



UUA Insurance Plans Webinar Series 2025

Webinar 1

Insurance Basics and Enrollment Essentials



Presented by
Ashley Anguiano and Mariyah Hawkins



Our Team



Mariyah Hawkins

Insurance Plans Project
Coordinator



Ashley Anguiano

Insurance Plans Specialist



Hugh Dennis

Deputy Director, CSF



Richard Nugent

Director, CSF



Our Purpose



At the heart of our webinar series is a commitment
to equipping administrators and plan members
with the confidence to advocate for themselves
and their families.



Topics we'll explore

- Benefits of joining the UUA Health Plan
- Explanation of key health terms
- Understanding enrollment and changes timelines
- Walkthrough of essential forms and documentation for enrollment
- Introduction to Subscription Agreements
- Tips for avoiding common mistakes when enrolling or making changes



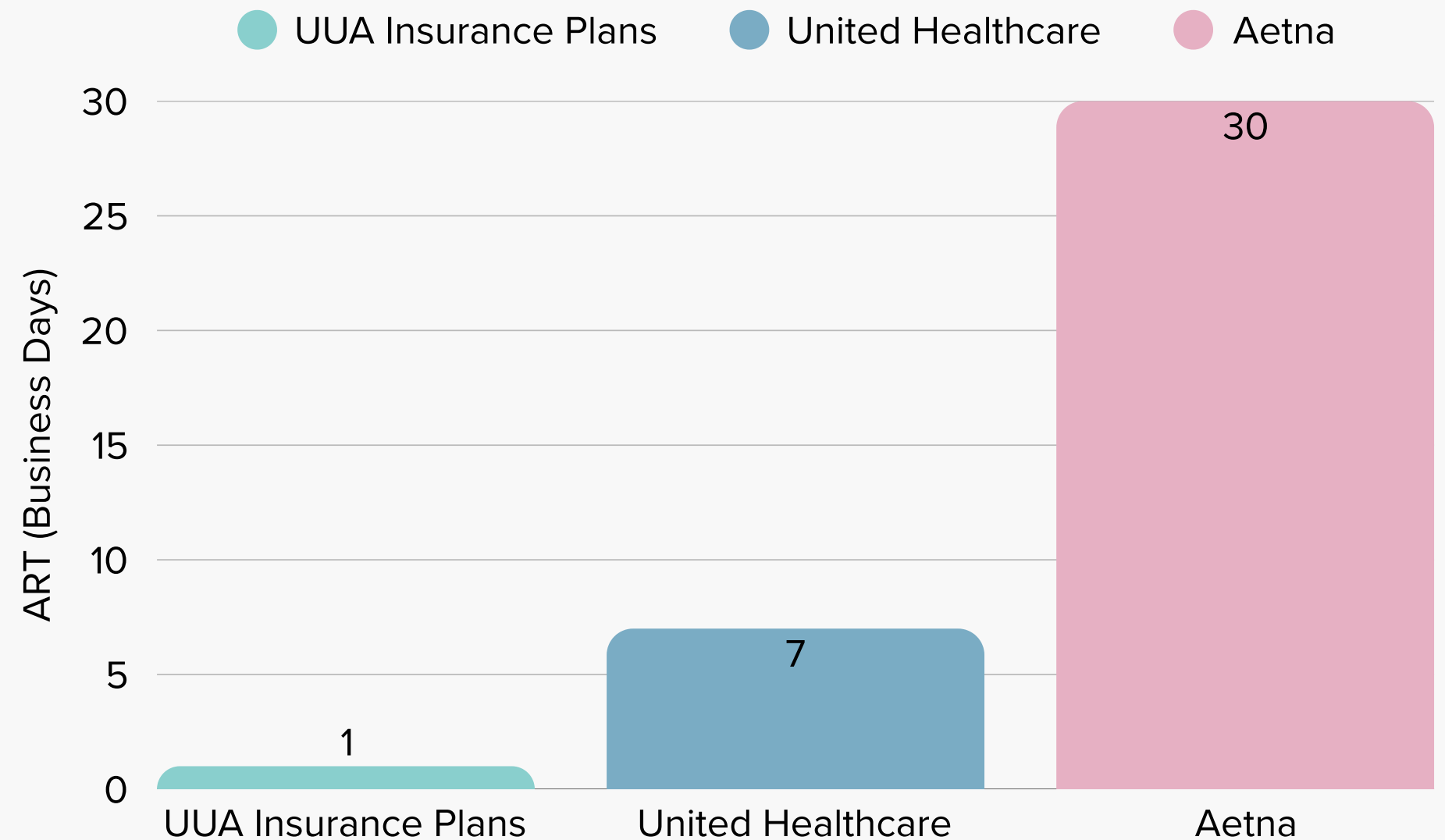


Benefits of Joining the UUA Health Plan



One on One Support

Connect directly with a member of our team for support with claims, billing, enrollment, and more. We're committed to delivering a quick turnaround, with an average initial response time of just 1-2 business days, compared to competitors who can take up to 30 days. Whether it's a general question, a claims issue, or something urgent, we're here to help in a timely manner.



