

COVID-19 FAQ

Expatriate and Business Travel

The health of our members and supporting those who deliver care are our top priorities, and we are taking additional steps to provide support during this challenging time. This builds on UnitedHealthcare Global Solutions' previously announced efforts to waive cost-share for COVID-19 diagnostic testing and test-related visits and related items and services covered by the member's health plan. Please contact your Strategic Client Executive or your Sales Representative with any questions. The information below has been developed to address the most frequently asked questions.

Expatriate and Business Travel Policies

How will UnitedHealthcare Global Solutions cover COVID-19 treatment?

If a member gets sick with COVID-19, their health care provider may prescribe treatments. A summary of coverage is below. If the member has questions about their benefits, they should sign into their health plan account or call the number on their member ID card.

• For COVID-19 treatment, cost-sharing will be according to the member's benefit plan. Members will be responsible for any copay, coinsurance, or deductible. In the U.S., coverage for out-of-network services will be determined by the individual's benefit plan. State variations may apply.

Did UnitedHealthcare Global Solutions cover COVID-19 treatment at no cost share?

UnitedHealthcare Global Solutions waived member cost-sharing (i.e., deductibles, coinsurance, copayments) for the appropriate treatment of COVID-19 until December 31, 2020, for in-network and out-of-network through October 22, 2020. Waiving of cost-sharing applies both in and outside of the United States.

UnitedHealthcare Global Solutions had made the decision to extend medically necessary network inpatient COVID-19 treatment at no cost share for medical expenses for covered services. This extension applies between January 1, 2021, and January 31, 2021. This extension applies to inpatient COVID-19 treatment for members admitted with a COVID-19 diagnosis. We will also waive cost-share for COVID-related FDA-approved medications administered in these locations.

If a member received treatment under a COVID-19 admission or diagnosis code between February 4, 2020 and December 31, 2020, for in-network treatment and through October 22, 2020, for out-of-network treatment, we waived cost-sharing (co-pays, coinsurance, and deductibles) for the following:

- Office/telehealth visits
- Urgent care visits
- Emergency department visits
- Observations stays
- Inpatient hospital episodes
- Acute inpatient rehab
- Long-term acute care
- Skilled nursing facilities

When available, we will also waive cost-share for medications that are under Emergency Use Authorization (EUA) by the FDA COVID-19 treatment.

Please note, providers outside of the United States are treated as in-network.

Does UnitedHealthcare Global Solutions cover outpatient monoclonal antibody treatment?

The FDA has issued emergency use authorization for two monoclonal antibody treatments. According to the CDC, monoclonal antibody treatments may be recommended by a member's provider if they test positive for COVID-19 and are at risk of getting very sick or are admitted to the hospital. This treatment can help the body respond more effectively to the virus.

A summary of coverage for monoclonal antibody treatment is below. Members should sign into their online UnitedHealthcare <u>Global Solutions member account</u> for more details.

For monoclonal antibody treatments, members will have a \$0 cost-share with network providers in outpatient settings through Mar. 31, 2021. Other COVID-19 outpatient treatments will be according to the member's benefit plan. The member's benefit plan will determine coverage for out-of-network services. If outside the U.S., we will cover the administration cost provided that the treatment is authorized for use by the local government through March 31, 2021. Beginning April 1, 2021, the monoclonal antibody treatment will pay according to plan benefits. Other COVID-19 outpatient treatments will be according to the member's benefit plan.

Will standard programs apply to Out of Network (OON) claim processing, e.g., Reasonable & Customary (R&C) cutbacks, Maximum Non-Network Reimbursement (MNRP), shared savings, etc.?

Yes, standard OON programs apply. Any plan that has R&C would be managed on the back end, and we would negotiate up to posted cash price. If that is not available, the standard OON reimbursement will apply.

Is UnitedHealthcare Global Solutions waiving cost-sharing for telehealth testing and testing-related visits for COVID-19?

