

## CARE PROVIDER INFORMATION

# Quick Reference Guide: Michigan

UnitedHealthcare Dual Complete® (HMO SNP)

Need to contact us? This reference guide provides you with quick access to a variety of helpful resources about the UnitedHealthcare Dual Complete (HMO SNP) plan.



### Link and UHCprovider.com

Use Link to perform secure transactions such as checking member eligibility and benefits, managing claims and requesting prior authorization. To learn more about using Link, please visit [UHCprovider.com/Link](https://UHCprovider.com/Link)



### Provider Services

**Phone: 844-368-6885**

- Confirm member eligibility and benefits.
- Provide care coordination notification.
- Check claims status.
- Request prior authorization.
- Update facility/practice data.
- Submit an appeal request.

Representatives are available weekdays, 8 a.m. – 6 p.m. (except major holidays)



### Network Referrals

**Online:** [UHCprovider.com](https://UHCprovider.com) > Find Dr. > Search for a Provider > Medical Directory > Medicare Plans > UnitedHealthcare Dual Complete

**Phone: 877-369-1302**

To submit a behavioral health service referral, please call **844-368-6885**



### Eligibility and Benefits

Please call **844-368-6885** or use the eligibilityLink tool at [UHCprovider.com/eligibilityLink](https://UHCprovider.com/eligibilityLink)



### Prescription Drugs

Formulary

**Online:** [UHCprovider.com/MIcommunityplan](https://UHCprovider.com/MIcommunityplan) > UnitedHealthcare Dual Complete Special Needs Plans > Dual Complete Medicare Advantage Pharmacy Formulary



### Claims Management and Reconsideration

Please call **844-368-6885** or use the claimsLink tool at [UHCprovider.com/claimsLink](https://UHCprovider.com/claimsLink)

### Claims Submission

**Payer ID: 95467**

**Electronic Claims:** Please submit claims within 180 days of service, or the time frame in your participation agreement, at [UHCprovider.com/claimsLink](https://UHCprovider.com/claimsLink)

### Paper Claims:

Please mail claims to:

UnitedHealthcare Community Plan – Michigan  
P.O. Box 30991  
Salt Lake City, UT 84130

### Appeals Submission

#### Mail formal appeals to:

UnitedHealthcare Community Plan – Michigan  
Attention: Provider Dispute  
P.O. Box 31364  
Salt Lake City, UT 84131-0364



### Prior Authorization Requests

**Phone: 844-368-6885**

Prior Authorization information is available at [UHCprovider.com/paan](https://UHCprovider.com/paan)



### Model of Care Training

Please complete the required Model of Care training at [UHCprovider.com](https://UHCprovider.com) > Menu > Resource Library > Training > Special Needs Model of Care Training for Providers



### Other Resources

For more information, please contact your Provider Advocate or visit [UHCprovider.com/MIcommunityplan](https://UHCprovider.com/MIcommunityplan)

## ADDITIONAL KEY CONTACTS



### Behavioral Health

Phone: 844-368-6885  
Monday – Friday, 8 a.m. – 6 p.m.  
Online: [providerexpress.com](http://providerexpress.com)



### Dental

Phone: 844-368-6885  
Monday – Friday, 8 a.m. – 6 p.m.  
Online: [DBP.com](http://DBP.com)



### Vision (MARCH®)

Phone: 844-586-2724  
Monday – Friday, 8 a.m. – 6 p.m.  
Online: [MarchVisionCare.com](http://MarchVisionCare.com)



### Non-Emergent Transportation Vendor (National MedTrans)

Phone: 844-525-2329  
Monday – Friday, 7 a.m. – 7 p.m.  
Online: [Natmedtrans.com](http://Natmedtrans.com)



### Hearing (EPIC)

Phone: 866-956-5400  
Monday – Friday, 9 a.m. – 9 p.m.  
Online: [EPIChearing.com](http://EPIChearing.com)



### OptumHealth NurseLine

Phone: 877-440-9407  
7 days a week, 24 hours a day



### Personal Emergency Response System (Philips Lifeline)

Phone: 800-368-2925  
Monday – Friday, 8:30 a.m. – 6:30 p.m.  
Online: [Lifeline.Philips.com](http://Lifeline.Philips.com)



### Chiropractic

Phone: 866-785-1654  
Monday – Friday, 8:00 a.m. – 8:00 p.m.  
Online: [MyOptumHealthPhysicalHealth.com](http://MyOptumHealthPhysicalHealth.com)

## SAMPLE CARDS

### Medicare

MEDICARE HEALTH INSURANCE	
Name/Nombre <b>JOHN L SMITH</b>	
Medicare Number/Número de Medicare <b>1EG4-TE5-MK72</b>	
Entitled to/Con derecho a <b>HOSPITAL (PART A)</b>	Coverage starts/Cobertura empieza <b>01-01-2019</b>
<b>MEDICAL (PART B)</b>	<b>01-01-2019</b>

### Michigan Medicaid

<b>12345678</b> <b>JOHN O. CITIZEN</b>	

### UnitedHealthcare Dual Complete

UnitedHealthcare <sup>®</sup> Community Plan		Michigan
Health Plan (80840): <b>911-95467-00</b>		
Member ID: <b>000000000-00</b>	Group Number: <b>MIDSNP</b>	
Member: <b>MEMBER NAME</b>		
PCP Name: <b>PROVIDER NAME</b>	Payer ID: <b>95467</b>	Dental Benefits Included
PCP Phone: <b>(000)000-0000</b>		<b>Medicare<sup>Rx</sup></b> Prescription Drug Coverage
		RxBIN: 610097 RxPCN: 9999 RxGrp: MPDCSP
<b>UnitedHealthcare Dual Complete (HMO SNP)</b>		
H2247 PBP# 001		

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Customer Service Hours: 8 am - 8 pm 7 days/week		Printed: 08/27/2018
<b>For Members</b>		
Website:	<a href="http://www.UHCCommunityPlan.com">www.UHCCommunityPlan.com</a>	
Customer Service:	1-844-368-6885 TTY 711	
NurseLine:	1-877-440-9407 TTY 711	
Behavioral Health:	1-844-368-6885 TTY 711	
Dental:	1-844-368-6885 TTY 711	
<b>For Providers</b>		
Medical Claim Address:	<a href="http://www.UHCprovider.com">www.UHCprovider.com</a>	1-844-368-6885
	P.O. Box 30991, Salt Lake City, UT 84130-0991	
Dental Providers:	<a href="http://www.dbp.com">www.dbp.com</a>	1-844-275-8750
Medicare Community Plan	<b>UHC</b>	<b>NO Referral Required</b>
For Pharmacists 1-877-889-6510 Pharmacy Claims OptumRx P.O. Box 29045, Hot Springs, AR 71903		

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