2021 Annual Enrolment Campaign

Information session for UN Medical Insurance Plan (MIP)



Agenda

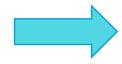
- Introduction meet the participants of this session
- UN Medical Insurance Plan (MIP) funded by staff members, retirees and the Member States
- Annual enrolment campaign what do you need to know about this event?
- Q&A answers to pre-submitted and frequently asked questions related to the enrolment campaign



Participants

Global policyholder

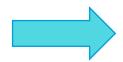




UN Health & Life Insurance Section

Global Third-Party Administrator





Third-Party Administrator Cigna International

Plan Participants







Locally recruited UN Secretariat staff, retirees, and their eligible family members, serving at designated duty stations away from the headquarters.



Health Insurance Overview – Who is involved?

Insurer of UN MIP



United Nations

UN Health & Life Insurance Section

Global policyholder of UN MIP



Global Third-Party Administrator



Cigna International Health Services

HR focal points at missions

Local managers of UN MIP



UN MIP Participants





Locally recruited staff, retirees and eligible dependants

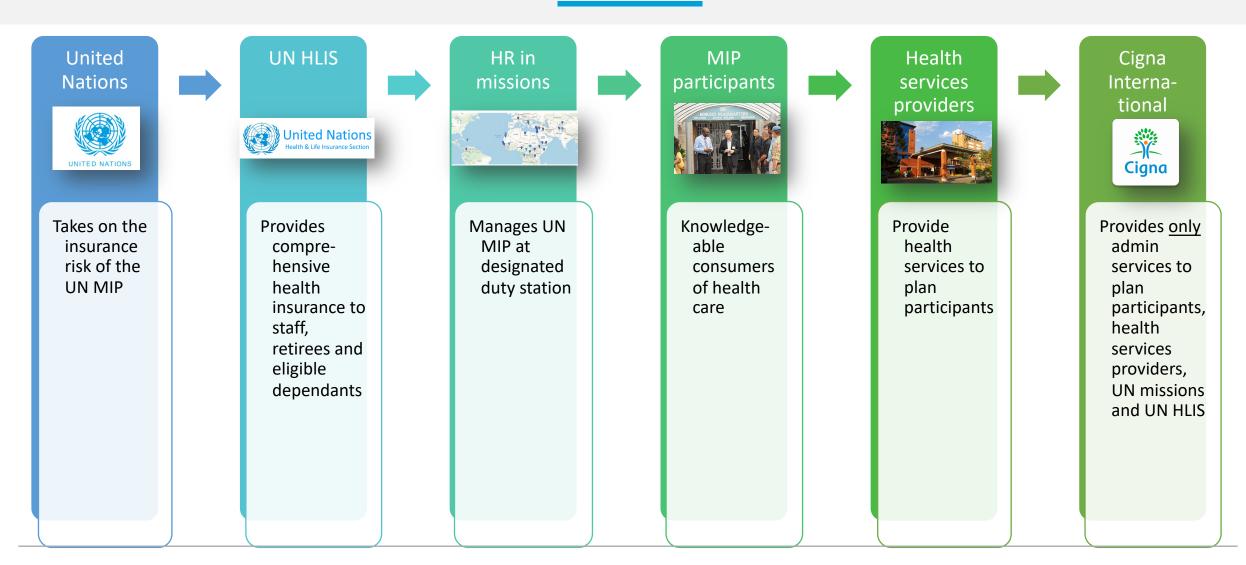
Hospitals, doctors, licensed practitioners,...

Health services providers





Health Insurance Overview – Who is involved?





Health Insurance Overview - Roles & responsibilities 1

United Nations



- UN MIP is self-funded, hence United Nations acts as insurer of the UN MIP
- Decides on the benefits of the UN MIP
- Determines who is covered under the UN MIP
- Decides how reimbursements will be made
- Defines the administrative services the Third-Party Administrator should offer

UN HLIS



- Provides health insurance plans
- Provides eligibility files to Cigna
- Reviews the adequacy of the UN MIP
- Provides policy and technical support to missions and regional service centers

HR in missions



- Manages the UN MIP locally
- Provides training to local staff on UN MIP
- Processes eligibility matters, coordinates payment issues and collection of ASHI contributions
- Gathers structural issues regarding TPA services and addresses them to Cigna and, if needed, UN HLIS



