



Member and Provider Guide to Care

Information for Members

The UnitedHealthcare® Group Medicare Advantage (PPO) plan offers a unique set of benefits to members. Because of this, you and your doctor may not be familiar with all of the details of the plan. This flyer will help give you and your doctor information on how this plan works, so that you can get the most out of your plan benefits. The other side of this flyer contains important information that can help guide your doctor in providing you with covered services.

You can seek care from any doctor or provider that accepts Medicare.

- This Preferred Provider Organization (PPO) plan gives you the freedom to go to any doctor or other licensed medical professional that accepts Medicare, anywhere in the United States.
- The provider does not have to be part of the UnitedHealthcare network.

You have the flexibility to see providers in- or out-of-network.

- Providers who have a contract with UnitedHealthcare (“in-network”) must accept this plan if you are a current patient.
- Similar to traditional PPO plans, providers who do not have a contract with UnitedHealthcare (“out-of-network”) have the choice to accept the plan, except in the case of a medical emergency when they have to accept.



You pay the same co-pay or co-insurance whether your provider is in- or out-of-network.

- Any co-pay for covered services can be paid to the provider at the time of service.
- Out-of-network providers must bill UnitedHealthcare, not Medicare.

Questions? Give us a call. We're happy to help.



Call Customer Service at the number listed on the back of your member ID card.



Provider Guide to Care

Information for Providers

UnitedHealthcare® Group Medicare Advantage (PPO) offers a unique set of benefits to members. This flyer contains important information for in-network providers and can help out-of-network providers better understand the plan.

Key Highlights

- Your patient's plan is a traditional Preferred Provider Organization (PPO) product.
- We pay out-of-network providers according to Medicare's allowable fee schedule.
- A member's out-of-pocket costs are the same whether using an in-network or out-of-network provider, which differs from other UnitedHealthcare Medicare PPO plans with higher member cost sharing for out-of-network services.
- Plan is open access. No referrals. No gatekeeper model. No prior authorizations or prior notifications required for out-of-network physicians.
- Out-of-network providers who participate in Medicare, but do not accept Medicare assignment may balance bill the plan up to the Medicare limiting charge. The excess charges will be paid by UnitedHealthcare, not the member.
- In-network providers, please refer to the UnitedHealthcare Provider Administrative Guide for more information regarding prior notification and prior authorization requirements.

Claims and Payment

UnitedHealthcare administers claim payments for out-of-network providers in accordance with federal regulation 42 CFR Section 422.214. In-network providers are reimbursed according to their contract. Member cost sharing applies.

- Electronic claims submission –
UnitedHealthcare Payer ID: 87726
- Hard copy submission: **Refer to the back of your patient's member identification card for mailing address.**

For information or inquiries, including payment or payment rates, member eligibility, benefits or claims status, visit our secure website, **UnitedHealthcareOnline.com**, or call us toll-free at **1-877-UHC-3210 (1-877-842-3210)**.

UnitedHealthcare® Group Medicare Advantage (PPO)

plans are only offered to groups, such as employers, unions and government sub-entities with benefit plans often unique to each group. If a group qualifies, its plan may be available nationwide.

In-Network Providers

participate through their UnitedHealthcare contract that includes Medicare programs.

Out-of-Network Providers

are either contracted with a UnitedHealthcare Affiliate or willing to accept members of UnitedHealthcare Group Medicare Advantage (PPO) plans.

Want to Join Our Network?

To learn more, call us at **1-877-842-3210**. Select "Other Professional Services" and then "Credentialing."



Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan's contract renewal with Medicare.