Yes, UnitedHealthcare Global Solutions waives member cost-sharing for COVID-19 telehealth testing and testing-related services received outside the U.S. from February 4, 2020, through July 19, 2021. UnitedHealthcare Global Solutions is also waiving cost-sharing for COVID-19 telehealth testing and testing related services-in and out-of-network when in the U.S. from February 4, 2020, through July 19, 2021.

Can telehealth providers evaluate symptoms and send the individual for a COVID-19 diagnostic test?

A telehealth provider may determine whether the individual should be sent to an approved location for a COVID-19 diagnostic test. The COVID-19 diagnostic test and test-related telehealth visit are paid at no cost share.

Is UnitedHealthcare Global Solutions waiving cost-sharing for telehealth visits for non-COVID-19?

Effective March 31, 2020, until September 30, 2020, for **expatriate** health plan customers, UnitedHealthcare Global Solutions waived cost-sharing for telehealth visits for medical, outpatient behavioral, and PT/OT/ST for services received outside the U.S. or by an in-network U.S. provider.

As of October 1, 2020, office visits and treatment other than COVID-19 test-related services or treatment are paid at plan benefits.

Is UnitedHealthcare Global Solutions expanding access to telehealth services?

Yes, effective March 18, 2020, and through December 31, 2020, members can access telehealth services through their own choice of network physician without any cost- share (copayment, deductible, or coinsurance) for COVID-19 visit. Additionally, expatriate plan members have access to designated virtual visit partners for both COVID-19 and non-COVID-19. In the United States, designated virtual visit partners include AmWell, Doctor on Demand, and Teladoc.

- UnitedHealthcare will waive cost-share (copayment, deductible, and coinsurance) for all COVID- 19 Virtual Visits through the public health emergency, currently July 19, 2021.
- Beginning October 1, 2020, members will pay the copay (if applicable) for both COVID-19 and non-COVID-19 services. The copay COVID-19 services with a COVID diagnosis will be reimbursed to the member.

Starting February 1, 2021, eligible members on expatriate policies will have a new virtual visit provider internationally through Global Telecare offered by Teladoc International. Prescriptions may be available in select locations.

Members in some regions of the globe have additional options for telehealth in addition to Teladoc:

- Members in Europe, except Germany, may also seek services through our network provider Babylon®.
 Babylon can provide prescription services in the European Economic Area (except Germany) and Switzerland.
- In the UAE, our designated partner is Health at Hand for members of the ASNIC program. Members may also use Global Telecare offered by Teladoc International.
- Members in Australia, with coverage through nib, also have access to telehealth services rendered by a psychologist/psychiatrist.

Does UnitedHealthcare Global Solutions cover the diagnostic test for COVID-19?

Yes, UnitedHealthcare Global Solutions will waive cost-sharing (copayment, coinsurance, and deductible) for medically appropriate COVID-19 diagnostic testing during this global public health emergency (The public health emergency is now extended again through July 19, 2021) at approved locations in local regulatory guidelines, <u>or if in the U.S., at approved locations in accordance with U.S. Centers for Disease Control and Prevention guidelines including FDA approved testing at designated labs around the country.</u> We are also waiving cost-sharing for COVID-19 diagnostic testing-related visits during this same time, whether the testing-related visit is received in a health care provider's office, an urgent care center, an emergency department, or through a telehealth visiTesting must be ordered by a physician or licensed health care professional.

Who qualifies as "appropriately licensed" to order a covered diagnostic or antibody test?

Licensure requirements vary by country and US state. In some locations, a pharmacist or other health care professional, such as a nurse practitioner, would have the appropriate licensure to order a test. Please refer to location-specific licensure requirements for proper guidance on who would qualify in the member's location.

Does UnitedHealthcare Global Solutions cover COVID-19 Home Tests?

The testing must be ordered by a physician or licensed health care professional and processed at approved locations in accordance with U.S. Centers for Disease Control and Prevention (CDC) guidelines, including FDA-approved testing at designated labs around the country.