Health Insurance Overview - Roles & responsibilities 2

Plan Participants



- Fund 25% of the UN MIP
- Understand the benefits of the UN MIP
- Help keeping the UN MIP sustainable, eg by visiting in-network providers, refusing fraud, waste and abuse and becoming knowledgeable health consumers

Health services providers



- Provide medically necessary health services at reasonable & customary rates
- May decide to become part of Cigna's network and offer direct billing, potentially at preferential rates

Third-Party Administrator



- Processes claims by following and applying the plan rules
- Responds to inquiries from plan participants
- Provides a medical network of health care providers that offer both physical and virtual consultations
- Conducts fraud, waste and abuse investigation to protect the UN MIP in accordance with the services required by UN



United Nations



 Bears MIP costs and insurance risk together with subscribers through costsharing agreement

ategory of coverage	Subscriber's contributions	Organization's contributions	Total premius
A. Full-time and former staff			
For one insured person (subscriber alone)	1.05	3.15	4.2
For two insured persons (subscriber plus one eligible family member)	1.35	3.95	5.3
For three to five insured persons (subscriber plus two to four eligible family members)	1.85	7.35	9.2
For six or more insured persons (subscriber plus five or more family members)	2.40	9.55	11.9
Staff on special leave without pay			
For one insured person	4.20	0.00	4.2
For two insured persons	5.30	0.00	5.3
For three to five insured persons	9.20	0.00	9.2
For six or more insured persons	11.95	0.00	11.9
C. Staff on special leave with half/partial pay			
For one insured person	2.62	1.58	4.2
For two insured persons	3.32	1.98	5.3
For three to five insured persons	5.52	3.68	9.2
For six or more insured persons	7.17	4.78	11.9



 Determines and collects contributions







United Nations



 Determines and collects contributions

- Active staff and staff on special leave with <u>half</u> pay:
 - **✓ Contributions will be** deducted **from the staff member's** payroll

SLWOP:

- ✓ Full premium **billed** prior to the start of the leave
- ✓ If the period of leave exceeds three months, the staff member may be billed on a quarterly basis and payment must be received one month prior to the beginning of the quarter that the payment covers
- Coverage in MIP shall be terminated without further notice if payment is not received by the Organization within such time frame.
- **✓** Retired staff and eligible surviving spouse and children:
 - ✓ Contribution should be made quarterly and must be received at least one month prior to the first month covered by the payment



United Nations



Sets enrollment conditions

Participation in UN MIP is MANDATORY for:

- ✓ Locally recruited staff members holding an appointment in the General Service (GS), Security Service (SS), Trade and Craft (TC), and National Officer categories who serve at a designated duty station.
- ✓ All staff members, regardless of their length of appointment, will be enrolled in and contribute to – MIP

Participation in UN MIP is VOLUNTARY for:

- **✓** Eligible family members (one spouse and eligible children)
- ✓ A former staff member who meets the eligibility criteria for after-service health insurance as set out in section 7 of the ST/AI/2015/3 section 7 is eligible for after-service health insurance;

United Nations



Sets enrollment conditions

Eligible family members:

- Eligible spouse as recognized by UN
- ✓ Dependent child until the end of the year in which he or she reaches the age of 25
- ✓ Disabled child above 25 may be covered for as long as that incapacity lasts
- ✓ For ASHI: spouse and children already enrolled at the time of separation from service and any child born to the staff member within 300 days of separation

Non-eligible family members:

- ✓ Secondary dependants, like parents and siblings
- ✓ Married or full-time employed children
- Dependants of staff members holding a temporary appointment of less than six months



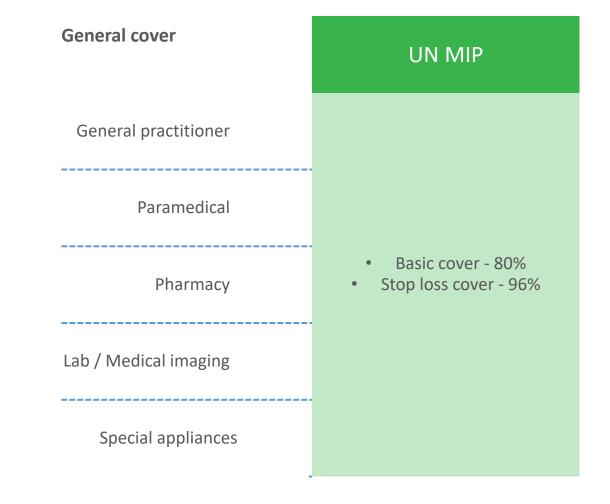
United Nations



Key principles	UN MIP
Overall yearly maximum per person	6 times MIP Reference Salary
Stop loss limit for active staff	50% of monthly net base salary
Stop loss limit for retirees	50% of remuneration basis used for calculation of retiree's contribution
Claim submission deadline	12 months after expenses were incurred
Area of cover	Duty Station and Regional Area of Care, plus evacuations and emergency during duty travel









