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Welcome to All Savers Alternate Funding Plans — tailored for small businesses.

Group size is 5 enrolled – 99 eligible; although the minimum size may vary by state. Some states have specific regulations for self-funded products. Check with your health plan for details. This guide provides the "play-by-play" for successfully selling and installing new All Savers business.

Quoting and submission of groups size 51 - 300 eligible, see your local sales representative.

All Savers Alternate Funding Plans use the UnitedHealthcare Choice and Choice Plus Networks. Additional network options are available and vary by state.



First down-Get appointed.

Have you completed your producer agreement?

The All Savers producer agreements can be obtained through your local health plan.

Once completed, they can be returned to your health plan for processing. Once processed, allow 2 to 3 business days to receive your login for **www.myallsavers.com**.

What is available on myallsavers.com?

- Producer Guide.
- Product Brochures and Summary Plan Documents.
- Case Submission Instructions.
- Quoting Tool.
- Your Book of Business.

Commission payments.

Commissions are paid weekly via Electronic Funds Transfer (EFT).

Questions about the contracting or appointment process?

Contact your health plan with questions about the contracting or appointment process.

If you have questions regarding:

- Agent of Record (AOR) Changes.
- Tax ID Changes.
- General Agent Changes.
- Mergers/Buyouts.

You may email us at: uholcallsavers@uhc.com Or call us at: 1-866-405-7174



Get in the know in The Red Zone

- Must have an All Savers Insurance Company Appointment.
- To ensure commissions are paid timely, an appointment is required prior to obtaining a quote.
- Commission Schedules are posted to the producer website, www.UHOne.com/broker.

2 Second down—Start a quote. Now that you're appointed, let's go over some tools to help you "line up" your next move:

The All Savers Alternate Funding Agency Operations Guide provides detailed instructions on how to submit your quote. Locate this document on **myallsavers.com** in the Forms and Brochures tab, Forms and Guides section.

	Street Quote	Case Submission	Preliminary Encoding	Preliminary Underwriting
Who	Broker or Virtual Ops	Broker or Virtual Ops	Encoding Team	Regional UW Team
Where	myallsavers.com	myallsavers.com	SAFES ¹	SAFES ¹
Activity	Enters group census	Uploads data/forms	 Enters data in SAFES Reviews applications Follows up on missing information needed for preliminary underwriting 	 Determine rate ups Determine Decline to Quote (DTQ)
Required Information	 Group census Average total number of employees (ATNE) or full-time equivalent (FTE) Prior carrier name Employer tax ID # 	 Employee applications or member level census based on enrollment size Prior carrier name Employer tax ID # 	 Employee applications or member level census based on enrollment size, state, and prior carrier Prior carrier name Employer tax ID # 	 Employee applications or member level census based on enrollment size Prior carrier name Employer tax ID #
Turnaround Time (TAT)	-	-	48 hours	72 hours

¹SAFES refers to an internal All Savers system.

All Savers restricts sales from the following SIC codes:

All Savers is only available to businesses that are subject to ERISA laws and regulations. Businesses in these SIC categories do not fall under the umbrella of ERISA.

SIC Code	Meaning	
43xx xxxx	U.S. Postal Service	
8211 xxxx	Elementary and Secondary Schools	
8222 xxxx	Junior Colleges	
8231 xxxx	Libraries	
8299 xxxx	Schools and Educational Services, not Elsewhere Classified	
8661 xxxx	Churches, Temples and Shrines, and Non-Church Religious Organizations (Convent, Monastery, Religious Instruction)	
91xx xxxx	Executive, Legislative and General Government, Except Finance	
92xx xxxx	Justice, Public Order and Safety	
93xx xxxx	Public Finance, Taxation and Monetary Policy	
94xx xxxx	Administration of Human Resource Programs	
95xx xxxx	Administration of Environmental Quality and Housing Programs	
96xx xxxx	Administration of Economic Programs	
97xx xxxx	National Security and International Affairs	
99xx xxxx	Nonclassifiable Establishments	

continued

Preliminary quote.

The preliminary quote is used to present to the group after Underwriting has reviewed the required information and determined if the group is acceptable.

The preliminary quote is not the final quote and will not be used for installation.

If information submitted to obtain a preliminary quote is incomplete, the sender will receive email notification. The turnaround time for preliminary encoding will start again once complete information is received.

Eligibility.

An Eligible Employee is a regular, full-time employee who is scheduled to work at least 30 hours per week. This excludes part-time or seasonal employees and retirees.

Grandchildren are not covered under an All Savers Alternate Funding Plan unless the grandparent is the legal guardian.

Domestic Partners are covered in all states.

