

UnitedHealthcare Navigate

Quick reference guide

UnitedHealthcare Navigate benefit plans offer UnitedHealthcare commercial members a customized, more focused network of health care professionals. The 3 Navigate plan options offer varying levels of coverage.

Key features

- Members are required to select a primary care provider (PCP) to manage their health care needs
- The member's PCP must submit **electronic referrals** for members to see a network specialist

Benefits

Plan name	In-network care with referral	In-network care without referral	Out-of-network care
Navigate	Network benefits	No coverage*	No coverage*
Navigate Balanced	Network benefits	Higher member cost share, lower level of benefits	No coverage*
Navigate Plus	Network benefits	Higher member cost share, lower level of benefits	Out-of-network benefits

*Except for emergency services and related admissions

- Navigate plans are administered by either UnitedHealthcare or UnitedHealthOne. The payer ID will vary – check the member's ID card for the name of the administrator and the appropriate payer ID.
- Referral and prior authorization requirements are outlined in the **UnitedHealthcare Administrative Guide**
- The UnitedHealthOne claims process and resources are outlined in the UnitedHealthOne individual plans supplement to the **Administrative Guide**
- UnitedHealthOne contacts are listed on the member's ID card and at myuhone.com

PCP requirement

- Members must choose a PCP. The PCP is listed on the ID card, in the EDI 271 response transaction and when you verify eligibility using the **Eligibility tool** on the **UnitedHealthcare Provider Portal**.
- Members are required to see their designated PCP or a covering physician at an address location that is tied to the same provider group and tax ID number (TIN)
- Members may change their designated PCP once per month; changes are effective the first day of the following month
- You can generate a PCP roster report through **Document Library** on the portal
- Visit UHCprovider.com/findprovider to find network specialists and PCPs. Members may be referred by their PCP to a network physician located in another state.

Referrals

- Referrals must be submitted by the member's PCP or a PCP within the same group and tax ID number (TIN)
- Specialists must confirm a referral is on file before seeing the member
- You can submit referrals electronically and check status using the **Referrals tool** on the portal
- Some services **don't require a referral**

Sample member ID card

1. UnitedHealthcare or UnitedHealthOne logo; payer ID depends on the plan type
2. Navigate plan name and referral indicator
3. Plans with additional network benefits have W500 indicator
 - In some states, UnitedHealthcare Navigate plans may feature tiered benefits for UnitedHealth Premium® designated health care professionals
 - To determine whether a Navigate plan features tiered benefits, check the member's ID card or use the [Eligibility tool](#) on the [UnitedHealthcare Provider Portal](#)



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

Learn more about [tiered benefits](#).

Billing

The terms of your Participation Agreement may allow you to bill members for non-covered services in certain circumstances. If your Participation Agreement allows you to bill for non-covered services, you may bill the member only if they had knowledge of the determination of non-coverage and specifically agreed in writing to be responsible for the charges prior to the date of service. If the services aren't covered due to lack of medical necessity, you may bill the member only if they're informed of the non-coverage and accepted financial responsibility in writing before the date of service.

Prior authorization requirements

[Prior authorization](#) and admission notification requirements apply.

Call the Provider Services number on the member's ID card if you believe a member doesn't have access to particular care in the Navigate network. If approved, we'll apply the network benefits to eligible out-of-network services.

W500 benefit

Some benefit plans include the **W500 additional network benefit**, which provides network access to some health care professionals otherwise excluded from participation in the plan. Services provided through this network include:

- Emergency services and related admissions
- Urgent care
- Services pre-approved by UnitedHealthcare when services aren't available from a network physician

Questions?

If you participate in UnitedHealthcare commercial benefit plans, you'll participate in UnitedHealthcare Navigate plans (unless specifically excluded in your Participation Agreement). To review your participation status, use [My Practice Profile](#) on the UnitedHealthcare Provider Portal and view your provider demographic details.



If you have questions about your Participation Agreement, please [contact your Network Management representative](#). For general questions, call Provider Services at **877-842-3210**.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Health plan coverage provided by UnitedHealthcare of Arizona, Inc., UHC of California DBA UnitedHealthcare of California, UnitedHealthcare Benefits Plan of California, UnitedHealthcare of Colorado, Inc., UnitedHealthcare of the Mid-Atlantic, Inc., MAMSI Life and Health Insurance Company, UnitedHealthcare of New York, Inc., UnitedHealthcare Insurance Company of New York, UnitedHealthcare of Oklahoma, Inc., UnitedHealthcare of Oregon, Inc., UnitedHealthcare of Pennsylvania, Inc., UnitedHealthcare of Texas, Inc., UnitedHealthcare Benefits of Texas, Inc., UnitedHealthcare of Utah, Inc., UnitedHealthcare of Washington, Inc., Optimum Choice, Inc., Oxford Health Insurance, Inc., Oxford Health Plans (NJ), Inc., Oxford Health Plans (CT), Inc., All Savers Insurance Company, or other affiliates. Administrative services provided by OptumHealth Care Solutions, LLC, OptumRx, Oxford Health Plans LLC, United HealthCare Services, Inc., or other affiliates. Behavioral health products provided by U.S. Behavioral Health Plan, California (USBHPC), United Behavioral Health (UBH), or its affiliates.