

Carrier Presentation – UnitedHealthcare of New Mexico, Inc.

PY2027

Timothy Patterson, Agency Manager



Who We Are...

Our Mission:

Help people live healthier lives and make the health system work better for everyone.

Our Vision

Deliver affordable coverage; simple experience, and high quality, supported care.

Service Areas

In 2027, UnitedHealthcare will continue to cover all 33 counties in New Mexico

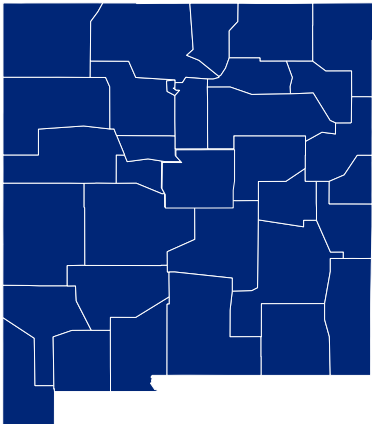
- Albuquerque (Rating Area-1)
- Farmington (Rating Area-2)
- Dona Ana (Rating Area-3)
- Santa Fe (Rating Area-4)
- Rural New Mexico (Rating Area-5)

Continuing cross-border coverage in: Maricopa county AZ, La Plata county in CO, and El Paso, Lubbock, and Potter counties in TX

IHS Facilities and Tribal Clinics

Provider Site Name	Organization Name	Address	City	State	County	In-Network
Acoma-Canoncito-Laguna Hospital	Acoma-Canoncito-Laguna Hospital	80b Veterans Blvd	Acoma	NM	Valencia	Yes
First Nations Community HealthSource	First Nations Community HealthSource	5608 Zuni Rd SE	Albuquerque	NM	Bernalillo	Yes
Albuquerque Indian Health Center	Indian Health Service	801 Vassar Dr NE	Albuquerque	NM	Bernalillo	Yes
Sandia Health Center	Pueblo of Sandia	203 Sandia Day School Rd	Bernalillo	NM	Sandoval	Yes
Jemez Pueblo Comprehensive Health Center	Pueblo Of Jemez	110 Sheep Springs Rd	Jemez Pueblo	NM	Sandoval	Yes
Pine Hill Health Center	Pine Hill Health Center	Bia Rt 125 Mp 12.5	Pinehill	NM	Cibola	Yes
Zia Health Center	ASU/Indian Health Service	155 Capitol Square Dr	San Ysidro	NM	Sandoval	Yes
Santa Ana Health Center	ASU/Indian Health Service	02-C Dove Rd	Santa Ana Pueblo	NM	Sandoval	Yes
Santa Fe Indian Hospital	Santa Fe Service Unit	1700 Cerrillos Rd	Santa Fe	NM	Santa Fe	Yes
Taos Picuris Health Center	Taos Picuris Health Center	1090 Goat Springs Rd	Taos	NM	Taos	Yes

2027 Individual Exchange New Mexico



Quick State Facts

- Statewide service area
- Non-gated HMO plans: must use in-network providers, but you don’t need a referral to see a specialist.
- Broad network
- Cross-border coverage in Maricopa county in AZ, La Plata county in CO, and El Paso, Lubbock, and Potter counties in TX

Network Changes from 2026 to 2027

- No changes



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The availability of a provider in the network can change. This means that providers may be added or removed from the network at any time. It’s advisable to verify provider participation at the time of service.

