

UnitedHealthcare Level Funded

2024 Portfolio Review

California Small Business Market





UnitedHealthcare Level Funded Overview

Why UnitedHealthcare Level Funded?



Fixed Monthly Payment



Lower Premium Taxes



12/60 Stop Loss Policy (incurred)



Potential Year End Surplus Refund*



\$0 Kid <19
Network Copays



Monthly Claims & Utilization Reports



UHC Rewards**



HealthiestYou Virtual Visits

^{**}UHC Premium Reward in all states except, DE, KS, MO, NJ, PA or WI, which offer UHC Core Reward program



^{*}Available when actual claims liability is less than maximum claims liability

12/60 Stop Loss Period



Why is 12/60 incurred important?

- ✓ Protection
- √ No coverage gap on backend
- √ Employers have no further exposure
- ✓ Claim payments apply to the plan year they were incurred

Based on a review of our claims data*

- 3,762 total claims processed month 30
- Total payments \$1,030,517.92
- Highest payment \$93,958.41

With 12/12, 12/24, or 12/30 paid contacts:

Limited Protection

Employer exposed to potential coverage gap

Employer responsible for claims paid after month 12, 24 or 30

Employer exposure to higher-than-expected claims costs on current plan year

*Based on all claim payments made through 4/23/21



Nationally Marketed

Not Marketed HI/VT/DC

UnitedHealthcare Level Funded

Oxford Level Funded

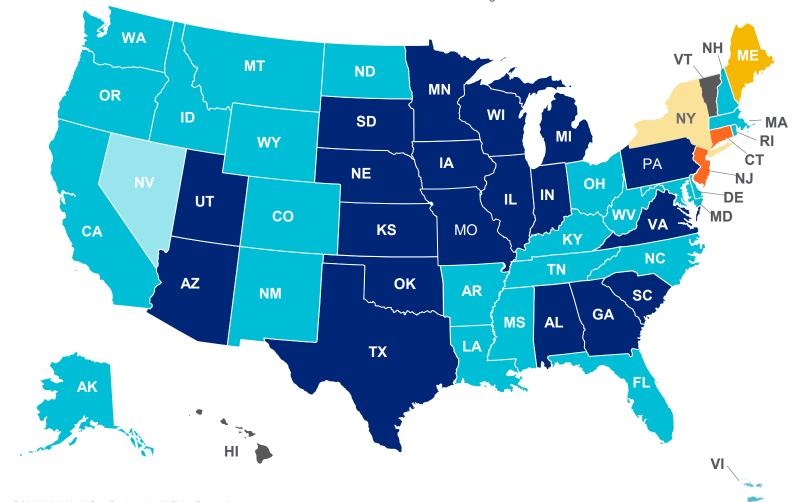
2-300 eligible

10-300 eligible

11-300 eligible

100-300 eligible



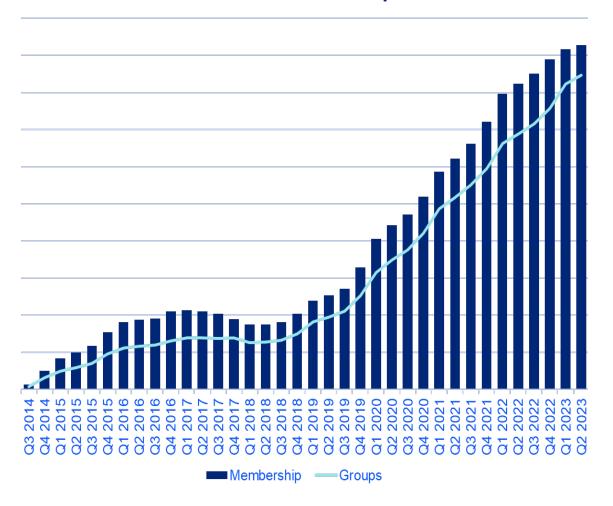




Membership

- Strong membership growth fueled through investments:
 - New Business Discounts (5-50)
 - Implementation Credits
 - Guaranteed Admin Credits (51+)
- 2-4 segment market expansion in 21 states
- 87% of membership in 2-50 market segment
- 13% of membership in 51-300 market segment
- Strong growth trajectory due to price, competitiveness, transparency and strong value adds

Medical Membership





Year End Surplus Refund

2022 Surplus Refund Summary

(January 2022 through December 2022)

