



UnitedHealthcare Dual Complete® (HMO-SNP), offered by UnitedHealthcare Community Plan of Michigan

Quick Reference Guide

Need to contact us? Use this reference guide for quick access to a variety of helpful resources about UnitedHealthcare Dual Complete®, (HMO-SNP), offered by UnitedHealthcare Community Plan of Michigan, a Medicare Advantage program.



Link and UHCprovider.com

Use Link to perform secure transactions such as checking member eligibility and benefits, managing claims and requesting prior authorization. To sign in to Link, go to UHCprovider.com and click on the Link button in the top right corner. If you aren't registered yet, go to UHCprovider.com and select "New User" to begin registration.

To learn more about using Link, please visit UHCprovider.com/Link



Provider Services

Phone: 844-368-6885

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

Representatives are available weekdays, 8 a.m. – 6 p.m. local time (except major holidays).



Eligibility and Benefits

Please call **844-368-6885** or use the eligibility Link application on Link.



Care Professional Network

You may find a network provider online or by calling us.

Online: Link > UnitedHealthcare Community Plan application > For Health Care Providers > Michigan > Dual Complete (HMO-SNP) Program.

Phone: 844-368-6885



Prescription Drugs

Formulary

Online: Link > UnitedHealthcare Community Plan application > For Health Care Providers > Michigan > Dual Complete (HMO-SNP) Program.



Claims Submission

Electronic Claims:

Please submit claims within **90** days of service, or **the timeframe in your participation agreement** to UHCprovider.com/Link.

Payer ID: 95467

Paper Claims:

Please mail claims to:
UnitedHealthcare Community Plan of Michigan
P.O. Box 30991
Salt Lake City, UT 84130



Claims Management and Reconsideration

Please call **844-368-6885** or use the claimsLink application on Link.



Appeals Submission

Mail formal appeal to:

UnitedHealthcare Community Plan of Michigan
Attention: **Appeals and Grievance**
P. O. Box 31364
Salt Lake City, UT, 84131-0364



Other Resources

For more information, please contact your Physician Advocate or visit Link > UnitedHealthcare Community Plan application > For Health Care Professionals > Michigan > Dual Complete Program HMO – SNP

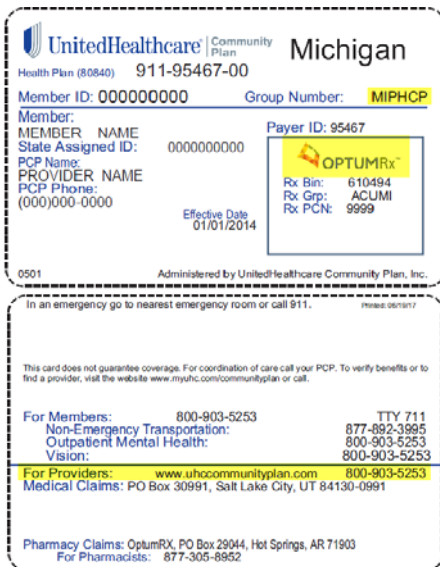


Completing Model of Care Training

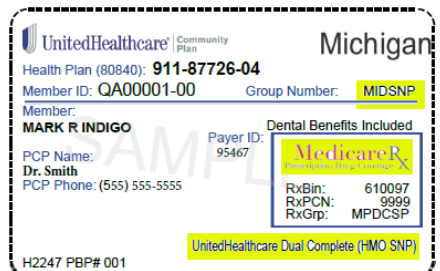
Please complete the required Model of Care training at UHCprovider.com > Menu > Resource Library > Training > 2017 Special Needs Plan Model of Care Training.



Sample Community Plan Medicaid Member ID Card



Sample Dual Complete Member ID Card



Sample State Medicaid Member ID Card



- Eligible members may carry all three cards when seeking treatment.
- Please remember to ask members for all health insurance ID cards.
- Dual Complete® Medicare Advantage is the primary payer.

Additional Key Contacts

Behavioral Health:

Phone Number: **844-368-6885**
Hours: Monday – Friday, 8 a.m. to 6 p.m. local time

UnitedHealthcare Dental:

Phone Number: **844-368-6885**
Hours: Monday – Friday, 8 a.m. to 6 p.m. local time

March Vision:

Phone Number: **844-586-2724**
Hours: Monday – Friday, 8 a.m. to 5 p.m. local time

Non-Emergent Transportation: Logisticare

Phone Number: **866-418-9812**
Hours: Monday – Friday, 8 a.m. to 5 p.m. local time
Web: Logisticare.com

OptumHealth NurseLine:

Phone Number: **877-440-9407**
Hours: 7 days a week, 24 hours a day