Administrative changes for UnitedHealthcare Medicare Advantage members in Washington

Quick reference guide

For dates of service beginning Jan. 1, 2023, Optum® Care Network, an affiliate of UnitedHealthcare, will manage certain administrative services for certain 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 Optum Care Network, effective Jan. 1, 2023:

Plan name	CMS contract number	Group number
AARP® Medicare Advantage Choice (PPO)	H1821-001-000	90158
AARP® Medicare Advantage Choice Plan 1 (PPO)	H1821-002-000	90160
AARP® Medicare Advantage Choice Plan 1 (PPO)	H1821-002-000	90608
AARP® Medicare Advantage Choice (PPO)	H1821-003-000	90162
AARP® Medicare Advantage Choice (PPO)	H1821-003-000	90609
AARP® Medicare Advantage Patriot (PPO)	H1821-004-000	90058
AARP® Medicare Advantage Patriot (PPO)	H1821-004-000	90610
AARP® Medicare Advantage Choice Plan 2 (PPO)	H1821-005-000	90059
AARP® Medicare Advantage Choice Plan 2 (PPO)	H1821-005-000	90611
AARP® Medicare Advantage Plan 3 (HMO-POS)	H3805-015-000	HCFAS8-O6B
AARP® Medicare Advantage Plan 3 (HMO-POS)	H3805-015-000	HCFAS8-O8A
AARP® Medicare Advantage Plan 3 (HMO-POS)	H3805-015-000	HCFAS8-O9A
AARP® Medicare Advantage Plan 3 (HMO-POS)	H3805-015-000	HCFAS8-OZO
AARP® Medicare Advantage Plan 2 (HMO-POS)	H3805-017-000	HCFAH6-O6A
AARP® Medicare Advantage Plan 2 (HMO-POS)	H3805-017-000	HCFAH6-OJ5
AARP® Medicare Advantage Plan 2 (HMO-POS)	H3805-017-000	HCFAH6-OX5
AARP® Medicare Advantage Plan 2 (HMO-POS)	H3805-017-000	HCFAH6-OY4
AARP® Medicare Advantage Walgreens (HMO-POS)	H3805-032-000	HCFA49-OH0
AARP® Medicare Advantage Walgreens (HMO-POS)	H3805-032-000	HCFA49-OMI
AARP® Medicare Advantage Plan 1 (HMO-POS)	H3805-033-000	90153



Plan name	CMS contract number	Group number
AARP® Medicare Advantage Plan 2 (HMO-POS)	H3805-034-000	90155
AARP® Medicare Advantage Patriot (HMO-POS)	H3805-035-000	90156
AARP® Medicare Advantage Plan 1 (HMO-POS)	H3805-037-000	HCFA94-OI5
AARP® Medicare Advantage Plan 1 (HMO-POS)	H3805-037-000	HCFA94-OL9
AARP® Medicare Advantage Plan 1 (HMO-POS)	H3805-037-000	HCFA94-OW9
AARP® Medicare Advantage Plan 1 (HMO-POS)	H3805-037-000	HCFA94-O5B
Harrison Electrical SH-WA	H3805-806-000	006084-IJR
Harrison Electrical SH-WA	H3805-806-000	006084-ILH
Cement Masons – Washington	H3805-806-000	006130-IKN
Cement Masons – Washington	H3805-806-000	006130-IKQ
Machinist H&W Trust	H3805-806-000	006261-IJR
Machinist H&W Trust	H3805-806-000	006261-ILH
Wester Teamsters Welfare	H3805-806-000	006713-IJR
UFCW Local 555/WA	H3805-806-000	034562-IJR
UFCW Local 555/WA	H3805-806-000	034562-ILH
City of Seattle	H3805-806-000	801855-IJO
City of Seattle	H3805-806-000	801855-IKG
City of Seattle	H3805-806-000	801867-IJO
City of Seattle	H3805-806-000	801867-IKG
Pacific Coast Shipyards	H3805-806-000	801879-IJQ
Pacific Coast Shipyards	H3805-806-000	801879-IJR
Wester Teamsters Welfare	H3805-806-000	801883-IJQ
Carpenters Health & Security	H3805-806-000	801899-IJR
Carpenters Health & Security	H3805-806-000	801899-ILH
Retiree's Welfare Trust	H3805-806-000	801970-IJN
Retiree's Welfare Trust	H3805-806-000	801970-ILE



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 in the Optum Care provider portal.



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 in the Optum Care provider portal. Please include any clinical information associated with the requested service.
- Phone: Call 877-836-6806

You don't need to submit another prior authorization request to Optum Care Network if a request was previously reviewed and approved by UnitedHealthcare for dates of service starting Jan. 1, 2023, and after. Optum Care Network will reimburse services approved by UnitedHealthcare.



Hospital admission notifications

Please notify Optum Care Network of hospital admissions no later than 1 business day after admission by faxing 253-627-4708.



Claim submissions

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

- Electronic: Payer ID LIFE1
- Mail: P.O. Box 30788, Salt Lake City, UT 84130-0788

To check the status of your claim submission, sign in to the Optum Care provider portal.

For any other claim questions, call **877-836-6806.** 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 **877-836-6806**, using the contact option in the portal, in the Optum Care provider portal or by mail:

Optum Provider Dispute Resolution P.O. Box 30788 Salt Lake City, UT 84130-0788



Member ID cards

Members in the affected plans will get new member ID cards that show the Payer ID LIFE 1 and will have the delegate website, optum.com, 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. Group Retiree cards will remain the same.















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.