Market Area	Counties	Hospitals and Employed Providers
Albuquerque	Bernalillo, Sandoval, Torrance, Valencia	Lovelace: Lovelace Medical Center, Lovelace Westside Hospital, Lovelace Women’s Hospital, Presbyterian: Presbyterian Kaseman Hospital, Presbyterian Hospital, Presbyterian Rust Medical Center, University of New Mexico: University of New Mexico Health Sciences Center, University of New Mexico Hospital, University of New Mexico Sandoval Regional Medical Center, Carrie Tingley Hospital
El Paso (TX & NM)	Dona Ana	Memorial Medical Center, Mountainview Regional Medical Center, Three Crosses Regional Hospital
Farmington	San Juan	San Juan Regional Medical Center
Rural New Mexico	Catron, Chaves, Cibola, Colfax, Curry, De Baca, Eddy, Grant, Guadalupe, Harding, Hidalgo, Lea, Lincoln, Los Alamos, Luna, McKinley, Mora, Otero, Quay, Rio Arriba, Roosevelt, San Miguel, Sierra, Socorro, Taos, Union	Lincoln County Medical Center, Cibola General Hospital, Union County General Hospital, Gila Regional Medical Center, Nor-Lea Hospital District, Gerald Champion Regional Medical Center, Miners Colfax Medical Center, Dan C Trigg Memorial Hospital, Guadalupe County Hospital, Mimbres Memorial Hospital, Eastern New Mexico Medical Center, PHC-Los Alamos Medical Center, Artesia General Hospital, Presbyterian Espanola Hospital, Holy Cross Hospital, Clovis Plains Regional Medical Center, Socorro General Hospital, Rehoboth McKinley Christian Hospital, Carlsbad Medical Center, Sierra Vista Hospital, Roosevelt General Hospital, Covenant Health Hobbs Hospital, Alta Vista Regional Hospital, Lovelace Regional Hospital
Santa Fe	Santa Fe	Christus St Vincent Regional Medical Center, Presbyterian Santa Fe Medical Center

Providers: check out additional information regarding NM Exchange plans on UHCprovider.com/Exchanges

Note: Information up to date as of 6/25/2026

PY 2027 Offerings

Value	Lower premium with higher deductible and cost shares at time of service Mix of copays and coinsurance
Advantage	Mid-Range premium with lower deductibles and cost shares at time of service Copay cost shares for many services
Copay Focus	Higher premium plans with first dollar coverage and \$0 medical deductible Predictable out-of-pocket costs with copays for commonly used services
Clear Cost	Standardized health insurance offerings on New Mexico's BeWell Marketplace. All insurers must use the same cost structure (copays, deductibles, out-of-pocket limits), which makes comparing plans straightforward.

Note: Per the budget reconciliation bill (OBBA) all on-exchange Bronze plans are now HSA eligible regardless of High-Deductible Health Plan (HDHP) status. Bronze off-exchange only plans will not be considered HSA eligible

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All plan designs, benefits, cost shares, and service area expansions for plan year 2026 are pending regulatory approval and subject to change.

This policy has exclusions and limitations. For costs and complete details of the coverage, call or write your insurance agent or the company, whichever is applicable



Additional Benefits Continuing in 2027

This policy has exclusions and limitations. For costs and complete details of the coverage, call or write your insurance agent or the company, whichever is applicable

Value added products and services are not insurance benefits and may be discontinued at any time

*Formulary medications only. Certain strengths or dosage forms are not \$0. \$0 cost-share is operationalized by formulary tier placement on the \$0 Preventive tier or through a \$0 drug list (SDL). See PY26 formulary for full list of \$0 medications



OnePass

Digital fitness for members 18+ through One Pass
Member-funded physical gym buy up for members 18+ through One Pass



\$0 Diabetes Management

Continued \$0 diabetes management support, including \$0 formulary insulin for eligible members



\$0 Medications

Select prescription medications available at \$0 cost share per plan formulary. Refer to the applicable formulary for medication details, limitations, and eligibility.



Virtual Care

Virtual Urgent Care visits generally \$0 cost share



Walgreens OTC Discount

Discount Card provided to members which offers 20% discount on Walgreens branded OTC health and wellness products at Walgreens retail stores.



