

Frequently Asked Questions

Care Provider Information | Massachusetts UnitedHealthcare® Senior Care Options (HMO D-SNP)

Effective Jan 1, 2021



UnitedHealthcare offers a Medicare Advantage plan in your area known as UnitedHealthcare® Senior Care Options (HMO D-SNP), a Dual Special Needs Plan (D-SNP), for individuals who are eligible for both MassHealth and Medicare.

UnitedHealthcare Community Plan of Massachusetts manages the Medicare Advantage benefits and reimburses you according to your existing contracted rates.

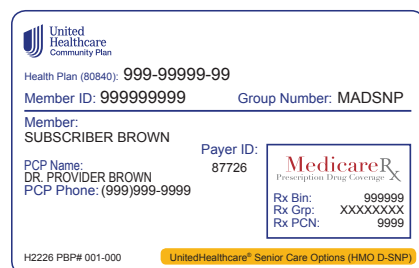
Eligibility and Benefits

Q. Who is eligible to participate in the plan?

A. D-SNP-eligible members can include low-income seniors ages 65 and older and people with disabilities who are younger than age 65. Individuals must qualify for MassHealth and Medicare separately. While most qualify for Medicare once they reach 65, some younger adults with disabilities also qualify.

Q. How can I check member eligibility?

- A. Always verify eligibility before providing services to a plan member. You can check member eligibility and benefits by:
- Eligibility and benefits on **UHCprovider.com/eligibility**
 - Calling Provider Services at **888-867-5511** or the number on the member's ID card.
 - Asking for all health insurance cards at each visit including both primary and secondary cards (MassHealth)



We've included an example of the member ID cards to help you identify these members. All member information in the sample is fictional for sample purposes. Please always refer to the member's active ID card for current details.

Q. Are referrals required for the plan?

A. Referrals are normally not required if the member seeks in-network care. As part of the plan benefit design, members can decide who they wish to visit for their care. Please check eligibility and benefits prior to providing services.

Key Points

UnitedHealthcare® Senior Care Options (HMO D-SNP) is a **Medicare Advantage** plan.

This plan will be expanding its service area effective Jan. 1, 2021. The service area will now include Bristol, Essex, **Franklin**, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk and Worcester counties.*

*New counties in bold

Q. What are the member advantages of the plan?

A. Members can continue to access core Medicare benefits along with Part D (pharmacy) benefits and targeted clinical programs and services. Additionally, the plan offers supplemental benefits and services that are not typically available through original Medicare or MassHealth at no extra cost. These may include:



Prescription Drug Coverage

Drug coverage on thousands of prescription medications with home delivery option



Routine Vision Care

Routine eye exam and \$200 allowance toward eyewear



OTC Product

Up to \$600 per year on a debit card to buy over-the-counter products



Fitness Program

Renew Active™ is a fitness program for body and mind, at a gym or at home



Healthy Food Benefit

Up to \$300 per year on a debit card to buy healthy foods at many retailers



Virtual Medical and Mental Health Visits

\$0 copay for virtual visits

Q. How can a member enroll in a Senior Care Options Plan?

A. Prospective members can explore their options by visiting UHCCommunityPlan.com/MA or speaking to a licensed sales agent. In addition to individuals enrolling during Annual Enrollment Period, October 15 – December 7, plan members may enroll, disenroll or switch plans once per calendar quarter during the first nine months of the year by following the Centers for Medicare & MassHealth Services (CMS) regulatory requirements.

Care Provider Reimbursement

Q. How will I be reimbursed for the plan?

A. We will reimburse you according to your existing Medicare Advantage contracted rates. As the primary payer, we're responsible for the management and payment of the Medicare covered and supplemental services. Since these members are dually eligible for Medicare and MassHealth, they'll have MassHealth as their secondary payer in Massachusetts. Care providers may not attempt to collect additional reimbursement from D-SNP members whose MassHealth benefits cover all Medicare cost-sharing components. These members aren't responsible for Medicare cost sharing under CMS regulations. Medicare cost sharing includes the deductibles, coinsurance and copays included as part of Medicare Advantage benefit plans.

Q. As a care provider, do I need to be enrolled in MassHealth to receive the remaining reimbursement?

A. At a minimum, you are required to enroll or register with the state MassHealth plan for Medicare secondary cost share billing purposes. Depending on the service and covered benefit level, many DSNP care providers will be required to submit a secondary claim to MassHealth if there is deductible, copayment or coinsurance amount that is the responsibility of the MassHealth payer to cover. This will depend on the member's MassHealth eligibility levels. This may require registering for a care provider MassHealth ID number for reimbursement. If you decide not to enroll or re-enroll with the state MassHealth program, you'll give up your ability to seek the secondary payer reimbursement for a dually eligible member.

Care Provider Resources

- To learn more about this new plan, visit UHCprovider.com/MADSNP
- If you have questions, please call Provider Services at **888-867-5511** and select "Health Care Provider".
- Further details around medical and reimbursement policies at UHCprovider.com/policies > Medicare Advantage Policies
- Find out more about doing business with us at UHCprovider.com/guides > Administrative Guide for Commercial, Medicare Advantage and D-SNP > Choose State Specific Community Plan Provider Manual > Massachusetts.