Sources: <https://www.aetna.com/medicare/contact-us/appeals-grievances.html>

Infertility and Fertility Benefits



Limited Assistance Fertilization

Benefits are limited to
IUI and ICI services

90% after deductible
In-Network
Standard PPO Plan

Infertility Counseling, Testing, and Treatment

90% after deductible
In-Network
Standard PPO Plan

Fertility Counseling, Testing, and Treatment

90% after deductible
In-Network
Standard PPO Plan

Infertility and Fertility Benefits

Employers who do **NOT** offer
infertility/fertility benefits

Employers who do offer
infertility/fertility benefits



58%

42%

Standard PPO Plan

100% Covered In-Network (deductible does not apply)



Preventative Care	Diagnostic Services
Pediatric and Adult Diagnostic Services and Procedures	Advanced Imaging (MRI, CAT, PET scan, etc.)
Pediatric and Adult Physical Exams	Outpatient Diagnostic Services
Pediatric and Adult Immunizations	Standard Imaging
Routine Gynecological Exam	Pathology/Laboratory
Routine Pap Smear	Allergy Testing
Mammograms (Annual Routine)	Diagnostic Medical



Key Health Terms



Key Health Terms

Term	Definition
Premium	The amount you pay for your insurance every month.
Deductible	The amount you must pay out-of-pocket for covered services before your plan begins to pay.
Out-of-Pocket Max (OOP Max)	The most you'll have to pay in a year for covered services. After reaching this amount, the plan pays 100%.
Copay	A fixed amount you pay for a covered health care service (e.g., \$25 for a PCP visit).
Coinsurance	Your share of the costs of a covered service, usually a percentage (e.g., you pay 20%, the plan pays 80%).

