# UPMC HEALTH PLAN

# A message from UPMC Health Plan to our small business clients impacted by COVID-19:

The following message has been shared with employer groups with less than 500 employees.

Like you, we at UPMC Health Plan have been making a number of adjustments to the way we live and work. While we have all experienced challenges adapting to the new and unfamiliar situation around us, we know that the economic pressures from restricted business operations due to COVID-19 can be especially difficult for small businesses. As you work to balance your own commitments to your families, business, employees, and communities, we want you to know that we are here and we are committed to helping you get through this difficult time. In addition to our benefit and coverage enhancements during the COVID-19 emergency, we are offering the following specific forms of assistance for our fully insured small business clients impacted by COVID-19:

## **No-Fee Credit Card Payments**

While we already allow our business clients to pay their premiums using a credit card, from April 1 through July 31, 2020, we will be waiving all fees associated with credit card payments.

#### **No-Fee Reinstatements**

For any eligible group that experiences a coverage lapse in March 2020

through July 2020 and requests reinstatement, we will waive any fees associated with policy reinstatements that occur within 30 days.

#### **Mid-Year Benefit Adjustments**

For any eligible group that wants to reduce premium costs by offering a lower cost plan, we will permit prospective mid-year buy downs. Groups will be required to maintain the same anniversary date and UPMC Health Plan will apply deductible credits for enrolled members based on accrued deductible spending at the time of plan transfer. Before making benefit changes employers should discuss implications with their tax and benefit advisors.

#### **No-Cost Premium Deferment**

While financial assistance for impacted businesses may be available from a variety of sources, business owners shouldn't have to worry that administrative delays in receipt of loans or grants could be the difference in maintaining coverage for their employees. For any eligible group that is facing extreme hardship and is applying for State or Federal financial support through the Paycheck Protection Program, Pennsylvania COVID-19 Working Capital Access Program (CWCA), an SBA Economic Injury Disaster Loan or other similar program, we will defer, at the group's option, their full April or May premium. This deferral will not be subject to any fee or interest charge for up to 6 months. Premium Deferment groups will be required to sign a Deferment Agreement and will have the option of paying back the deferred premium upon receipt of their financial assistance disbursement or over three monthly installments in July, August, and September 2020.

No specific loan or assistance program is required for groups requesting this relief, but we encourage clients to evaluate the Paycheck Protection Program,

which may allow for 100% loan forgiveness when used to pay for certain expenses that include group health insurance premiums. For more information on this program:

- <u>Paycheck Protection Program Information Sheet for Borrowers</u> (U.S. Treasury)
- Paycheck Protection Program Application Form

### **Eligible Employee Flexibility**

Through July 31, 2020, UPMC Health Plan is relaxing its requirement that employees be actively working to be eligible for coverage and will allow groups to continue coverage for temporarily laid-off or furloughed employees. Groups must continue to pay all monthly premiums and this coverage must be offered to impacted employees on a uniform, non-discriminatory basis. Before making plan eligibility changes employers should discuss implications with their tax and benefit advisors.

#### **Next Steps**

For more information about any of these options, employers should contact their agent, broker, or UPMC Health Plan account manager. Exercise of any option or program described herein is subject to approval by UPMC Health Plan.

Please note that, while our Member Services team is generally able to answer a wide range of questions, it may not the best source of answers to questions about our relief options for small employers. Employers offering HSAs or FSAs should also talk to their tax advisors.

The term "eligible group" refers to existing fully-insured group health plan (medical) clients with less than 500 employees. Before making any benefit or eligibility changes, employers should discuss implications with their tax and benefit advisors. Program terms may be subject to change and/or approval by the Pennsylvania Insurance Department.