# UNITEDHEALTH GROUP®

# Lakeland Care Network –

# Payor Conference

# (part 1)

## Wednesday, October 19th



Jennifer S.
Kayaker
Sr. VP Client Solutions

Bringing your best every day defines **your life's best work.**℠

# Agenda

**Introductions**

**Member ID Cards and Plans**

**Verify Doctor Network Status**

**UHCProvider.com**

**Online Tools**

**Claim Submission and Status**

**Authorizations**

**Customer Service Contacts**

**Claims Remediation and Appeals**

# Our Mission

Our mission is to help people live healthier lives and to help make the health system work better for everyone.

- ## Lakeland Care Plans:   ❖ Commercial

### Commercial health plan ID card legend



Front

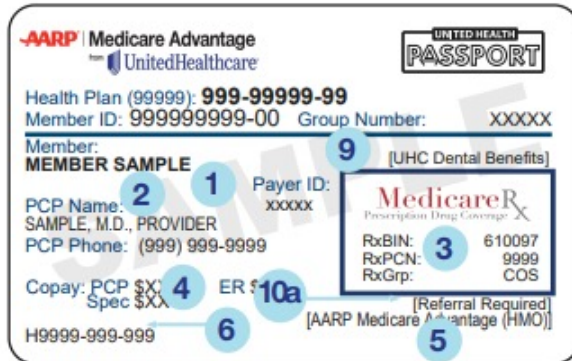United Healthcare | OPTUMRx | Customer Logo Here

Member: MEMBER SMITH
Member ID: 999999999          Group Number: 999999

PCP:
FIRSTNAME LASTNAME          Customer Name Line 1
PCP Phone: (999) 999-9999   Customer Name Line 2
                            Payer ID 87726

Copays:
Office: $99    ER: $99
UrgCare: $99   Spec: $99

Coins 99%   Ded IND/FAM       OOPM IND/FAM
Tier 1:     $99999/$99999     $99999/$99999
INN:        $99999/$99999     $99999/$99999
OON:        $99999/$99999     $99999/$99999

Rx Bin: 610279
Rx PCN: 9999
Rx Grp: UHEALTH

INN:   Ded IND/FAM   OOPM IND/FAM
OON:

Referrals Required
UnitedHealthcare Navigate
Underwritten by UnitedHealthcare Insurance Company

DOI-0508

Back

Printed: 10/17/21

Members: We're here to help. Check benefits, view claims, find a doctor, ask a question and more.

Web: myuhc.com

Phone: 555-555-5555

Providers: 877-842-3210 or UHCprovider.com
Medical Claims: PO Box 740825, Atlanta GA 30374-0825

Shared Savings
MultiPlan          Preferred Lab
Facility: ER/Eligible Services Only

Pharmacists: 888-290-5416
Pharmacy Claims: OptumRx PO Box 650540 Dallas, TX 75265-0540

1. **UnitedHealthcare brand:** This includes UnitedHealthcare, All Savers, UnitedHealthcare Level Funded, UnitedHealthcare Oxford Level Funded, Golden Rule, UnitedHealthcare Oxford, UnitedHealthOne, UMR and UnitedHealthcare Shared Services (UHSS), UnitedHealthcare Freedom Plans.

2. **Member Plan Identifier:** This is a customized field to describe the member's benefit plan (i.e., Individual Exchange, Tiered Benefits, ACO).

3. **Payer ID:** Indicates claim can be submitted electronically using the number shown on card. Contact your vendor or clearinghouse to set up payer in your system, if necessary.

4. **PCP name and phone number:** Included for benefit plans that have PCP selection requirements. For Individual Exchange Members "PCP required" is listed in place of the PCP name and number. This section may also include Laboratory (LAB), Preferred Lab Network (PLN) and Radiology (RAD) participant codes.

5. **Copay information:** If this area is blank, the member is not required to make a copay at the time of service.

6. **Benefit plan name:** identifies the applicable benefit plan name.

7. **Referral requirements identifier:** Identifies plans with referral requirements. Requires PCP to send electronic referrals.

8. **For members section:** Lists benefit plan contact information and, if applicable, referrals and notifications information.

9. **For providers section:** Includes the prescription plan name.

## Lakeland Care Plans:   ❖ Medicare Advantage

**Medicare Advantage (MA) member ID card**

Front                                                  Back



1. **Payer ID:** Indicates claim can be submitted electronically using the number shown on card. Contact your vendor or clearinghouse to set up payer in your system, if necessary.

2. **PCP:** Included for benefit plans that require a PCP selection.

3. **Prescription information:** If the benefit plan includes Part D prescription drug coverage, the Rx Bin, PCN and Group code are visible. If Part D coverage is not included, this area lists information for Medicare Part B Drugs.

