

2027 Individual Exchange plans of Colorado

Quick reference guide

Please use this guide to quickly refer to the information you need to work with our UnitedHealthcare Individual Exchange plans, also referred to as UnitedHealthcare Individual & Family ACA Marketplace plans.

All Individual Exchange plans require that members have an assigned primary care physician (PCP).



Example member ID cards

- 1 Group number “ONEX” plans offered on the Exchange; “OFEX” plans offered off the Exchange
- 2 Plan name – includes the metal level of bronze, silver, gold or platinum
- 3 Referral Required indicator (if applicable)
- 4 Network

Colorado Doctors Plan HMO

ROCKY MOUNTAIN HEALTH PLANS A UnitedHealthcare Company		Optum Rx®	
Member: Member ID: 000000000		1 Group ID: COXXXX	
2 RMHP Colorado Doctors Plan Silver Value-X		Spec:DED+XX%	
Copay: PCP:\$X UC:\$XX ER:DED+XX% InPtHosp:DED+XX%		Payer ID: 87726	
DED INDV/FAM MED: \$XXXX/\$XX		OOPM INDV/FAM \$XXX/\$XXXX	
3 No PCP Referral Required		4 Colorado Doctors Plan HMO Network	
CO-DOI-508		Underwritten by Rocky Mountain HMO, Inc.	

Colorado Doctors Plan HMO CO Option*

ROCKY MOUNTAIN HEALTH PLANS A UnitedHealthcare Company		Optum Rx®	
Member: Member ID: 000000000		1 Group ID: COXXXX	
2 RMHP Colorado Doctors Plan Colorado Option Bronze		Spec:DED+XX%	
Copay: PCP:\$X UC:\$XX ER:DED+XX% InPtHosp:DED+XX%		Payer ID: 87726	
DED INDV/FAM MED: \$XXX/\$XXX		OOPM INDV/FAM \$XXX/\$XXX	
3 No PCP Referral Required		4 Colorado Doctors Plan HMO Network	
HMO CO-DOI		Underwritten by Rocky Mountain HMO, Inc.	

Monument Health HMO

  	
Member: Member ID: 000000000	
1 Group ID: COXXXX	
2 RMHP Monument Health Bronze Value-B	
Copay: PCP:\$X UC:\$XX	InPtHosp:DED+XX% Spec:DED+XX% ER:DED+XX%
Payer ID: 87726	
Rx Bin: 610279 Rx PCN: 7777 Rx Grp: EXCCO	
Tier 1: DED INDV/FAM \$XXXX/\$XXXX Tier 2: \$XXXX/\$XXXX	OOPM INDV/FAM \$XXXX/\$XXXX
3 No PCP Referral Required	
4 Monument Health HMO Network	
Underwritten by Rocky Mountain HMO, Inc.	

	
Members: Sign in at myuhc.com/exchange to find network care, pay your bills, see your claims, ask a question and more. Prior authorization or notice of admission: 800-854-4558. Prior authorization of some services and notice of hospital admission is required.	
UHC Online Account: Member Services + Care Support:	myuhc.com/exchange 888-809-6539
Providers: 888-478-4760 or UHCprovider.com Medical Claims: PO Box 5290, Kingston, NY, 12402-5290	
Pharmacists: 844-569-4143 Pharmacy Claims: OptumRx PO Box 650540, Dallas, TX 75265-0540	

Monument ONE HMO

  	
Member: Member ID: 000000000	
1 Group ID: COXXXX	
2 RMHP Monument One Bronze Copay Focus-X	
Copay: PCP:\$X UC:\$XX	InPtHosp:DED+XX% Spec:DED+XX% ER:DED+XX%
Payer ID: 87726	
Rx Bin: 610279 Rx PCN: 7777 Rx Grp: EXCCO	
Tier 1: DED INDV/FAM \$XXXX/\$XXXX Tier 2: \$XXXX/\$XXXX	OOPM INDV/FAM \$XXXX/\$XXXX
3 No PCP Referral Required	
4 Monument ONE HMO Network	
Underwritten by Rocky Mountain HMO, Inc.	

Monument ONE HMO CO Option

  	
Member: Member ID: 000000000	
1 Group ID: COXXXX	
2 RMHP Monument One Colorado Option Silver	
PCP Required	
Copay: PCP:\$X UC:\$XX	InPtHosp:DED+XX% Spec:DED+XX% ER:DED+XX%
Payer ID: 87726	
Rx Bin: 610279 Rx PCN: 7777 Rx Grp: EXCCO	
Tier 1: DED INDV/FAM \$XXXX/\$XXXX Tier 2: \$XXXX/\$XXXX	OOPM INDV/FAM \$XXXX/\$XXXX
3 No PCP Referral Required	
4 Monument ONE HMO Network	
Underwritten by Rocky Mountain HMO, Inc.	