Community Resources

Helping members connect with local resources that support health and social needs

1. \$0 benefit is limited to specific CPT codes associated with diabetes management. HSA plans only offer pharmacy-provided supplies and oral medications diabetes management benefits.
2. Supplies covered under medical benefit is subject to diabetic cost share
3. Formulary medications on the \$0 Cost-Share Preventative Tier only. Certain manufacturers, strengths, or dosage forms are not \$0

New in 2027: Out-of-Network Urgent Care Coverage



Covering all Out-of-Network (OON) Urgent care in all markets at the same cost as In-Network Urgent Care





Product Incentives

Value added products and services are not insurance benefits and may be discontinued at any time

Incentive Opportunities



Primary Care Physician (PCP) Visit

Annual Primary Care Physician Visit



Account Related Actions

Complete 4 account-related actions



Health Risk Assessment

Complete a health risk assessment



NEW: Flu Vaccine

Receive annual flu vaccine (Sept – Dec)



NEW: Educational Content Viewing

View plan educational videos

The annual Primary Care Physician (PCP) visit and annual flu vaccine are covered plan benefits. Any rewards are associated with completion of eligible wellness activities and are not plan benefits.

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Premium Billing Process

Billing questions can be directed to customer service

- Invoice + Premium Payment Questions: 1-800-691-0021, TTY 711

Premium billing timeline:

- Premiums due on the 1st of every month
- Notices sent 3rd or 4th of the month prior to the due date

Guest Pay now available (see next slide)



Introducing Guest Pay

All plan designs, benefits, cost shares, and service area expansions for plan year 2027 are pending regulatory approval and subject to change



Who it's for

Anyone paying on behalf of a member - caregivers, family, brokers, employers, or the member themselves.



What it does

Completes one secure, one-time premium payment without authentication or a portal account.



How it's secured

Member ID + DOB verification

The screenshot shows the United Healthcare mobile app interface for making a one-time payment. The header includes the United Healthcare logo, a 'Back' button, and the title 'Make a one-time payment' for the 'UHC Gold Standard - HMO' plan. A link for 'How premiums and subsidies work' is also present. The main section is titled '1. Select amount' and includes a 'Show cost breakdown' link. There are two radio button options: 'Amount due' (selected) showing '\$106.48' due on '01/07/2026', and 'Other amount' with a text input field. A 'Summary' box on the right lists plan details: Plan (UHC Gold Standard - HMO), Member name (Cindy Kabango), Member ID (123456789), Payment details (One-time payment), Payment date (01/06/2026), and a Total of \$106.48. A disclaimer at the bottom states: 'This payment will process on the date indicated on the payment receipt and will be reflected on the Premium Payment page in the member's payment history section. *Total amounts due do not reflect any pending payments.'