National

Average % Receiving Surplus Refund

37.0%

Average Surplus Refund

8.4k

- Group must be active month 15 to be eligible
- Reconciliation occurs after month 15
- 50% of any surplus* refund issued month 17 or 18
- 50% of surplus refund retained as deferred fee**





^{**}Varies by state; not applicable in all states



^{*}Minus IBNR Customer Reserve

HealthiestYou 2022 Nationwide Utilization

General Medical

Consultations 52,806

> Utilization 10.7%

Net Claims Savings \$27,576,388

Top Diagnoses

Upper Respiratory Infection **Sinusitis Pharyngitis Urinary Tract Infection**

Consultations Mental Health 18,356 Utilization 18.5%

Net Claims Savings \$3,534,060

Top Diagnoses

Anxiety Depression Post Traumatic Stress Disorder

Consultations Dermatology 3.983

Utilization 3.2%

Net Claims Savings \$785,000

Top Diagnoses

Acne **Dermatitis** Rash

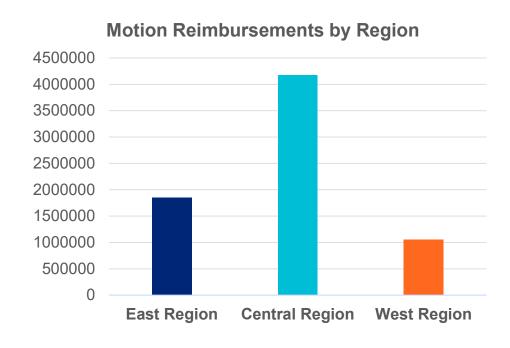
*Based on 2022 HeatlhiestYou Annualized Utilization data for All Savers/Level funded clients January-December 2022



UnitedHealthcare Motion® Reimbursements



Over 7 million dollars in motion reimbursements issued nationwide in 2022



Average Reimbursement \$150 \$207 **■** East Region Central Region **■ West Region** \$195

*Based UnitedHealthcare Motion data from 1/1/22 through 12/31/2022





2023 Changes

New for 2023



Market Expansions

Effective 6/1/23

- Arizona launched in 2-4 market segment Effective 9/1/23
- Nevada expands into the 10-50 market segment
- Surplus share in NV changed to 50%

Effective 10/1/23

- Louisiana launches in 2-4 market segment
- North Carolina down to 5 enrolled

Effective 11/1/23

 UnitedHealthcare Level Funded launches in New Hampshire



Network/Plans

Effective 9/1/23

- 100+ Plan Flexibility (Nationwide)
- SelectColorado (CO) tiered benefits
- Select Tiering (LA and MS)
- Doctors LX EPO Plans (CO)
- Major Health Partners (IN)
- Charter (GA 51-300 only)
- CORE Essential (GA)
- Navigate plans sunset (NM)





New for 2024

Pharmacy Network



Majority of states move to Broad network 1/1/24 (no anchors)

Exceptions:

- CO & WY
- Metro Oxford (NJ/NY)

Note: These markets will remain on Standard Select with an anchor pharmacy

Renewals:

- Existing groups will not move to the Broad network unless there is a force roll, or the employer makes a plan change.
- If more than one plan, important that all plans change so the group has the same pharmacy network

Benefit Enhancements



Benefit Enhancements (Effective for new & renewing business on or after 1/1/24)

Gender Dysphoria

Removed (4) exclusions from Summary Plan Description

- · Breast enlargement, including augmentation mammoplasty and breast implants
- Thyroid cartilage reduction; reduction thyroid chondroplasty; trachea shave (removal or reduction of Adam's Apple)
- Voice modification surgery
- · Voice lessons and voice therapy
- Over-the-counter (OTC) Hearing Aids (Effective 1/1/24 for new & existing members)

