

# UnitedHealthcare Community Plan of Iowa HCBS/LTSS Quick Reference Guide

This reference guide for care providers offers quick access to resources to help make it easier for you to contact UnitedHealthcare Community Plan about Home- and Community-Based Services (HCBS) and Long Term Services and Supports (LTSS).



## Prior Authorization Requests and Care Coordination Notification

### HCBS/LTSS require prior authorization.

All members who need HCBS/LTSS receive a comprehensive assessment by our Community-Based Case Manager (CBCM). CBCMs work with members to develop a person-centered care plan that includes:

- **Coordinating and monitoring needed services** for Children's Mental Health (CMH) waiver services, which is coordinated and managed through an Integrated Health Home
- **Coordinating all care resources** to help minimize any negative affect on the member
- **Collecting information about changes in the member's health** to support care providers in planning, delivering and monitoring services for members
- **Identifying needed HCBS/LTSS services** based on the member's care plan; after agreeing on services with the member's care provider, the CBCM authorizes the HCBS/LTSS services

Members who reside in a nursing facility or an Intermediate Care Facility for the Intellectually Disabled (ICF/ID) do not require prior authorization for services.

To contact the member's CBCM, please call **888-650-3462**.



## Online Resources

### Electronic and Paper Claims:

We offer instructor-led sessions on direct data entry for professional claims (CMS-1500 claims only) at no cost to you. To register for training, go to **UnitedHealthcareOnline.com** > Tools & Resources > Training & Education > EDI and ICD-10. Mail paper claims to:

UnitedHealthcare Community Plan  
Attn: Claims  
P.O. Box 5220  
Kingston, NY 12402-5220

### Electronic Data Interchange (EDI) Clearinghouse

You may work with any clearinghouse with a connection to UnitedHealthcare to exchange EDI transactions. Please submit claims within 180 days of service and use **Payer ID 87726**.

We have many tools and resources to help you with your UnitedHealthcare electronic transactions. To learn more, go to **UnitedHealthcareOnline.com** > Tools & Resources > EDI Education for Electronic Transactions.

### Link

Use Link, your gateway to UnitedHealthcare's online tools, for:

- Claims management
- Eligibility and benefits
- Provider data management

To access Link, sign in to UnitedHealthcareOnline.com using your Optum ID. If you don't have an Optum ID, click "New User" at the top of the homepage to begin registration. To learn more about using Link, go to **UnitedHealthcareOnline.com** > Quick Links > Link: Learn More

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## Office Ally

Office Ally is a free, web-based service you can use to enter professional (CMS-1500) and institutional (UB-04) claims manually, or upload them through your existing software. To learn more:

- Contact Office Ally at **360-975-7000** and select option 3. Refer to code UHCCP.
- Go to **UnitedHealthcareOnline.com** > Tools & Resources > UnitedHealthcare Community Plan Resources. Scroll to the section titled “Tools & Resources,” then click “No Cost Solution for Filing Claims Electronically.”



## Other Resources for HCBS and LTSS Care Providers

### Appeals

You can find information about appeals in the “Long Term Services and Supports/Home and Community Based Services (HCBS)” chapter of the UnitedHealthcare - IA Health Link Provider Manual at **UHCommunityPlan.com** > For Health Care Professionals > Iowa > [UnitedHealthcare - IA Health Link Provider Manual](#).

### Electronic Tools & Resources

To learn about online resources and access to policies, protocols, newsletter, please visit **UnitedHealthcareOnline.com** > Tools & Resources > UnitedHealthcare Community Plan Resources > Tools & Resources > [Electronic Tools & Resources for Home and Community Based Services \(HCBS\) & Long Term Support Services \(LTSS\) Providers](#).

### Your Provider Advocate

If you don't know who your Provider Advocate is, you can look them up at **UHCommunityPlan.com** > For Health Care Professionals > Iowa > [Provider Information](#) > Provider Advocate Look Up.

### Provider Services

Call **888-650-3462** to:

- Check claims status
- Confirm member eligibility and benefits
- Provide care coordination notification
- Request prior authorization
- Submit an appeal request
- Update facility/practice data

If you're calling on behalf of a member, you may be prompted to enter the member's date of birth, the date of service, the member's ID number and the group number listed on the member's identification card.

Representatives are available weekdays, 7:30 a.m. – 6 p.m. Central Time (except major holidays).