United Nations



Ceilings per person per calendar year	UN MIP	
Dental	50% of monthly MIP Reference Salary	
Dental care after an accident	1 time monthly MIP Reference Salary	
Physiotherapy	Prior approval as of 61st session per calendar year	
Psychotherapy	1 time monthly MIP Reference Salary	
Hearing aids	300 USD/apparatus and 1 apparatus per ear/ per 36 months	
Preventive care	 1 general routine physical examination For women: 1 PAP smear, 1 gynaecological exam, 1 mammography For men: 1 PSA test 	



United Nations



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United Nations



Hospital admissions	UN MIP
Bed & board in a semi-private room or ward	100%
Bed & board in a private room	70% or 100% of a semi-private room
Other hospital expenses	100%
Doctor's fees	100%
Personal expenses	Not covered



United Nations



 Authorizes Regional Area of Cover and Regional Recognized Medical Evacuation Centers

Regional Area of Care:

- A country or region of a country generally neighbouring the duty station of the subscriber and enrolled family members that is specially designated by the United Nations where they can undergo medical treatment without the need for an approved medical evacuation. A regional area of care is designated solely owing to the lack of adequate facilities in the duty station or the country of duty station. Medical expenses incurred in such areas will be reimbursed at the reasonable and customary rate of the designated location
- Regional Area of Care DRC for MIP members residing near the eastern border of the country:
 - ✓ Burundi
 - ✓ Rwanda
 - ✓ Uganda (for staff and family members located near the Eastern borders of Congo)



United Nations



 Authorizes Regional Area of Cover and Regional Recognized Medical Evacuation Centers

- Medical Evacuation Travel (MET):
 - ✓ In the case of expenses incurred during approved medical evacuation in the authorized location or medical care received in an approved regional area of care, the expenses will be settled in accordance with the reasonable and customary cost level of the area or country where care was provided. MET is not available for retirees/ASHI participants.
- Regional Recognized Medical Centers for DRC:
 - Cameroon
 - ✓ Côte d'Ivoire
 - ✓ Gabon
 - ✓ Senegal
 - ✓ South Africa





Issues membership cards

- Plastic and electronic ID card per enrolled family member:
 - ✓ Personal identifiers of plan participant (Cigna reference nr, name and date of birth)
 - ✓ Cigna contact information (email, phone numbers and website)
 - ✓ Out-patient direct payment % and Regional Area of Cover
 - ✓ Access electronic ID card on Cigna member pages or through the Cigna Health Benefits App





 Informs and educates members on MIP and Cigna services

- How to reach Cigna?:
 - ✓ Call Cigna 24/7/365 on + 32 3 217 65 72
 - ✓ Use the call back feature on Cigna's member pages under header 'Contact'
 - ✓ Call a toll-free line (listed on the member pages under header 'Contact)
 - ✓ Call via commercial Skype (not Skype for Business) on "Cigna Health Benefits"
 - ✓ Email to un.mip@cigna.com
- Cigna's communication efforts, supported by HLIS:









 Screens and processes claims

Screening:

✓ To identify fraud early in the claims process, Cigna introduced a system of automated pre-payment screening. Fraud Analysts review suspicious claims. All claims go through this process.

Claims processing:

✓ Once claim review is finalized, Cigna reimburses claim within 5 working days turn-around time. Payments and recuperations are processed through UN pay files.





 Offers clinical and administrative (direct payment) support

- Cigna Global Telehealth:
 - ✓ Cigna Global Telehealth offers free of charge access to licensed doctors and specialists around the world through the Cigna Wellbeing App.
- Case Management, Chronic Condition and Decision Support
 Programs

- Pre-authorization and guarantees of payment:
 - ✓ Integrated Health Team facilitates direct billing trough pre-authorization and guarantees of payment, in which we confirm benefits and give billing instructions





 Ensures R&C and medical necessity

Reasonable and Customary prices:

Cigna, as third-party administrator, is authorized by the United Nations to reimburse claims in line with these benefits on the basis of reasonable and customary charges applicable at the duty station. Reasonable and customary refers to the prevailing pattern of charges for professional and other health services at the duty station where the service is provided as reasonably determined by the third-party administrator.

