Simplified Narrow HMO

Los Angeles, Orange, Riverside, San Bernardino, and San Diego Counties (*based on zip code availability, some partial counties!*)

## Specialty

**Activate The Savings** – earn a one-time credit up to \$5,000 when you add dental plus an additional line of specialty to your medical offering [For Effective Dates 6/1/24 – 1/1/25].

*Note: Life requires 25K to qualify. 10+ subscribers required on each line of specialty*

**Package Savings 2-100** – bundle medical, dental, vision, life, LTD (*Excludes Voluntary plans*). **PEPM Credits off enrolled medical employees**

- Dental \$3; Vision \$2; Life \$1 or Life&LTD \$2**

**Quick Facts:**

Vision: *Voluntary = 2 eligible, only 1 to enroll!*

Dental: *Voluntary = 2 eligible, min 2 enrolling*

Vision & Dental: *Contributory = Min 50% part. of total eligible*

Dental Ortho plans: *5 eligible with 3 enrolling*

Dental Dual option PPO/PPO: *10 enrolling*

Dental Dual option HMO/PPO: *5 eligible with 3 enrolling*



# 2025 CA 5-100 UnitedHealthcare Level Funded POS + EPO + Gatekeeper

## Underwriting Highlights

**Participation:** 50% of all eligible must participate

ERISA eligible and compliant groups only

**Employer contribution:** At least 50% of EE premium

**Group size:** 5 enrolled -100 eligible

**Maximum plans available:** 15

**PEPM:** Default \$55 (negotiable)

**OOS guidelines:** Plurality rules applies – Greatest number of enrollees must live or work in the state where company is physically located.

**Kaiser wrap guidelines:** Minimum of 10 employees; 50% of eligible employee must enroll under UnitedHealthcare Level Funded.

**Individual Stop Loss:** Minimum \$75K up to \$100K

**Aggregate Stop Loss:** 125% of expected claims

### 12/60 Stop Loss:

- No lasering
- No carry over deficit
- Stop Loss policy is incurred vs paid claims

### Surplus:

- Possible surplus refund when actual claims cost are less than maximum claims liability.
- Group must be active month 15 to be eligible.
- Reconciliation occurs month 16.
- 50% surplus refunded (minus IBNR) as a credit on invoice month 17 or 18.

**IBNR:** 100% refund of unused IBNR after claims run out period; month 61 (group does not have to be active to receive IBNR refund)

- For Jan & Feb 2025 effective dates.

**Monthly reports:** Excess Loss Summary, Rx Utilization, Provider Utilization, Claim Activity report and much more.



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## Underwriting Highlights Additional Value Adds Included with all Level Funded Medical Plans:

**HealthiestYou Virtual Visits available to non-HSA members at \$0 cost share; and a \$45 cost share to HSA members**

*(HSA member copay applies until plan deductible is satisfied)*

Virtual Visits include:

- 24/7 Doctor Visits., Mental Health, Back Care, and Dermatology

HealthiestYou Virtual visits are available to non-covered dependents living in the covered members household; added through HealthiestYou App.

*\$45 copay applies to HSA members non-covered household dependents.*

Covered members have access to Expert Medical Services offering **Second opinion expert medical advice**

Other virtual visit provider groups available to level funded members through myuhc.com include, Amwell, Doctors on Demand, and Teledoc Health

**UHC Premium Rewards:** Participants track daily activities designed to help them move more and take healthy actions, with the potential of getting rewarded up to \$1,000.

**Real Appeal:** Virtual weight management program with personalized support.

**Package Savings:** Bundle medical, dental, vision, life, LTD group can receive administrative credits per enrolled medical employee.

**uBundle:** Up to 4% off medical by adding specialty 5-100

## Network Options

**Choice Plus / Choice (EPO)** = Full PPO  
Network

**Select Plus / Select (EPO)** = Full PPO  
Network

**Core / Core Essential (EPO)** = Narrow PPO  
Network

**Formulary** = Choose 1 option (applies to all plans offered):  
Advantage 4 Tier PDL -OR- Essential PDL 4 Tier PDL