

Retiree Webinar Q&As- October 2022:

1. Definition of vision eyewear. Limits of cost?
*\$130 glasses allowance every 12 months
(changed for 2023)
\$175 allowance for contacts*
2. What is covered on emergency room visits?
\$90 copay is charged for the visit, plus any other services where a copay is charged
3. What does Medicare pay for health?
The only services that are paid by Medicare is Hospice Care. All other services are paid by UHC.
4. Definition of part B drugs
Drugs administered by your provider or at a dialysis facility, Non self-administered drugs.
5. What coverage is there for a home care worker?
Services required by employment are not covered.
6. What does lesser of mean if drug cost is \$9,000 month?
Once the individual meets the Rx Catastrophic Stage, the member will pay the LESSER of 5% or the Catastrophic Copays
7. Podiatry – specialty shoes – do you have to be a diabetic? What if you are not diabetic?
Refer to language in UHC Plan Guide for details on podiatry services.
8. Can you explain what the eye glass coverage is today? Versus the change next year?
*Routine Eye Exam \$0 (changed for 2023)
\$130 glasses allowance every 12 months
(changed for 2023)
\$175 allowance for contacts*
9. Can a spouse enroll for dental if the primary insured doesn't enroll?
The Retiree must be covered in order for a spouse to be covered under dental.
10. Is today's seminar available for viewing later at the conference website?
Yes, it will be posted at the GNJ website.
11. How do drug charges compare to GoodRX?
You may utilize Good Rx in place of your OptumRx coverage, however those expenses will not apply to your Rx Catastrophic coverage.
12. Would you tell me the coverage of hospice by the Medicare?
Generally 100% of core Hospice expenses. Refer to UHC Plan Guide.
13. Can we use a doctor who does not accept Medicare?
*You will want to utilize a doctor who accepts Medicare, particularly if they do not participate with UHC.
We cannot require that a doctor accept our plan, even if they accept Medicare.*
14. How are lab costs handled?
A \$20 copay is charged for lab services. This may be in addition to an office visit copay.
15. I live a distance from the providers, and recently more and more are telling me they do not accept my insurance. I cannot afford to go to the city. Are you saying I should go back to my local doctors and ask them to accept my insurance?
You may utilize a provider that does not participate with UHC as long as they are willing to accept and bill our plan. Please provide the details surrounding the area with the MRC and we will make outreach to those doctors.
16. I am in a similar situation in terms of living in a rural setting and have had difficulty finding doctors. When I tried to find a specialty provider in my area from the United Healthcare's website, the vast majority of

the doctors it named were not in fact in the specialty. I registered a complaint, but if the conference could do as well that would be helpful.

Please provide the details surrounding the area with the MRC and we will make outreach to those doctors.

17. Would "durable medical equipment" include cpap machines and supplies as well?

Yes. DME refers to all hardware a patient may need to treat their healthcare issues. I.e. walkers, beds, crutches, etc.

18. We tried Optum Rx and had issues getting necessary drugs on time. Will this be addressed? We used Optum and then went back to our local pharmacy after repeated errors, missed shipments, etc-

Please provide the details surrounding the prescriptions with the MRC and we will make outreach to OptumRx.

19. Are there any "surprise" uncovered expenses... for example, if I go to hospital for emergency care but hospital is not in network, are all expenses covered (less co-pays)...or if a ER doctor is not in plan, or anesthesiologist...

Covered members are charged copays for each service as the plan is billed. If you have an office visit with a primary doctor and the office also does lab work, you will be charged separate copays for the office visit and lab work. For Emergency services, you will want to go to the nearest emergency room or call 911. If you are balanced billed by an ER provider, you should contact UHC for assistance.

20. Eye exam means eye sight checkup for prescription or eye health?

This represents your routine eye exam, not a medical exam.

21. Our dentist takes Delta Premier. Is that a Delta PPO.?

It is not. However our plan allows you to go outside of the Delta PPO network for care.

22. How many cleanings per year are included in the preventive coverage per year? Are fillings included in basic services?

Two cleanings per year / Fillings are Basic services.

23. Once federal law limits out of pocket for prescriptions at \$2500, our limit will change as well?

We have not been formally notified of any changes in Out of Pocket required by Federal Law. If this should surface and our plan is required to comply, it will comply.