

# 2020 UnitedHealthcare Medicare Advantage Plans Indiana

## Quick Reference Guide

This guide provides contact information, prior authorization requirements and other general information to help you and your practice when working with UnitedHealthcare Medicare Advantage health maintenance organization (HMO) and preferred provider organization (PPO) members.



### UHCprovider.com and Link

Link is your gateway to UnitedHealthcare's online tools. To sign in to Link, go to [UHCprovider.com](https://UHCprovider.com) and click on the Link button in the top right corner. On Link you can:

- Check patient eligibility and benefits
- Check claims status and submit reconsideration requests
- Watch videos on demand in UHC On Air
- Referrals not required for Indiana Medicare plans

If you have questions, visit [UHCprovider.com/link](https://UHCprovider.com/link) or call the UnitedHealthcare Connectivity Help Desk at **866-842-3278**, option 1, from 7 a.m. to 9 p.m. Central Time, Monday through Friday.



### Provider Hotline

Call us at **877-842-3210** to:

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



**Tip:** You can go online to get much of this information and submit transactions. To learn more, please go to [UHCprovider.com/link](https://UHCprovider.com/link).

You'll be prompted to enter your patient's date of birth, the date of service and the member ID and group number as shown on the member's ID card.



### Claims Submission

**Electronic:** To submit claims by Electronic Data Interchange (EDI), please use **payer ID 87726**. Learn more at [UHCprovider.com/edi](https://UHCprovider.com/edi). For WellMed Payer ID# WELM2, reference member ID card for details.

**Paper:** Please submit paper claims to the address listed on the back of the member's ID card.



### Prior Authorization Requests and Care Coordination Notifications

Request prior authorization and provide care coordination notifications.

**877-842-3210**

**UHCprovider.com** > [Prior Authorization and Notification Resources](#)



### Prescription Medications

#### OptumRx.com

Mail Order

- Call **800-791-7658**, Monday through Friday, 8 a.m. to 8 p.m. Central Time
- Fax 800-491-7997

Oral Drug Prior Authorization Requests

- Call **800-711-4555**, option 1
- Fax 800-527-0531

Injectable Drugs Prior Authorization Requests

- Call **800-711-4555**, option 2

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### Behavioral Health Services

Please refer to the member's ID card for their behavioral health provider phone number.



### Routine Vision: UnitedHealthcare Vision

spectera.com

800-638-3120

Monday through Friday, 7 a.m. to 10 p.m., and Saturday, 8 a.m. to 5:30 p.m. Central Time



### Routine Hearing: UnitedHealthcare Hearing

UHChearing.com

855-523-9355

Monday through Friday, 8 a.m. to 8 p.m. Central Time



### Dental

dbp.com

877-816-3596

Monday through Friday from 7 a.m. to 10 p.m. Central Time



### Virtual Medical Visits

amwell.com

Members have access to virtual medical visits 24/7 with American Well at [amwell.com](https://www.amwell.com).



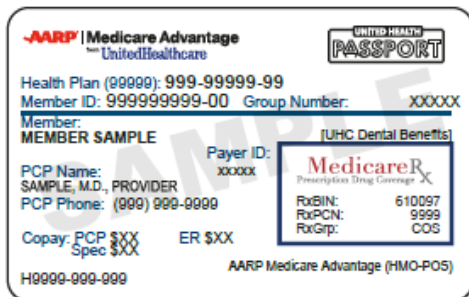
### Other Resources

You'll find information in our Care Provider Administrative Guides at [UHCprovider.com/guides](https://UHCprovider.com/guides). If you have questions, please contact your Provider Advocate at [Indiana\\_PR\\_team@uhc.com](mailto:Indiana_PR_team@uhc.com) or Network Management at [IN\\_NM\\_team@uhc.com](mailto:IN_NM_team@uhc.com).



### 2020 Medicare Advantage Sample ID Cards

#### HMO-POS



Sample member ID cards for illustration only. Actual information varies depending on payer, plan and other requirements.

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#### PPO

**AARP Medicare Advantage**  
UnitedHealthcare

Health Plan (99999): 999-99999-99  
Member ID: 999999999-00 Group Number: XXXXX

Member: MEMBER SAMPLE [UHC Dental Benefits]

Payer ID: xxxxxx

PCP Name: SAMPLE, M.D., PROVIDER  
PCP Phone: (999) 999-9999

Copy: PCP \$XX ER \$XX  
Spec \$XX

H9999-999-999

**MedicareRx**  
Prescription Drug Coverage

RxBIN: 610097  
RxPCN: 9999  
RxGrp: COS

AARP Medicare Advantage (PPO)  
Medicare limiting charges apply.