Cost-share will be waived for testing and testing-related services during the national public health emergency. Claims must be coded appropriately for COVID-19 diagnostic testing, including home tests. At this time, home tests, including saliva tests with FDA approval or emergency use authorization (EUA), are covered for diagnosis.

Are home tests available outside of the US?

The testing must be ordered by a physician or licensed health care professional and processed at approved locations. Claims must include a detailed description for COVID-19 diagnostic testing, including home tests.

Can a member self-refer for the test?

No. A member should call their physician right away if they believe they have been exposed to COVID-19. The provider will have special procedures to follow. If the provider feels a COVID-19 diagnostic test is indicated, the provider will collect a respiratory specimen. In certain situations, the provider may refer a member to an approved testing location, and UnitedHealthcare will cover the test without cost-sharing.

Can pharmacists order and administer COVID-19 diagnostic and antibody tests?

Yes. In the US, HHS authorized licensed pharmacists to order and administer COVID-19 tests that the FDA has approved through emergency authorization. The guidance was issued on April 8, 2020, under the PREP Act. Pharmacists, in partnership with other health care providers, are well-positioned to aid COVID-19 testing expansion. Pharmacists are health care professionals with established relationships with their patients. Most Americans live close to a retail or independent community-based pharmacy. Pharmacists also have strong relationships with medical providers and hospitals to refer patients when necessary.

Will UnitedHealthcare Global Solutions cover the COVID-19 vaccine, and how will they cover the vaccine?

Yes. Expatriate members will have a \$0 cost-share (copayment, coinsurance, or deductible) for COVID-19 vaccines, as outlined below, including when two doses are required: This cost-share waiver is applicable through the national (U.S.) public health emergency period, currently scheduled to end July 19, 2021.

- In the U.S.: The COVID-19 vaccine serum will initially be paid for by the U.S. government. We will cover the administration of FDA-authorized COVID-19 vaccines with no cost share for in-and out-of-network providers. Administration fees for in-network providers will be based on contracted rates. Administration fees for out-of-network providers will be based on CMS published rates.
- Outside of the U.S.: We will cover the cost of the vaccine, along with any administration fees that the local government does not otherwise fund, for COVID-19 vaccines provided at an approved location and in accordance with applicable governmental or public health advice.

Are travel expenses covered for expatriate members who travel to receive a COVID-19 vaccine?

No. Travel expenses to receive a vaccine outside of the member's location are not covered.

Does UnitedHealthcare have a tool to help members find resources in their area?

COVID-19 vaccines are an essential step in slowing the spread of the disease, and it will take time to make enough vaccines for everyone. Due to the initial limited supply, the Centers for Disease Control and Prevention and state and local health departments coordinate who should get vaccinated first and where vaccines are available. This information is developing and varies locally.

- The launch of the US-based UnitedHealthcare COVID-19 Vaccine Resource Locator will help members navigate local vaccination planning and find resources for their area to help them take steps toward vaccination. This zip-codebased tool finds online public vaccine resources available through state and local health departments and national retail pharmacies.
- These public resources may include information on who is eligible to get the vaccine, where vaccines may be available, how to sign up for alerts, and in some places, scheduling an appointment.
- We are updating resources as more information becomes available. Resources vary based on location and time.
- At this time, the resource locator will not include information available from specific health care providers or physician
 offices.
- Members should visit the Global Intelligence Center for vaccine information outside of the US. If the member is unable to find the required information, please contact your SCE.

How are FDA-authorized COVID-19 vaccines being distributed in the US?

Due to limited supply, FDA-authorized COVID-19 vaccine distribution is being coordinated by the CDC with state and local health departments. The federal government is also working to help accelerate vaccination and provide resources to help end the pandemic.

Vaccination is occurring in phases, with those at the highest risk getting vaccines first. The CDC recommendations for vaccination prioritization are below. <u>State and local health departments</u> may have different criteria locally. To understand the vaccination plan and eligibility in their local area, members should look to their state and local health department's website, as well as local pharmacies and health care providers. Availability and eligibility vary locally.

