

**University of Central Arkansas**  
**CURRENT PPO HEALTH PLAN FAQ**

**Frequently asked questions for health insurance:**

1. Where can I call to check on the status of a claim?

You may call United Healthcare (UHC) at 1-866-633-2446 or go to [myuhc.com](http://myuhc.com). After your service is provided it usually takes about 2-3 weeks for the claim to process and pay.

2. Can I change my PCP?

UHC does not require that you name a PCP so there is no need to make any change.

3. How can I determine if a physician is in the network?

You can reference the website provider search at [www.myuhc.com](http://www.myuhc.com) or call customer service at 1-866-633-2446.

4. How can I order a new health/prescription insurance card?

You can reorder ID cards on the website [www.myuhc.com](http://www.myuhc.com), call customer service at 1-866-633-2446, or call the UCA Human Resource office @ 501-450-3181. A temporary card can be printed from the [www.myuhc.com](http://www.myuhc.com) website.

5. What is a deductible?

A deductible is first dollar cost that you pay out of your pocket. The deductible only applies to services that do not have a flat dollar copay.

6. What is coinsurance?

Coinsurance is a percentage of the cost of a service that you pay for out of your pocket. Your coinsurance is what applies to your out of pocket maximum.

7. Are annual routine physicals covered on my plan?

Annual routine physicals are covered under your plan.

8. Does our plan provide vision care?

Your plan does cover one refractive eye exam once every 24 months for a copay.

9. Are allergy shots covered on my plan?

Allergy shots are covered under your plan. Any injection received in a physician's office is subject to a copay or the actual cost of injection whichever is least.

10. What is considered a month's supply of a prescription?

A month's supply of a prescription can vary by drug. UHC uses the guidelines from the drug manufacturer to determine what a month's supply of a specific prescription would be.

11. When can I add a family member to my policy?

You can add or term family members at open enrollment time. Open enrollment will usually start in October with an effective date of January 1 of the following year. The only other time you can add or term a family member is if you have a qualifying event.

12. What are considered qualifying events for purposes of making changes to my policy?

A qualifying event can be marriage, divorce, birth, adoption, death, loss in full time student status, or loss of other insurance coverage.

13. If I had a qualifying event and added a family member to my plan during the plan year, when does their coverage become effective?

The date of the event (e.g. birth date of newborn) would be the effective date.

14. When can I drop a family member from my policy?

You can drop a family member during open enrollment or if there is a qualifying event. See qualifying events above.

15. What would be the termination date of the member's coverage?

The end of the month they are terminated regardless of the "qualifying event."

16. Do I need a referral to see a specialist?

No referrals are required by UHC.

17. If my doctor is not available, can I see another doctor in the same clinic?

You can see another doctor but to receive the in network benefit level, you would need to check the network status of the other physician.

18. Can I go out-of-network for health services?

You can go out of network for health services but the out of pocket cost to the member is more.

19. Does my child who attends college out-of-state have coverage?

The child can have coverage with your plan. It is best to go on the [www.myuhc.com](http://www.myuhc.com) website or call customer service to make sure there are in network providers available in that area before adding the student to the policy.

20. Does this plan provide international travel coverage?

This plan only covers emergencies internationally. If you are required to pay up front in another country make sure to get a copy of the bill in English. You can then file for reimbursement if needed.

21. How can I determine who the providers are for mental health/substance abuse?

You can reference the website at: <https://www.lww-trans.com/PreClinicianSearchAction.do>

22. If I need to see a provider for mental health/substance abuse, what should I do?

1. If you use a mental health/substance abuse provider that is in the network, the provider is responsible for obtaining a pre-authorization. Be sure the pre-authorization is approved prior to your appointment.

2. If you use a mental health/substance abuse provider that is out-of-network, the patient is responsible for the pre-authorization. The phone number for United Behavioral Health is 1-800-391-5653.

23. Where can I call to ask questions about the prescription drug program?

Members may call Medco pharmacy at 1-877-842-1510. If a physicians office needs to call for notification on prescriptions they may call 1-800-753-2851.

24. How can I determine what the cost of my prescription will be?

Members may call Medco pharmacy @ 1-877-842-1510 or access the website @ [www.myuhc.com](http://www.myuhc.com) and go to Drug info. to search for drug.

25. I am a new employee. When is my health insurance coverage effective?

Your health coverage starts on your 1st day of full-time employment.

26. Does this health insurance policy provide dental coverage?

No coverage is provided for dental services such as preventative care, diagnosis, Treatment of or related to the teeth, jawbones or gums, implants, braces, dental x-rays, etc. Only dental accidents will be covered. Please access your account under the [www.myuhc.com](http://www.myuhc.com) website for details.