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Mobile App

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Payment

Ability to complete one time payment



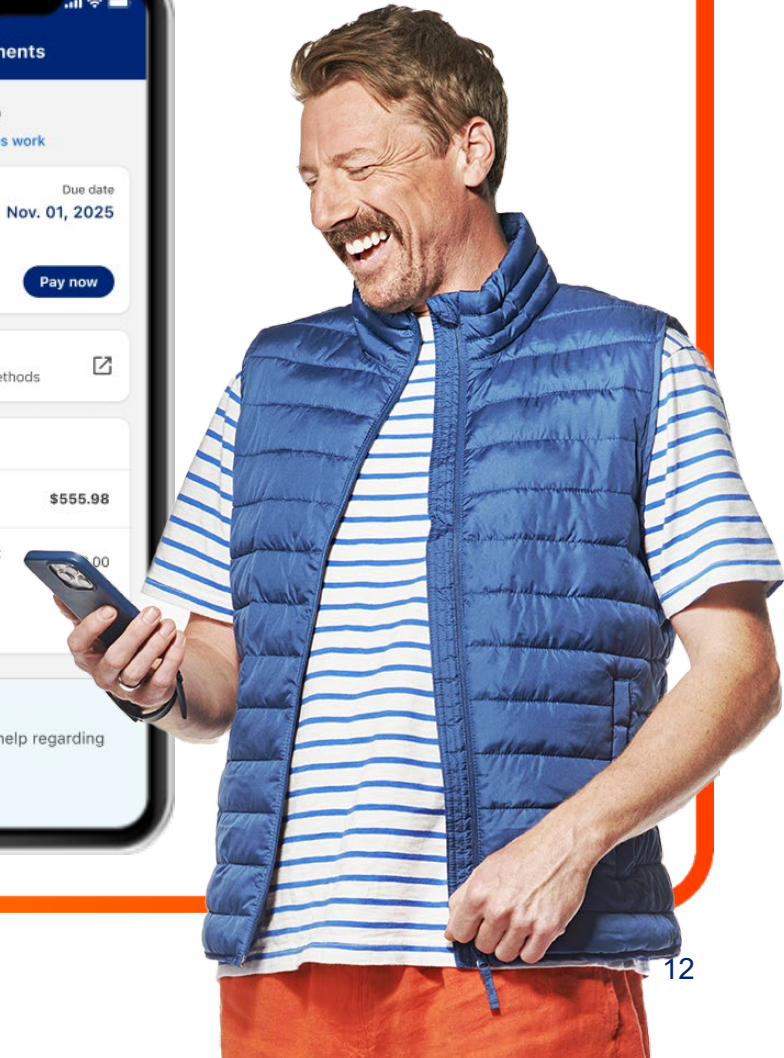
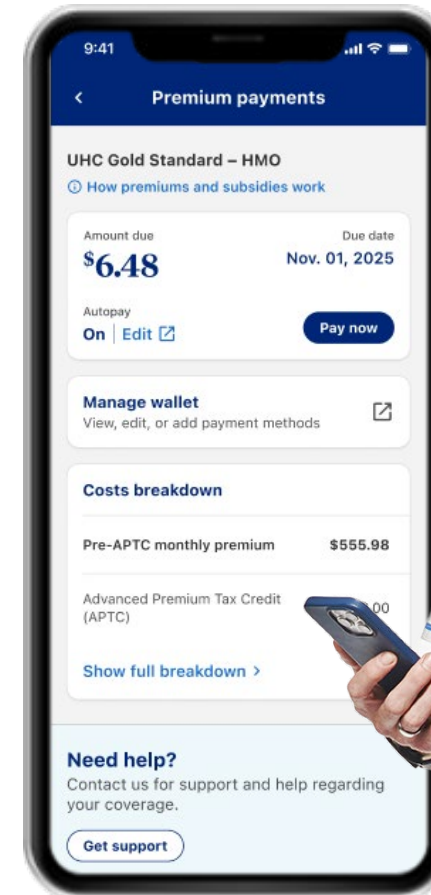
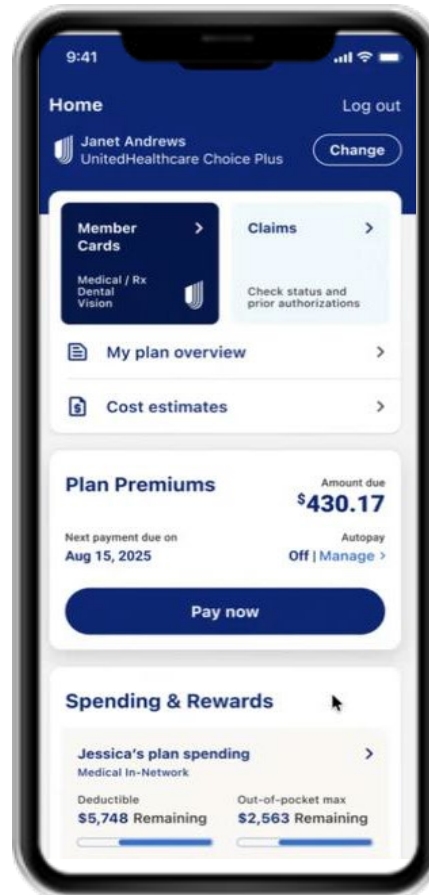
Plan Information

The ability to track, manage, view, and request plan details and documents



Renewal

Bringing in renewal and planning for next year experiences





Say Hello to Avery

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Avery, an Artificial Intelligence (AI) companion from UnitedHealthcare, is designed to help members navigate their health journey with confidence and help Advocates offer better 1-on-1 support and prioritize complex interactions and care needs.

