

UHC Complete Benefit Plans

Quick reference guide

The UHC Complete Individual Benefit Plans encourage members to use their primary care provider (PCP) to coordinate care across a wide spectrum of health services and allow PCPs to enter electronic referrals to network specialists. This quick reference guide provides an overview of the plan's benefits to support you when assisting patients enrolled in this plan.

Key features

- Members and their families have access to UnitedHealthcare commercial plans (not sold on the marketplace)
- Members are required to select a PCP to manage their health care needs
- Members have access to a broad network of care providers
- Members must have a referral to see a network specialist
- Standard prior authorization and notification requirements apply
- The UnitedHealthcare Complete plans utilize the Choice Plus network

Benefits

- In-network care with referral: Covered
- In-network care without a referral: No Coverage, except for emergency services and related admissions
- Out-of-network care: No Coverage, except for emergency services and related admissions

PCP selection

- Members are required to select a PCP within 30 days of enrollment, selections display on the front of the ID card
- Members may change their PCP at any time
- You can generate a PCP roster report by visiting our [Document Library](#)



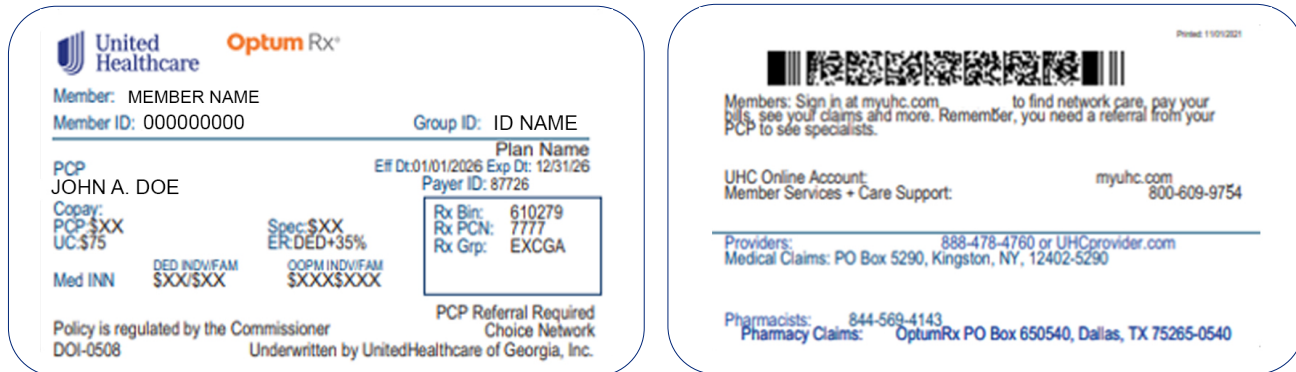
We're here to help

- For questions about your Participation Agreement, please contact your **Network Management representative**
- For chat options and contact information, visit UHCprovider.com/contactus

Referrals

- The member's PCP or a PCP with the same group ID number and tax ID number (TIN) can submit referrals
- A referral to see a specialist must be on file before the member can see the specialist
- Certain services do not require a referral
- You can submit electronic referrals and check the status of your referrals using the Referrals tool
- To find network PCPs and specialists, please visit Referral directory

Sample ID card



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

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Health plan coverage provided by UnitedHealthcare of Arizona, Inc., UHC of California DBA UnitedHealthcare of California, UnitedHealthcare Benefits Plan of California, UnitedHealthcare Community Plan, Inc., UnitedHealthcare of Colorado, Inc., UnitedHealthcare of Florida, Inc., UnitedHealthcare of Georgia, Inc., UnitedHealthcare of Illinois, Inc., UnitedHealthcare of the Mid-Atlantic, Inc., MAMSI Life and Health Insurance Company, UnitedHealthcare of New York, Inc., UnitedHealthcare Insurance Company of New York, UnitedHealthcare of North Carolina, Inc., UnitedHealthcare of Ohio, Inc., UnitedHealthcare of Oklahoma, Inc., UnitedHealthcare of Oregon, Inc., UnitedHealthcare of Pennsylvania, Inc., UnitedHealthcare of Texas, Inc., UnitedHealthcare Benefits of Texas, Inc., UnitedHealthcare of Utah, Inc., UnitedHealthcare of Washington, Inc., Optimum Choice, Inc., Oxford Health Insurance, Inc., Oxford Health Plans (NJ), Oxford Health Plans (CT), Inc., All Savers Insurance Company, Rocky Mountain Health Maintenance Organization Incorporated, Tufts Health Freedom Insurance Company or other affiliates. Administrative services provided by OptumHealth Care Solutions, LLC, OptumRx, Oxford Health Plans LLC, United HealthCare Services, Inc., Tufts Health Freedom Insurance Company or other affiliates. Behavioral health products provided by U.S. Behavioral Health Plan, California (USBHPC), United Behavioral Health (UBH), or its affiliates.