Customer Service Hours: 8 am - 8 pm 7 days/week Printed: xx/xx/xxxx

**For Members**  
Website: www.MEMBERURL.com  
Customer Service: 1-999-999-9999 TTY 711  
NurseLine: 1-999-999-9999 TTY 711  
Behavioral Health: 1-999-999-9999 TTY 711  
[Dental: 1-999-999-9999 TTY 711]

**For Providers** www.PROVIDERURL.com 1-999-999-9999  
Medical Claim Address: P.O. Box 99999, Healthcare, US 99999-9999

[UHC Dental Providers: www.DENTALURL.com 1-999-999-9999]

**UHC** [Fitness Benefit Logo] [No Referral Logo] [Network Logo]

For Pharmacists 1-999-999-9999  
Pharmacy Claims OptumRx P.O. Box 99999, Healthcare, US 99999

#### National PPO

**AARP Medicare Advantage**  
UnitedHealthcare

Health Plan (99999): 999-99999-99  
Member ID: 999999999-00 Group Number: XXXXX

Member: MEMBER SAMPLE [UHC Dental Benefits]

Payer ID: xxxxxx

PCP Name: SAMPLE, M.D., PROVIDER  
PCP Phone: (999) 999-9999

Copy: PCP \$XX ER \$XX  
Spec \$XX

H9999-999-999

**MedicareRx**  
Prescription Drug Coverage

RxBIN: 610097  
RxPCN: 9999  
RxGrp: COS

AARP Medicare Advantage (PPO)  
Medicare limiting charges apply.

Customer Service Hours: 8 am - 8 pm 7 days/week Printed: xx/xx/xxxx

**For Members**  
Website: www.MEMBERURL.com  
Customer Service: 1-999-999-9999 TTY 711  
NurseLine: 1-999-999-9999 TTY 711  
Behavioral Health: 1-999-999-9999 TTY 711  
[Dental: 1-999-999-9999 TTY 711]

**For Providers** www.PROVIDERURL.com 1-999-999-9999  
Medical Claim Address: P.O. Box 99999, Healthcare, US 99999-9999

[UHC Dental Providers: www.DENTALURL.com 1-999-999-9999]

**UHC** [Fitness Benefit Logo] [No Referral Logo] [Network Logo]

For Pharmacists 1-999-999-9999  
Pharmacy Claims OptumRx P.O. Box 99999, Healthcare, US 99999

#### WellMed

**AARP Medicare Advantage**  
UnitedHealthcare

Health Plan (80840): 911-87726-04  
Member ID: 999999999-00 Group Number: XXXXX

Member: MEMBER R SAMPLE [UHC Dental Benefits]

Payer ID: [WELM2]

PCP Name: SAMPLE, M.D., PROVIDER  
PCP Phone: (999) 999-9999

Copy: PCP \$XX ER \$XX  
Spec \$XX

H9999-999-999

**MedicareRx**  
Prescription Drug Coverage

RxBIN: 610097  
RxPCN: 9999  
RxGrp: COS

AARP Medicare Advantage Choice (PPO)  
Medicare limiting charges apply.

Customer Service Hours: 8 am - 8 pm 7 days/week Printed: xx/xx/xxxx

**For Members**  
Website: www.memberurl.com  
Customer Service: 1-999-999-9999 TTY 711  
NurseLine: 1-999-999-9999 TTY 711  
Behavioral Health: 1-999-999-9999 TTY 711  
[Dental: 1-999-999-9999 TTY 711]

**For Providers** [https://eprg.wellmed.net] 1-999-999-9999  
Medical Claim Address: P.O. Box 400066, San Antonio, TX 78229-0066  
Provider Authorizations: 1-999-999-9999 [PCP to send electronic referrals]  
[UHC Dental Providers: www.dentalurl.com 1-999-999-9999]

**UHC** [Fitness Benefit Logo] [No Referral Logo] [Network Logo]

For Pharmacists 1-999-999-9999  
Pharmacy Claims OptumRx P.O. Box 99999, Healthcare, US 99999

#### DSNP

UnitedHealthcare Community Plan

Health Plan (99999): 999-99999-99  
Member ID: 999999999-00 Group Number: XXXXX

Member: MEMBER SAMPLE [UHC Dental Benefits]

Payer ID: XXXXX

PCP Name: SAMPLE, D.O., PROVIDER  
PCP Phone: (999) 999-9999

Copy: PCP \$XX ER \$XX  
Spec \$XX

H9999-999-999

**MedicareRx**  
Prescription Drug Coverage

RxBIN: 610097  
RxPCN: 9999  
RxGrp: COS

UnitedHealthcare Dual Complete (PPO D-DSNP)  
Medicare limiting charges apply.

Customer Service Hours: 8 am - 8 pm 7 days/week Printed: xx/xx/xxxx

**For Members**  
Website: www.MEMBERURL.com  
Customer Service: 1-999-999-9999 TTY 711  
NurseLine: 1-999-999-9999 TTY 711  
Behavioral Health: 1-999-999-9999 TTY 711  
[Transportation Svcs: 1-999-999-9999 TTY 1-999-999-9999]

**For Providers** www.ProviderURL.com 1-999-999-9999  
Medical Claim Address: P.O. Box 99999, Healthcare, US 99999-9999

[UHC Dental Providers: www.DENTALURL.com 1-999-999-9999]

**UHC** [Fitness Benefit Logo] [No Referral Logo] [Network Logo]

For Pharmacists 1-999-999-9999  
Pharmacy Claims OptumRx P.O. Box 99999, Healthcare, US 99999

Sample member ID cards for illustration only. Actual information varies depending on payer, plan and other requirements.