Avery is available in addition to existing Member Services and Advocate support and does not replace access to live customer service representatives.



Care Coordination

Bringing key health care info together in one place — benefits, costs and care options — and connecting members to appropriate care options, so they spend less time searching and avoid unnecessary surprises



Personalized Navigation

Helping members make more informed care choices by considering their unique needs, circumstances and benefits, and offering options to help simplify their next steps



Proactive Support

Shifting from a reactive to proactive approach, giving members timely, thoughtful support whether they self-serve digitally or engage with an Advocate



Point of Contact for Assisters

Broker Inquiries:

- Producer Help Desk (PHD): Call 1-866-235-4095 or chat via the Jarvis chat feature
- Ask Jarvis AI

Member Inquiries:

- UHC Online Account: myuhc.com/exchange
- 24/7 Member Services + Care Support: 866-569-3491
- Invoices + Premium Payment Questions: 1-800-691-0021, TTY 711
- Avery AI, available in addition to Member Services and live customer support

Navigator and Assister Resources:

- <https://www.uhc.com/individuals-families/aca-marketplace>

Resources for Assistors

- **Jarvis (Broker-Specific Portal):**
 - Access plan & carrier flyers
 - Plan materials and member resources
 - Explore other resource links
 - Commission statements
- **Point of contact:**
 - Producer Help Desk (PHD): 1-866-235-4095 or Jarvis chat feature
 - Ask Jarvis AI
 - Tim Patterson – timothy_Patterson@uhc.com



Improved Tools & Resources For Brokers

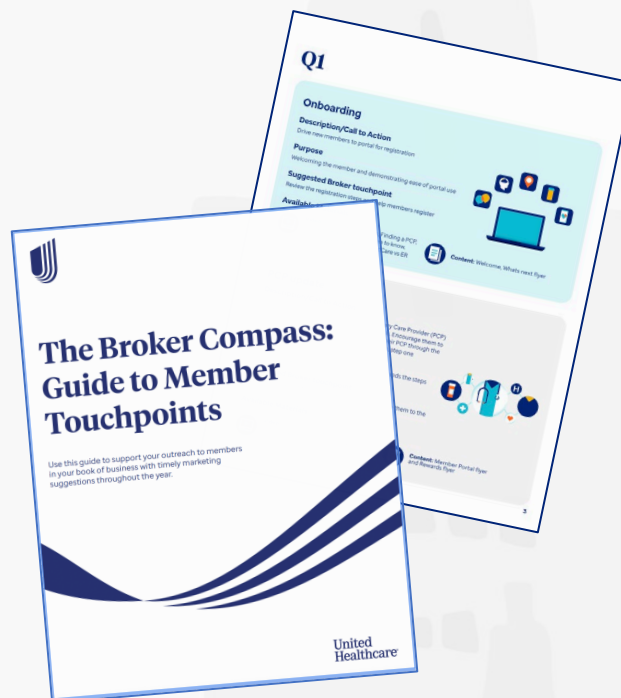
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Interactive Benefit Grids