Members should go to the Global Intelligence Center for vaccine information outside of the US. If the member is unable to find the required information, please contact your SCE.

CDC COVID-19 Vaccine Distribution Framework

Phase 1A	Phase 1B	Phase 1C	Phase 2	Phase 3
Health care workers	Frontline essential workers in these	Other essential workers:	People ages 16 and older not	Children and young adults,
Long-term care residents	industries:	 Transportation and logistics 	recommended in Phase 1	pending recommendations for
	 Fire and police departments 	 Water and wastewater 		vaccination
	Corrections	Food service		
	 Food and agriculture 	 Shelter and housing 		
	U.S. Postal Service	Finance		
	Manufacturing	 Information technology and 		
	Grocery stores	communications		
	Public transit	 Energy, legal and media 		
	 Education, including teachers, 	 Public safety and public health 		
	support staff and daycares	workers		
	People ages 75 and older	People ages 65 to 74 years old		
		People ages 16 to 64 years old with high-risk, underlying conditions*		

*List of high-risk, underlying medical conditions can be found here.

The framework continues to evolve as the vaccine authorization, and distribution process continues.

COVID-19 vaccines may be more available in the spring to the mid-year time frame as additional vaccines are FDA-authorized, produced, and distributed. The goal will be for people to get the COVID-19 vaccine easily and conveniently, as recommended by their health care provider.

The FDA reports that it is also likely that there will be a period where COVID-19 vaccines will not be recommended for children or women who are pregnant. However, clinical trials continue to expand participants.

Will the COVID-19 vaccines provide protection from COVID-19?

In the US, the FDA has authorized 3 COVID-19 vaccines for emergency use. These vaccines are as safe and as effective as possible at preventing COVID-19, according to the CDC. There are 1 one-dose vaccine and 2 two-dose vaccines. Like other vaccines, COVID-19 vaccines can take several weeks after vaccination completion for full effectiveness.

Vaccine manufacturer	Doses ¹	Ages for EAU ²	FDA Fact Sheets
<u>Pfizer-BioNTech</u>	2 doses, 21 days apart	16 and older	Pfizer for health care providers Pfizer for patients and caregivers
<u>Moderna</u>	2-doses, 1 month apart	18 and older	Moderna for health care providers Moderna for patients and caregivers
Janssen (Johnson and Johnson)	-1 dose	18 and older	Janssen for health care providers Janssen for patients and caregivers

1 - Always follow vaccination instructions from the manufacturer.

2 - Emergency Use Authorization (EUA) for use among people of these ages.

Like the flu vaccine, vaccination providers will administer the COVID-19 vaccine based on availability. Vaccination providers may not have all FDA-authorized COVID-19 vaccines at their location.

Important reminders on the protection COVID-19 vaccines provide:

- While COVID-19 vaccines may help protect the individual from the virus, it is not yet known if vaccinated people can still give the COVID-19 virus to others.
- The duration of protection against COVID-19 is currently unknown.

Because of this, members should follow public health safety guidelines to help protect themselves and others. Wear a face mask, practice physical distancing and wash hands regularly.

What can you tell me about Johnson & Johnson's Janssen COVID-19 vaccine and its safety?

The use of Johnson & Johnson's Janssen COVID-19 vaccine has resumed. Medical and scientific teams with the U.S. Food and Drug Administration (FDA) and the U.S. Centers for Disease Control and Prevention (CDC) did a thorough review that found this vaccine is safe and effective in preventing COVID-19. As of April 23, 2021, and out of more than 6.8 million doses administered, the FDA and CDC found a total of 15 cases of a severe blood clot in people after receiving Johnson & Johnson's Janssen COVID-19 vaccine. These cases occurred in women between the ages of 18 and 59, with a median age of 37 years. Reports indicated symptom onset between 6 and 15 days after vaccination.

