

2025 Individual Exchange plans of Colorado

Quick reference guide

Please use this guide to quickly refer to the information you need to work with our UnitedHealthcare Individual Exchange plans, also referred to as UnitedHealthcare Individual & Family ACA Marketplace plans.




All Individual Exchange plans require that members have an assigned primary care physician (PCP).



Example member ID cards

- 1 Group number - "ONEX" - plans offered on the Exchange, "OFEX" - plans offered off the Exchange
- 2 Plan name - includes the metal level of bronze, silver, gold or platinum
- 3 Referrals Required indicator (if applicable)
- 4 Network

Monument Health HMO

  	
Member: Member ID: 000000000	
1 Group ID: COXXXX	
2 RMHP Monument Health Bronze Value-B	
Copay: PCP:\$X UC:\$XX	InPtHosp:DED+XX% Spec:DED+XX% ER:DED+XX%
Tier 1: Tier 2:	DED INDV/FAM \$XXXX/\$XXXX \$XXXX/\$XXXX
	OOPM INDV/FAM \$XXXX/\$XXXX
Tier 2: Copays may vary HMO CO-DOI	Payer ID: 87726
	Rx Bin: 610279 Rx PCN: 7777 Rx Grp: EXCCO
	3 No PCP Referral Required
	4 Monument Health HMO Network Underwritten by Rocky Mountain HMO, Inc.

	
Members: Sign in at myuhc.com/exchange to find network care, pay your bills, see your claims, ask a question and more. Prior authorization or notice of admission; 800-854-4558. Prior authorization of some services and notice of hospital admission is required.	
UHC Online Account: Member Services + Care Support:	myuhc.com/exchange 888-809-6539
Providers: Medical Claims: PO Box 5290, Kingston, NY, 12402-5290	888-478-4760 or UHCprovider.com
Pharmacists: Pharmacy Claims:	844-569-4143 OptumRx PO Box 650540, Dallas, TX 75265-0540

Colorado Doctors Plan HMO

ROCKY MOUNTAIN HEALTH PLANS
A UnitedHealthcare Company

Optum Rx[®]

Member:
Member ID: 000000000 **1** Group ID: COXXXX

2 RMHP Colorado Doctors Plan Silver Value-X
Spec:DED+XX%

Copay: Payer ID: 87726
PCP:\$X Rx Bin: 610279
UC:\$XX Rx PCN: 7777
ER:DED+XX% Rx Grp: EXCCO
InPtHosp:DED+XX%

DED INDV/FAM OOPM INDV/FAM
MED: \$XXXX/\$XX \$XXX/\$XXXX

3 No PCP Referral Required
4 Colorado Doctors Plan HMO Network
Underwritten by Rocky Mountain HMO, Inc.

CO-DOI-508

Colorado Doctors Plan HMO CO Option

ROCKY MOUNTAIN HEALTH PLANS
A UnitedHealthcare Company

Optum Rx[®]

Member:
Member ID: 000000000 **1** Group ID: COXXXX

2 RMHP Colorado Doctors Plan Colorado Option Bronze
Spec:DED+XX%

Copay: Payer ID: 87726
PCP:\$X Rx Bin: 610279
UC:\$XX Rx PCN: 7777
ER:DED+XX% Rx Grp: EXCCO
InPtHosp:DED+XX%

DED INDV/FAM OOPM INDV/FAM
MED: \$XXXX/\$XX \$XXX/\$XXXX

3 No PCP Referral Required
4 Colorado Doctors Plan HMO Network
Underwritten by Rocky Mountain HMO, Inc.

HMO CO-DOI

Monument ONE HMO

ROCKY MOUNTAIN HEALTH PLANS
A UnitedHealthcare Company

Optum Rx[®]

MONUMENT HEALTH

Member:
Member ID: 000000000 **1** Group ID: COXXXX

2 RMHP Monument One Bronze Copay Focus-X

Copay: Payer ID: 87726
PCP:\$X InPtHosp:DED+XX% Rx Bin: 610279
UC:\$XX Spec:DED+XX% Rx PCN: 7777
ER:DED+XX% Rx Grp: EXCCO

Tier 1: DED INDV/FAM OOPM INDV/FAM
Tier 2: \$XXXX/\$XXXX \$XXX/\$XXXX

3 No PCP Referral Required
4 Monument ONE HMO Network
Underwritten by Rocky Mountain HMO, Inc.

Tier 2: Copays may vary
HMO CO-DOI

Monument ONE HMO CO Option

ROCKY MOUNTAIN HEALTH PLANS
A UnitedHealthcare Company

Optum Rx[®]

MONUMENT HEALTH

Member:
Member ID: 000000000 **1** Group ID: COXXXX

2 RMHP Monument One Colorado Option Silver

PCP Required Payer ID: 87726
Copay: InPtHosp:DED+XX% Rx Bin: 610279
UC:\$XX Spec:DED+XX% Rx PCN: 7777
ER:DED+XX% Rx Grp: EXCCO

Tier 1: DED INDV/FAM OOPM INDV/FAM
Tier 2: \$XXX/\$XXX \$XXXX/\$XXXX

3 No PCP Referral Required
4 Monument ONE HMO Network
Underwritten by Rocky Mountain HMO, Inc.

Tier 2: Copays may vary
HMO CO-DOI

Rocky Mountain HMO Valley

ROCKY MOUNTAIN HEALTH PLANS
A UnitedHealthcare Company

Optum Rx[®]