Virtual Visits



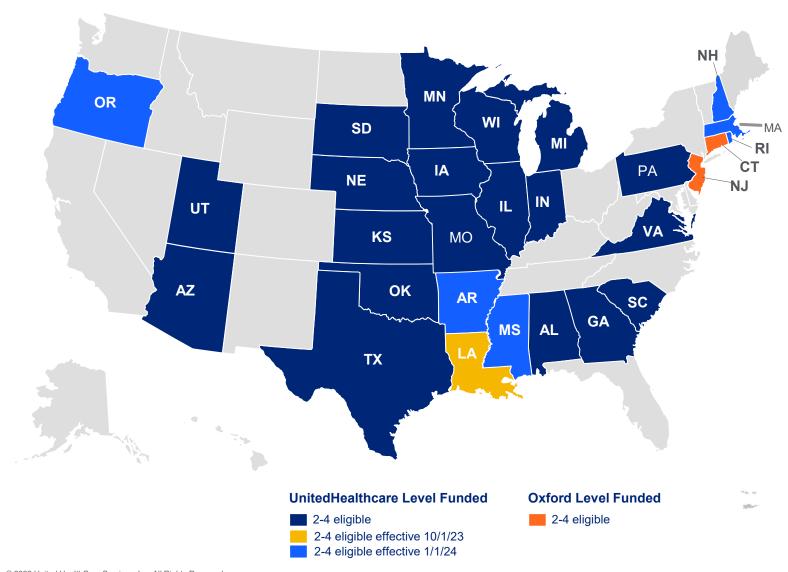
\$0 Virtual Visits* for anyone on an HSA plan

- New Business effective 1/1/24
- Existing Business upon renewal on or after 1/1/24
 - All existing business on an HSA plan will be mapped to the same plan or close plan to receive \$0 Virtual Visits
- Impacts member cost share for:
 - HealthiestYou Virtual Visits
 - Other virtual visit provider groups available to level funded members include, Amwell, Doctors on Demand, Teledoc Health and Walmart Health Virtual Care

*Change applies to HealthiestYou and other virtual visit provider groups at myuhc.com



2-4 Market Segment Expansions





New Traditional & HSA Plan Designs

Zero deductible plans (MAX)

- No network deductible
- 100% network coinsurance
- In-Patient per occurrence copay of \$750 then 100%
- Emergency Room per occurrence copay of \$250 then 100%
- Minor Lab/Xray 100%
- Multiple networks available
- PDL option applies

Copay Only Plan (040100)

- No network deductible
- 100% network coinsurance
- Copays
 - \$40 Primary Care Physician
 - \$100 Specialist
 - \$100 Urgent Care
 - \$525 Emergency Room
- In-Patient per occurrence copay of \$1,500
- Outpatient Surgery per occurrence copay of \$1,500
- Minor Lab/Xray 100%
- Multiple networks available
- PDL option applies

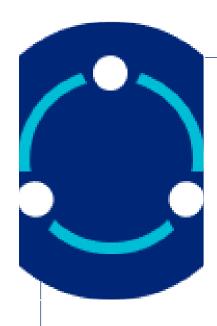
HSA copay after deductible with CORE Plus (CP) Preventive Drug List

- 100% & 80% coinsurance plans
- Copays After Deductible
 - \$25 Primary Care Physician (PCP)
 - \$75 Specialist
 - \$50 Urgent Care
- Emergency Room subject to deductible + coinsurance
- Multiple networks available
- PDL option applies

*Plan availability varies by state.



Networks



New Networks effective 1/1/24

- Nexus ACO (IN, IL, OR, TX, WA, WI)
- Select Plus (MT)

Wellness



UHC Rewards

- Effective 1/1/24 for New Business
- Existing business effective upon renewal on or after 1/1/24
 - Premium (all current motion states)
 - Core (all current non-motion states*)





2024 Portfolio Timeline

Timeline Portfolio Launch



Plan Grids (sortable & pdf versions) available early September Updated
Marketing
Materials
available early
September

Quote Ready 9/1/23 for New Business & Renewals Effective Dates 1/1/24 and beyond



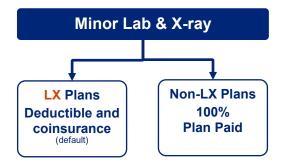




Options

Benefit Options

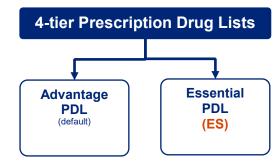
1 Employer can choose Minor Lab and Xray benefit under our Traditional Plan Category (POS/EPO)



- Option selected applies toward ALL plans in the Traditional Plan Category (POS/EPO) except: New "MAX" plans and Copay only plan 040100
- LX plan CANNOT be paired with a <u>non-LX</u> plan



Employer can choose one of two 4-tier Prescription Drug Lists



- Option selected applies toward ALL plans categories except: Primary Focus
- ES plan CANNOT be paired with a <u>non-ES</u> plan

