



UnitedHealthcare Group Medicare Advantage (PPO) Plan Guide to Care

We've created this Guide to Care to help you understand how the UnitedHealthcare Group Medicare Advantage (PPO) plan differs from individual Medicare plans or Medicare Supplement plans in which your patients may be enrolled. Members of this plan can see any care provider who participates in Medicare and accepts the plan, whether or not they participate in the UnitedHealthcare network.

The UnitedHealthcare Group Medicare Advantage (PPO) plan works differently than other types of Medicare Advantage plans:

- It's a **Group** Medicare Advantage plan. It's been designed exclusively for these members by their former employer or plan sponsor. This isn't an individual Medicare Advantage plan or Medicare Supplement plan.
- Members can use network or out-of-network care providers for the same copay or coinsurance. There's no difference in what the member will pay.
- No referrals are required.

Frequently Asked Questions

Do I need a contract with UnitedHealthcare to see members of this plan?

No, you do not need a contract with UnitedHealthcare to see and treat members of the Group Medicare Advantage (PPO) plan. If you're not in our UnitedHealthcare Group Medicare Advantage network, but you do participate in Medicare, you may bill UnitedHealthcare up to the Medicare allowable charge. Please don't balance bill the patient. Any excess charges — up to the Medicare allowable amount — will be paid by UnitedHealthcare.

What do members pay for services?

Members pay their appropriate copay or coinsurance.

Are prior authorizations required?

For doctors and care providers not contracted with UnitedHealthcare, prior authorization or notification requests are not needed to provide services to UnitedHealthcare Group Medicare (PPO) Advantage plan members.

We're here to help



If you have questions about the UnitedHealthcare Group Medicare Advantage (PPO) plan, please call Provider Services at **877-842-3210**.

Online Resources for All Care Providers

We have online tools and resources available to you for secure transactions such as checking member eligibility and benefits, managing claims, and viewing policies, protocols and reference guides. To learn more, visit **UHCprovider.com**.

Claims and Payments

You may submit claims in the following ways:

- Go to **UHCprovider.com**. To access the claimsLink, sign in to Link by clicking on the Link button in the top right corner of UHCprovider.com.
- Use the clearinghouse of your choice with UnitedHealthcare Payer ID **87726**.
- Mail paper claims to the address on the back of the member's ID card.

For more information about claims and payment,

- Visit **UHCprovider.com** > Menu > Claims, Billing and Payments.

Join Our Network

If you wish to join our network, please call Provider Services at 877-842-3210. Select "Other Provider Services," then "Credentialing."