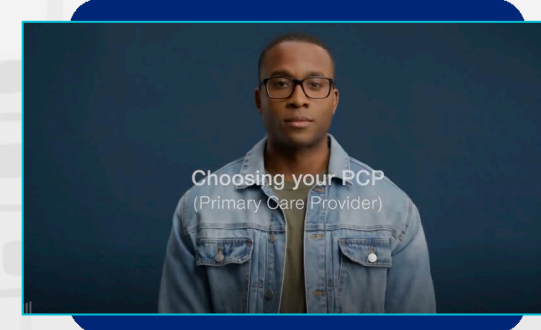


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Broker Compass



Member Videos



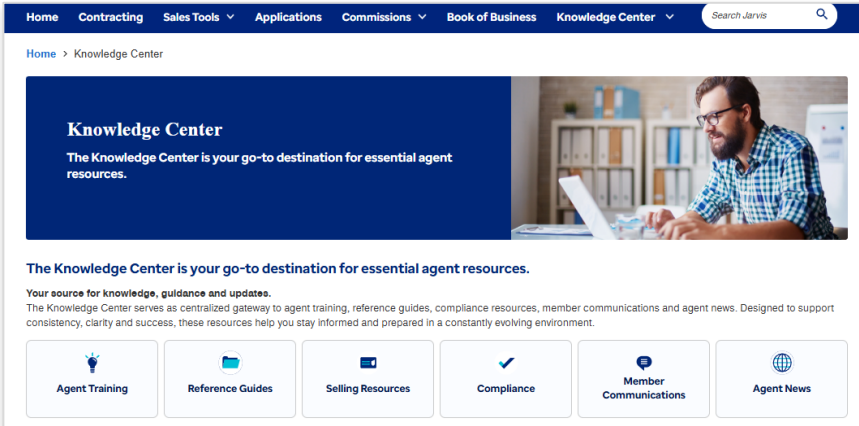
Jarvis Features

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1

Individual and Family Plan (IFP) Knowledge Center Page

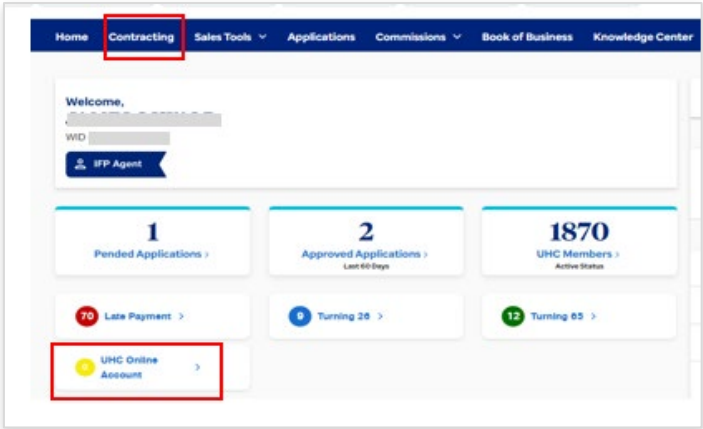
A refreshed look and feel — the redesigned Knowledge Center (KC) page delivers improved navigation and clearer organization.



2

Jarvis Homepage

A new Contracting tab is available to access contracting resources and tools, and a UnitedHealthcare (UHC) Online Account tile now flags member registration status — with a downloadable report for following up on members still pending.



Jarvis Features

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3

True Application Received Date

This top-requested feature is live — no more entering a future effective date in the end date field just to view current applications.

Filter 0		Search Name and Confirmati...		Sort by: ▾	Columns ▾	Download Results
Showing 3 of 3 Results		< Previous		1	Next >	
Applicant Name	Product	Status	Status Reason	Received	Effective	
	IFP	Active		05/29/2026	06/01/2026	
	IFP	Application Pending Payment		06/04/2026	07/01/2026	

4

Age-In Details (Turning 26 & 65)

The dashboard and Member Profile Page now show an adjusted drop-off window for Turning 26 and Turning 65: three months before through three months after the birth month.

Plan Status	Date Of Birth	Member Number	Agent Of Record	Member Status
Active			STRAATSMA, JOSUN WID :	Turning 26



Jarvis Features

5

Premium, Advance Premium Tax Credit (APTC), State Subsidy & Subscriber Responsibility in Book of Business (BoB)

Choose either current or future subsidy in the BoB downloadable report.

