

UnitedHealthcare Compass

Quick Reference Guide

UnitedHealthcare Compass is a commercial member benefit plan built on patient-centered health. Members choose a primary care provider (PCP) to help coordinate their care. Compass is offered as an Individual Exchange plan in New York.



Key Features

- Specifically designed for Individual Exchanges
- Customized, more focused network of care providers
- Members are required to select a PCP to manage their health care needs
- The member's PCP must submit electronic referrals for members to see a network specialist physician
- Standard prior authorization and notification requirements apply



Benefits

Compass has a limited network service area in New York. No coverage is provided outside the network service area, except for emergency and urgent services.

Plan model	Network physicians with required referral	Network physicians without required referral	Non-network care provider*
Compass	Network benefits	No coverage*	No coverage*
Compass Balanced	Network benefits	Lower-level benefits	No coverage*
Compass Plus	Network benefits	Lower-level benefits	Non-network benefits

*Except for emergency services and related admissions



Referrals

- Referrals must be submitted by the member's PCP or a PCP within the same tax ID number (TIN).
- Referrals can be backdated up to five calendar days prior to the date of entry.

Some services don't require a referral. To see a full list of services that require a referral, go to UHCprovider.com/NY > Commercial > UnitedHealthcare Compass > Compass FAQs.



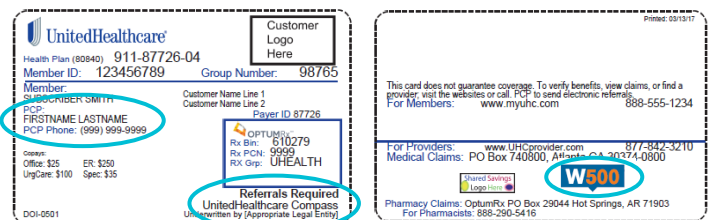
Learn More

For more information about UnitedHealthcare Compass, go to UHCprovider.com/NY > Commercial UnitedHealthcare Compass. For more information about prior authorization/notification, go to UHCprovider.com/priorauth.



Sample Member ID Card*

1. Member's PCP name and phone number
2. "Referrals Required" indicator and W500 logo identifying plans with additional network benefits



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



Contact Us

If you have questions about your Participation Agreement, please contact your Network Management representative. To find your Network Representative, go to UHCprovider.com/contactus > Find a Network Contact. For general questions, please call Provider Services at **877-842-3210**. Thank you.