Key Health Terms

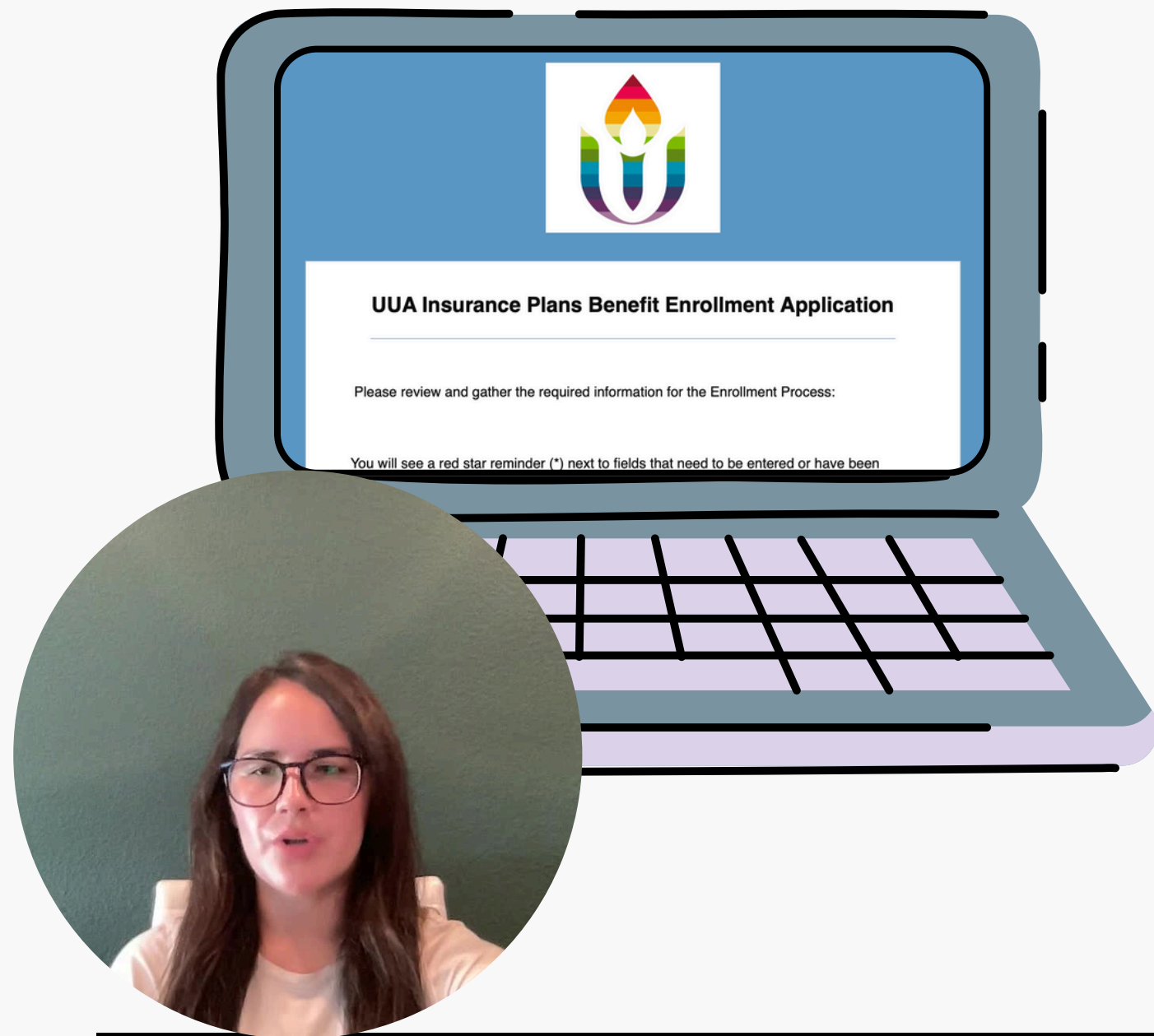
Term	Definition
In-Network vs. Out-of-Network	In-Network: Providers who contract with your plan, usually at a lower cost. Out-of-Network: Providers not contracted, often more expensive or not covered at all.
Explanation of Benefits (EOB)	A statement from your insurer showing what was billed, what was covered, and what you owe.
Drug Formulary	A list of prescription drugs your plan covers. Often organized into tiers (generic, preferred, non-preferred, and nonformulary).
Preauthorization (Prior Authorization)	Approval from your insurer required before you receive certain services or medications.
Preferred Provider Organization (PPO)	A type of health insurance plan that offers flexibility in choosing doctors and specialists without needing referrals. PPOs cover both in-network and out-of-network care, though you'll pay less when using providers within the plan's network.