Rocky Mountain HMO Valley

 	
Member: Member ID: 000000000	
1 Group ID: COXXXX	
2 RMHP Valley Bronze Value	
Copay: PCP:\$X UC:\$XX	InPtHosp:DED+XX% Spec:DED+XX% ER:DED+XX%
Payer ID: 87726	
Rx Bin: 610279 Rx PCN: 7777 Rx Grp: EXCCO	
Med INN DED INDV/FAM \$XXXX/\$XXXX OOPM INDV/FAM \$XXX/\$XXX	
3 No PCP Referral Required	
4 Rocky Mountain HMO Valley Network	
Underwritten by Rocky Mountain HMO, Inc.	

Rocky Mountain HMO Valley CO Option

 	
Member: Member ID: 000000000	
1 Group ID: COXXXX	
2 RMHP Valley Colorado Option Silver	
Copay: PCP:\$X UC:\$XX	InPtHosp:DED+XX% Spec:DED+XX% ER:DED+XX%
Payer ID: 87726	
Rx Bin: 610279 Rx PCN: 7777 Rx Grp: EXCCO	
Med INN DED INDV/FAM \$XXXX/\$XXXX OOPM INDV/FAM \$XXX/\$XXX	
3 No PCP Referral Required	
4 Rocky Mountain HMO Valley Network	
Underwritten by Rocky Mountain HMO, Inc.	

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

*In 2026, we will not include a few counties for the Colorado Doctors HMO CO Option plan.



Individual Exchange plans page

Visit UHCprovider.com/exchanges to access the following resources:

- The 2026 Individual Exchange plans self-paced interactive guide
- State-specific prescription drug lists (PDLs)
- Our policies, coverage determination guidelines and prior authorization/notification requirements
- Individual Exchange plan news



UnitedHealthcare Provider Portal

UHCprovider.com/portal

The UnitedHealthcare Provider Portal allows you to quickly get the answers you need so you can save valuable time and get better documentation and visibility.

To access the secure portal and the following tools, please **create and/or sign in using a One Healthcare ID**.

Eligibility and benefits

UHCprovider.com/eligibility

We encourage you to verify member eligibility each time a patient presents for service.

Claims

UHCprovider.com/claims

To submit multi-payer transactions online or through a clearinghouse, please use the electronic data interchange (EDI) in the claims tool and enter the following:

- EDI 837 Health Care Claim Transaction
- Payer ID 87726

To learn more, please visit UHCprovider.com/edi.

You can also use the claims tool to submit reconsideration requests and appeals.

Prior authorization and notification

UHCprovider.com/paan

Call **800-711-4555** to request prior authorization for outpatient self-administered medications.

Unless otherwise allowed by state law, you must submit prior authorization requests electronically. We won't accept prior authorizations that require a referral unless a completed referral is on file.

To access prior authorization requirements and forms, please visit UHCprovider.com/exchanges.

You can also use the claims tool to submit reconsideration requests and appeals.



Find in-network specialists

- **Online:** Visit UHCprovider.com/findprovider
- **Phone:** Call **888-478-4760**

Referral requirements by plan

Plan	Primary care physician (PCP) required?	Accessing care		
		Colorado plan	Colorado Option plan	Out-of-network benefits
Colorado Doctors Plan HMO	Yes	No referral needed	No referral needed	Coverage*
Monument Health HMO	Yes	No referral needed	No referral needed	Coverage*
Monument ONE HMO	Yes	No referral needed	No referral needed	Coverage*
Rocky Mountain HMO Valley	Yes	No referral needed	No referral needed	Coverage*

*Emergency room and urgent care coverage is available even if out-of-network.



Questions? We're here to help.

- For chat options and contact information, visit UHCprovider.com/contactus
- Call Individual Exchange plans Provider Services at **888-478-4760**, weekdays, 7 a.m.–7 p.m. CT
- Contact your provider advocate

UnitedHealthcare Individual & Family plans medical plan coverage offered by: UnitedHealthcare of Arizona, Inc.; Rocky Mountain Health Maintenance Organization Incorporated in CO; UnitedHealthcare of Florida, Inc.; UnitedHealthcare of Georgia, Inc.; UnitedHealthcare of Illinois, Inc.; UnitedHealthcare Insurance Company in AL, IN, KS, LA, MO, NE, NJ, TN, and WY; Optimum Choice, Inc. in MD and VA; UnitedHealthcare Community Plan, Inc. in MI; UnitedHealthcare of Mississippi, Inc.; UnitedHealthcare of New Mexico, Inc.; UnitedHealthcare of North Carolina, Inc.; UnitedHealthcare of Ohio, Inc.; UnitedHealthcare of Oklahoma, Inc.; UnitedHealthcare of South Carolina, Inc.; UnitedHealthcare of Texas, Inc.; UnitedHealthcare of Oregon, Inc. in WA; UnitedHealthcare of Wisconsin, Inc., and UnitedHealthcare Plan of the River Valley in Iowa. Administrative services provided by United HealthCare Services, Inc. or their affiliates.