



A UnitedHealthcare Company

Group Services Department

Frequently Asked Questions

When Are My Payments Due?

Bills are mailed approximately 15 days prior to their due date. Payments are due on the first day of the billing period being covered, e.g., payments for the coverage period beginning September 1 are due on September 1.

How Do I Avoid Incorrect Posting of My Premiums?

Always include the premium payment remittance slip with each payment and write your Group number(s) on your check.

If you have more than one account, e.g., Optimum Choice of the Carolinas, Inc. (OCCI) and MAMSI Life and Health Insurance Company (MLH), you may write one check made payable to MAMSI. Please indicate on the check the amount to be posted to each account.

Please Note: DO NOT send enrollment applications with your premium payments.

What If I Lose My Remittance Slip?

If you misplace your remittance slip, please write your Group number(s) on the check and indicate the amount to be posted to each account. Payment should be mailed to:

Optimum Choice, Inc. P.O. Box 42924 Philadelphia, PA 19101-2924	MD-Individual Practice Association, Inc. P.O. Box 75223 Baltimore, MD 21275-5223
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OCCI P.O. Box 75416 Baltimore, MD 21275-5416	MLH P.O. Box 13615 Philadelphia, PA 19101-3615
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How and When Do I Add an Employee/Dependent to the Policy?

Additions/deletions should be in our hands by the 5th of each month (15th of the month for our mid-month Groups) to be reflected on the next month. To ensure accurate and rapid processing of enrollment applications, please be sure all items are completed and legible, e.g., full name, complete address, Group number, employment date, Social Security number, and all dependent information. Please sign and date the application.

Incomplete or illegible applications will delay processing.

Mail applications to:

OCI P.O. Box 941 Frederick, MD 21705-0941	M.D. IPA P.O. Box 943 Frederick, MD 21705-0943
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OCCI P.O. Box 992 Frederick, MD 21705-0992	MLH P.O. Box 942 Frederick, MD 21705-0942
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Health plan identification (ID) cards and benefit information will be mailed within two business days of receipt of completed applications.

How and When Do I Disenroll an Employee/Dependent from My Policy?

Check the disenrollment box at the top of an enrollment application and complete the following items:

- Employee's name and/or dependent's name(s) and member identification number(s)
- Group number
- Effective date, i.e., 6/30/04 is the last day the employee and dependents will receive coverage under this plan.

Please Note: If only the dependents are to be canceled, please enter the dependent information only on the form. DO NOT enter the employee's name on the form.

Disenrollment requests received after the 5th day of the month may be reflected on the following month's bill.

May I Terminate an Employee's Coverage Retroactively?

Please refer to your Group Agreement for specific details concerning employee terminations.

When Are New Dependents Eligible to Enroll?

Dependents may be enrolled:

- at the same time as the employee; or
- during Open Enrollment:
 - Date of birth
 - Date of marriage
 - Date of adoption
 - Exhaustion of COBRA benefits
 - Involuntary loss of coverage (layoff, termination, Group non-payment)
 - Lifestyle change (even if employee was not previously covered) including, birth, marriage or adoption

Also, note that the effective date of coverage for an employee/dependent being added due to a qualifying event will be the actual date of the qualifying event, i.e., if baby's date of birth is August 12, 2005, the baby's effective date of coverage will be August 12, 2005. However, we must be notified within 30 days of the event.

If an Employee Enrolls During the Month, Do I Pay the Full Month's Premium?

Premiums are not prorated. Employees/dependents who become effective during the first 15 days of the billing period will be charged for the full month's premium.

Those effective from the 16th through the 31st day of the billing period will receive coverage but will not be charged any premium for that month.

If We Purchase Life Insurance, Does Everyone Need to Complete a Life Enrollment Card?

Yes. An enrollment card must be completed by each employee who desires life coverage. Each beneficiary should be listed to avoid delays in processing.

How May I Order More Health Care Professional Directories or Member Enrollment Applications?

Call our Member Services Department 24 hours a day, seven days a week (301-360-8115 or 1-800-709-7604) or go to www.mamsi.com.

Who Should My Employees Call with Claims or Doctor-Related Questions?

Our Member Services Representatives are trained to answer member's questions regarding benefits and claims. Member Services can also update member addresses and telephone numbers as well as issue duplicate health plan ID cards and Life Insurance Certificates. Members should call the telephone number on their health plan ID card.

Who Is Eligible for COBRA?

Groups with 20 or more employees for more than 50 percent of the work days in the prior year are federally mandated to offer COBRA benefits. The Group is responsible for informing its employees of their COBRA rights within 14 days of their termination date. Contact the Department of Labor at 202-219-8776 for complete details. Individuals who elect COBRA must complete an Enrollment Application, check the box for COBRA at the top of the form, enter the COBRA begin coverage and expiration dates, and mail to the Health Plan. The election must be made within 60 days of the qualifying event or the notice of the COBRA election right.

Note: COBRA coverage will also terminate if the Group ceases to maintain Group coverage.

COBRA members will continue to appear on your monthly invoice. Payment terms must be made between you and the COBRA recipient. As a Group, you are responsible for paying the Health Plan the amount due for all members, including all COBRA members.

What Should I Do if I Want to Change My Group's Benefits Package?

You should contact your Account Manager regarding any benefit changes.

How Do I Terminate the Group Contract?

Groups must provide adequate prior written notification to terminate coverage. Please refer to the termination section of your Group Agreement for details.

Quick Reference Guide

Applications/Terminations Addresses:

OCI	P.O. Box 941 Frederick, MD 21705-0941
M.D. IPA	P.O. Box 943 Frederick, MD 21705-0943
OCCI	P.O. Box 992 Frederick, MD 21705-0992
MLH	P.O. Box 942 Frederick, MD 21705-0942

Payment Mailing Addresses:

OCI	P.O. Box 42924 Philadelphia, PA 19101-2924
M.D. IPA	P.O. Box 75223 Frederick, MD 21705-5223
OCCI	P.O. Box 75416 Frederick, MD 21705-5416
MLH	P.O. Box 13615 Philadelphia, PA 19101-3615

Other Correspondence Mailing Address:

OCI, M.D. IPA, OCCI or MLH
P.O. Box 931
Frederick, MD 21705-0931

Group Services (8:00 a.m. – 5:00 p.m.)

301-360-8017 or 1-800-362-8474
Automated Acct.
24 hours a day, seven days a week
301-360-8109 or 1-800-670-3716
Fax: 301-360-8917
Toll-free Fax: 1-888-360-7228

Member Services

(24 hours a day, seven days a week)
301-360-8115 or 1-800-709-7604

*For online bill presentment and Group eligibility, go to www.mamsi.com.