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### 2020 Medicare Advantage Indiana Membership Plans

Referrals are not required.

Plan Name and Type	Indiana Counties	CMS (Centers for Medicare and Medicaid Services) Contract	Group Number	Member Monthly Premium
AARP® Medicare Advantage Profile (HMO-POS) Parkview	Allen, De Kalb, Huntington, Lagrange, Noble, Whitley	H2802-007	00700 00701 00746 00747	\$0
AARP® Medicare Advantage Plan 1 (HMO-POS)	Adams, Wells	H2802-008	00702 00703 00748 00749	\$0
AARP® Medicare Advantage Plan 1 (HMO-POS)	Bartholomew, Benton, Blackford, Boone, Brown, Carroll, Clinton, Decatur, Delaware, Fayette, Fountain, Hamilton, Hancock, Hendricks, Henry, Howard, Jay, Johnson, Lawrence, Madison, Marion, Monroe, Montgomery, Morgan, Orange, Putnam, Randolph, Rush, Shelby, Tippecanoe, Tipton, Union, Warren, White	H2802-010	00704 00705 00744 00745	\$0
AARP® Medicare Advantage Plan 1 (HMO-POS)	Crawford, Daviess, Dubois, Gibson, Knox, Martin, Perry, Pike, Posey, Spencer, Vanderburgh, Warrick	H2802-012	00709 00710 00750 00751	\$0
AARP® Medicare Advantage Plan 2 (HMO-POS)	Cass, Elkhart, Fulton, Grant, Kosciusko, Marshall, Miami, St. Joseph, Steuben, Wabash	H2802-015	00714 00739 00754	\$79
AARP® Medicare Advantage Plan 1 (HMO-POS)	Clark, Dearborn, Floyd, Franklin, Harrison, Jackson, Jefferson, Jennings, Ohio, Ripley, Scott, Switzerland, Washington	H2802-016	00740 00755 00756	\$0

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Plan Name and Type	Indiana Counties	CMS (Centers for Medicare and Medicaid Services) Contract	Group Number	Member Monthly Premium
AARP® Medicare Advantage Plan 1 (HMO-POS)	Jasper, La Porte, Lake, Newton, Porter, Pulaski, Starke	H2802-018	00742 00743 00758 00759	\$0
AARP® Medicare Advantage Plan 1 (HMO-POS)	Clay, Greene, Owen, Parke, Sullivan, Vermillion, Vigo	H2802-020	00721 00722 00761 00762	\$0
AARP® Medicare Advantage Choice Plan 1 (PPO)	Adams, Allen, De Kalb, Huntington, Lagrange, Noble, Wells, Whitley	H2228-019	67001 67021 67030 67031	\$18
AARP® Medicare Advantage Focus (PPO) Lutheran	Adams, Allen, Huntington, Wells, Whitley	H2228-020	67007 74000 67032 74001	\$0
AARP® Medicare Advantage Choice Plan 1 (PPO)	Bartholomew, Benton, Blackford, Boone, Brown, Carroll, Clinton, Decatur, Delaware, Fayette, Fountain, Hamilton, Hancock, Hendricks, Henry, Howard, Johnson, Lawrence, Madison, Marion, Monroe, Montgomery, Morgan, Orange, Putnam, Randolph, Rush, Shelby, Tippecanoe, Tipton, Union, Warren, White	H2228-021	67025 67024 67194 67195 67026 67027 67028 67029	\$22
AARP® Medicare Advantage Choice (PPO)	Crawford, Daviess, Dubois, Gibson, Knox, Martin, Perry, Pike, Posey, Spencer, Vanderburgh, Warrick	H2228-022	67017 67034	\$18

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Plan Name and Type	Indiana Counties	CMS (Centers for Medicare and Medicaid Services) Contract	Group Number	Member Monthly Premium
AARP® Medicare Advantage Choice (PPO)	Jasper, La Porte, Lake, Newton, Porter, Pulaski, Starke	H2228-064	67171 67172 90101 90102	\$24
AARP® Medicare Advantage Choice (PPO)	Clark, Dearborn, Floyd, Franklin, Harrison, Jackson, Jefferson, Jennings, Ohio, Ripley, Scott, Switzerland, Washington	H2228-065	67173 67174 90103 90104	\$22
AARP® Medicare Advantage Choice (PPO)	Clay, Greene, Owen, Parke, Sullivan, Vermillion, Vigo	H2228-066	67175 67176 90105 90106	\$0
AARP® Medicare Advantage Choice Plan 2 (PPO)	Adams, Allen, De Kalb, Elkhart, Huntington, St. Joseph, Wells, Whitley	H2228-080	74055 90126	\$0
AARP® Medicare Advantage Choice Plan 2 (PPO)	Boone, Hancock, Hamilton, Hendricks, Johnson, Marion	H2228-081	74056 74057 90127 90128	\$0
UnitedHealthcare Dual Complete® (PPO SNP)	All Indiana Counties except for Wayne County	H0271-005	67200	\$0