COBRA services are not administered by an All Savers Alternate Funding Plan. If an employer requires COBRA services, United Benefit Services (UBS) is the preferred administrator and can be contacted at **1-800-318-5311**.

Resources for new case submission.

Access the appropriate checklist on **myallsavers.com** to ensure you submit complete information when obtaining a quote:

- Preliminary Quote Checklist.
- Preliminary Quote Checklist Claims Experience (available in TX).
- Preliminary Quote Checklist Member Level Census.

Questions about the quoting and case submission process?

Email us: uhomyallsaversinfo@uhc.com Or call us: 1-866-405-7174



Get in the know in The Red Zone

- Changes to the group census after submission may result in rate changes. Final rates are based on the final census. Adding or removing even one person from the original census can cause rates to change.
- Are all employee applications signed and dated? Medical questions answered? Your quote can't be processed without this information. If medical questions are not answered or applications are not signed and dated by the employee, the turnaround time starts over from the time we receive complete information.

Are you using competitor applications? Medical Underwriting must review any competitor application to ensure it captures our required information. If competitor applications are being used in lieu of the All Savers employee application, you must complete the All Savers Alternate Funding Certification form located on myallsavers.com.

This does not apply to UnitedHealthcare applications or State Uniform, Universal or MAF applications.

Prior to install, All Savers employee applications must still be completed with demographic information and employee signature.

Did the group have prior UnitedHealthcare coverage? If the group currently has UnitedHealthcare coverage and is interested in All Savers at renewal, please work with your renewal account executive to receive an All Savers proposal.

• Effective Date Rules: Groups must be submitted (for preliminary encoding) to Medical Underwriting by the 10th of each month to get a first of the month effective date. Example: Group submitted to Underwriting on Dec. 9 may receive a Dec. 1 effective date.

Groups are only able to have a first of the month effective date.

If a group is in final encoding and needs/wants to change their effective date, they can safely do so before the Employer Rate Confirmation button is pressed on the broker website (**myallsavers.com**).



Third down-Sold case.

Once the preliminary quote has been produced and accepted by the group, a final quote must be obtained with additional information from the employer.

	Broker Action	Final Encoding	Final Underwriting	Rate Confirmation	Employee Plan Selection
Who	Broker	Encoding Team	Regional UW Team	Broker Employer	Broker
Where	myallsavers.com	SAFES ¹	SAFES ¹	myallsavers.com	myallsavers.com
Activity	 Indicates plans selected Uploads documents 	 Enters data in SAFES Reviews applications Follows up on missing information 	Determines final rates and sends final quote to broker	Broker accepts rate after consultation with employer	Broker completes plan selection
Required Information	 Employee applications or demographic spreadsheet based on enrollment size Employer application Wage and tax report³ Excess Loss Application Employer Payment Authorization Initial check² Billing and Collection Agreement³ NY Surcharge Forms 	 Employee applications or demographic spreadsheet based on enrollment size Employer application Wage and tax report⁴ Excess Loss Application Employer Payment Authorization Initial check² Billing and Collection Agreement³ NY Surcharge Forms 	 Employee applications or demographic spreadsheet based on enrollment size Employer application Wage and tax report³ Excess Loss Application Employer Payment Authorization Initial check² Billing and Collection Agreement NY Surcharge Forms 	-	-
TAT	-	48 hours; if missing information is requested, TAT is dependent on response time from broker	72 hours	TAT managed by broker/employer	TAT managed by broker/employer

Note: If basic life, dental or vision coverages are elected, the Specialty Group Application, the Employee Specialty Applications or an enrollment spreadsheet are required. ¹ SAFES refers to an internal All Savers system.

² Initial check not required if the group is electing EFT for their first monthly payment. Completion of Section E of the Payment Authorization form is required in its place. ³ Wage and tax not required with submission by member level census.

Get in the know in The Red Zone

- Participation requirement is 50% of eligible employees.
- Inaccurate census information may result in rate changes. It is critical that you validate the information on the census before submitting. If the employee count is not entered accurately, this will affect your final rates.

Validate the status of each employee: gender, age, full or part-time employee, termination status and COBRA status.

Are you over or under 20? Under federal law, if your group had 20 or more employees during 20 or more calendar weeks in the preceding calendar year, the Health Plan is primary and Medicare is secondary. When the Health Plan is primary, rates increase.



Get in the know in The Red Zone

• Is the employer plan selection correct? The employer may elect to offer 1 plan option or multiple plans for their employees to choose from.

If the employer elects to offer 1 plan option, all employees are automatically enrolled in that option.

If the employer elects to offer multiple options, 2 or more plans can be selected for the employees to choose from. One of these plans must be chosen as the default plan. Employees who do not make a selection will be enrolled in the default plan.