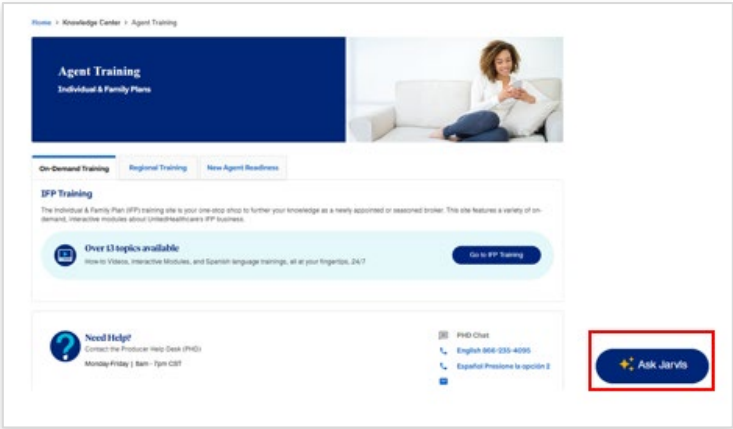
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IFP Current Subsidy Effective Dat	IFP Curren	IFP Curren	IFP Curren	IFP Curren	IFP Future Subsidy Effect	IFP Future	IFP Future	IFP Future	IFP Future
2026-01-01	391.22	391.22	0.00	0.00	2026-08-01	391.22	0.00	0.00	391.22
2026-01-01	1224.90	1224.90	0.00	0.00	2026-08-01	1224.90	0.00	0.00	1224.90

6

Ask Jarvis AI from the Knowledge Center

AI-powered support that widens Jarvis self-service, helping agents rapidly track down answers and training information.

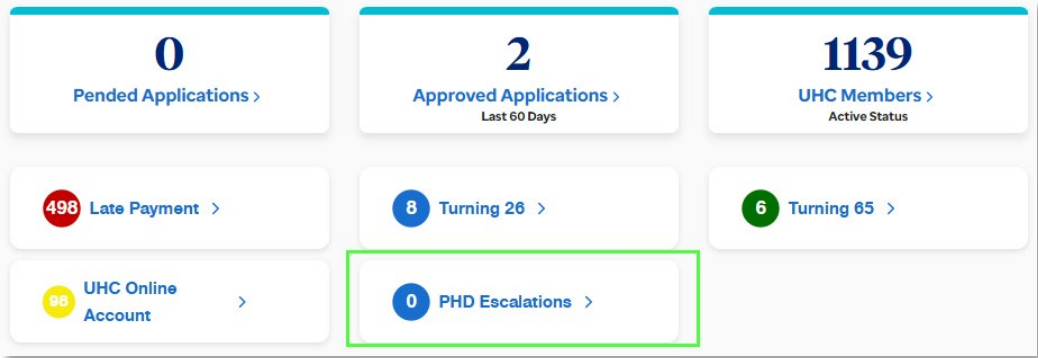


Jarvis Features

7

PHD Escalated Service Request Dashboard

Agents and agencies can now track member escalations submitted through a member’s profile page in one centralized location.



8

Individual Coverage Health Reimbursement Arrangement (ICHRA) indicator on Late Payment

The Late Payment report now shows Health Reimbursement Arrangement (HRA) status for members with ICHRA or a Qualified Small Employer Health Reimbursement Arrangement (QSEHRA). Its Payment Responsibility column identifies the payer: Member or Employer/Third-Party Administrator (TPA).

Member ID	Phone	Grace Period Days Left	Paid Through	Monthly Premium	Balance Due	Grace Period End Date	AOR Writing ID	ICHRA/QSEHRA Status	Payment Responsibility	Email
3		57	07/07/2026	\$153.80	\$307.60	10/31/2026	6460809			
0		57	07/01/2026	\$1.59	\$3.18	10/31/2026	6450221			

Carrier Escalation Process

Broker Inquiries:

- PHD: Call 1-866-235-4095 or chat via the Jarvis chat feature

PHD Escalated Service Request Dashboard

- Agents and agencies can now track member escalations submitted through a member's profile page in one centralized location.

Member Inquiries:

- 24/7 Member Services + Care Support: 866-569-3491

Questions?

Reminder: Brokers are encouraged to be contracted and appointed with all carriers offering health plans through BeWell for PY27.

