



Provider Alert

Use the Claim Reconsideration Process for Clinical Denials

The following important update may affect you, your practice or your patients.

We want to make working with UnitedHealthcare Community Plan easier for you. That's why we opened our claim reconsideration process to include clinical reconsiderations for claims that have been denied or closed for "No Authorization on File" or "Does Not Meet Medical Necessity."

Submitting a Claim Reconsideration

We'll perform a full medical necessity review of the service when you request a reconsideration which can help simplify the submission process and decrease your overall turnaround time. You can submit claim reconsiderations either online or by mail:



Online:

- Use the claims Link app in Link - your gateway to UnitedHealthcare's online tools. To access Link, please sign in to UnitedHealthcareOnline.com using your Optum ID.
- You can also check the status of your request online.
- For more information about Link and claimsLink, visit UnitedHealthcareOnline.com > Quick Links > [Link: Learn More](#).



Mail:

- Download and follow the instructions on the Claim Reconsideration Form at UHCCommunityPlan.com > For Health Care Professionals > Texas > [Provider Forms](#) > Claim Reconsideration Form.

Please include the following documents to help us complete the medical necessity review:

- Medical records
- Lab reports
- Radiology reports
- Any other related documents

We're Here to Help

If you have questions about claim reconsiderations, please call us at **888-887-9003**, from 8 a.m. to 8 p.m. Central Time, Monday through Friday. Thank you.