

Follow up FAQ from Benefits Information Sessions

Q: Are 90-day supply prescriptions available through retail pharmacies?

A: Yes, 90-day supply prescriptions are available through retail pharmacies, as well as through mail order.

Q: Are continuous glucose monitors covered under the medical or pharmacy portion of the plan?

A: Continuous glucose monitors are covered under the medical portion of the plan. Check the National Vendors Directory on the umr.com “Find a provider” page. MiniMed Distribution at 877-576-6113 is one of the common in-network providers that UMR members use.

Additional Resources



Behavioral
health directory



National vendors
directory



Add my provider
to the network

Q: Are employees able to set communication preferences for emails from the wellness program?

A: Yes, you may "opt out" of emails from the wellness program by removing your email address in the My Profile section on the wellness portal. (The wellness portal will be live in January.) However, if you remove your email address, you will not receive notifications that come from the wellness portal and could miss important information.

Q: Are the Mayo Clinic facilities and its doctors in-network?

A: Yes, the Mayo Clinic and many of its doctors are in the UnitedHealthcare Choice Plus Network. You are encouraged to confirm that your specific doctor is in-network by going to the umr.com “Find a provider” page. Search for UnitedHealthcare Plus Choice Network to go to the provider search page. Change the location to the city your doctor is in and search for your doctor by name. Directions for searching the provider directory are also posted on StribNet under “Get Help”, 2020 Benefits Resources.

Q: What is the average network discount between HealthPartners and UMR?

A: Due to confidentiality, we are not able to disclose network discounts. UMR and HealthPartners consider this confidential business information which is not publicly disclosed.

Q: Are there any benchmarking, or industry standards, for claims processing, quality of TPAs, etc.?

A: Yes, there are. UMR meets all industry standard performance measures. In addition, UMR has put contractual performance guarantees in place for Star Tribune with dollars at risk if these standards aren't met.

Q: Would there be an additional charge if referred to another provider by Teledoc?

A: Yes, if you speak with a Teledoc physician, you will be charged the consult fee, even if the Teledoc provider refers you to another provider. This is similar to when you visit a primary care provider, and you are then referred to another provider for care (a specialist for example). Using the information you provide at the time of the consult, the Teledoc physician assesses the situation, provides their medical opinion and treats you accordingly. As a reminder, the Teledoc service works best for cold and flu symptoms, allergies, pink eye, respiratory infections, sinus problems, and skin problems.

Q: How does the UMR "reasonable and customary" standard compare with HealthPartners' "usual and customary" standard?"

A: HealthPartners: The applicable usual and customary language from the HealthPartners SPD can be found below. The default will be the percentage of the Medicare fee schedule; however not all services have a Medicare fee schedule. For those services where there is not a fee schedule, number 2 or 3 are applied.

"For the usual and customary charge for covered services delivered by out-of-network providers, the Plan's payment is calculated using one of the following options to be determined at the Plan Manager's discretion: 1) a percentage of the Medicare fee schedule; 2) a comparable schedule if the service is not available on the Medicare fee schedule; or 3) a commercially reasonable rate for such service.

The usual and customary charge is the maximum amount allowed that the Plan considers in the calculation of the payment of charges incurred for certain covered services. You must pay for any charges above the usual and customary charge, and they do not apply to the out-of-pocket limit."

UMR: The applicable usual and customary language from the UMR SPD is below. (The UMR SPD is currently being finalized.)

"Usual and Customary (U&C) - Reimbursement for covered services received from providers, including physicians or health care facilities, who are not part of your network are determined based on one of the following:

- Fee(s) that are negotiated with the Physician or facility; or
- The amount that is usually charged by health care providers in the same geographical area (or greater area, if necessary) for the same services, treatment based on the 85th percentile, or

- Using current publicly available data reflecting the costs for health care providers providing the same or similar services, adjusted for geographical differences plus a margin factor.

When covered health services are received from a non-network provider as a result of an Emergency or as arranged by Your plan administrator, eligible expenses are an amount negotiated by Your claims administrator or an amount permitted by law. Please contact Your plan administrator if You are billed for amounts in excess of Your applicable Plan Participation, Co-payment or any Deductible. The Plan will not pay excessive charges or amounts You are not legally obligated to pay.”

Q: What does it mean that Star Tribune is self-insured?

A: Being self-insured means that rather than paying an insurance company to pay medical claims, we (Star Tribune) pay the claims ourselves, using a third-party administrator (UMR) to process the claims on our behalf. Self-funding can help companies save money, but can also carry significant risk. We purchase stop loss insurance for catastrophic claims to help reduce this risk. Star Tribune has been self-insured for over 15 years.

This infographic from our benefits broker, Lockton, illustrates what it means to be self-insured vs. fully insured. A fully insured medical plan charges a non-refundable premium, regardless of what actual claims are paid. A self-insured (or self-funded plan) only pays actual claims paid.

