

MEMBER

WELCOME GUIDE



HEALTH PLANS
UNIVERSITY OF UTAH

WELCOME

Thank you for choosing University of Utah Health Plans.

There are a few things you need to know about getting started with your plan. This guide will provide you with a quick overview of the following.

- [ID Cards](#)
- [Benefits](#)
- [Medical Plan Basics](#)
- [What you Pay](#)
- [Your Health](#)
- [Key Terms](#)
- [Contact Information](#)

You will also find helpful links throughout this document to make it more convenient to find what you're looking for quickly and easily.

QUESTIONS?

Our Member Services Team is here to help! If you have questions about your current plan, we'll get you the answers you need.

MEMBER SERVICES

Monday - Friday, 8 am - 6 pm MST
801-587-6480 or toll free 888-271-5870



ID CARDS

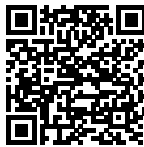
The ID card is for the following services: Medical, Pharmacy (Rx) and Behavioral Health. If dental coverage is part of your plan, you will receive a separate dental card from your dental plan administrator.

Please present your new ID card for you and any enrolled dependents. Up to date claims submission and contact information is located on the back of your card.

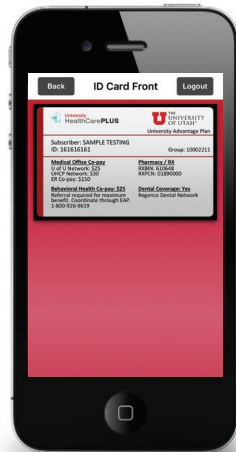
ID CARD MOBILE APP

You can access your ID Card on the go, anywhere and anytime, through the U of U Health Plans ID Card application.

To download the ID card app, scan the QR code with your phone or search "U of U Health Plans ID Card" in iTunes or Google Play. The app will let you download your ID card right to your phone.



App PIN CODE = Last 4 digits of your subscriber ID



BENEFITS

SELECTING YOUR PCP

You can select a participating Primary Care Physician (PCP). Routinely visiting a PCP can lower your medical costs and help you maintain a healthy lifestyle. If you need help finding a doctor, contact our Member Services Team. They can help you find the closest doctor with the most immediately available appointment, and they can schedule appointments for you.

SUMMARY OF BENEFITS AND COVERAGE (SBC)

As part of the Affordable Care Act, health insurance issuers and group health plans are required to provide you with an easy-to-understand summary about a health plan's medical, pharmacy, and behavioral health benefits, coverage, and exclusions. The new regulation is designed to help you better understand and evaluate your health insurance choices. Visit uhealthplan.utah.edu to view the most current Provider Directory and Summary of Benefits and Coverage.

EXPLANATION OF BENEFITS (EOB)

An EOB statement is created each time you receive care. It explains how your claim was processed and lists the amount you are responsible to pay to the provider.

You can access and review your EOB(s) through MyChart, your secure, online connection to your health information. To activate your account or request paper statements contact Member Services.

MYCHART

U OF U HEALTH PLANS

MEDICAL PLAN BASICS

Your provider network is identified by the logo on your ID Card. To receive benefits, you must use doctors, clinics, and hospitals that participate in your network.

To find a participating provider visit, uhealthplan.utah.edu and click on “Find a Provider” or call Member Services.

URGENT CARE

Because sickness doesn't always come between 8 – 5, evening and weekend care is available for symptoms that are not life-threatening.

- Flu and fever
- Earaches
- Nausea
- Rashes and allergic reactions
- Animal and insect bites
- Sprains and minor bone fractures
- Minor cuts requiring stitches
- Urinary tract/ bladder
- Infections

EMERGENCY CARE

If you experience an emergency, call 911 or go to the nearest hospital.



UNDERSTANDING YOUR NETWORK

Your provider network is **Healthy Premier**. This provider network provides access to a variety of doctors for you to choose from. If you have out-of-network coverage, you have the option to seek care from providers not listed in our network, but it's important to note that their services could have higher out-of-pocket costs.

If you have questions regarding your provider network, contact our Member Services Team at 801-587-6480.

HOSPITALS

The Healthy Premier network provides you access to **42** hospitals in Utah. To view a comprehensive list of in-network hospitals, visit uhealthplan.utah.edu.

ACCESS YOUR BENEFITS

ARUP FAMILY HEALTH CLINIC

Employees of ARUP, their spouses/domestic partners, and their registered dependents are eligible to use the clinic. If you would like to be seen by a provider please call to schedule an appointment. This includes but is not limited to: urgent care, chronic conditions, preventive medicine, immunizations, and minor procedures. For more information regarding the types of appointments that are offered, please visit Family Health Clinic Services.

The clinic is open:

Monday–Friday, 6:00 a.m.–5:00 p.m.

Saturday, 8:00 a.m.–4:00 p.m.

To schedule an appointment, call **(801) 584-5144**.

YOUR BENEFITS

To review your medical and pharmacy benefits visit uhealthplan.utah.edu/aruplabs.



OUTSIDE OF UTAH

When outside of Utah, you are covered for urgent and emergency care. We have an agreement with the largest national provider networks, First Health. Using these providers will cost you less. To find in-network providers, call 801-587-6480 or visit uhealthplan.utah.edu.



OUTSIDE OF THE UNITED STATES

If you are traveling outside of the country and need urgent or emergency care, visit the nearest doctor or hospital. You may need to pay for the treatment at the time of service. Some services received outside of the U.S. require preauthorization. Call Member Services for details.

FILING / SUBMITTING A CLAIM

University of Utah Health Plans
Attention: Claims Department
PO Box 45180
Salt Lake City, UT 84145-0180

Participating providers will file claims for you. However, if you need to file a claim from a non-participating provider, or submit a paid claim for reimbursement, call Member Services to find out what information is needed or visit uhealthplan.utah.edu.