Member:
Member ID: 000000000 **1** Group ID: COXXXX

2 RMHP Valley Bronze Value

Copay: Payer ID: 87726
PCP:\$X InPtHosp:DED+XX% Rx Bin: 610279
UC:\$XX Spec:DED+XX% Rx PCN: 7777
ER:DED+XX% Rx Grp: EXCCO

Med INN DED INDV/FAM OOPM INDV/FAM
\$XXXX/\$XXXX \$XXX/\$XXX

3 No PCP Referral Required
4 Rocky Mountain HMO Valley Network
Underwritten by Rocky Mountain HMO, Inc.

HMO CO-DOI

Rocky Mountain HMO Valley CO Option

ROCKY MOUNTAIN HEALTH PLANS
A UnitedHealthcare Company

Optum Rx[®]

Member:
Member ID: 000000000 **1** Group ID: COXXXX

2 RMHP Valley Colorado Option Silver

Copay: Payer ID: 87726
PCP:\$X InPtHosp:DED+XX% Rx Bin: 610279
UC:\$XX Spec:DED+XX% Rx PCN: 7777
ER:DED+XX% Rx Grp: EXCCO

Med INN DED INDV/FAM OOPM INDV/FAM
\$XXXX/\$XXXX \$XXX/\$XXX

3 No PCP Referral Required
4 Rocky Mountain HMO Valley Network
Underwritten by Rocky Mountain HMO, Inc.

HMO CO-DOI

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



Individual Exchange plans page

Visit UHCprovider.com/exchanges to access the following resources:

- The 2025 Individual Exchange plans self-paced interactive guide
- State-specific prescription drug lists (PDLs)
- Our policies, coverage determination guidelines and prior authorization/notification requirements
- Individual Exchange plan news



UnitedHealthcare Provider Portal

UHCprovider.com/portal

The UnitedHealthcare Provider Portal allows you to quickly get the answers you need so you can save valuable time and get better documentation and visibility.

To access the secure portal and the following tools, please **create and/or sign in using a One Healthcare ID.**

Eligibility and benefits

UHCprovider.com/eligibility

We encourage you to verify member eligibility each time a patient presents for service.

Claims

UHCprovider.com/claims

To submit multi-payer transactions online or through a clearinghouse, please use the electronic data interchange (EDI) in the claims tool and enter the following:

- EDI 837 Health Care Claim Transaction
- Payer ID 87726

To learn more, please visit UHCprovider.com/edi.

You can also use the claims tool to submit reconsideration requests and appeals.

Prior authorization and notification

UHCprovider.com/paan

Call **800-711-4555** to request prior authorization for outpatient self-administered medications.

Unless otherwise allowed by state law, you must submit prior authorization requests electronically. We won't accept prior authorizations that require a referral unless a completed referral is on file.

To access prior authorization requirements and forms, please visit UHCprovider.com/exchanges.

You can also use the claims tool to submit reconsideration requests and appeals.

Find in-network specialists

- **Online:** Visit UHCprovider.com/findprovider
- **Phone:** Call **888-478-4760**

Referral requirements by plan

Plan	Primary care physician (PCP) required?	Accessing care		
		Colorado plan	Colorado Option plan	Out-of-network benefits
Colorado Doctors Plan HMO	Yes	No referral needed	No referral needed	Coverage*
Monument Health HMO	Yes	No referral needed	No referral needed	Coverage*
Monument ONE HMO	Yes	No referral needed	No referral needed	Coverage*
Rocky Mountain HMO Valley	Yes	No referral needed	No referral needed	Coverage*

*Emergency room and urgent care coverage is available for out-of-network.



Questions?

- For contact information, visit our [Contact us](#) page
- Call Individual Exchange plans Provider Services at **888-478-4760**, weekdays, 7 a.m.-7 p.m. CT
- Contact your provider advocate

UnitedHealthcare Individual & Family plans medical plan coverage offered by: UnitedHealthcare of Arizona, Inc.; Rocky Mountain Health Maintenance Organization Incorporated in CO; UnitedHealthcare of Florida, Inc.; UnitedHealthcare of Georgia, Inc.; UnitedHealthcare of Illinois, Inc.; UnitedHealthcare Insurance Company in AL, IN, KS, LA, MO, NE, NJ, TN, and WY; Optimum Choice, Inc. in MD and VA; UnitedHealthcare Community Plan, Inc. in MI; UnitedHealthcare of Mississippi, Inc.; UnitedHealthcare of New Mexico, Inc.; UnitedHealthcare of North Carolina, Inc.; UnitedHealthcare of Ohio, Inc.; UnitedHealthcare of Oklahoma, Inc.; UnitedHealthcare of South Carolina, Inc.; UnitedHealthcare of Texas, Inc.; UnitedHealthcare of Oregon, Inc. in WA; UnitedHealthcare of Wisconsin, Inc., and UnitedHealthcare Plan of the River Valley in Iowa. Administrative services provided by United HealthCare Services, Inc. or their affiliates.