PDL Pairing Examples					
Can be paired	<u>Can</u> be paired	<u>Cannot</u> be paired			
E3500i50 LXES 21	HP2000 ES 22	PREMP50020I90 ES 21			
HE4250ES21	Focus E1000i8021	P3500i70LX21			



15-Month Rate Guarantee

New Business and Funding Conversions



- MUST be selected at time of install
- MUST be reflected in SAMx or Benefiter
- Employer must complete 12-mo or 15-mo attestation form
- Option selected cannot be modified post install



Health Plans | UnitedHealthcare Level Funded

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Acknowledgment for 15-month rate guarantee

I acknowledge that I understand and agree with the following arrangements related to our 15-month rate guarantee and the impact to the excess loss policy period we are entering into with UnitedHealthcare Insurance Company ("UHIC") or affiliated stop loss carriers. I confirm that I understand that a renewal date change is available only for a calendar year deductible plan.

The initial term of the excess loss policy will be a period of 3 months and therefore will fall under the early termination clause of the Administrative Services Agreement Section 6.5, which reads:

If this Agreement or the Stop Loss Policy terminates during the Term of the Agreement or before the end of the third calendar month following the close of the Term of the Agreement, United shall conduct a reconciliation after the 24th calendar month following the close of that Term of the Agreement (the "Reconciliation Date") and also calculate a reserve (the "Customer IBNR Reserve") for claims incurred during the Term of the Agreement but not paid prior to the Reconciliation Date. United will reconcile the amount of the cumulative Maximum Monthly Claim Liability payments paid to United for the Term of the Agreement over (i) the amount of claims incurred during the Term of the Agreement and paid before the Reconciliation Date, less any specific stop loss insurance reimbursements, and (ii) the Customer IBNR Reserve. The Customer IBNR Reserve shall be equal to 100 percent of claim payments made during the 3 months prior to the Reconciliation Date, and in no event shall the Customer IBNR Reserve be less than \$0. Any amount in excess of the Customer IBNR shall be payable to United as a Deferred Service Fee in accordance with the applicable provision in Section 5.4.

The Individual Stop Loss and Aggregate Stop Loss coverage with UHIC or affiliated stop loss carriers will be in effect for an initial 3-month term, and will renew for a 12-month term immediately following the initial shortened term. The stop loss limits will reset on the first day of the 12-month term.

By signing below, I confirm and acknowledge full understanding of the above changes to our stop loss policy period resulting from our 15-month rate guarantee.

Legal Business Name:	
By Authorized Signatur	re:
Print Name and Title:_	
Date:	
By Broker Signature: _	
Print Name:	
Date:	

*Market Segment 2-50 (5-100 in CA) eligible. Availability varies by state



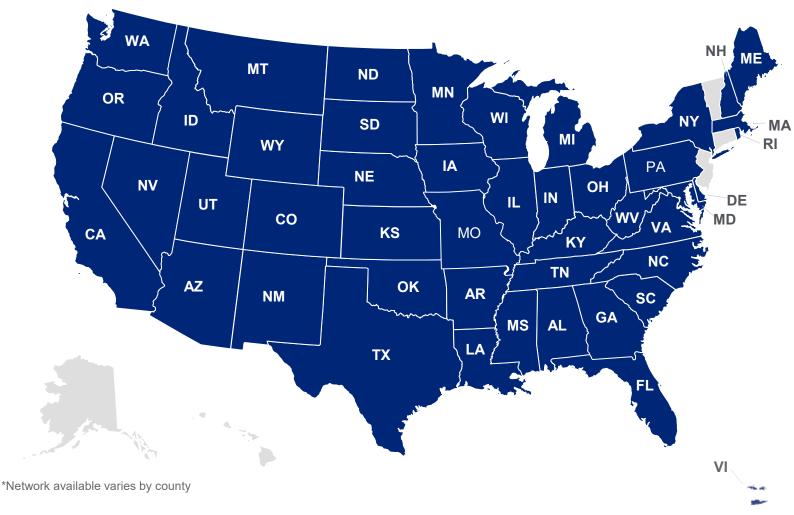
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Networks