- The FDA and CDC have determined the chance of blood clots and low platelets occurring is very low, and the
 vaccine's benefits outweigh the known and potential risks in individuals 18 years of age and older. The FDA and CDC
 remain vigilant in continuing to investigate this risk.
- The Janssen COVID-19 Vaccine Fact Sheets for Healthcare Providers and Patients have been updated to include information about this very rare and serious type of blood clot. Women younger than 50 years old should be aware of this rare risk of blood clots with low platelets after vaccination. Other COVID-19 vaccines, such as Pfizer and Moderna, are available where this risk has not been seen.
- The safety of vaccines is a top priority, and millions of people have already been safely vaccinated. The CDC states this potential safety issue was caught early and reflects the vaccine safety system is working. The brief pause reflected the federal government's commitment to transparency as the CDC and FDA reviewed data. COVID-19 vaccines have undergone and will continue to experience intensive safety monitoring.
- Learn more about the Janssen COVID-19 vaccine here.

Will Johnson & Johnson's Janssen COVID-19 vaccine be available?

Use of Johnson & Johnson's Janssen COVID-19 vaccine will resume, effective April 23, 2021. The <u>CDC and FDA</u> recommendation states that women younger than 50 years old should be aware of the rare risk of blood clots with low platelets after vaccination. Other COVID-19 vaccines, such as Pfizer and Moderna, are available where this risk has not been seen. Additional details on Johnson & Johnson's Janssen COVID-19 vaccine can be found on the <u>CDC website</u>.

Should the overall safety of COVID-19 vaccines be a concern?

- The <u>safety</u> of COVID-19 vaccines is a top priority, and millions of people have already been safely vaccinated. COVID-19 vaccines have undergone and will continue to undergo intensive safety monitoring by the CDC and FDA. According to the <u>CDC</u>, the Johnson & Johnson's Janssen safety issue was caught early and reflects the vaccine safety system is working. The brief pause reflected the federal government's commitment to transparency as the CDC and FDA reviewed data.
- Medical and scientific teams with the FDA and CDC did a <u>thorough review</u> that found Johnson & Johnson's Janssen COVID-19 vaccine is safe and effective in preventing COVID-19. As of April 23, 2021, and out of more than 6.8 million doses administered, the <u>FDA and CDC</u> found a total of 15 cases of a severe blood clot in people after receiving this vaccine. These cases occurred in women between the ages of 18 and 59, with a median age of 37 years. Reports indicated symptom onset between 6 and 15 days after vaccination.
- The Janssen COVID-19 Vaccine Fact Sheets for <u>Healthcare Providers</u> and <u>Patients</u> have been updated to include information about this very rare and serious type of blood clot. Women younger than 50 years old should be aware of this rare risk of blood clots with low platelets after vaccination. Other COVID-19 vaccines, such as Pfizer and Moderna, are available where this risk has not been seen.

To learn more, visit the CDC website.

Will Johnson & Johnson's Janssen COVID-19 vaccine continue to be covered?

COVID-19 vaccinations, including Janssen, authorized for emergency use by the FDA, will continue to have a \$0 cost-share through the national public health emergency period. Additional cost and coverage details can be found at <u>uhc.com/covid-19vaccines</u>.

What should I know about getting Johnson & Johnson's Janssen vaccine?

- According to the <u>CDC</u>, if you received Johnson & Johnson's Janssen COVID-19 vaccine more than 3 weeks ago, your risk of developing a blood clot with low platelets is very low.
- If you received this vaccine within the last 3 weeks, your risk of developing a blood clot with low platelets is very low. However, be on the lookout for possible symptoms of a blood clot with low platelets, which typically occurs within 3 weeks of vaccination, and seek medical care urgently if you develop any of these symptoms:
 - Severe headache
 - Backache
 - Blurred vision
 - Biuned visit
 Fainting
 - Seizures
 - Severe pain in your abdomen or stomach
 - Severe pain in your chest
 - Leg swelling
 - Shortness of breath
 - Tiny red spots on the skin (petechiae)
 - New or easy bruising or bleeding
- If you have other questions, call your primary care provider or other health care professional. You can also use a
 <u>virtual visit</u> to connect with a health care professional. To access 24/7 on-demand virtual visits through a designated
 national provider, sign in to your <u>online UnitedHealthcare account</u>. Cost-share for the virtual visit will be according to
 your benefits plan.