Enrollment Forms and Documents



Enrollment Forms and Documents



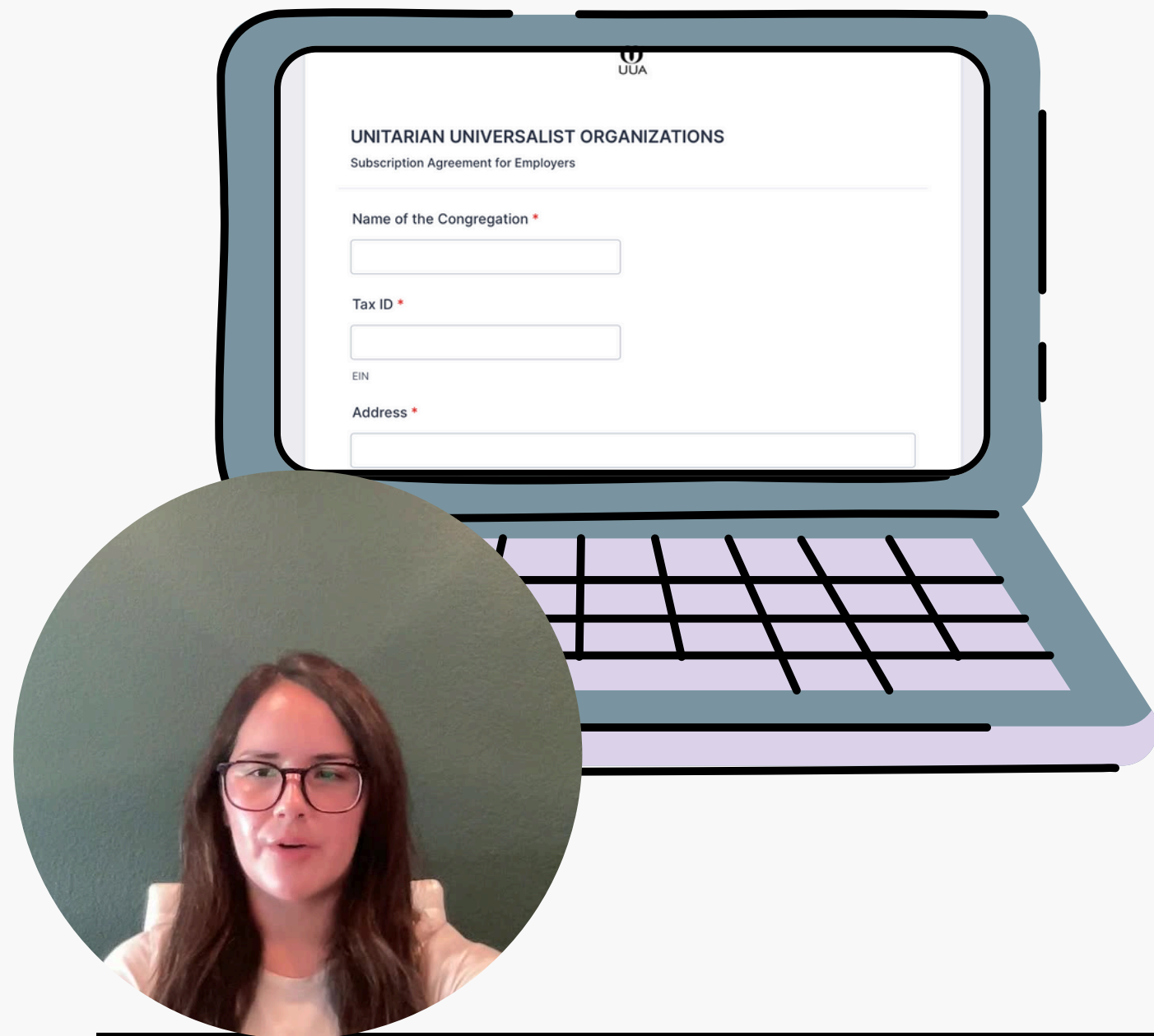
Enrollment Application

- New enrollments
 - New hire
 - Qualifying event
 - Adding a dependent
 - EOI approval
 - Open Enrollment

Benefit Change Form

- Plan changes
 - Name change
 - Employee status change (hours worked)
 - Employee income updates (affects life/LTD premiums and coverage amounts)
 - Employee address changes (affects health premiums)

Enrollment Forms and Documents



Subscription Agreement

- Congregations who want to offer benefits to employees must have an updated Subscription Agreement on file.
- The Unitarian Universalist Association has established and maintains the Unitarian Universalist Association Employee Benefits Trust (the “Trust”), which provides benefits under the Unitarian Universalist Organizations Health Plan (the “Plan”). By submitting this agreement, you are subscribing to and agreeing to the terms of the Plan and the Trust and you become a “Subscribing Employer.” As a Subscribing Employer you may enroll Eligible Employees, Eligible Retirees and their Dependents (as those terms are defined in the Plan and the Trust).

Enrollment Application



UUA Insurance Plans Benefit Enrollment Application

Please review and gather the required information for the Enrollment Process:

You will see a red star reminder (*) next to fields that need to be entered or have been entered incorrectly.

Your Social Security Number is encrypted; all information is confidential and stored in a secure location.

You will receive an email confirmation when you finish your application.

To add a dependent to your existing coverage please use this form

If you have any questions please contact Insurance Plans at (888)792-7496 or InsurancePlans@uua.org

Reason for Application *

New Hire

Benefit Change Form



UUA Insurance Benefits Change Form


NOTE: Insurance Plans invoices close on the 15th of each month. Changes submitted after the 15th will be reflected on the following months insurance plan invoice.

Use this form to report changes/transitions for employees enrolled in the UUA Insurance Plans or Retirement Plan. Changes must be reported directly to the Office of Church Staff Finances using this form. Never send Insurance or Retirement Plan changes with payments. The Insurance Plans bank lock box and Retirement Plan recordkeeper staff cannot report your changes to us.

Please use one form per employee; multiple changes for one employee can be reported on one form. Use this form to report:

- Employee status changes - reduction in hours, termination/retirement or transition to new congregation
- Employee income updates (affects Life/Accidental Death & Dismemberment Insurances (AD&D) and Long-Term Disability Insurance (LTD) coverage) For the Retirement Plan, you must re-calculate contribution amounts due
- Employee address changes (can affect Health premiums)
- For the Retirement Plan, changes must also be submitted using the [Empdata Online Submission Form](#). Please contact retirementplan@uua.org with questions
- Employee Elective Drop of coverage for self or dependents
- Employee Elective plan level change
- Employee Name Change

Subscription Agreement



UNITARIAN UNIVERSALIST ORGANIZATIONS

Subscription Agreement for Employers

Name of the Congregation *

Tax ID *

EIN

Address *

Street Address

Street Address Line 2

Enrollment and Changes Timelines

New Enrollments

- Complete online enrollment form within the first 30 days of hire for health insurance and within the first 60 days for all Guardian Group Insurance plans.

