

# **Post-Enrollment Frequently Asked Questions (FAQ)**

for AARP® Medicare Supplement
Insurance Plans from UnitedHealthcare®



Utilize the information in this FAQ to engage your clients in key conversations to help them get the most out of their AARP Medicare Supplement Plan.

## **Common Questions:**



Upon being accepted into their plan, members can typically expect:

- If they selected electronic delivery of plan documents,
  - To receive a Welcome Email letting them know their plan documents have been posted to <a href="mailto:myAARPMedicare.com">myAARPMedicare.com</a> within 2-3 days. Please note, members will have to create an account to log in and view their materials.
  - o To receive their health insurance identification (ID) card in the mail within 7-12 days.
- If they did not select electronic delivery of plan documents,
  - o To receive their Welcome Materials, including their plan documents and ID card, in the mail within 7-12 days.
- To receive an email (if one was provided) and a phone call from a UnitedHealthcare representative to complete the Health Check-In Survey\* during the call or later on the dedicated member website, <a href="mayAARPMedicare.com">myAARPMedicare.com</a>, within 2 weeks after their plan effective date.

## **→** What should members do first?

After receiving their Welcome Materials, members should:

- Review their plan information, including their Outline of Coverage, Certificate of Insurance, and ID card.
  - If any information shown on their ID card is not what is expected, please have the member contact UnitedHealthcare Customer Service as soon as possible at 1-800-523-5800.

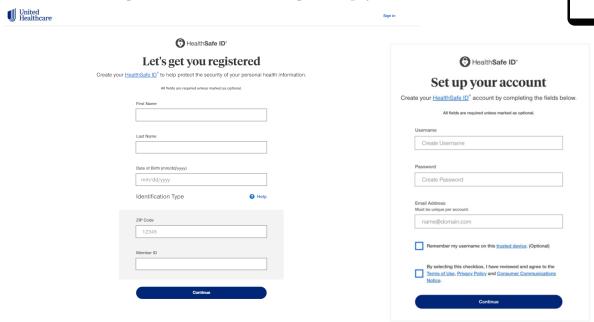


- · Review and pay their first month's premium if it hasn't already been paid.
  - If they haven't already done so, be sure to remind your client that they can pay via monthly paper coupon, by recurring Electronic Funds Transfer (EFT), online at <a href="mailto:myAARPMedicare.com">myAARPMedicare.com</a>, or over the phone. Payment via recurring EFT is recommended.
- If the member is interested, they can create an account on the member website.

## How can members get started on the member website?

While setting up an online account isn't required, an online account can give members access to many resources and self-service options to help them maximize the value of their new plan. Members simply visit:

- myAARPMedicare.com and select "Register now".
- A member can get started creating their account\*\* using their Member ID number and their email address.
  - If a member has trouble registering, they should contact UnitedHealthcare Customer Service at 1-800-523-5800.
- Remind members there is also the UnitedHealthcare mobile application they can download via the App Store to their smart device to easily access their account information, including their ID card, on-the-go. Simply search for "UHC".



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### What can members do on the member website?

After creating an account and logging in, members can:

- Find claims and track claim progress.
- View and manage premium payments.
- Find doctors or specialists who accept Medicare.
- View plan benefits.
- Find plan forms and documents such as the Certificate of Insurance, privacy authorization form, and more.
- Print a copy of their ID card.
- Sign up for electronic delivery of plan documents.
- Complete the Health Check-In Survey.
- Chat live with UnitedHealthcare Customer Service.
- For those with a plan that has Wellness Extras, they can review and activate their discounts and services.
- Find other resources and tips to help them use their plan, stay more active, sharpen their mind, etc.

For a high-level view of the navigation of the website please *click here*.

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## What can members expect after they visit a provider?

UnitedHealthcare coordinates with Medicare and health care providers to automatically receive claims, so in most cases, members don't have the worry or hassle of filing claims.

- After their appointment, the health care provider(s) will submit a claim to request payment—to Medicare.
- After Medicare considers the medical claim, UnitedHealthcare will receive and consider the claim.
- Members will receive periodic Explanation of Benefits (EOBs) from both Medicare and UnitedHealthcare detailing the services they received, how these claims were considered, and any payments they owe. If they owe anything further, they will receive a bill from their provider and should pay their provider directly.
  - Generally, if a member has medical claims, they will receive an EOB about every 90 days from UnitedHealthcare.



#### What other resources are available to members?

For additional Medicare, plan, or other relevant questions, members can check out:

- The official website for the U.S. government's Medicare program. This is the site to check which services are covered by Medicare:
  - www.Medicare.gov
- Thousands of health care terms defined in plain, clear language to help members make informed decisions:
  - www.JustPlainClear.com/en
- More information on the discounts and services a part of the Wellness Extras (if the member's plan includes them):
  - myAARPMedicare.com/Extras
- UnitedHealthcare Customer Service:
  - Call 1-800-523-5800, TTY 711
     Monday Friday, 7 a.m. 11 p.m., ET and Saturday, 9 a.m. 5 p.m., ET



When possible, UnitedHealthcare will email you copies of communications your clients receive. Please ensure your email address is up-to-date in Jarvis by selecting your Username in the upper-right-hand corner, then Manage Profile and Edit Personal Info.

This document is intended to serve as a reference guide only. Information provided, including timelines, screenshots, websites, and instructions may be subject to change. Please be on the lookout for communications and/or notifications regarding any changes to this document or the availability of updated versions.

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<sup>\*</sup>The Health Check-In Survey is voluntary and responses will be kept confidential.

<sup>\*\*</sup>Agents cannot create a member account on behalf of their client.