Level Funded Network Availability

Choice Plus/Choice

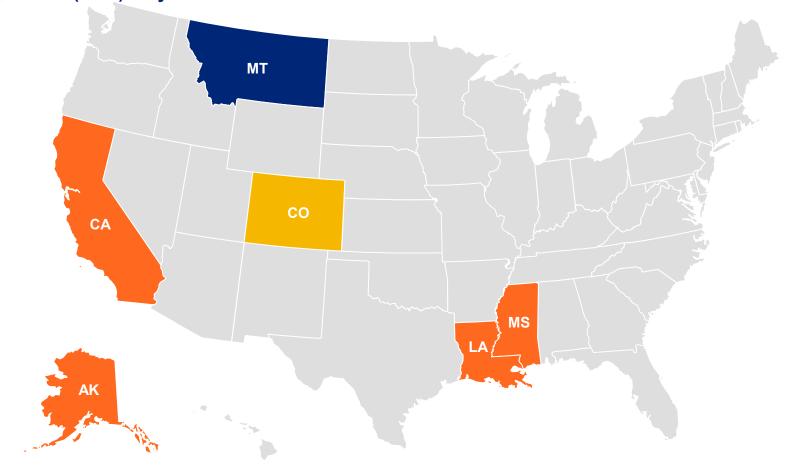


Level Funded Network Availability

Select Plus/Select

Select Plus only

Select (EPO) only



*Network available on Level Funded Select Tiering (LA/MS) and SelectColorado (CO) plan designs only



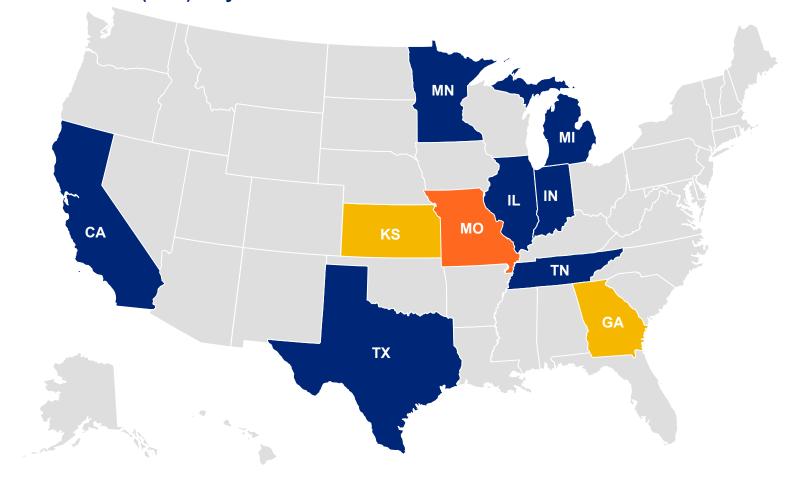
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Level Funded Network Availability Map

CORE/Core Essential Networks

CORE only

Core Essential (EPO) only



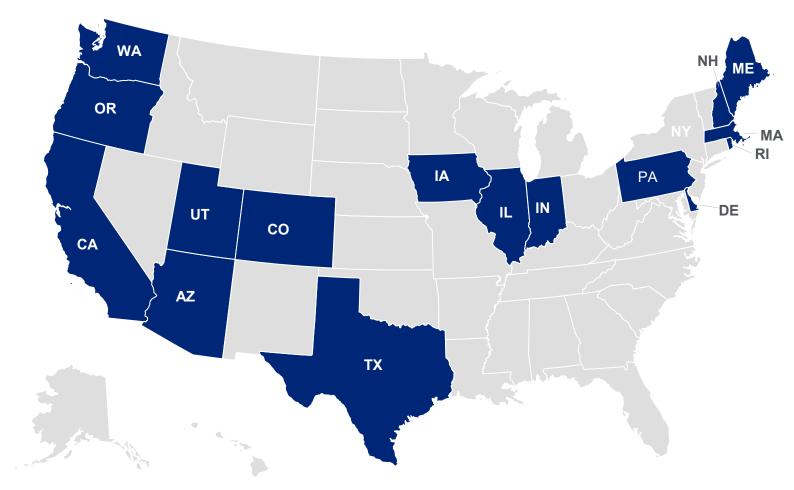
*Network available varies by county



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Level Funded Network Availability Map