Medical necessity:

All health-care services that a medical practitioner, exercising prudent clinical judgement, would provide to a covered individual for the purpose of preventing, evaluating, diagnosing or treating an illness, injury or disease or its symptoms, and that are: (i) in accordance with generally accepted standards of medical practice; (ii) clinically appropriate in terms of type, frequency, extent, site and duration and considered effective for the covered individual's illness, injury or disease; (iii) not primarily for the convenience of the covered individual, physician or other health-care provider; and (iv) not more costly than an alternative service or sequence of services at least as likely to produce equivalent therapeutic or diagnostic results as to the diagnosis or treatment of that covered individual's illness, injury or disease





Controls Fraud, Waste and Abuse

- What actions can we take?:
 - ✓ Do not submit, or cause someone else to submit, false or misleading information



- ✓ Check your explanation of benefits (EOB)
 - Call provider for an explanation, if needed
 - If response is not satisfactory, contact UN HLIS about your concern

Fraud is a serious offence and cannot be tolerated!





 Mandatory for staff, voluntary for eligible retirees and primary dependants

- MIP is the same plan for actives and retirees (ASHI)
- Eligible family members of active staff must be enrolled:
 - **✓** Within 31 days of "qualifying" events
 - ✓ During the annual enrolment campaign in June, with the date of coverage being effective on 1 July of that year





 Covers medically necessary and R&C costs

Exclusions - examples:

- ✓ Spa cures, rejuvenation cures or cosmetic treatment
- ✓ Alternative medicine (only if the treatment is recognized as valid by the competent health authorities of the country)
- ✓ Food and dietary products;
- **√** ..

R&C costs - example

GP consultation – R&C= \$10	Provider A	Provider B
Price charged	\$10	\$20
Patient share	\$2	\$12
UN insurance pays	\$8	\$8



• RAC reimb- example



Covers in Duty Station, RAC and RRMC

GP consultation	Care in Duty Station	Care in RAC (eg Uganda)	Care outside RAC (eg Kenya)
Duty Station	\$10	\$10	\$10
Country of care	\$10	\$40	\$50
Patient share	\$2	\$8	\$42
UN insurance pays	\$8	\$32	\$8





- Annual ceiling of 6 times reference salary
- Financial hardship provision after exhausting out of pocket

Annual ceiling:

Individual claims exceeding an amount equivalent to five times the MIP reference salary are considered to have reached a threshold that merits special attention; accordingly, the administering offices should give particular emphasis to the monitoring of such claims. While the administering offices or third-party administrators are authorized to settle claims up to the annual MIP ceiling of six times the MIP reference salary locally, claims exceeding the threshold will be reported to United Nations Headquarters on a periodic basis.

Hardship provision:

The hardship provision shall be applicable in the event of major medical expenses where the subscriber or an enrolled family member is faced with expenses that are so significantly over and above the normal limits payable under the Plan as defined in paragraph 3.2 above that they would cause undue financial hardship. Undue financial hardship will not be considered as long as the total unreimbursed medical expenses (or "out-of-pocket" expenses) incurred by the subscriber and enrolled family members for reasonable and customary care have not exceeded one half of the subscriber's monthly net base salary for active staff members or one fourth of the monthly net base salary at the date of separation adjusted by the global cost-of-living increases declared by the United Nations Joint Staff Pension Fund for retirees.



Latest service update from Cigna International

- Contact Cigna completely free of charge no matter where in the world you are:
 - ✓ Call via commercial Skype (not Skype for Business) on "Cigna Health Benefits":
 - ✓ Use the call back feature on Cigna's member pages under header 'Contact'
- In collaboration with Cigna, HLIS was able to publish the annual maxima per duty station on the HLIS website:

https://www.un.org/insurance/sites/www.un.org.insurance/files/un_mip_2 021_maxima.pdf



Talk to a doctor anytime, from anywhere, free of charge

CIGNA GLOBAL TELEHEALTH

Live video & telephone doctor consultations





WHY GLOBAL TELEHEALTH?

