Administrative changes for UnitedHealthcare Medicare Advantage members in New York

Quick reference guide

For dates of service beginning Jan. 1, 2023, Optum® IPA of New York, an affiliate of UnitedHealthcare, will manage certain administrative services for the UnitedHealthcare Medicare Advantage benefit plans listed below. This reference guide provides an overview of the new administrative processes:

- · Verifying member eligibility
- Referrals
- · Prior authorization requests
- · Hospital admission notifications
- Claims submission
- Claims reconsideration

The following benefit plans will be newly administered by Optum IPA of New York, effective Jan. 1, 2023:

Plan name	CMS contract number	Group number
AARP® Medicare Advantage Plan 1 (HMO-POS)	H3307-002-000 H3307-012-000	90169, 90170 90171, 90172
AARP® Medicare Advantage Prime (HMO-POS)	H3307-015-000	90173, 90174
AARP® Medicare Advantage Patriot (HMO-POS)	H3307-018-000	90175, 90176
AARP® Medicare Advantage Plan 2 (HMO-POS)	H3307-023-000	90177, 90178
AARP® Medicare Advantage (HMO-POS)	H3307-025-000	90179, 90180
AARP® Medicare Advantage Plan 2 (HMO-POS)	H3379-001-000	90181, 90182
AARP® Medicare Advantage (HMO-POS)	H3379-039-000 H3379-040-000 H3379-041-000 H3379-045-000 H3379-046-000	90183 90184 90185, 90186 90188 90189, 90190
AARP® Medicare Advantage Value Care (HMO-POS)	H3379-043-000	90187
AARP® Medicare Advantage Mosaic Choice (PPO)	H3418-001-000	09000, 09001



Plan name	CMS contract number	Group number
AARP® Medicare Advantage Premier Choice (PPO)	H3418-003-000	09002, 09003
AARP® Medicare Advantage Choice (PPO)	H3418-004-000 H3418-005-000 H3418-006-000 H3418-007-000 H3418-008-000	90316 90318, 90319 90320, 90321 90322, 90323 90324

The following benefit plans will continue to be administered by Optum IPA of New York, effective Jan. 1, 2023:

Plan name	CMS contract number	Group number
AARP® Medicare Advantage Value Care (PPO)	H3418-002-000	09117 09118
UnitedHealthcare Medicare Advantage Choice Plan 1 (Regional PPO)	R5342-001-000	90142 90143
UnitedHealthcare Medicare Advantage Patriot (Regional PPO)	R5342-002-000	90144 90145
UnitedHealthcare Medicare Advantage Choice Plan 3 Regional PPO)	R5342-005-000	90146 90147
UnitedHealthcare Medicare Advantage Choice Plan 4 (Regional PPO)	R5342-006-000	90148 90149





Verifying member eligibility

You can verify member eligibility online, by phone or using electronic data interchange (EDI):

- Online: Through the UnitedHealthcare Provider Portal, go to UHCprovider.com and click Sign In at the top-right corner. Then, select Eligibility and enter member information.
- Phone: Call 866-565-3468 and select the Eligibility and Benefits option
- EDI: Use Transactions 270 (Inquiry) and 271 (Response) through your vendor or clearinghouse



Referral requests

For plans that require referrals, submit referral requests online in the Optum Care Provider Portal.



Prior authorization requests

Prior authorization may be required for certain services based on the member's plan. Inpatient and outpatient services generally don't require prior authorization when members are referred to health care professionals who participate with UnitedHealthcare Medicare Advantage PPO.

Services that require prior authorization will be listed at **UHCprovider.com/priorauth** > **Advance Notification and Plan Requirement Resources**. Submit your request at least 14 days before the planned date of service.

- Online: Submit your request in the Optum Care Provider Portal. Please include any clinical information associated with the requested service.
- Phone: Call 866-565-3468

You don't need to submit another prior authorization request to Optum IPA of New York if a request was previously reviewed and approved by UnitedHealthcare for dates of service starting Jan. 1, 2023, and after. Optum IPA of New York will reimburse services approved by UnitedHealthcare.



Hospital admission notifications

Please notify Optum IPA of New York of hospital admissions no later than 1 business day after admission

by calling 866-565-3468 or submitting online in the Optum Care Provider Portal.



Claims submissions

Please submit claims for UnitedHealthcare members Optum Care Network using the following electronic Payer ID or mailing address:

- Electronic: Payer ID Optum Care Network Payer ID LIFE1 or use your clearinghouse's Optum Care Network Payer ID
- Claims Submissions Mailing Address: Optum Care Network Claims, P.O. Box 30781 Salt Lake City, UT 84130-0781
- Claim Reconsideration Mailing Address: Optum Care Network Claims, P.O. Box 30781 Salt Lake City, UT 84130-0781

To check the status of your claim submission, sign in at the Optum Care Provider Portal.



For any other claim questions, call **866-565-3468**. Please don't submit duplicate claims unless you haven't received payment or an explanation of payment within 45 days of submission.





Member ID cards

Members in the affected plans will get new member ID cards that show the Payer ID LIFE1 and will have other applicable delegation-specific descriptors such as delegate name and delegate website listed as the care provider contact. You can download a copy of the member ID card when you verify eligibility and benefits in the **UnitedHealthcare Provider Portal**.

UnitedHealthcare UCard

- Nearly all UnitedHealthcare Individual Medicare Advantage plan members will receive a UnitedHealthcare UCard™ (some plan exclusions may apply)
- UnitedHealthcare UCard makes it easier for members to access their benefits and programs so they can take advantage of their plan offerings
- UCard does not need to be activated for you to verify eligibility or provide care services or for members to receive medical, dental, prescription, vision and hearing care services
- Starting Jan. 1, 2023, impacted members will present their redesigned member card
- UCard will have the information you need to verify eligibility and should be used in the same manner as any other UnitedHealthcare member ID card
- UCard cannot be used for member out-of-pocket expenses, including copays, coinsurance, or deductibles
- Each UCard will include an S3 number, security code and scannable barcode for in-store purchases – providers do not need to scan the barcode to provide medical, dental, prescription, vision or hearing services to the member
- For questions, members should visit their plan website or call the Customer Service number on their UCard
- For a description of the information displayed on the UCard, refer to Chapter 2 of the UnitedHealthcare Care Provider Administrative Guide





Sample member ID cards for illustration only; actual information varies depending on payer, plan and other requirements.



We're here to help

If you have questions, please call 877-842-3210. Thank you.

