

Administrative changes for UnitedHealthcare Medicare Advantage members in Connecticut

Quick reference guide

Effective for dates of service beginning Jan. 1, 2022, Optum Care Network of Connecticut, an affiliate of UnitedHealthcare, will manage administrative processes for members of UnitedHealthcare® Medicare Advantage benefit plans offered in Connecticut, as identified below.

You can find more information about Optum Care at optumcare.com.

We've put this guide together to help you understand the changes to administrative processes, including:

- Claim submissions
- Hospital admission notifications
- Member eligibility verification
- Prior authorization requests



Affected UnitedHealthcare Medicare Advantage Plan Members

Members of the following UnitedHealthcare Medicare Advantage plans who have chosen an Optum Care primary care provider (PCP) are managed by Optum Care Network of Connecticut:

- H0755-030-000 UnitedHealthcare Medicare Advantage Plan 1 (HMO)
- H0755-031-000 UnitedHealthcare Medicare Advantage Plan 2 (HMO)
- H0755-033-000 UnitedHealthcare Medicare Advantage Plan 3 (HMO)
- H0755-032-000 UnitedHealthcare Medicare Advantage Patriot (HMO)
- H3442-001-000 AARP® Medicare Advantage Walgreens (PPO)
- H0271-014-000 UnitedHealthcare Dual Complete (PPO D-SNP)

New! Beginning Jan. 1, 2022, Optum Care Network of Connecticut will manage services for members who choose an Optum Care PCP for the following plan:

- R7444-001-000 AARP Medicare Advantage Choice (Regional PPO)

Member IDs for the affected plans will show the **payer ID E3287** and have the Optum Care logo. For all other members, please continue following the UnitedHealthcare processes outlined in the Administrative Guide at UHCprovider.com/guides.



Verify member eligibility

You can verify UnitedHealthcare member eligibility at the time of service online or by phone:

Online: Log into the care provider gateway at optumcare-mso.com

Phone: 888-556-7048



Requesting Prior Authorization

Prior authorization is required for certain services based on the patient's benefit plan. Please request prior authorization at least 14 days before planned date of elective services in one of these ways:

Online: Log into the care provider gateway at optumcare-mso.com

Phone: 888-556-7048 (only for urgent referrals)

Fax: 855-268-2904



Submitting Claims

Please submit claims for the Optum Care-managed members:

Electronically: Payer ID E3287

Mail: OCNCT Claims, P.O. Box 2500, Rancho Cucamonga, CA 91729-2500

For claims status, call 888-556-7048. Please don't submit duplicate claims unless you haven't received payment or an explanation of payment within 45 days of submission.



AARP Medicare Advantage
UnitedHealthcare

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

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

PCP Name: **SAMPLE, M.D., PROVIDER**
PCP Phone: (999) 999-9999
OPTUM CARE NETWORK-CONNECTICUT

Copay: PCP \$XX ER \$XX
Spec \$XX

RXXXX-XXX-XXX

Payer ID: E3287

MedicareRx
Prescription Drug Coverage

RxBIN: 610097
RxPCN: 9999
RxGrp: COS

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

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Customer Service Hours: 24 hours a day, 7 days a 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.OptumCare.com 1-888-556-7048
Medical Claim Address: P.O. Box 2500, Rancho Cucamonga, CA 91729-2500
Provider Authorizations: 1-888-556-7048
[UHC Dental Providers: www.providerdental.url 1-999-999-9999]

UHC **NO Referrals Required** **OPTUM**

For Pharmacists 1-899-999-9999
Pharmacy Claims OptumRx P.O. Box 999999, Healthcare, US 99999-9999

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Questions?

If you have questions about these plan members, contact Optum Care at **888-556-7048**. For questions about other plan members, please call UnitedHealthcare Provider Service Voice Portal at **877-842-3210**.