Administrative updates for UnitedHealthcare Medicare Advantage members in Wisconsin



For dates of service beginning Jan. 1, 2024, Optum Care Network, an affiliate of UnitedHealthcare, will manage certain administrative services for Independent Physician Network, Inc. Medicare ACO providers and their patients with the following UnitedHealthcare Medicare Advantage benefit plans. This reference guide provides an overview of the administrative processes, including how to:

- Verify member eligibility
- Submit prior authorization requests
- Notify us of hospital admissions
- Submit claims
- Submit claim reconsideration requests

The following benefit plans will be administered by Optum Care, effective Jan. 1, 2024:

Group delegated entity	Contract number	PBP	Segment ID	Group number
Optum Care Network	H0294	004	000	90508
Optum Care Network	H0294	004	000	90509
Optum Care Network	H0294	011	000	90510
Optum Care Network	H0294	011	000	90511
Optum Care Network	H0294	012	000	90512
Optum Care Network	H0294	014	000	90513
Optum Care Network	H0294	015	000	90514
Optum Care Network	H0294	016	000	90515
Optum Care Network	H0294	023	000	90516
Optum Care Network	H0294	023	000	90517
Optum Care Network	H0294	026	000	90518
Optum Care Network	H0294	026	000	90519
Optum Care Network	H5253	004	000	90520
Optum Care Network	H5253	011	000	90521
Optum Care Network	H5253	021	000	90522



Group delegated entity	Contract number	PBP	Segment ID	Group number
Optum Care Network	H5253	030	000	90523
Optum Care Network	H5253	033	000	90524
Optum Care Network	H5253	034	000	90525
Optum Care Network	H5253	072	000	90526
Optum Care Network	H5253	072	000	90527
Optum Care Network	H5253	073	000	90528
Optum Care Network	H5253	097	000	90529
Optum Care Network	H5253	097	000	90530

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: Optum Pro portal at optumproportal.com

By phone: 800-384-0853

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. Optum Care will reimburse services approved by UnitedHealthcare.

Hospital admission notifications

Please notify Optum Care of hospital admissions no later than 1 business day after admission:

Online: optumproportal.com

By phone: 800-384-0853

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



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



Claims

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

Payer ID: LIFE1 Mailing address: Optum Care Claims P.O. Box 30781 Salt Lake City, UT 84130-0781

Submit claim reconsiderations:

Online: optumproportal.com By phone: 800-384-0853 By mail:

Optum Care Provider Dispute Resolution P.O. Box 30781 Salt Lake City, UT 84130-0781

Check the status of your claim submission:

Online: optumproportal.com By phone: 800-384-0853

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



2024 plan name changes

Providers can refer to the **Plan Name Change Crosswalk** for the state-specific 2024 plan names.

Plan overviews

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

Questions?

Chat with a live advocate 7 a.m.-7 p.m. CT from the **UnitedHealthcare Provider Portal**. You can also contact [UnitedHealthcare Provider Services at **877-842-3210**, TTY/RTT **711**, 7 a.m.-5 p.m. CT, Monday-Friday or [Phone, Hours (new Optum Care hours: 8 a.m.-6 p.m. local time, Monday-Friday)]].

