

UnitedHealthcare Dual Complete 2023

Quick reference guide

As a health care professional participating in UnitedHealthcare® Medicare Advantage plans, you may also deliver care and services to UnitedHealthcare Dual Complete® members. This guide provides information to help you understand this Dual Special Needs Plan (D-SNP) including:

- How to identify members
- How to file claims for services
- How to contact us if you have questions



UnitedHealthcare Dual Complete

UnitedHealthcare Dual Complete is a UnitedHealthcare Medicare Advantage D-SNP for Full-Benefit Dual-Eligible (FBDE) beneficiaries (full), qualified Medicare dual-eligible beneficiaries (QMBs) and partial dual-eligible beneficiaries (partial). UnitedHealthcare Medicare Advantage D-SNPs combine the hospital and doctor coverages of Medicare Parts A and B with Part D prescription drug coverage, plus additional features and benefits designed to meet the unique needs of identified Medicare consumer populations, including current and prospective members. You can find more plan information at UHCprovider.com/ohcommunityplan > Medicare > **Ohio Dual Complete® Special Needs Plans.**



2023 group name and plan benefit package (H-PBP) contracts

UnitedHealthcare Dual Complete LP (Health Maintenance Organization (HMO) D-SNP) (H5253-059)

UnitedHealthcare Dual Complete Select (HMO D-SNP) (H5253-122)

UnitedHealthcare Dual Complete (HMO D-SNP) (H5322-028)

UnitedHealthcare Dual Complete Select (HMO D-SNP) (H5322-034)

UnitedHealthcare Dual Complete Choice (Preferred Provider Organization (PPO) D-SNP) (H0271-055)



2023 plan changes

In 2023, there are 3 new D-SNP plans:

- H5253-122 and H5322-034 are select HMO D-SNP plans
- H0271-055 is our PPO D-SNP

You can find additional plan details at UHCprovider.com/OHD-SNP.



Sample member ID card

UnitedHealthcare UCard™

UnitedHealthcare Dual Complete LP
(HMO-POS D-SNP) with Dental

MINGZHI SAMPLE

Member Number
123456789-00

RxBIN RxPCN RxGRP
610097 9999 MPDCSP

Group Number: OHSNPHF1 H5253-059-000

PCP: JIN, XIAN WEN W.
PCP: 2164445665

MedicareRx
Prescription Drug Coverage X

For Members: myuhc.com/CommunityPlan
Customer Service: 1-866-944-3488, TTY 711
Printed Date: 09/25/2022
Plan Year: 2023

OCT-MAR Hours: 7 days, 8am-8pm
APR-SEP Hours: Mon-Fri, 8am-8pm

For Providers: UHCprovider.com
Provider Service: 1-866-944-3488
Provider Authorization: 1-866-944-3488
Dental Providers: uhcdentalproviders.com 1-844-255-8730

Payer ID: 87726
Medical Claims: P.O. Box 820, Kingston, NY 12402-8207
Pharmacy Claims: OptumRx P.O. Box 650287, Dallas, TX 75265-0287
For Pharmacists: 1-877-889-6510

Card #: 41769045990286873 Security Code: 0011

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



Balance billing

Centers for Medicare & Medicaid Services (CMS) regulations don't allow you to bill QMB or FBDE members for Medicare coinsurance or deductibles. **Health care professionals or managed care entities may be subject to sanctions if they bill these members for any cost sharing.**

Health care professionals also cannot attempt to collect additional reimbursement from D-SNP members whose Medicaid benefits cover all Medicare cost-sharing components. This also includes full Medicaid QMB Plus FBDE and SLMB Plus, as well as QMB-only Medicaid members. These members will have a secondary Medicaid card.

Note: Only partial dual-eligible members can be billed for the Medicare coinsurance or deductible. Partial dual-eligible members include:

- Specified Low-Income Medicare Beneficiary (SLMB) only
- Qualified Disabled and Working Individual (QDWI) and Qualified Individual (QI)

After a claim has been settled and you receive the explanation of benefits (EOB) from both the primary payer, UnitedHealthcare Dual Complete and Medicaid, payment is considered paid in full.



Ohio member information

Health care professionals in Ohio can access member information using the following:

- Provider Network Management (PNM) systems at ohid.ohio.gov/wps/portal/gov/ohid/login
- For technical assistance, call the Ohio Department of Medicaid Integrated HelpDesk (IHD) at 800-686-1516, 8 a.m.–4:30 p.m. ET, Monday-Friday
- Call Ohio Medicaid Interactive Voice Response (IVR) at 800-686-1516 to check Medicaid eligibility status



More about UnitedHealthcare PPO D-SNP

Nonparticipating health care professionals will be reimbursed according to your existing standard Medicare rates, for eligible and covered services, up to the defined benefit value. As the primary payer, UnitedHealthcare is responsible for the management and payment of Medicare-covered and supplemental services. Remember to check patient eligibility and benefits on the UnitedHealthcare Provider Portal at UHCprovider.com.



Provider remittance advice (PRA)

We include messages on Medicare claim PRAs for UnitedHealthcare Dual Complete members to remind you that:

- Any applicable Medicare crossover claim is being processed
- QMB Dual Eligible or FBDE members should not be billed for the Medicare coinsurance or deductible

Questions? We're here to help.

Please call Provider Services at **866-944-3488**, 8 a.m.–8 p.m. CT, Monday–Friday. For details about medical and reimbursement policies, go to UHCprovider.com/policies > [For Medicare Advantage Plans](#). For information about special needs plans, go to UHCprovider.com/ohcommunityplan > Medicare > [Ohio Dual Complete® Special Needs Plans](#).