Employers may not restrict coverage for dependents (i.e., they may not offer employee-only coverage).

If the plan selection is incorrect, requested changes after install result in additional health plan ID cards, Summary Plan Descriptions (SPD) and Summary of Benefits and Coverage (SBC) being sent out. Call the right play the first time to avoid confusion on the field.

• **Do you have the initial check or EFT information?** A copy of the Payment Authorization Form, initial check or completed Electronic Funds Transfer section of the Payment Authorization Form is required for installation. The physical check should be mailed no later than when the Employer Rate Confirmation button is pressed.

The initial check should be mailed to: United HealthCare Services, Inc. P.O. Box 19032 Green Bay, WI 54307-9032

Overnighted Checks: United HealthCare Services, Inc. Attn: Lockbox #88106 4900 W. 95th Street Oak Lawn, IL 60453

What happens if the group decides not to enroll

and their check has been cashed? If a group needs a refund, send an email to: **uhoadminallsavers@uhc.com**. The email should include the group name, copy of the original check and an indication that the group is requesting a refund.

• Are you offering Specialty Products? Ensure you have submitted the proper employer and employee documentation if dental, vision or life is being offered to the group. This would include:

Employee applications or spreadsheet enrollment

Employer application

- Is your commission reflected correctly? If you have an Employer Fee Arrangement (EFA) in place, now is the time to double check your commissions. If they are not accurate, now is the time to adjust.
- Double check your rates. There are no rate adjustments after installation.

QUESTIONS? Learn more about rates and underwriting.

Contact us at 1-866-405-7174 | uhomyallsaversinfo@uhc.com

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Fourth and goal-Installation.

A successful installation ensures the winning points.

	Installation	ID Cards Sent	Employee Kits Sent	Employer Kits Sent	Welcome Call
Who	Ops Team	Ops Team	Ops Team	Ops Team	Ops Team
Where	UHOPS ¹	myallsavers.com	UHOPS ¹	UHOPS ¹	UHOPS ¹
Activity	Group data loaded 3 times daily Email sent to broker with group plan number	 Access to print temporary ID Permanent ID cards mailed 	Employee kits mailed to the Employer	• Employer kits mailed	 Welcome call to employer Call is scheduled approximately 10 days after installation Monthly employer Welcome Webinar
TAT	Less than 24 hours	Temporary 24 business hours Permanent mailed within 4 business days from install	Mailed within 2 business days from install	Mailed within 2 business days from install	
Documents	-		 (SPD) Welcome Letter Summary of Benefits and Coverage (SBC) Federal Women's Cancer Notice Privacy Notice Information 	 Employer Guide Welcome Letter Excess Loss Policy Administrative Services Agreement (ASA) Extra employee enrollment forms Taxes and Fees Filing Pharmacy Program Summary MyAllSavers Connect.com flyer Ancillary Welcome Letter and Guides, if applicable 	

¹UHOPS refers to an internal All Savers system.

continued



Get in the know in The Red Zone

• Were there errors in the enrollment? Prior to install – Employees who were enrolled in error must complete a new enrollment form and complete this section only (in addition to the enrollee information):

I waive medical coverage for:	Self (and dependents) Dependent Children	Please state reason for waiving coverage: Qualifying Coverage: Other
If I have waived coverage for r may in the future be able to en	nyself and/or my dependents (i roll myself and/or my dependen	ncluding my spouse) because of other health insurance coverage ts n the plan, provided that I request enrollment within 31 days afte
my other coverage ends becau reduction in number of hours placement for adoption, I may the event.	ise of involuntary loss of other co of employment). In addition, if be able to enroll my dependent:	overage (divorce, death, legal separation, termination of employmen I have a new dependent as a result of marriage, birth, adoption, o s, provided that I request enrollment within 31 days after the date o

Enrolled in error could include an employee who does not work the required number of hours to be eligible for coverage. If the employee was enrolled in error, he/she must complete the form.

Post-Install – If the enrollment error is caught after install is completed, send an email to **uhoadminallsavers@uhc.com** stating the employee was enrolled in error.

Employees who intended to enroll but did not provide timely enrollment information prior to install must wait until open enrollment to enroll in the product.

All Savers does not allow late enrollees. All Savers does not allow late enrollees unless there is a qualifying event. Once a group is installed and issued a policy number, only an applicant with a qualifying event will be added to the coverage. Any late enrollees will be postponed until the medical plan's next anniversary renewal date.

Learn more.

Questions about membership changes, ID cards, plan documents, address changes or billing? Contact us at 1-800-291-2634 | uhoadminallsavers@uhc.com



After the big win.