YOUR HEALTH

Our care management team is led by distinguished physicians, highly skilled nurses and care coordinators that help members navigate the health care system to improve their health care experience resulting in the best outcomes while providing cost-effective care.

OUR PROGRAMS

Our care management programs are built around population health, disease management, and quality improvement. A few of our care management teams include:

- U Baby Women's Health
- Pediatric Special Needs
- Adult Complex Chronic Needs
- Behavioral Health
- Health & Wellness
- Inpatient Navigator

Contact the Member Services team to learn more about these and other programs that are available to you as a U of U Health Plans member.

INTERPRETER SERVICES

We have interpreters for any language. You may call Member Services Team at 801-587-6480 to ask for help finding a doctor who speaks your language. You can also find this information on our website in the Provider Directory. Telephone relay services, or TTY/TDD, are also available by calling Utah Relay Services at 711 or 1-800-346-4128.



TELEHEALTH

U of U Health Plans is fully integrated with the University of Utah Health system offering telehealth technology to you and your family. Telehealth is an efficient and cost effective means to provide care at a distance.

VIRTUAL VISITS

INSTANT ONLINE CARE

Online care from the expert providers at U of U Health. You don't need an appointment, just a connection.



To start a virtual visit, call 801-213-UNOW.
7 days a week 9 am - 9 pm

KEY TERMS

ALLOWED AMOUNT

The dollar amount allowed for a specific covered service.

COPAY

A fixed amount stated on your ID Card that you must pay for covered services to a provider or facility.

COINSURANCE

A set percentage of the allowed amount you pay towards health care after your deductible has been met.

COVERED DEPENDENT

A member of your family who meets the eligibility requirements to be covered by your plan and whom you have enrolled on your plan.

DEDUCTIBLE

An amount stated on your ID Card that you must pay each year for covered services before we make any payment. Some categories of benefits may be subject to separate deductibles.

EFFECTIVE DATE

The date the coverage for you and your covered dependent(s) actually begins. It may be different from the eligibility date or the contract and/or anniversary date.



EXPLANATION OF HEALTH CARE BENEFITS (EOB)

A form describing how a claim had been processed. EOB's outline the services provided, the amount billed, payment made and any costs that are your responsibility.

NETWORK PROVIDER

A health professional, a supplier of health items or a health care facility that has an agreement or contract with U of U Health Plans to provide or coordinate covered services to you.

OUT-OF-POCKET MAXIMUM

The most you will pay in coinsurance and deductible for covered health care services and prescription drugs.

OUT-OF-NETWORK PROVIDER

Any provider not under contract to deliver covered services to you.

PRIMARY CARE PHYSICIAN (PCP)

A physician you may select within the panel of participating providers who will provide and coordinate your health care.

PRIVACY NOTICE

U of U Health Plans is legally required to protect the privacy of each member's health information, and doing so is of extreme importance. PHI (Protected Health Information) is information that includes your personal and demographic information that identifies you and that relates to your past, present or future physical or mental health condition and related health care services. For more information please visit uhealthplan.utah.edu to read the Notice of Privacy Practices.

If you would like a free copy of these materials printed and mailed to you, please contact our Member Services Team at 801-587-6480.

RIGHTS AND RESPONSIBILITIES

U of U Health Plans wants to give you the best care and service. As a University of Utah Health Plans member, you have rights and responsibilities. To see these Rights and Responsibilities in detail please visit uhealthplan.utah.edu.

COBRA

Some U of U Health Plans group plans may entitle you to COBRA benefits if you or your family members lose your health care coverage. Please refer to our website, uhealthplans.utah.edu, to see our Notice Of Continuation Of Coverage Rights (COBRA).

COMPLAINTS, GRIEVANCES AND APPEALS

If you have concerns or wish to file an oral or written complaint, grievance, or appeal please visit uhealthplan.utah.edu for more details. The website also contains details about your options for an independent, external review of final U of U Health Plans coverage decisions.



OTHER

ADVANCING MEDICAL TECHNOLOGIES

U of U Health Plans evaluates advances in technology to make sure that members have fair access to safe and effective care. This includes medical and behavioral healthcare procedures, drugs, and devices. To be included in your plan, the technology must meet the following nationally accepted criteria:

1. Final approval from the appropriate governmental regulatory agencies;
2. Scientific studies showing conclusive evidence of improved net health outcome;
3. The use of the technology is in accordance with standards of good medical practice.

COVERAGE DECISIONS

All utilization review decisions and care management actions are based on a determination of appropriateness of care and service according to the benefit coverage for the member. U of U Health Plans provides no incentive or reward for issuing denials of coverage. There is no use of incentives to encourage barriers to care and services. Utilization Review decisions are based on nationally recognized criteria, plan benefits and adherence of utilization management policies and procedures.

CONTACT

INFORMATION

MEMBER SERVICES

(801) 587-6480

Toll Free: (888) 271-5870

Fax: (801) 281-6121

uuhp@hsc.utah.edu

HEALTHY ADVANTAGE PLUS HMO

(866) 537-8128 - Enrollment Services

(877) 644-0344 - Member Services

CLAIMS/ELIGIBILITY

(801) 587-6480

CASE MANAGEMENT & UTILIZATION REVIEW

(801) 587-6480

PROVIDER RELATIONS

(801) 587-2838

provider.relations@hsc.utah.edu

EDI SUPPORT

(801) 587-2638

SUBMIT CLAIMS TO:

University of Utah Health Plans

Attention: Claims Department

PO Box 45180

Salt Lake City, UT 84145-0180

University of Utah Health Care
P.O. Box 45180
Salt Lake City, UT 84145



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(801) 587-6480

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