

UnitedHealthcare NexusACO referral requirements

Quick reference guide

The **UnitedHealthcare NexusACO** benefit plans offer UnitedHealthcare commercial members a tailored network of accountable care organization (ACO) care providers. In areas where UnitedHealthcare NexusACO doesn't have a featured ACO, UnitedHealth Premium® program designated providers will be included as participating Tier 1 care providers.

UnitedHealthcare NexusACO includes 2 benefit plans with different referral requirements:

- NexusACO R requires referrals
- NexusACO OA does not require referrals

UnitedHealthcare NexusACO referral requirements

- Referrals are required before a NexusACO R member can see most network specialty care providers
- Referrals to network physicians must be submitted electronically by the member's primary care provider (PCP) or a PCP with the same tax ID number (TIN). Referrals can be dated up to 5 calendar days before the date of submission.

Verify referral requirements using the member ID card

Identify the member's plan and referral requirements:

1. UnitedHealthcare NexusACO plan name
2. "Referrals Required" reminder for NexusACO R

Online: Submit referrals and verify referral requirements

You can use a single online tool, the **referralLink** tool on Link, to:

- Find out if a referral is needed for your patient
- Submit a referral request and receive a confirmation number
- Check the status of a referral request

At UHCprovider.com/referralLink, you'll find instructions, a quick reference guide and video tutorials. To access referralLink, sign in to Link by clicking on the Link Sign In button in the top right corner of UHCprovider.com.

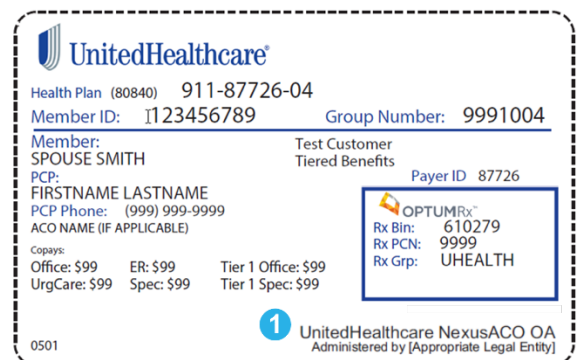
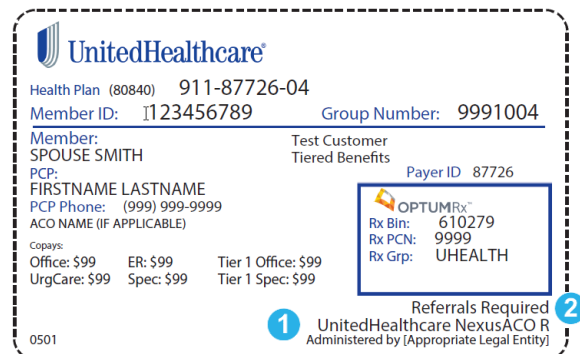
Referrals and notifications/prior authorizations

The referral and notification/prior authorization processes are separate.

Requirements vary by member benefit plan and you can use the eligibilityLink tool at UHCprovider.com/eligibilityLink to find out if referrals, notifications or prior authorizations are required for the requested services.

Submitting a notification/prior authorization request can't substitute for a referral. If the member doesn't have a required referral, coverage for the specialty care may be denied or the member may have a higher out-of-pocket cost. You can find more information about notification/prior authorization requirements in the Care Provider Administrative Guide at UHCprovider.com/guides and at UHCprovider.com/priorauth.

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





Online resources

NexusACO

- UHCprovider.com/plans > Choose Your State > Commercial > UnitedHealthcare NexusACO. This includes a Frequently Asked Questions document, which can help answer many of your questions about the plan.
- You can find more information on the UnitedHealth Premium program at UHCprovider.com/premium

Notification/prior authorization requirements

- UHCprovider.com/priorauth
- Care Provider Administrative Guide at UHCprovider.com/guides

Submitting referrals

- UHCprovider.com/referralLink



Contact us

If you have questions related to your Participation Agreement, please contact your Network Management representative listed at UHCprovider.com > Menu > [Contact Us](#). For general questions, call **877-842-3210**.