Open Enrollment

- Complete online enrollment form between November 1-30 to have benefits begin January 1st of the following year.
- Multiple reminders will be issued

Benefit Changes

- Submit Benefit Change Form within 30 days of any change (employment termination, benefit termination, change in hours worked, address change, income updates, transition to new congregation)

• • • • •


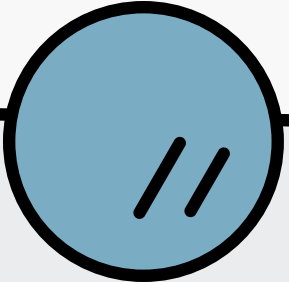


*Tips to Avoid Common
Mistakes When Enrolling
or Making Changes*




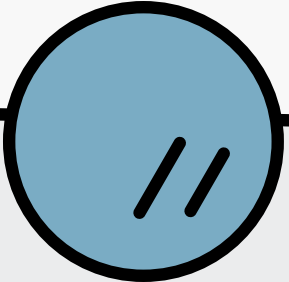
• • • • •



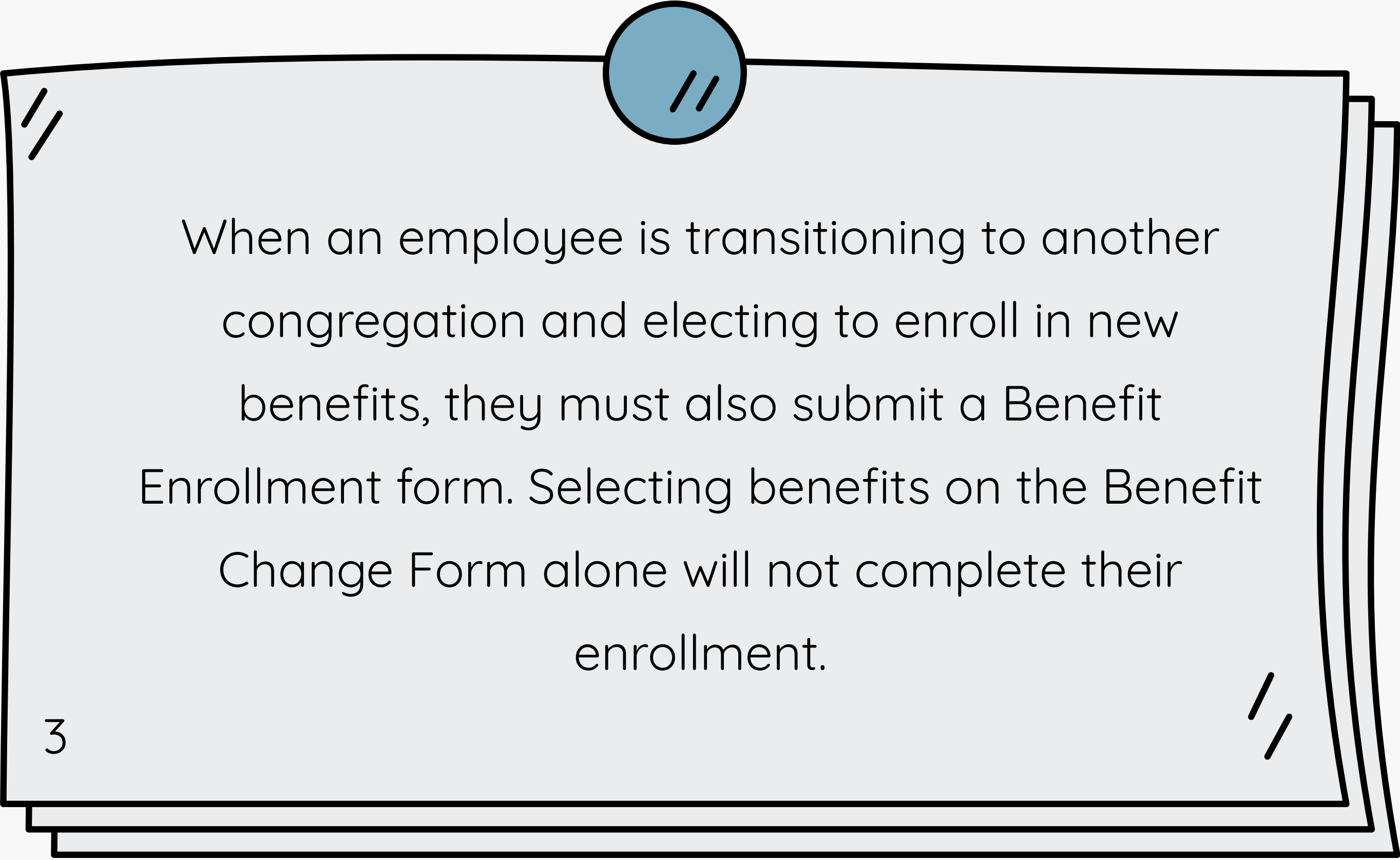


If your congregation offers benefits but has a waiting period, be sure to submit enrollment forms as soon as possible to avoid missing the enrollment window. Even if the benefits won't start right away, you can still select a future effective date, such as after a 90-day waiting period window, as long as we receive the form within 30 days of the employee's start date for health plans, or 60 days for Guardian plans.