24/7/365 access to a doctor within 48 hours, available globally in multiple languages.



WHAT IS IT?

Consult a licensed doctor with private, online, and live appointments via a secure video or phone conversation.

- Diagnosis for non-emergency health issues from acute conditions to complex chronic conditions and paediatric care
- **Prescriptions on common health issues -** when clinically necessary
- Free of charge

- 110+ board-certified doctors internal medicine, gastroenterology, orthopaedics, mental health specialists and paediatricians
- Telephone consultation: English, Spanish, French,
 German, Hindi, Mandarin Chinese, Arabic, Japanese
 & Portuguese
- Video Consultation: English & Spanish



What actions should you take no later than June 30th?

- Review your health insurance coverage and indicative data in Umoja ESS
- If desired, make a change in Umoja ESS to your health insurance plan by 30 June 2021:
 - ✓ Add or terminate coverage for eligible dependants This is the only opportunity to either add or remove dependants from your health insurance plan without a qualifying event (eg marriage/divorce, birth,...)

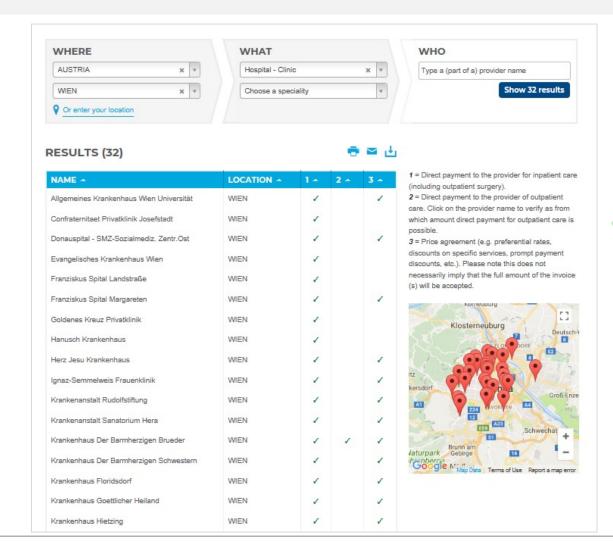


Ways to avoid surprises and steep increases of future premia

- Replace in-person consultations with Telehealth consultations
- If available, claim expenses with a primary insurance first
- When surgery is prescribed, a second medical opinion is advisable
- Obtain a cost estimate and share this with Cigna for review in case of planned surgery and day case



Visit in-network providers



- > In the easy dropdown menu you can enter location and medical specialty.
- > The search engine tells you how many health care providers fit the selected criteria and with whom Cigna has tariff and/or direct payment agreements.



Additional questions during this campaign?

- Visit the brand-new HLIS website: <u>www.un.org/insurance</u>
- Contact the Third-Party Administrator Cigna International
 - ✓ Call via commercial Skype (not Skype for Business) on "Cigna Health Benefits"
 - ✓ Use the call back feature on Cigna's member pages under header 'Contact'
 - ✓ Email to un.mip@cigna.com
 - ✓ Call Cigna 24/7/365 on the telephone number mentioned on your Cigna membership card
 - ✓ Call a toll-free line (listed on www.cignahealthbenefits.com under header 'Contact')
- Contact your HR focal point









Home

About the Section Toolkits

ith Plans 🔻

Life Insurance

Third-Party Referen Administrators Materi COVID-19 Response

Events an Updates Contact Us

All about Your Health & Life Insurance

Welcome to the website of the UN Health and Life Insurance Section (HLIS). We trust that this site provides you with everything you need to know about UNHQ-administered health & life insurance, including the onboarding process, plan maintenance and transition after your retirement.

It is the common responsibility of all plan participants of the self-insured UNHQ-administered health plans to safeguard the sustainability of these plans, funded by all plan participants and the Member States. This website allows staff members and retirees to be fully informed of the insurance benefits as well as ways to contribute to reducing costs. You will have access to reference material such as guidance material from Third-Party Administrators (TPAs), insurance rate simulators, checklists, brochures, forms and updates as well as various Toolkit pages designed for the specific needs of each of our more than 150,000 plan participants worldwide.

Enjoy your learning journey!

Shortcuts for your Specific Needs

Please click on the most applicable picture below in order to directly access the information most relevant to you.







Active Staff



Retirees

We kindly invite you to visit our website (www.un.org/insurance) and discover a wealth of information available to you!

