This document lists the most frequently requested information from our provider administrative guide and manuals. It is not inclusive of all UnitedHealthcare products. For comprehensive information on these topics, view the UnitedHealthcare Care Provider Administrative Guide or the UnitedHealthcare Community Plan Care Provider Manuals at UHCprovider.com/guides.

Join our Network and Credentialing

If you are interested in joining our network, visit UHCprovider.com/join. To view our credentialing policies and procedures, visit UHCprovider.com > Menu > Resource Library > Join Our Network.

Credentialing application: Check on your application status by calling the United Voice Portal at 877-842-3210. Say or enter your TIN, respond to the prompts as follows: Other Professional Services > Credentialing > Medical > Get Status.

Self Service

UHCprovider.com: UHCprovider.com is your home for care provider information with 24/7 access to Link self-service tools, medical policies and news bulletins. The website offers great resources to support administrative tasks including eligibility, claims and prior authorizations and notifications.

UHCprovider.com/Link: Access Link – your gateway to UnitedHealthcare’s online tools – through UHCprovider.com. With Link tools, you can get eligibility and benefit details, submit referrals and prior authorization requests, manage claims, submit claims reconsideration and appeals and even manage your demographic information that appears in our provider directory.

Network Bulletin: News and updates regarding policy, product or reimbursement changes are posted in the Network Bulletin and accessible online at UHCprovider.com/news. An updated bulletin is posted at the beginning of each month.

Practice Matters: A quarterly newsletter containing national and regional Community Plan information is available at UHCprovider.com > Menu > Resource Library.

Contact UnitedHealthcare

Most questions can be answered using our online tools at UHCprovider.com. If you need to speak with someone, we’re here to help. For state-specific contact information, visit UHCprovider.com > Menu > Contact Us.

Technical Assistance/Connectivity .... 866-842-3278
Provider Services ......................... 877-842-3210
Prior Authorizations .......................... 877-842-3210
Electronic Payments & Statements (EPS) Helpdesk ..................... 877-620-6194

Provider Agreement questions: Contact your Network Management Representative. To identify your Network Management Representative go to uhc.com > Contact us > Providers > Select State > Network Management. Or contact Provider Services at 877-842-3210.

Provider Advocate: To find your Provider Advocate, go to UHCprovider.com > Contact Us > Find a Network Contact and select your state.
Eligibility

Access benefit, coverage and identification card information.

• Online: UHCprovider.com/eligibilityLink
• EDI: 270/271 transaction
• Phone: 877-842-3210

Specialty Pharmacy Program (Commercial)

Specialty Pharmacy Program provides focused support to help better manage rare and complex chronic conditions. Find details about the Specialty Pharmacy Program online at: UHCprovider.com/specialtyRx.

Advance Notification/Prior Authorization and Referrals

To notify us or request prior authorization:

Link: UHCprovider.com/paan

Use the Prior Authorization and Notification Tool on Link to:

• Determine if notification or prior authorization is required.
• Complete the notification or prior authorization process.
• Select the Specialty Pharmacy Transactions tile on your Link dashboard. You will be directed to the new website we’re using to process these authorization requests.
• Upload medical notes or attachments.
• Check request status.

Online: UHCprovider.com/priorauth (information and advance notification/prior authorization lists)

Phone: Call Care Coordination at the number on the member’s ID card (self-service available after hours) and select “Care Notifications.”

To submit referrals:

• EDI: Transaction 278R
• Link: UHCprovider.com/eligibilitylink

Timely Filing Guidelines

Refer to your internal contracting contact or Provider Agreement for timely filing information.

Claims

EDI: UHCprovider.com/edi. View our Claims Payer List to determine the correct Payer ID.

Link: UHCprovider.com/claimslink

Online: UHCprovider.com/claims (policies, instructions and tips)

Phone: 877-842-3210 (follow the prompts for status information)

Reimbursement Policies:

• UHCprovider.com > Policies and Protocols > Commercial Policies > Commercial Reimbursement Policies
• UHCprovider.com > Policies and Protocols > Medicare Advantage Policies > Medicare Advantage Reimbursement Policies
• UHCprovider.com > Policies and Protocols > Community Plan Policies > Reimbursement Policies for Community Plan

Reimbursement policies may be referred to in your Agreement as “payment policies.” Refer to the Medicare Advantage policies for DSNP members.

Paper Forms

Care Provider or Group Demographic Information Update forms:

• UHCprovider.com/demographics > No Access to My Practice Profile?

Claims, Billing and Payment forms:

• UHCprovider.com/claims > Need a Paper Form?

Prior Authorization and Notification forms:

• UHCprovider.com/priorauth > Forms

Claim Reconsiderations and Appeals

Online submissions are the fastest and easiest way to file Claim Reconsiderations and Appeals. Access the claimsLink tool from UHCprovider.com/claimslink.

Report escalated or unresolved issues to your Provider Advocate by email. Submit an appeal as a final resolution.

Medical Policies: Obtain copies of the Coverage Determination Guidelines, Medical Policies and Coverage Summaries online at UHCprovider.com/policies.