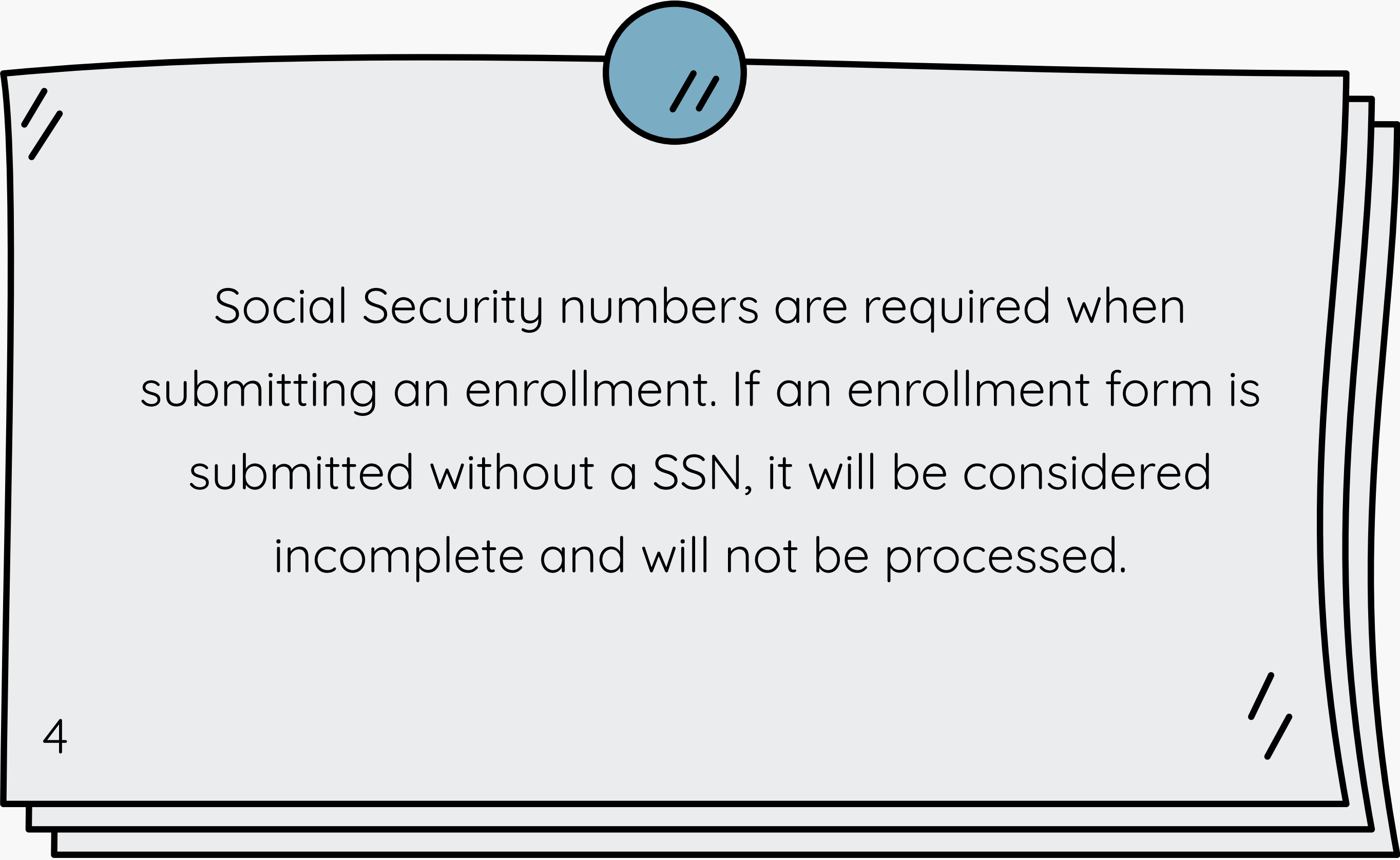




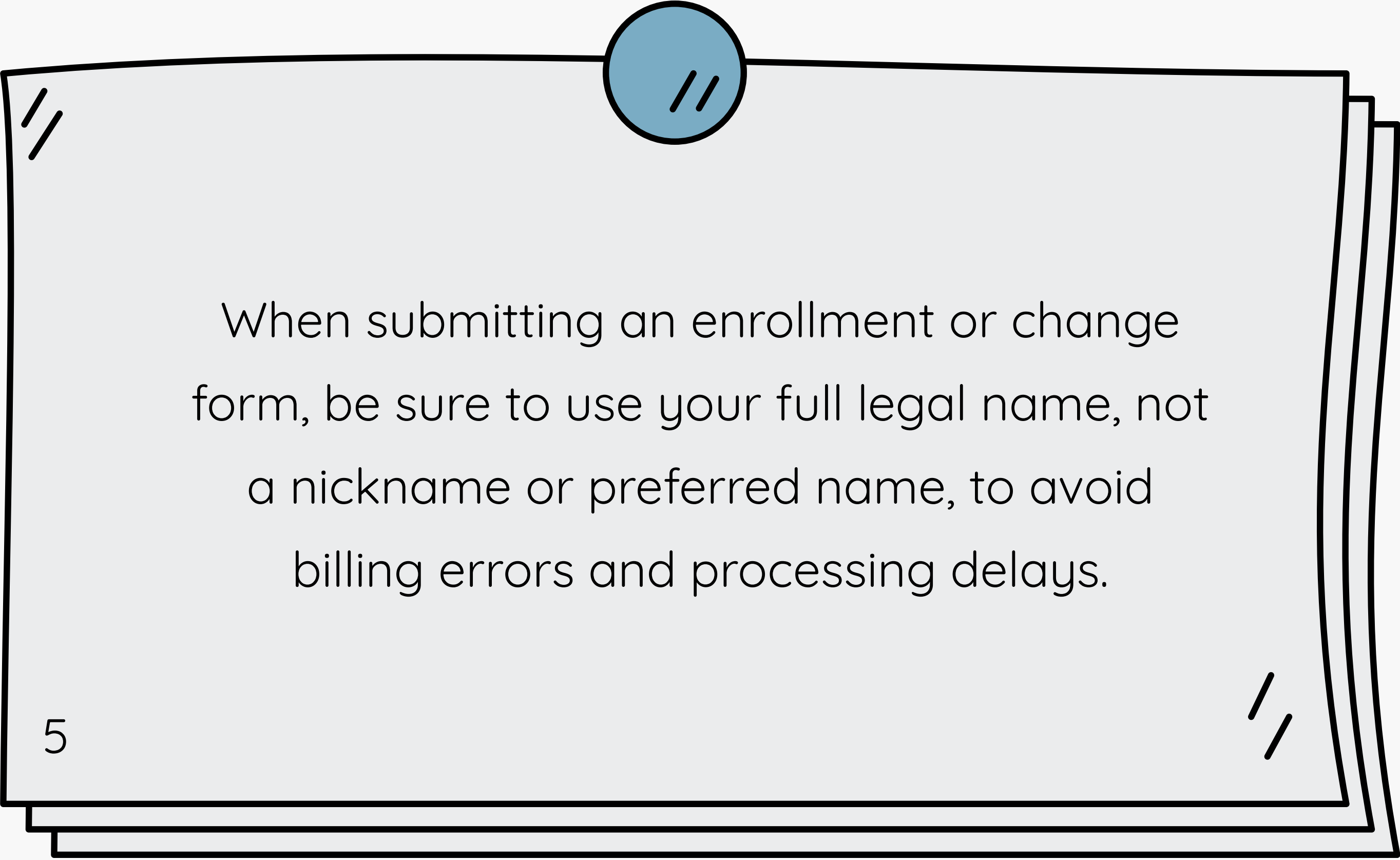
When an employee is moving to a different congregation, be sure to submit a Benefit Change Form and select “Benefit Transition” instead of “Employment Termination.” Submitting a termination can disrupt their benefits, and they would have to re-enroll.



