
Q&A – UnitedHealthcare 2025 Medical Plans (10/1/24)

Click to access the following categories or view all below.

- [Surest Plans](#)
- [HSA Plans & Health Savings Account \(HSA\)](#)
- [Pharmacy Benefits](#)
- [Alternate Insurance Fee](#)
- [General & Miscellaneous](#)

- [Additional Resources](#)

Surest Plans

Q: Which of the 2025 healthcare options is most like our current PPO options?

A: The Surest plans are most like our current PPO plans.

Q: When will we have login information for the Surest app to review details of the new plans? It asks for a member login.

A: All information currently available can be found at <https://www.whyuhc.com/taylor>, including copayment information.

Q: How do we know which physicians are considered premium providers with lower copays?

A: You will see which physicians have lower co-pays in the Surest app. The lower the co-pay, the more successful the provider. Providers also appear with 2 hearts by their name when searching for a provider.

Q: What happens when you pay your co-pay and need to go for follow-up visit? Do you have to pay additional copayments?

A: Each visit to your provider is considered another event. Note: An ER visit copay is going to be significantly higher than the follow up provider appointment. The Surest app will help you see what each copay will be.

Q: What do the Surest copayments cover for primary care “office” visits?

A: The copayments cover all care received during that appointment, including labs/x-rays that may also occur during this visit or in the days leading up to the office visit.

Q: Do copays count toward the out-of-pocket maximum?

A: Yes.

Q: Do you have to pay copays upfront?

A: Your provider and their payment requirements will determine when payment is due. Please reach out to your provider/clinic for more information.

Q: Are the copay levels the same for in-network and out of network?

A: The copays shown in all material are in-network copays. If you are considering receiving services out of network, please contact UHC for specific details.

Q: If I go for an Emergency Room visit, how will I know my copay without knowing what services I need?

A: The emergency room copay is set in advance and does not vary based on services received.

Q: Will I be able to see the actual copay requirements on the Surest site? For example, if I want to see what my physician copay will be, is that available?

A: Yes, you will be able to see all provider copay information.

Q: Are cancer screening services covered at 100%?

A: If your physician codes the service as preventive, the service is covered at 100%. If the services cannot be viewed as preventive due to an existing medical condition, copays are applied.

Q: Do surgeries fall under the hospital copay or is this treated as all separate?

A: Surgery does fall under the hospital copay. Visit <https://www.whyuhc.com/taylor> to confirm your specific surgery or procedure.

Q: Do you have to have approvals before having procedures or surgeries?

A: Your provider generally is responsible for doing any prior authorizations. When having a surgery, hospitalization or similar large copay procedure, it is a good idea to ask your physician's office if they have completed the prior authorization.

Q: Do the Surest plans remove the need for a primary care physician?

A: No and Taylor continues to emphasize the importance of visiting a primary care physician annually. You are not required to “designate” a primary care provider when enrolling in a medical plan.

HSA Medical Plans & Health Savings Account (HSA)**Q: I am currently on an HSA plan and would like to switch to Surest. What happens to the balance of my HSA?**

A: The balance of your HSA will stay with Fidelity. Please contact Fidelity to confirm how the account balance can be used while you are not on a high deductible health plan. You can reach Fidelity at <https://www.netbenefits.com> or 1-800-835-5095.

Q: Do the HSA plans include the same provider list as the Surest plans?

A: Yes, the provider network is the same for all plans.

Q: Are medical and pharmacy costs combined to meet the deductible for the HSA plans?

A: Yes, the medical and pharmacy claims are combined to meet deductible and out of pocket maximum.

Q: How do I get medical prices like what is available under the Surest plans?

A: That level of transparency has not been available as part of the traditional HSA plans – it is a unique feature of the Surest plans. Contact your physician's office or clinic regarding their billed prices and your potential out of pocket costs.

Pharmacy Benefits**Q: Will the pharmacy benefits be any different between the two HSA plans?**

A: All medical plans cover the same prescriptions and other medical services. The difference between the plans is how each plan covers the prescription or service.

Q: Will there still be 90-day prescription refills?

A: Yes, if you are taking maintenance medication, we encourage you to use the 90-day refill options.

Q: Will we be able to use whatever pharmacy we choose?

A: You continue to be able to use any pharmacy in the CVS/Caremark network. Visit www.caremark.com or call 1-800-405-6432 for more information.

Q: Will CVS be notified of our new plans? Or do we need to notify them on January 1?

A: CVS is aware of our move to UHC. You do not need to notify CVS.

Alternative Insurance Fee**Q: When does the Alternative Insurance Fee apply?**

A: If your spouse is employed and has access to coverage through his/her employer, this fee will apply if you enroll your spouse on your plan. The Fee does not apply if your spouse is on Medicare, VA coverage or similar programs. Also, the Fee does not apply to spouses also employed by Taylor.