Navigate Network









2024 Portfolio

Traditional POS/EPO/Gatekeeper EPO

Plan Highlights Individual Individual Coinsurance **Out of Pocket Deductibles** \$0* \$2,000 100% \$3,000 \$250 \$3,500 \$500 90% \$4,000 \$1,000 \$4,500 \$1,500 \$5,000 80% \$2,000 \$5,500 \$2,500 \$6,000 \$3,000 70% \$6,500 \$3,500 \$7,000 \$4,000 \$7,350 60% \$5,000 \$7,900 \$6,000 \$8,000 50% \$8,000 \$8.150

Benefit Options Prescription Drug List² Minor Lab & X-ray¹ **Essential LX Plans** Non-LX **Advantage PDL PDL Plans Deductible** (default) (ES) 100% and coinsurance **Plan Paid**



*\$0	deductible	plans	include	an	In-Patient	per	occurrence	deductible	of \$750	0
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S	PRIMARY CARE (PCP)
Copays	\$0 Kid <19 \$0 \$15 \$25 \$40

SPECIALIST
\$0
\$15
\$75
\$100

URGENT CARE
\$0
\$50
\$75
\$100

EMERGENCY ROOM	,
\$250	
\$300 \$525	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	



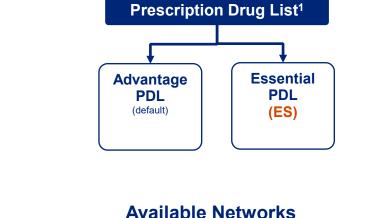
^{*}Plan and Network availability varies by county and state.

Option selected will apply toward all plans in the Traditional Plan Category (PPO/EPO); cannot pair non-LX with LX plans

² Prescription Drug List selected will apply toward all plans; cannot pair PDLs

HSA POS/EPO/Gatekeeper EPO

Plan Highlights Individual Individual Coinsurance **Out of Pocket** Levels **Deductibles** Limit \$2,500 \$1,600 \$3,200 100% \$2,000 \$3,500 \$4,000 \$2,500 \$4,250 \$4,600 \$3,200 80% \$3,500 \$5,000 \$4,000 \$6,000 \$6,350 70% \$4,250 \$6,550 \$6,900 \$7,000 \$5,000 \$6,000 50% \$6,350 \$7,500 Non-Embedded Plan Designs



Benefit Option





HSA copays AFTER Deductible Plans

Primary Care Physician	Specialist	Urgent Care	Emergency Room	
\$25	\$75	\$50	\$300	

*Plan and Network availability varies by county and state.

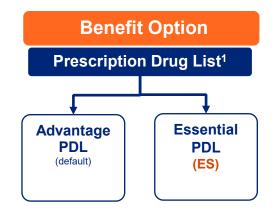
¹ Prescription Drug List selected will apply toward all plans; cannot pair PDLs



Personal Protect POS/EPO

Plan Highlights				
Individual Deductibles	Individual Out of Pocket Limit	Coinsurance Level		
\$3,000	\$3,000			
\$4,000	\$4,000			
\$5,000	\$5,000	100%		
\$6,000	\$6,000	100%		
\$7,000	\$7,000			
\$8,500	\$8,500			





Available Networks



¹Prescription Drug List selected will apply toward all plans; cannot pair PDLs

^{*}Plan and Network availability varies by county and state.



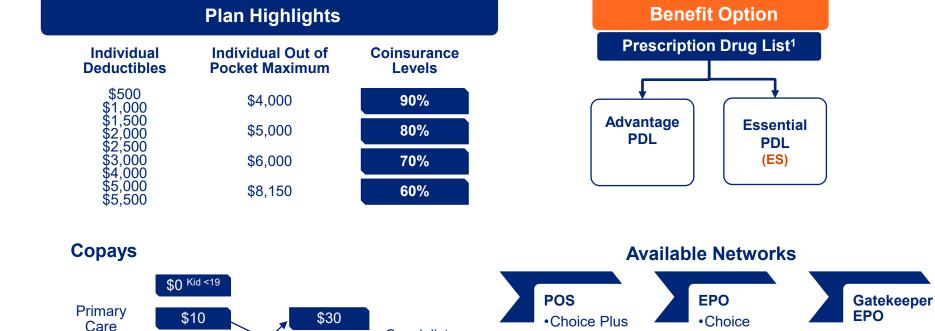
Premier PROformance POS/EPO

\$65

\$75

Emergency

Room



Specialist

Copays

\$300

(then deductible + coinsurance)

•CORE

Select Plus

•Core

Select

Essential



Physician

Copays

Urgent

Care

\$15

\$20

\$25

\$60

Navigate

^{*}Plan and Network availability varies by county and state.