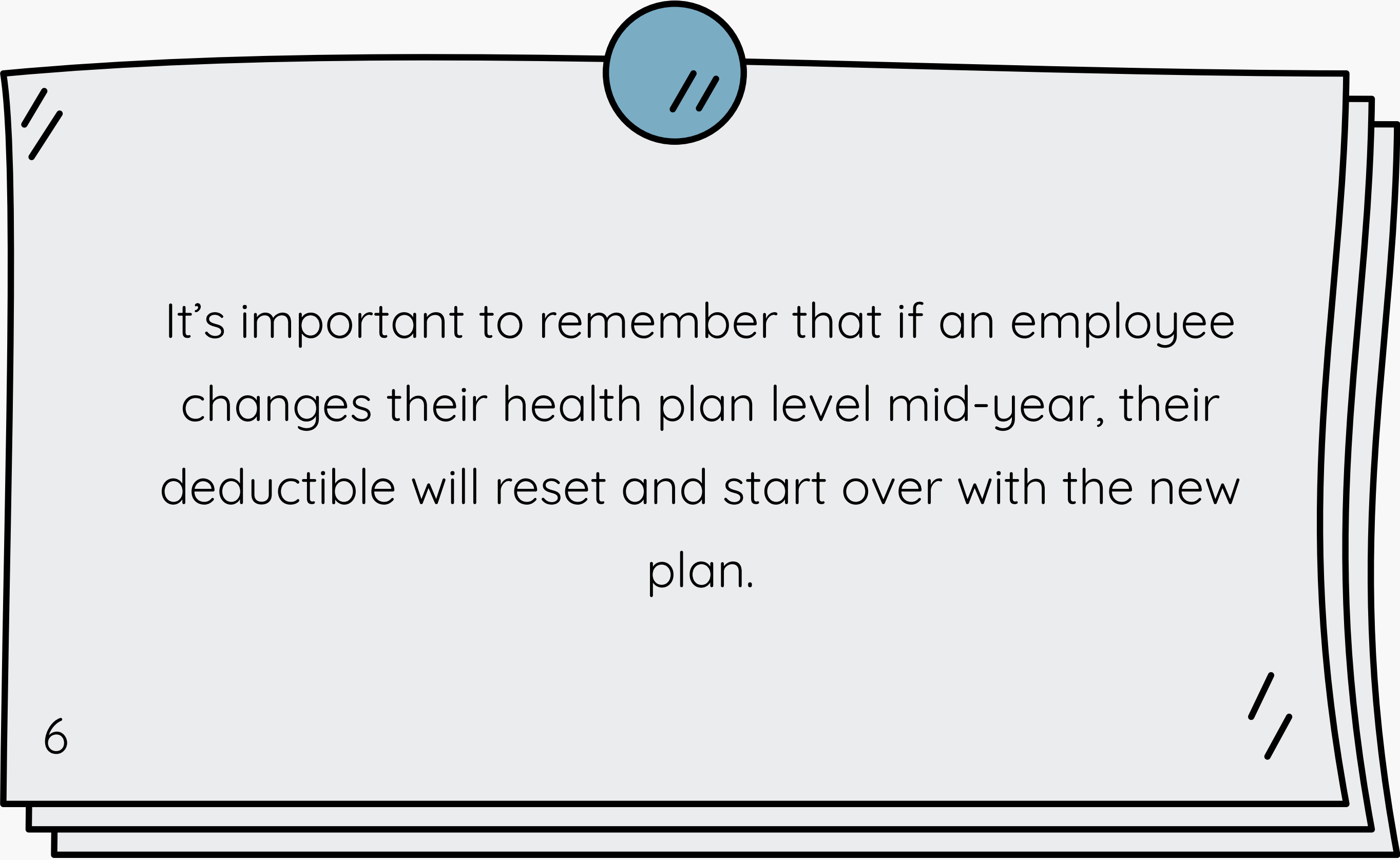
When an employee is transitioning to another congregation and electing to enroll in new benefits, they must also submit a Benefit Enrollment form. Selecting benefits on the Benefit Change Form alone will not complete their enrollment.



Social Security numbers are required when submitting an enrollment. If an enrollment form is submitted without a SSN, it will be considered incomplete and will not be processed.



When submitting an enrollment or change form, be sure to use your full legal name, not a nickname or preferred name, to avoid billing errors and processing delays.



It's important to remember that if an employee changes their health plan level mid-year, their deductible will reset and start over with the new plan.



Contact Us

Insuranceplans@uua.org

(888) 792-7496

UUA.org/insuranceplans