Q: Will there be an additional fee for children like there will be for spouses if they have secondary insurance?

A: No. The Alternative Insurance Fee is only applicable to spouses.

General Questions

Q: What plan is best if I will likely reach my deductible early in 2025?

A: Use the [Alex tool](#) to decide which plan is best for you.
(<https://start.myalex.com/taylor-corporation/>)

Q: How can I check to see if my provider is in network?

A: You can visit <https://www.whyuhc.com/taylor> or use this QRC code to view all network providers.



Q: Do you need to check to see if your provider is in network before committing to the certain plan?

A: This is not a requirement of you prior to choosing a plan, however we encourage you to do this if you'd like to know if your provider is within network, or what their copay is prior to signing up for a plan.

Q: How do the single/family deductible or out of pocket limits work?

A: No one person in the family will be required to meet more than the 'single' deductible or out of pocket limits. The 'family' levels are important when you have 3 or more people on the plan. No one person in the family meets more than the single level (i.e. one person does not meet the \$13,200) and as a family, your expenses are capped at the family level deductible or out of pocket maximum.

Q: Which plans have the new Supplemental benefits?

A: The HSA and Surest plans include the supplemental benefits since these plans require the employee to accept more responsibility for their medical costs. The Surest Plus and HSA plus will **not** receive supplemental benefits.

Q: Will we still have access to Dr. On Demand?

A: Yes, you will still have access to Dr. On Demand along with additional virtual provider options.

Q: What if our prescriptions go through DME Suppliers typically?

A: This will not change when we move to the new carrier.

Q: Will there be hearing aid coverage?

A: Yes, this will stay the same.

Q: Will I still be able to have an FSA?

A: If you enroll in Surest Plus or Surest, you may still enroll in a Health Care Flexible Spending Account.

Q: Can you enroll in a Health Care Flexible Spending Account if you don't enroll in a medical plan?

A: Yes.

Q: What happens when you have a procedure that involves the doctor, lab, and facility charges?

A: For the Surest plan, all service related to the procedure will be covered under the one copay. For the HSA plan, you will pay 100% of that visit until your deductible is met.

Q: How can I better understand what medical procedures are covered and which are not covered?

A: It is safe to assume that all in-network medically necessary procedures are covered. For more information, visit <https://www.whyuhc.com/taylor>.

Q: Are the wellness credits included in the published bi-weekly rates?

A: Wellness credits are not included in the premiums that are published. [View the chart](https://employees.taylor.com/) on the Benefits Hub, <https://employees.taylor.com/>.

Q: If we currently have an employee plus spouse plan and we both work for Taylor, can we change to each of us having employee only to save money?

A: Yes.

Q: My spouse is covered under my current plan, but we won't need to be next year. If you move me to a plan that matches up with my current plan, will I be able to easily remove coverage for my spouse?

A: Yes, you can change your covered dependents during the open enrollment process. Simply remove the check mark by your spouse's name during enrollment in Workday.

Q: How do we know what plan we're being mapped to and what do I need to do if I don't want to elect that plan?

A: Your coverage is being mapped to the plans highlighted below. If you would like to select a different plan, you can do so during the open enrollment period.

CURRENT 2024 PLANS	PLANS FOR 2025
PPO Plus PPO Plus Limited Network	SUREST PLUS
PPO PPO Limited Network	SUREST
HSA Plus HSA Plus Limited Network	HSA PLUS
HSA HSA Limited Network	HSA
Kaiser HMO	Kaiser HMO

Q: How do you calculate the cost if you are going out of network?

A: Out of network is generally double the cost. If you choose to go out of network, you are encouraged to confirm the exact pricing with your provider.

Q: Do the new health plans cover both physical and mental health?

A: Yes.

Q: My spouse's open enrollment period is after Taylor's open enrollment period. Will I have the option to change by elections after seeing my spouse's options?

A: Yes. Please call HRConnect by December 1st if you need to modify your elections.

Q: Do we start over on January 1 for visits that are covered once per calendar year?

A: Yes. Coverage for 2025 is January 1st through December 31st.

Q: Will there be a calculator to put in our personal situation to see which works best as in previous years?

A: Yes, the Alex tool is still available to you and can help you with this.

<https://start.myalex.com/taylor-corporation/>

Additional Resources

To listen to a recording of the benefits livestream meeting, [click here](#).

(<https://www.youtube.com/live/ut5ENMlrJeY?t=1096s>)

For a copy of the home mailer and 2025 benefit resources, visit *Your Benefits Hub*,

<https://employees.taylor.com/>.