¹ Prescription Drug List selected will apply toward all plans; cannot pair PDLs

Primary Focus POS/EPO

Plan Highlights Individual Individual Coinsurance **Out of Pocket Deductibles** Levels Limit \$1,000 \$6,500 80% \$2,000 \$7,900 \$3.000 50% 8,150 \$5,000

Primary Care Physician \$100 \$100 \$50 \$250 (then Ded/Coins)

Advantage 4-tier Prescription Drug List



Available Networks



*Plan and Network availability varies by county and state.





Specialty

Packaged Savings® 5-100 Eligible

Earn credits toward administrative costs each month by bundling UnitedHealthcare Level Funded medical plan with dental, vision or basic life from UnitedHealthcare.







Purchase a Level Funded medical plan and:	Receive the following credits per month:		
Dental	\$3 per enrolled medical employee		
Vision	\$2 per enrolled medical employee		
Life*	\$1 per enrolled medical employee		
The more you bundle	, the more you save		
Dental, vision, life* and short-term disability/long-term disability**	\$7 per enrolled medical employee		
Dental, vision and life*	\$6 per enrolled medical employee		
Dental and vision	\$5 per enrolled medical employee		
Dental and life*	\$4 per enrolled medical employee		
Vision and life*	\$3 per enrolled medical employee		
Life* and long-term disability***	\$2 per enrolled medical employee		
Life* and short-term disability**	\$2 per enrolled medical employee		

^{*}Requires a minimum of \$25,000 benefit.

*Supplemental Life and other Financial Protection products sold separately through UnitedHealthcare.



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^{**}Long-term disability does not qualify alone; it must be packaged with life or short-term disability.



Value Adds

Wellness Programs and Real Appeal









HealthiestYou™ Virtual Visits



Doctor Visits

- Consult with a Doctor 24x7
- Diagnose, prescribe, inform



Behavioral Health

Confidential counseling 7 days a week by

phone or video



Dermatology

- Request a consult on the HealthiestYou App
- Communicate with Board Certified Dermatologists
- View results online within 2 business days



3ack Care

- Guided videos in HealthiestYou App
- Expert support through certified coaches
- Stay on track with personalized progress monitoring

24/7 Virtual care available via app, web or phone

Available to all dependents in a member household — even those not currently covered on the plan all at \$0 cost







HealthiestYou™ Expert Medical Services

All at NO additional cost!

Enabling covered members with complex medical conditions to receive an independent, expert evaluation of their diagnosis and treatment plan



\$12k

Average cost savings per case

37% Improved Diagnosis

71% Improved treatment



UHC Rewards

Effective January 1, 2024

- UHC Level Funded New
 Business Groups and existing
 All Savers and UHC Level
 Funded employers and
 members will be migrating to
 UnitedHealthcare Rewards.
- Migration to Rewards will take place on the group's renewal date.
- Once migrated, all groups will lose access to their Rally coins and Motion experience.

	Rally coins	Simply Engaged	Motion	UHC Rewards Core & Premium
Health Survey	✓	✓		✓
Daily Fitness / FIT			~	✓
Biometric Screening		✓		✓
Connect a smart tracker			✓	✓
Sleep tracking				✓
Select Paperless				✓
Coaching programs Real Appeal / Quit For Life	✓	✓		Future consideration





Migrating to UHC Rewards



Migration from Motion to UHC Rewards



30 days before renewal date, members should:

Update Motion profile

To update preferred mailing address for reimbursement and HSA information, visit www.unitedhealthcaremotion.com

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Sync final activity data on the Motion app

Sync Motion data daily leading up to the UHC Rewards case effective date

Activate UHC Rewards

Sign in or register on the UnitedHealthcare® app or at www.myuhc.com®





Migration from Rally to UHC Rewards



30 days before renewal date, members should:

1 Redeem coins

All Rally coins need to be redeemed by the last day of the plan year.
If not, members will lose them.

