

2023 Administrative Guide for UnitedHealthcare Medicare Advantage members in Nevada

Quick reference guide

Intermountain Healthcare

For dates of service beginning Jan. 1, 2023, Intermountain Healthcare will manage certain administrative services for UnitedHealthcare® Medicare Advantage benefit plans listed below. This reference guide provides an overview of the administrative processes:

- Verifying member eligibility
- Referrals
- Prior authorization requests
- Hospital admission notifications
- Claims submission
- Claims reconsideration

The following benefit plans will continue to be administered by Intermountain Healthcare, effective Jan. 1, 2023:

Plan name	CMS contract number	Group number
AARP® Medicare Advantage (HMO-POS)	H0609-028	90204
AARP® Medicare Advantage Premier (HMO-POS)	H0609-031	90206
UnitedHealthcare® Medicare Advantage Assist (HMO-POS C-SNP)	H0609-037	90211
AARP® Medicare Advantage Walgreens (HMO-POS)	H0609-038	90213
UnitedHealthcare® Group Medicare Advantage	H0609-810	667112- IJU
UnitedHealthcare® Group Medicare Advantage	H0609-811	667044-ILE, 667055-IDO, 667068-IDF, 667096-IKO, 667120-IDT, 667130-IKO, 667132-ILE, 667159-IJR, 667200-IJS, 667201-IEN, 900068-IDT, 900074-IDG, 900076-IGI
UnitedHealthcare® Group Medicare Advantage	H0609-813	900141-IGN, 900142-IKK, 900143-IJG, 900219-IHO, 900220-IGO, 900221-IHC, 900223-IJF, 900224-IJF, 900225-IGO, 900226-IGO
UnitedHealthcare Dual Complete® (D-SNP HMO-POS)	H1360-001	90011



Verifying member eligibility

You can verify member eligibility online or by phone:

- **Online:** Through the UnitedHealthcare Provider Portal, go to UHCprovider.com and click Sign In at the top-right corner. Then, click Eligibility and enter member information.
- **Phone:** Call **877-842-3210** and select the Eligibility and Benefits option



Referral requests

For plans that require referrals, submit referral requests online to [HealthFortis](https://HealthFortis.com) or fax to 702-567-3176.



Prior authorization requests

Prior authorization may be required for certain services based on the member's plan. Inpatient and outpatient services generally don't require prior authorization when members are referred to health care professionals who participate with UnitedHealthcare Medicare Advantage.

Services that require prior authorization will be listed at UHCprovider.com/priorauth > Advance Notification and Plan Requirement Resources. Submit your request at least 14 days before the planned date of service.

- **Online:** Submit your request to [HealthFortis](https://HealthFortis.com). Please include any clinical information associated with the requested service.
- **Phone:** Call 702-318-2400



Hospital admission notifications

Please notify Intermountain Healthcare of hospital admissions no later than 1 business day after admission by faxing admit notification to 702-777-1212. Our hospitalists can be reached 24 hours a day, 7 days a week, at 702-464-8866. You can fax inpatient out-of-area (OOA) admit notifications to 702-777-1209.



Claim submissions

Please submit claims for UnitedHealthcare members to Intermountain Healthcare using the following electronic Payer ID or mailing address:

- **Electronic:** Payer ID 20501 or use your clearinghouse's Intermountain Healthcare Payer ID
- **Mail:** Intermountain Healthcare, P.O. Box 95638, Las Vegas, NV 89193

To check the status of your claim submission, sign in at claimsportal.intermountainnv.org.

For any other claim questions, call 702-318-2400. Please don't submit duplicate claims unless you haven't received payment or an explanation of payment within 45 days of submission.



Claim reconsiderations

- You can submit claim disputes by calling 702-318-2400, signing in to claimsportal.intermountainnv.org or mailing to:

Intermountain Healthcare
P.O. Box 95638
Las Vegas, NV 89193-5638



Member ID cards

Members in the affected plans will get new member ID cards that show Payer ID 20501 and the Intermountain Healthcare name and logo listed as the care provider contact. You can download a copy of the member ID card when you verify eligibility and benefits in the UnitedHealthcare Provider Portal.

New for 2023 – UnitedHealthcare UCard (member ID)

- Nearly all UnitedHealthcare Individual Medicare Advantage plan members, including D-SNP, will receive a UnitedHealthcare UCard™ (some plan exclusions may apply)
- UnitedHealthcare UCard makes it easier for members to access their benefits and programs, so they can take advantage of their plan offerings
- UCard doesn't need to be activated for you to verify eligibility or provide care services or for members to receive medical, dental, prescription, vision and hearing care services
- Starting Jan. 1, 2023, impacted members will present their redesigned member card
- UCard will have the information you need to verify eligibility and should be used in the same manner as any other UnitedHealthcare member ID card
- UCard cannot be used for member out-of-pocket expenses, including copays, coinsurance or deductibles
- Each UCard will include an S3 number, security code and scannable barcode for in-store purchases — providers don't need to scan the barcode to provide medical, dental, prescription, vision or hearing services to the member
- For questions, members should visit their plan website or call the Customer Service number on their UCard
- For a description of the information displayed on the UCard, refer to Chapter 2 of the UnitedHealthcare Care Provider Administrative Guide

UnitedHealthcare **UCard™**

Your UnitedHealthcare Plan Name (HMO) with Dental

Sample A Sample

Member Number
123456789-00

RxBIN 99999	RxPCN 9999	RxGRP XXXXXX
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Group Number: 12345 H0000-000-000
PCP: Dr. Sample A Sample MD
PCP: 999-999-9999
Sample Facility Name
Copay: PCP \$XX Specialist \$XX

For Members: myuhcmedicare.com
Customer Service: 1-888-888-8888, TTY 711

Printed Date: 99/99/20XX
Plan Year: 20XX

For Providers: uhcprovider.com
Provider Service: 1-888-888-8888
Provider Authorization: 1-888-888-8888
Dental Providers: uhcdental.com 1-888-888-8888
Medicare limiting charges apply.

Payer ID: 12345 XXXXX
Medical Claim Address: P.O. Box 9999, CITY NAME, USA 99999-9999
P.O. Box 9999, CITY NAME, USA 99999-9999
For Pharmacists: 1-888-888-8888

Card #: 9999 9999 9999 99999 Security Code: 9999

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



We're here to help

If you have questions, please call **877-842-3210**. Thank you.