

2024 Large Group Sales Tools & Resources



Ask your Univera Healthcare account manager about these and other available sales tools & resources.

What's New for 2024 (UN-3119)

What's New for 2024
We've got exciting changes planned that will help groups and their employees enjoy even better health and wellbeing in 2024. Let's take a look at what's in store.*

FOR ALL GROUPS:

Virtual Physical Therapy & MISK*
Members receive virtual access to a hybrid team of specialty medical doctors, physical therapists, health coaches, and nutritionists. Virtual physical therapy visits will be covered in full (subject to deductibles, where applicable) and included as a telemedicine service.

REACH Kidney Care
Our Care Management team is partnering with REACH Kidney Care, a kidney health management program designed to identify members along the continuum of kidney disease, specifically targeting members with Stage 4 & 5 Chronic Kidney Disease (CKD). At no cost to members, REACH will provide one-on-one, individualized care management, both in-person and virtually, to help members navigate their health in a way that best fits their lifestyle.

FOR SMALL GROUPS:

60 Outpatient Mental & Behavioral Health Care
We're committed to lowering the total cost and other barriers to care for our members. Beginning in 2024, outpatient mental and behavioral health services, including substance use support, will now be covered in full. This applies to all Non-Standard plans that have a PCP copy for these services (subject to deductibles where applicable).

50 Pediatric Primary Care Visits
Sick visits, generally considered non-preventive care visits to a primary care physician, will now be covered in full for members up to age 19. This applies to all Non-Standard plans (subject to deductibles, where applicable), with the exception of Univera Clear Options Guid.

2024 Univera Healthcare PPO Signature Suite for Large Groups At-a-Glance

Univera HEALTHCARE

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Covering every employee – and all aspects of health.

2024 Univera Healthcare PPO Signature Suite for Large Groups At-a-Glance

Univera Clear Options Employer Brochure (UN-2936) Member Brochure (UN-2937)

Univera Clear Options™
The clarity and predictability of a copay plan – without the higher premiums

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2024 Signature Suite for Large Groups At-a-Glance (UN-2565)

Let's get to know our aggregation options.

univera HEALTHCARE

Aggregation is how payments add up and are counted against a member's deductibles and out-of-pocket maximums. Depending on the plan, aggregation may be determined on an individual or family basis. It's important to understand how this works, as it determines who is responsible for paying medical expenses throughout the year. Let's take a closer look.

Deductible aggregation
Individual aggregation
Covered expenses for an "individual" Each covered family member only needs to satisfy their own individual deductible, not the entire family deductible, before plan benefits kick in. This option is often most attractive to families because claims for individuals will be covered when that individual reaches their single deductible, regardless of whether or not other family members have met theirs.

Out-of-pocket max aggregation
The same rules apply to out-of-pocket maximums (OOPM) with individual aggregation: each family member only needs to meet their own OOPM before services are covered in full. With family aggregation, the entire family's combined OOPM must be met before any individual's services are covered in full.

Family aggregation
While this option typically helps keep monthly premiums lower, family aggregation means the entire family's annual deductible must be met by one or any combination of covered members before a copay or coinsurance is applied for any family member.

Per person OOPM cap
All Univera healthcare plans include an extra layer of protection preventing any individual from exceeding certain personal out-of-pocket medical expenses each year above a set threshold. This cap applies to family plans with family aggregation, acting as a safeguard and providing more peace of mind for high medical expenses for one individual. For 2024, the per person cap is \$6,000 for USA-qualified plans and \$6,420 for non-qualified plans.

Let's take a look at two examples on the next page.

Consider this: Emile and Stefan are on a family plan that includes the following cost shares:

Individual deductible: \$2,500	Coinsurance: 20%	Individual OOPM: \$5,000
Family deductible: \$5,000		Family OOPM: \$10,000

Stefan (member) | **Emile** (member) | **Both** (member)

Understanding Aggregation Options (UN-3114)

Click the links to learn more.