How are adverse reactions to vaccines covered?

Care for adverse side effects will be covered according to your benefits plan. You may be responsible for copays, deductibles, coinsurance, or out-of-network charges, according to your benefits plan.

Are there any new safety concerns or updates regarding the FDA-authorized Pfizer or Moderna COVID-19 vaccines?

 No, the FDA and the CDC have not published any new safety concerns or updates regarding the Pfizer and Moderna COVID-19 vaccines. Vaccination continues to be an essential step in slowing the spread of COVID-19, and overall COVID-19 vaccination guidance has not changed. For the latest COVID-19 vaccine information, visit the CDC's overview pages for <u>Johnson</u> <u>& Johnson's Janssen</u>, <u>Pfizer</u>, and <u>Moderna</u>.

Which COVID-19 vaccine will be recommended for members?

Upon authorization, a member's primary care provider or other health care professional can help a member understand which COVID-19 vaccine might be suitable for them.

In the US, the CDC website continues to be the best resource for COVID-19 information. Members should visit myuhc.com for COVID-19 resources available through their health plan.

Can employees who return to their home country continue the expatriate benefit plan?

Yes, members may continue the expatriate policy if they remain classified as international or expatriate employees, and premiums are paid.

If we reduce hours for part of our covered employees or furlough them, can we continue to cover these employees?

Yes, UnitedHealthcare Global Solutions is temporarily relaxing its requirement that employees be actively working to be eligible for coverage and will allow you to cover your reduced hour employees, as long as you pay the monthly premium. If the employee is on a customer-approved leave of absence/furlough and the customer continues to pay required medical premiums, and the employee was eligible for and enrolled in coverage before the absence/furlough, the coverage will remain in force for no longer than 20 consecutive weeks for non-medical leaves (i.e., temporarily laid off) or no longer than 26 consecutive weeks for a medical leave. Coverage may be extended if required by local, state, or federal rules. Please note that you must offer this coverage on a uniform, non-discriminatory basis.

Does UnitedHealthcare Global Solutions cover surveillance testing?

UnitedHealthcare Global Solutions is covering medically appropriate COVID-19 diagnostic testing (virus/antigen) at no costshare when ordered by a physician or appropriately licensed health care professional for purposes of diagnosis or treatment of an individual member.

UnitedHealthcare Global Solutions health benefit plans generally do not cover testing for surveillance, including travel or pretravel screening, or public health purposes unless required by applicable law.

Who should a member call if they are symptomatic or believe they may have been exposed to COVID-19?

Members should contact the local authorities in their country for guidance on where to go for testing. They will inform the member of special procedures to follow. This applies to expatriate and global business travel policies.

If a member is quarantined while on business travel, is hotel and food reimbursed under the Expat Medical policy?

The policy covers a per diem if a member is quarantined due to illness. Please refer to the policy for details on the per diem.

Do you offer a resource if a member needs emotional support?

Members on an expatriate policy have access to Employee Assistance Plan (EAP) and should call the number on the back of their ID card.

May a fully insured group that missed UnitedHealthcare Global Solution's special enrollment period in response to the COVID-19 National Emergency still offer a voluntary special enrollment?

- No. UnitedHealthcare sponsored a voluntary Special Enrollment Period (SEP) for our fully insured customers with employees seeking to change their benefit election in response to COVID-19. The SEP, however, is no longer available.
- The SEP took place March 23, 2020, was extended to April 13, 2020, and expired on Nov. 15, 2020. It created the opportunity for many individuals that previously waived coverage to enroll and for others to revoke their existing election and/or make a new health coverage decision.
- UnitedHealthcare Global Solutions stopped offering its voluntary SEP effective Nov. 15, 2020. The SEP has sunset because it had been in place for several months, which allowed ample time for individuals who had previously waived coverage prior to COVID-19 to enroll in coverage. In addition, many of our fully insured customers are now engaged in their annual open enrollment periods. Thus, the voluntary period is no longer needed.

