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In the Spotlight

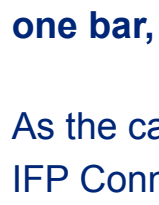


Mark of Integrity

When members make important health coverage decisions, trust matters. That trust begins with every interaction, every enrollment and every commitment to doing what's right for the member. **Brokering a Trust Advantage** is the foundation of the Mark of Integrity, a new initiative designed to help define, reinforce and celebrate what selling with integrity looks like for Individual & Family Plans (IFP) agents and brokers.

The Mark of Integrity includes several components designed to educate, inform and support distribution partners:

-  **Training and Attestation:** To earn the Mark of Integrity, agents and brokers will complete a training module and attest to a Pledge of Compliance, reinforcing their commitment to ethical, member-first selling practices.
-  **Ongoing Communications:** Through IFP Connect articles, leadership messages and timely alerts, brokers and agencies will receive predictable updates and important compliance reminders.
-  **Performance Visibility:** Quarterly reporting will provide insights into key integrity measures, helping identify strengths and opportunities for improvement.

-  **Coaching and Support:** When risk indicators emerge, partners will have access to coaching resources, job aids and a clear pathway back to good standing.

The Mark of Integrity is more than a symbol – it represents a shared commitment to compliant, ethical, member-first growth, and serves as a visible sign of accountability for brokers, agencies and distribution partners. The standard is consistent across all channels: **one bar, one mark, one promise to members.**

As the campaign rolls out in the coming weeks, look for future Mark of Integrity articles in IFP Connect featuring training opportunities, compliance resources, guidance on high-risk topics and practical tools to help strengthen trust and integrity across the market.



Training Touchpoint



Dual Enrollment

Available in Spanish and English, the Dual Enrollment training module on Jarvis can help you prepare for the upcoming Open Enrollment Period (OEP) by keeping you informed about what you need to do to assist members who are enrolled in both Medicaid and an Individual & Family plan. It can also help you learn how to ensure your clients avoid this issue in the future.

If any of the members in your book of business are enrolled in Medicaid (or the Children's Health Insurance Program (CHIP)) as well as an Individual & Family Affordable Care Act (ACA) Marketplace plan, they will no longer be eligible for subsidies or tax credits used towards their Individual & Family plan and will need to pay full price for their Marketplace plan if they want to keep both types of coverage. Furthermore, **failing to end Marketplace coverage when Medicaid coverage starts means they may have to pay back some or all of the premium tax credit owed when they file their federal taxes.**

During OEP, **checking consumers' Medicaid status** before enrolling them in an Individual & Family plan is an important and necessary step you should take to help avoid dual enrollments.

To learn more, launch the Dual Enrollment training module by going to **Jarvis > Knowledge Center > Agent Training > On-Demand Training** and launch the IFP training site.

IFP Training



Jarvis updates

Recent Jarvis updates have provided new tools and reporting enhancements designed to help you work more efficiently. Here's what's new on Jarvis:

PHD escalated service request dashboard

Agents and agencies can now track member escalations submitted through a member's profile page in one centralized location. The new Producer Help Desk (PHD) escalated service request dashboard provides greater visibility into submitted escalations, helping you quickly identify open issues and monitor progress without navigating multiple records.

Key enhancements include:

- A single view of escalation requests submitted through the member's profile page
- Visibility into whether the member contacted Member Services and the reason for the escalation
- The ability to review submitted escalations without opening profile pages for each individual member
- A new Service Requests tile on the Jarvis homepage for quick access
- Open escalation indicators displayed within the profile page to help identify members with active requests

ICHRA reporting enhancements added to late payment and Book of Business reports

The Late Payment Report now includes an indicator to identify members with an Individual Coverage Health Reimbursement Arrangement (ICHRA) or Qualified Small Employer Health Reimbursement Arrangement (QSEHRA). Additionally, "Payment Responsibility" will now be displayed, to show whether premiums are paid by the member, employer or third-party administrator (TPA).

These additions give you greater insight into late-payment situations and can help determine the appropriate party to contact when addressing payment-related concerns.

The Payment Responsibility field has also been added to the downloadable Book of Business (BoB) report, providing another way to view and analyze ICHRA membership data.

Go to your BoB



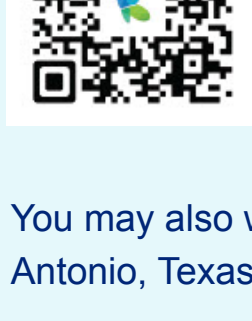
Member Experience Focus



Sanitas expansion

Sanitas Medical Centers and UnitedHealthcare have partnered to offer value-based care, meaning members can get personalized, convenient care – all under one roof. We are proud to announce that new Sanitas locations will be available in January 2027 in the following areas:

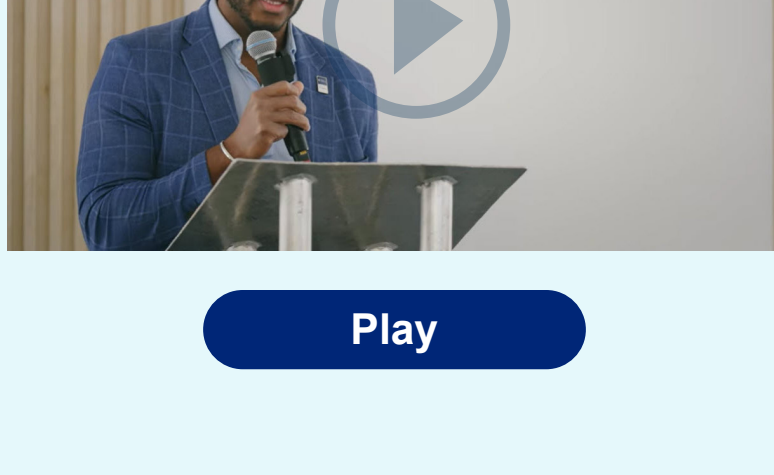
- Fort Bend, Texas
- Miami, Florida
- Phoenix, Arizona



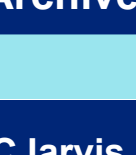
Learn more about Sanitas by scanning the QR code or by clicking the button below.

Learn about Sanitas

You may also want to take a moment to watch the video from our grand opening in San Antonio, Texas, to get an idea of what you can expect from UnitedHealthcare and Sanitas:



Play



Archives: See previous IFP Connect articles

Archives

UHCJarvis.com

Click below to chat with the Producer Help Desk or call **1-866-235-4095**.

Chat with PHD

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