

# UnitedHealthcare® Medicare Silver, UnitedHealthcare® Medicare Gold, UnitedHealthcare® Dual Complete® Choice, UnitedHealthcare® Medicare Advantage Choice Regional PPO Plans in all Texas Counties

## 2021 Quick Reference Guide

Need to contact us? Use this reference guide for quick access to a variety of helpful resources.



### 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
- Submit and check referral status

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, 7 a.m. – 9 p.m. Central Time, Monday – Friday.



### Provider Services

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

- Confirm member eligibility and benefits
- Provide advance notification
- 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).

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



### Prior Authorization Requests and Advance Notification

Request prior authorization and provide advance notification.

- Call **877-842-3210**.
- Visit [UHCprovider.com](https://UHCprovider.com) > Prior Authorization and Notification Resources.



### Behavioral Health Services

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



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### Prescription Medications

[OptumRx.com](https://www.optumrx.com)

Mail Order

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

Oral Drug Prior Authorization Requests

- [covermymeds.com/epa/optumrx](https://covermymeds.com/epa/optumrx)
- 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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### Routine Vision: UnitedHealthcare Vision

[spectera.com](https://www.spectera.com)

Call **800-638-3120**, Monday – Friday, 7 a.m. – 10 p.m. and Saturday, 8 a.m. – 5:30 p.m. Central Time.

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### Routine Hearing: UnitedHealthcare Hearing

[UHCaring.com](https://www.uhcaring.com)

Call **855-523-9355**, Monday – Friday, 8 a.m. – 8 p.m. Central Time.

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### Dental

[UHCdental.com](https://www.uhcdental.com)

Call **877-816-3596**, Monday – Friday, 7 a.m. – 10 p.m. Central Time.

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### Virtual Visits

#### Virtual Medical Visits

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

#### Virtual Mental Health Visits

- [VirtualVisitsMentalHealth.uhc.com](https://www.virtualvisitsmentalhealth.uhc.com)

**Members have access to virtual mental health visits through Optum Behavioral Health.**

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### Other Resources

You'll find information in our Care Provider Administrative Guides at [UHCprovider.com/guides](https://www.uhcprovider.com/guides).

If you have questions, please contact your Physician Advocate, Provider Relations or Network Management representative at [UHCprovider.com/contactus](https://www.uhcprovider.com/contactus) > Find a Network Contact.

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## 2021 Medicare Advantage Sample ID Cards

Need sample ID cards to emulate the below cards:

United Healthcare

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

Member: **MEMBER SAMPLE** UHC Dental Benefits

PCP Name: Payer ID: XXXXX  
 SAMPLE, M.D., PROVIDER

PCP Phone: (999) 999-9999

In Network: PCP\$ xx Spec \$ xx ER \$ xx  
 Out of Network: PCP\$ xx Spec \$ xx

UnitedHealthcare Medicare XXXXX (Regional PPO C-SNP)  
 R9999-999-999 Medicare limiting charges apply.

**MedicareRx**  
 Prescription Drug Coverage

RxBIN: 610097  
 RxPCN: 9999  
 RxGrp: COS

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

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

**UHC** NO Referral Required

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

United Healthcare Medicare National Network

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

Member: **MEMBER SAMPLE** UHC Dental Benefits

PCP Name: Payer ID: XXXXX  
 SAMPLE, M.D., PROVIDER

PCP Phone: (999) 999-9999

In Network: PCP\$ xx Spec \$ xx ER \$ xx  
 Out of Network: PCP\$ xx Spec \$ xx

UnitedHealthcare Medicare XXXXX (Regional PPO C-SNP)  
 R9999-999-999 Medicare limiting charges apply.

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

United Healthcare

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

Member: **MEMBER SAMPLE** [UHC Dental Benefits]

PCP Name: Payer ID: XXXXX  
 SAMPLE, M.D., PROVIDER

PCP Phone: (999) 999-9999

UnitedHealthcare Dual Complete Choice (Regional PPO D-SNP)  
 H9999-999-999 Medicare limiting charges apply.

**MedicareRx**  
 Prescription Drug Coverage

RxBIN: 610097  
 RxPCN: 9999  
 RxGrp: COS

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]

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

United Healthcare Medicare National Network

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

Member: **MEMBER SAMPLE** UHC Dental Benefits

PCP Name: Payer ID: XXXXX  
 SAMPLE, M.D., PROVIDER

PCP Phone: (999) 999-9999

In Network: PCP\$ xx Spec \$ xx ER \$ xx  
 Out of Network: PCP\$ xx Spec \$ xx

UnitedHealthcare Medicare Advantage Choice (Regional PPO)  
 R9999-999-999 Medicare limiting charges apply.

**MedicareRx**  
 Prescription Drug Coverage

RxBIN: 610097  
 RxPCN: 9999  
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Customer Service Hours: 8 am - 8 pm 7 days/week Printed: xx/xx/xxxx

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For Pharmacists 1-999-999-9999  
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Sample member ID cards for illustration only; actual information varies depending on payer, plan and other requirements. Members with the Medicare National Network logo will not need to activate Passport.



**2021 Plan Overview**

Referrals are not required.

Plan Name and Type	Counties	Centers for Medicare & Medicaid Services (CMS) Contract	Group Number
UnitedHealthcare® Medicare Silver (Regional PPO C-SNP)	All counties in Texas	R6801-008-000	99950
UnitedHealthcare® Medicare Gold (Regional PPO C-SNP)	All counties in Texas	R6801-009-000	99951 99954
UnitedHealthcare® Dual Complete Choice (Regional PPO D-SNP)	All counties in Texas	R6801-011-000	99952
UnitedHealthcare® Medicare Advantage Choice (Regional PPO)	All counties in Texas	R6801-012-000	99953 99955