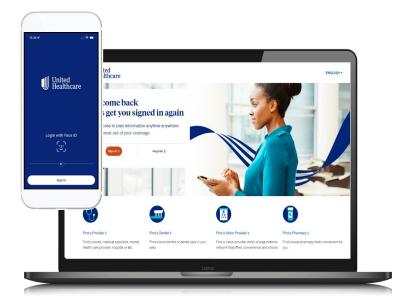
Activate UHC Rewards

Sign in or register on the UnitedHealthcare app or at **myuhc.com.**



UHC Rewards

Members activate UHC Rewards through the UnitedHealthcare app or **myuhc.com**



Complete reward activities — earn rewards for reaching daily goals and completing one-time reward activities





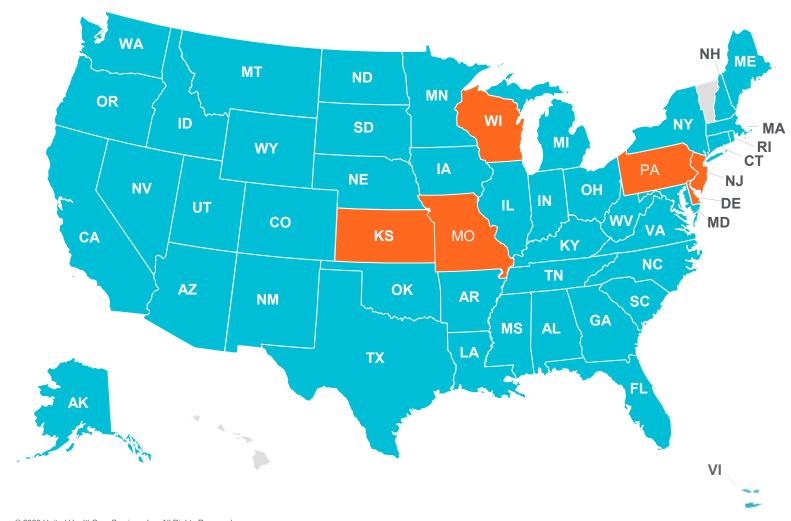
UHC Rewards Actions & Earnings

Antique	Bara datta		Dollars earned	
Action	Description	Core	Premium	
Connect a tracker in the UnitedHealthcare app	Automatically track activities	\$25.00	\$65.00	
Daily fitness – goal 1	Track 15+ active minutes or 5K+ steps per day	\$0.25	\$0.75	
Daily fitness – goal 2	Track 30+ active minutes or 10K+ steps per day	\$0.50	\$1.25	
Fitness challenge – weekly goal	Complete daily fitness goal 2 five out of seven days (Sunday to Saturday)	\$2.50	\$5.00	
Sleep tracking	Track sleep for at least 14 days	\$5.00	\$10.00	
Sleep challenge – weekly goal	Track 7 hours of sleep for five out seven days (Sunday to Saturday)	\$2.50	\$5.00	
Complete health survey	Complete additional parts of the health survey	\$15.00	\$25.00	
Get a biometric screening	Complete annual bloodwork and measurements	\$50.00	\$75.00	
Go paperless	Switch to paperless communications	\$2.50	\$5.00	
Flu Shot	Get an annual flu shot	\$10.00	\$30.00	
Annual Wellness	Complete an annual checkup to support health and prevent illness	\$25.00	\$50.00	
	Maximum Annual Incentives	\$300	\$1000	



UHC Rewards Map

- Core Rewards
- Premium Rewards





UHC Reward Redemption Options

Redemption Options	Method of Reward Redemption	Level Funded	Fully Insured SB	Fully Insured KA
Optum Bank HSA	Deposit into an Optum Bank health savings account (HSA)	Yes	Yes	Yes
HIA (for HIA Eligible Plans)	Deposit into a Health Incentive Account (HIA) (non-HSA)	Yes	No	No
One Pass	Towards a One Pass gym subscription	No	Yes	Yes
Gift Card	Digital Visa gift card.	No	Yes	Yes
HRA via CAMS (ACIS)	Deposit into a Health Reimbursement Account (HRA)	No	No	Yes
Device Purchase	Toward tracker device/walk it off	No	Yes	Yes
3rd Party HSA	Deposit into a 3 rd party Health Savings Account ^(HSA)	N/A	N/A	N/A



Real Appeal®

Real Appeal is a personalized program created to support long-term transformation

A customized approach is designed to assist members on their weight management journey.

It may help them reduce health risks, change behavior and save on medical expenses. It's all backed by science and includes:



A Success Kit



Health Coach/Online group classes



Digital support and tracking



United Healthcare







Thank you