The following information provides you with the contacts for appropriately serving your group:

Service Area	Used for	Phone #	Hours of Operation	Address
Member Website	 Dependent info (< age 18) Access to a doctor Prescription Drug List Link to UHC specialty website (if offered) Check status of claims View eligibility information View member documents 	N/A	24/7	www.myallsaversconnect.com All members age 18+ can register on the website
Employer Website	 View billing Access employer documents View, download, and print ID cards View employee roster Add/Term members 	N/A	24/7	www.myallsaversconnect.com Company Contact will receive an email with administrative login credentials for the website
Customer Care	 Member inquiries Provider inquiries Employer inquiries Authorizations 	1-800-291-2634	M-F 7:30 a.m 8 p.m. CT	
Pharmacy	Member inquiriesProvider inquiries	1-800-797-9791	M-F 4 a.m 7 p.m. CT Sat/Sun 5 a.m 5 p.m. CT	
Provider Website	 Member eligibility Verifying benefits Check claim status Obtain EOBs 	N/A	24/7	www.myallsaversconnect.com Providers may register at any time
Broker Service Center	Broker inquiries	1-866-405-7174	M-F 7:30 a.m 5:30 p.m. CT	uhomyallsaversinfo@uhc.com
Claims	Submit prior carrier deductible report	N/A	24/7	uhoclaimsrequests@uhc.com All Savers P.O. Box 31375 Salt Lake City, UT 84131-0375 Electronic Payer ID: 81400
Appeals	Submit formal appeals	N/A	24/7	United HealthCare Services, Inc. Appeals Review P.O. Box 31371 Salt Lake City, UT 84131-0371

¹Member eligibility, claim status and remittance for All Savers plans is **not** available on unitedhealthcareonline.com.

Sample Interim Card:

	All Savers	
	Temporary Information	ation
Member Name:		
Member ID:	COXXXXXXX	
Group Number:		
RXBIN:	RXGRP:	Payer ID: 81400
Effective Date:	1/1/0001	
Company Name:		
Customer Service nu	mber for members and	providers: 1-800-291-2634

Sample Permanent ID Card:

All Sa	avers	Policy Nu	umber: 5400-00XXXX
Health Plan	n (80840)911-81	400-00	000060
Member:	AMPLE	Group Nulliber.	300000
of member in o		Payer ID: 8	1400
		RX BIN: RX PCN: RX GRP	610279 9999 UGRI
Copay: Office: ER:	\$30 \$300		UnitedHealthcare Choice Plus
3010	Adr	Effective Da ministered by United HealthC	ate: 01/01/2020 are Services, Inc.

	Issued: 12/15/2019
Advanced Notification and Admission Notification requ Network providers. Insureds must call for out-of-netwo	uirements apply for UHC ork services.
For Members: myallsaversconnect.co	om 800-291-2634
Notification: For Providers: myallsaversconnect.c CLAIMS: EDI#81400, All Savers PO Box 31375, Salt Lake C	800-999-3404 com 800-291-2634 Xity, UT 84131-0375
Pharmacy Help Desk: 855-816-6618 Pharmacy Claims: OptumRx, P.O. Box 65054	40, Dallas, TX 75265-0540

If the broker or employer would like to call in on behalf of the employee, the employee will need to complete the Authorization to Disclose Medical Information Form (located on **myallsavers.com**) before we will release any information to them.

Prescription Drug List (PDL).

The UnitedHealthcare PDL includes brand and generic prescription medications approved by the FDA.

Medications are placed on different "tiers" based on our evaluation of their overall value. Tier 1 is the lowest-cost tier option. The PDL is a tool to help you look for lower-cost alternatives.

When in the broker website, select the "Find a Doctor" tab. Click "Compare Medication Costs" > "Pharmacy" > "Learn about your Pharmacy Benefits" > Click the link to the PDL.

Executive Reporting Package.

This package is prepared monthly, on or around the second working day of each month. It is available on **myallsaversconnect.com** for the employer, and **myallsavers.com** master record for the broker. The package contains:

- Executive Summary.
- Claims Summary; Medical and Drug/ Claims Cost Control.
- Provider and PPO Utilization.
- HealthiestYou Reporting

Terminations.

Members should be terminated timely by the group once they are no longer employed or lose eligible status. If the employee is not terminated timely, it could result in the group being liable for extra claims payments.

Not For Consumer Use.

Administrative services provided by United HealthCare Services, Inc. or their affiliates, and UnitedHealthcare Services LLC in NY. Stop-loss insurance is underwritten by All Savers Insurance Company (except MA, MN, NJ and NY), UnitedHealthcare Insurance Company in MA and MN, UnitedHealthcare Life Insurance Company in NJ, and UnitedHealthcare Insurance Company of New York in NY.