4. **Copay information:** Select plans do not list copay information or may have a variance.

5. **Benefit plan name:** Identifies the applicable benefit plan name.

6. **Plan ID number:** Identifies the plan ID number that corresponds to Centers for Medicare & Medicaid (CMS) filings.

7. **For members:** Lists benefit plan contact information for the member.

8. **For providers:** Lists benefit plan contact information for the health care provider.

9. **Dental benefits:** Included if routine dental benefits are part of the benefit plan and/or if the member purchased an optional supplemental dental benefit rider.

10a. **Referrals required:** Identifies benefit plans with referral requirements. Refer to the **Medicare Advantage (MA) Referral Required Plans** section in **Chapter 6: Referrals** for more detailed information.

10b. **No referrals required:** If the benefit plan does not require referrals "No Referral Required" appears on the member's ID card.

- **Lakeland Care Plans:** ❖ **Medicaid and DUAL**

- ## Lakeland Care Plans: ❖ Ucard – Coming 2023

**UnitedHealthcare** UCard™

[UnitedHealthcare Medicare Advantage Assure (PPO)] **5**

**Sample Member**

Member Number
99999999999

**3** RxBIN  RxPCN  RxGRP
610097  9999  COS

Group Number: 12345  H0000-000-000 **6**
**2** PCP: Sample, M.D., Provider
Copay: PCP $XX/$XX  Specialist: $XXX/$XXX **4**

MedicareRx
Prescription Drug Coverage

For Members: MEMBERURL.com **7**
Customer Service: 1-999-999-9999, TTY 711
Printed Date: XX/XX/XXXX

For Providers: PROVIDERURL.com **8**
Provider Service: 1-999-999-9999
Dental Providers: DENTALURL.com 1-999-999-9999
[Provider Authorization 1-999-999-9999]
[Medicare limiting charges apply.]

Payer ID: XXXXX **1**
Medical Claim Address: P.O. Box 99999, STATE, US 99999
Pharmacy Claims: OptumRX P.O. Box 99999, STATE, US 9999-9999
For Pharmacists: 1-999-999-9999

Medicare National Network
[Brand Logo]

Card #: 9999 9999 9999 99999  Security Code: 9999  [Printer Code]

1. **Payer ID:** Indicates claim can be submitted electronically using the number shown on card. Contact your vendor or clearinghouse to set up payer in your system, if necessary.
2. **PCP:** Included for benefit plans that require a PCP selection.
3. **Prescription information:** If the benefit plan includes Part D prescription drug coverage, the Rx Bin, PCN and Group code are visible. If Part D coverage is not included, this area lists information for Medicare Part B Drugs.
4. **Copay information:** Select plans do not list copay information or may have a variance.
5. **Benefit plan name:** Identifies the applicable benefit plan name.
6. **Plan ID number:** Identifies the plan ID number that corresponds to Centers for Medicare & Medicaid (CMS) filings.
7. **For members:** Lists benefit plan contact information for the member.
8. **For providers:** Lists benefit plan contact information for the health care provider.

# Verify Doctor Network Status

**www.myuhc.com (Member Facing Website)**

- **Can Search By Plan Type and Geographic Location for Participating Providers**

**www.uhcprovider.com (Provider Facing Website)**

- **Login to Provider Portal**

- **Search for Member/Eligibility**

- **Confirm Participating Status Based on Member's Plan**

# UHCProvider.com

# Online Tools

## Website/Portal Tools

- **Eligibility**

- **Prior Authorization**

- **Claims and Payments**

- **Referrals**

## Website Training Resources

[Healthcare Professional Education and Training | UHCprovider.com](Healthcare Professional Education and Training | UHCprovider.com)

- **Self Paced Online Courses**

- **Instructor Led Courses**

# Online Tools

[New user & user access | UHCprovider.com](#)

# New user & user access

## You can manage information, register, add, change and deactivate users all in the UnitedHealthcare Provider Portal.

The UnitedHealthcare Provider Portal allows you to take action and quickly access information regarding eligibility, prior authorization, claims and electronic letters and reports.

In order to access secure content and sign in to the portal, you'll need to first register with a One Healthcare ID. Follow the steps below to register with the portal as well as add or deactivate users, update personal profile information, and update or change who has access to different parts of the portal.

Access and registration guide →

Register for live training →

## New User Registration

To start the registration process, new users will need to create a One Healthcare ID and then connect it to their

# Online Tools - Join Network News



A simpler way to stay informed

Sign up to receive personalized UnitedHealthcare emails briefs

**First Name** *

**Last Name** *

**Email** *

**Preferred Primary Specialty** *

Select One

**State** *

Select One

**Sign Up**

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