



*Serving Employees and Retirees of School Districts in Smithtown, South Country, Three Village*

## Fall Bulletin 2021

**Notice:** Group health plans sponsored by State and local governmental employers must generally comply with Federal law requirements in title XXVII of the Public Health Service Act. However, these employers are permitted to elect to exempt a plan from the requirements listed below for any part of the plan that is "self-funded" by the employer, rather than provided through a health insurance policy. The Suffolk School Employees Health Plan has elected to exempt Suffolk School Employees Health Plan from the following requirements: Protections against having benefits for mental health and substance use disorders be subject to more restrictions than apply to medical and surgical benefits covered by the Plan. The exemption from these Federal requirements will be in effect for the plan year beginning on January 1, 2022 and ending on December 31, 2022. The election may be renewed for subsequent plan years. Please be advised, this notice should not be construed as meaning that mental health and substance use disorders are not covered by the Suffolk School Employees Health Plan. Please review the Summary Plan Description regarding the extent to which coverage is provided.

### **Maximum Out of Pocket Change**

Effective January 1, 2022 keeping in alignment with the Affordable Care Act, the Suffolk School Employees Health Plan Commercial Plan Maximum Out of Pocket amounts will be changed.

The new Maximum Out of Pocket amounts will be,

Individual: \$8,700

Family: \$17,400

### **Fertility Pharmacy Coverage Change**

Effective January 1, 2022 The Board of Trustees of Suffolk School Employees Health Plan have decided to add coverage for Injectable fertility medication therapies. This new pharmacy coverage is in addition to the oral medication therapies currently in place. Fertility medication therapies will be covered up to a \$15,000 per lifetime benefit maximum.

### **Covid-19 Testing**

**Is COVID-19 testing for surveillance or employment purposes required to be covered under section 6001 of the FFCRA?**

**No.** Section 6001 of the FFCRA requires coverage of items and services only for diagnostic purposes as outlined in this guidance. Clinical decisions about testing are made by the individual's attending

health care provider and may include testing of individuals with signs or symptoms compatible with COVID-19, as well as asymptomatic individuals with known or suspected recent exposure to SARS-CoV-2, that is determined to be medically appropriate by the individual's health care provider, consulting CDC guidelines as appropriate.

However, testing conducted to screen for general workplace health and safety (such as employee "return to work" programs), for public health surveillance for SARS-CoV-2, or for any other purpose not primarily intended for individualized diagnosis or treatment of COVID-19 or another health condition is beyond the scope of section 6001 of the FFCRA.

<https://www.cms.gov/files/document/FFCRA-Part-43-FAQs.pdf>

UnitedHealthcare will cover testing for employment, education, public health, or surveillance purposes when required by applicable law. Benefits will be adjudicated in accordance with a member's benefit plan and health benefit plans generally do not cover testing for pre-travel screening, surveillance, or public health purposes. We continue to monitor regulatory developments during emergency periods.

The Plan reserves the right to pursue legal action against a covered individual suspected of fraud, deception, false statements of a material fact, or accepting benefits for himself, herself, or a dependent knowing he/she or such dependent was not entitled to such benefits. Reimbursement to the Plan by a

covered individual of benefits obtained improperly fraudulently, or by deceit, shall not waive the right of the Plan to pursue legal action against said individual.

### **Digital vaccine pass now available on myuhc.com; UnitedHealthcare app availability targeted for November**

As of Sept. 21 on myuhc.com<sup>®</sup>, UnitedHealthcare will provide a sharable vaccine pass for members that is based on known health care information sources and rules governing the normal exchange of information. The pass is created as a quick response (QR) code or a PDF containing members' verified information. The vaccine pass will allow members to generate a QR code if they have at least one verifiable COVID-19 vaccine dosage.

The vaccine pass is available to most vaccinated members and may be activated once UnitedHealthcare verifies vaccine status, whether a member is fully or partially vaccinated. The digital vaccine pass was designed to confirm the member's vaccination while protecting data privacy.

### **ID Card Changes for 2022**

As part of the federal Consolidations Appropriations Act, beginning on January 1, 2022 the ID Card must include:

1. Plan deductibles for network and out-of-network deductible amounts.
2. Maximum limits on out-of-pocket costs including network and out-of-network limits, as applicable.
3. Phone number and web address for a member to get assistance including help to find a network provider.

New ID cards will not be mailed but will be made available on myuhc.com or the United Healthcare App.

### **Find quality, cost-efficient care.**

Studies show that people who actively engage in their health care decisions have fewer hospitalizations, fewer emergency visits, higher utilization of preventive care and overall lower medical costs.

Take an active part in your health by seeking out and choosing physicians, with the help of the UnitedHealth Premium program. The Premium designation makes it easy for you to find doctors who meet national standards for quality and local market benchmarks for cost efficiency. Choose with confidence. The UnitedHealth Premium program evaluates physicians in various specialties using evidence-based medicine and national standardized measures to help you locate quality and cost-efficient doctors. It's easy to find a UnitedHealth Premium Care Physician. Just go to myuhc.com® > Find a Provider. Choose smart. Look for the Tier 1 designation. Reminder your copay is \$25

for a tier 1 specialist and \$50 for a UHC non designated specialist.

### **Preferred Labs**

With the Preferred Lab benefit, you can visit any outpatient facility designated as a Preferred Lab. They meet higher quality standards and reduce your total cost of care. You will receive services at zero cost share compared to a \$25 copay for a non-preferred free-standing facility and a \$50 copay for a hospital-based center.

### **How to find a Preferred Lab.**

- 1 Visit myuhc.com
- 2 Click on care and costs OR find a doctor
- 3 click on Places
- 4 click on Labs, Imaging and Screenings
- 5 click on Lab Locations
- 6 click on Preferred Labs

Choose a facility with the "Preferred Lab" icon to help eliminate your out-of-pocket costs.

You can also find a lab by calling the member phone number on your health plan ID card.