Does the expiration of the UnitedHealthcare voluntary SEP affect the rights of individuals to enroll under HIPAA when certain life events take place or other group health plan coverage is lost?

No. The expiration of the UnitedHealthcare Global Solutions Voluntary SEP does not affect the rights an individual has to enroll under the HIPAA portability special enrollment provisions. Individuals are provided with special enrollment rights when certain family, job, or other events occur so long as they meet applicable portability requirements.

Under HIPAA portability, an individual is provided with special enrollment rights when one of the following special life events occurs.

- A member is allowed special enrollment when there is a:
 - Birth of newborn
 - o Legal Adoption
 - Placement for Adoption
 - o Marriage

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- Special enrollment is also available when there is a:
 - Loss of coverage due to:
 - Job Change
 - Reduction of hours
 - Loss of employment (not due to gross misconduct or failure to pay premiums)
 - Loss of Spouse coverage
 - Dropping of coverage due to stop of employer contributions to coverage
 - o Loss of Medicaid, CHIP eligibility, or when an individual becomes eligible for state premium assistance.

Did the DOL/IRS Extensions of Certain Timeframes regulation expand special enrollment opportunities?

No. The "Extensions of Certain Timeframes" regulation (85 Fed Reg 26351, May 4, 2020) gave members additional time to request special enrollment under the HIPAA portability provisions. For example, the 30-day time frame for requesting special enrollment in the case of a marriage, birth, adoption, or placement for adoption does not apply until 60 days after the Outbreak Period announced by the President expires. Thus, the Extensions give members more time to request special enrollment for certain life events but do not create additional opportunities for special enrollment.

Those opportunities can be found here

Importantly, members seeking special enrollment are still required to demonstrate that a life event or loss of other coverage, for example, took place to enroll.

Business Travel Medical Policies

Do the UnitedHealthcare Global Solutions Business Travel Medical policy only provide coverage when a member is traveling outside their home country?

The member must be outside of their home country for the primary purpose of business for benefits to apply under the Global Business Travel Medical policy.

Can we increase annual plan limits in our policy?

Annual limits may be available to change at the contract renewal. Please contact your Strategic Client Executive.

Does the Business Travel Medical policy cover medical evacuation?

Covered medical evacuation services include arranging and providing transportation and related medical services and supplies necessary in conjunction with a medically necessary emergency evacuation coordinated by UnitedHealthcare Global Solutions. Please note new travel bans, restrictions, and border closures may limit and/or restrict the ability to provide medical evacuations. COVID-19 patients may have further limitations imposed by health authorities. All cases will be evaluated on a case-by-case basis.

Does the business travel policy cover vaccinations?

Vaccinations are not standardly covered. However, vaccinations for the purpose of work and/or travel may be included depending on the type of policy purchased by the client.

If business travel is extended due to travel restrictions, will the member still be covered? The Global Business Travel Medical

policy does not have a day limit.

Is repatriation of mortal remains covered by the Global Business Travel Medical policy?

The Global Business Travel Medical policy covers repatriation of mortal remains, and benefit plan provisions would apply. Please note new travel bans, restrictions, and border closures will limit and/or restrict the ability to provide repatriation of mortal remains.

If a member is quarantined while on business travel, is hotel and food reimbursed under the Global Business Travel Medical policy?

The policy covers a per diem if a member is quarantined due to illness. Please refer to the policy for details on the per diem.

UNITEDHEALTHCARE PROPRIETARY AND CONFIDENTIAL

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Some of our products and networks have different features and as a result different guidelines and protocols are applicable to them. Please contact your UnitedHealthcare account representative for additional details.

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