Administrative updates for UnitedHealthcare Medicare Advantage members in Connecticut



For dates of service beginning Jan. 1, 2024, Advantage Plus Network – Connecticut (APN–CT), a partnership of Optum® and Hartford HealthCare, will manage certain administrative services for the following UnitedHealthcare Medicare Advantage benefit plans. This reference guide provides an overview of the administrative processes, including how to:

- Verify member eligibility
- Request prior authorization
- Send hospital admission notifications
- Submit claims and reconsideration

The following benefit plans will be administered by APN-CT, effective Jan. 1, 2024:

Group delegated entity	Contract number	PBP	Segment ID	Group number
Advantage Plus Network	H0755	030	000	27062
Advantage Plus Network	H0755	030	000	27151
Advantage Plus Network	H0755	031	000	27064
Advantage Plus Network	H0755	031	000	27153
Advantage Plus Network	H0755	032	000	27155
Advantage Plus Network	H0755	032	000	27156
Advantage Plus Network	H0755	033	000	27100
Advantage Plus Network	H0755	033	000	27150
Advantage Plus Network	R7444	001	000	90150
Advantage Plus Network	R7444	001	000	90151
Advantage Plus Network	H8768	042	000	90969
Advantage Plus Network	H8768	050	000	90970
Advantage Plus Network	R7444	001	000	90150
Advantage Plus Network	R7444	001	000	90151



Verifying member eligibility

You can verify member eligibility:

Online: Sign in to the UnitedHealthcare Provider Portal and select Eligibility

By phone: 877-842-3210

Prior authorization

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 PPO.

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: optumproportal.com By phone: 888-556-7048

You don't need to submit another prior authorization request if a request was previously reviewed and approved by UnitedHealthcare for dates of service starting Jan. 1, 2024, and after. APN-CT will reimburse services approved by UnitedHealthcare.

Hospital admission notifications

Please notify APN-CT of hospital admissions no later than 1 business day after admission:

Online: optumproportal.com By phone: 888-556-7048

Member ID cards

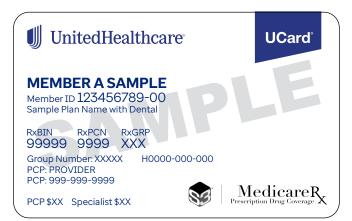
Members in the affected plans will get new member ID cards that show the Payer ID LIFE1 and will have other applicable delegation-specific descriptors such as delegate name and delegate website listed as the care provider contact. You can download a copy of the member ID card when you verify eligibility and benefits in the **UnitedHealthcare Provider Portal**.

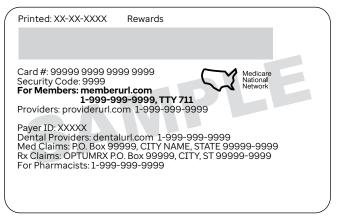


2024 UnitedHealthcare UCard

You can download a copy of the member ID card when you verify eligibility and benefits in the **UnitedHealthcare Provider Portal**.

- Nearly all UnitedHealthcare Medicare Advantage plan members who receive an ID card receive the 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 does not need to be activated for you to verify eligibility or provide care services to members 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 includes an S3 number, security code and scannable barcode for in-store purchases or spending rewards providers do not need to scan the barcode to provide medical, dental, prescription, vision or hearing services to the member





front back

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

2024 plan name changes

Starting Jan.1, 2024, providers can refer to the **Plan Name Change Crosswalk** for the state-specific 2024 plan names. Before Jan. 1, 2024, the crosswalk will only display 2023 health plan names.

Plan overviews

Plan overviews are available in the **2024 Medicare Advantage Plan Overview** > State > Plan overview interactive guide.

Summary of benefits

State-specific plan benefits are available at **UHC.com/medicare** > Shop Medicare Plans > Enter ZIP code > Find plans > View 2024 plans > select Medicare Advantage plans or Medicare Special Needs plans tab > find plan and select View plan details > Plan Documents > select Summary of Benefits.



UnitedHealthcare Medicare National Network and UnitedHealth Passport®

Referrals are not required for members who travel outside their plan service area and access covered services using the National Network or their Passport benefit. For more information about National Network and Passport, visit **UHCprovider.com/plans** > Choose your state > Medicare > Choose plan > Tools & Resources.

Claims

Submit claims using the following electronic Payer ID or mailing address:

Payer ID: LIFE1
Mailing address:
Advantage Plus
Network-Connecticut
P.O. Box 30781
Salt Lake City, UT 84130-0781

Submit claim reconsiderations:

Online: Optum Pro portal By phone: 888-556-7048

By mail:

Provider Dispute Resolution

P.O. Box 30781

Salt Lake City, UT 84130-0781

Check the status of your claim submission:

Online: Optum Pro portal By phone: 888-556-7048



Please don't submit duplicate claims unless you haven't received payment or an explanation of payment within 45 days of submission.



Questions?

Chat with a live advocate 7 a.m.-7 p.m. CT from the **UnitedHealthcare Provider Portal** or call us at **888-556-7048**, 8 a.m.-6 p.m. local time, Monday-Friday.

