

# UnitedHealthcare Community Plan of Ohio Quick Reference Guide for Participating Care Providers

Need to contact us? Use this reference guide for quick access to a variety of resources about UnitedHealthcare Community Plan of Ohio.



## Link and UHCprovider.com

Link's self-service tools can quickly provide the comprehensive information you may need for most UnitedHealthcare benefit plans – without the extra step of calling for information. Use Link to perform secure online transactions such as checking member eligibility and benefits, managing claims and requesting prior authorization.

To sign in to Link, go to [UHCprovider.com](http://UHCprovider.com) and click on the Link button in the top right corner. If you aren't registered yet, go to [UHCprovider.com](http://UHCprovider.com) and select "New User" to begin registration. To learn more about using Link, please visit [UHCprovider.com/link](http://UHCprovider.com/link).



## Sample Member ID Card

Each member covered by UnitedHealthcare Community Plan will receive their own identification card and select a primary care provider (PCP) who coordinates their care.



## Provider Services

**UnitedHealthcare Community Plan: 800-600-9007**

**General Provider Line: 877-842-3210**

Representatives are available weekdays, 8 a.m. – 8 p.m., Eastern Time

Call us to:

- Confirm member eligibility and benefits
- Check claims status
- Request prior authorization
- Update facility/practice data
- Submit a claim reconsideration request

## Care Management Services

**Phone: 800-508-2581**

**Fax: 866-337-7581**

- Cardiac program (congestive heart failure, coronary artery disease, high blood pressure)
- Complex children and adult care program
- Diabetes program
- Kidney disease
- Neonatal services
- Respiratory program (asthma, chronic obstructive pulmonary disease or emphysema)

# UnitedHealthcare Community Plan of Ohio

## Quick Reference Guide for Participating Care Providers

### Utilization Management

Phone: 800-366-7304

Get assistance with prior authorizations, admissions, discharges and coordination of members' care from 8 a.m. to 5 p.m. Central Time Monday through Friday. Our on-call staff is available 24 hours a day, seven days a week for emergency prior authorization purposes. If you need a peer-to-peer review, please call 800-955-7615 or email [uhc\\_peertopeer\\_scheduling@uhc.com](mailto:uhc_peertopeer_scheduling@uhc.com).



### Eligibility and Benefits

Check eligibility and benefits using the eligibilityLink tool on Link or by calling the Ohio Department of Medicaid Member eligibility at 800-686-1516. You'll need to know the care provider's national provider identifier (NPI) or Medicaid ID number, the member's UnitedHealthcare Community Plan ID number or Social Security number, and the member's date of birth. To access the eligibilityLink tool on Link, go to [UHCprovider.com](http://UHCprovider.com) and click on the Link button in the top right corner.



### Pharmacy Services and Authorizations

Phone: 800-310-6826  
Pharmacy Claims Help Desk: 877-305-8952

To view a complete list of services that require prior authorization, visit [UHCprovider.com](http://UHCprovider.com) > Health Plans by State > Ohio > Community Plan > [Prior Authorizations and Notification](#). Retail pharmacies must submit pharmacy claims to OptumRx using the BIN, PCN and Group numbers on the member ID card.



### Prior Authorization Requests

Prior authorization must be obtained for all services performed by a non-participating care provider.

**Online:** You can submit prior authorization requests online using the Prior Authorization and Notification tool on Link. Sign in to Link by going to [UHCprovider.com](http://UHCprovider.com) and clicking on the Link button in the top right corner. Then, select the Prior Authorization and Notification tile on your Link dashboard. For additional information, go to [UHCprovider.com](http://UHCprovider.com) > Health Plans by State > Ohio > Community Plan > [Prior Authorization and Notification](#)

Phone: 800-366-7304

For after-hours requests, follow the prompts for "Prior Authorization Requests."

Prior Authorization forms are available at [UHCprovider.com](http://UHCprovider.com) > Health Plans by State > Ohio > Community Plan > [Forms, Billing and Reference Guides](#).

Primary care providers, OB-GYN and other consulting physicians should refer members to participating care providers. If you're referring a member for lab services, please use a participating lab. Referrals to out-of-network labs require prior authorization. Chromosome or genetic testing, also require prior authorization. Members can self-refer for the following:

- Certified nurse midwife or nurse practitioner services
- Dental care (participating care providers only)
- Emergency services
- Family planning services including services rendered by a qualified family planning provider, an OB-GYN federally qualified health center or rural health center
- Mental health services offered through a community mental health center (CMHC) certified as a Medicaid care provider
- OB-GYN services

# UnitedHealthcare Community Plan of Ohio

## Quick Reference Guide for Participating Care Providers

- Specialty care services provided by participating care providers except pain management specialist services
- Substance abuse services offered through certified Medicaid care providers affiliated with the Ohio Department of Alcohol and Drug Addiction Services (ODADAS). Find a list of care providers affiliated with ODADAS at [mha.ohio.gov](http://mha.ohio.gov).
- Vision care (participating care providers only)

PCPs may access and print a monthly Primary Care Provider Panel Roster from UHCprovider.com. Go to UHCprovider.com and sign in to Link by clicking on the Link button in the top right corner. Then select Reports from Tools & Resources. From the Report Search page, select the Report Type (PCP Panel Roster) from the dropdown menu. Complete additional fields as required and click on the available report you want to view.

### Radiology/Cardiology Prior Authorization Requests

**Phone: 866-889-8054**

View a complete list of services that require prior authorization at UHCprovider.com > Health Plans by State > Ohio > Community Plan > [Prior Authorizations and Notification](#).



### Claims Submission

Please submit claims within the timely filing guidelines outlined in your UnitedHealthcare Participation Agreement. In accordance with federal guidelines, UnitedHealthcare Community Plan requires a NPI number on all claim forms. An NPI number is needed in the primary provider fields and the secondary provider fields of a claim form when applicable in order for claims to be paid. Submit claims using HIPAA-compliant CPT-4 or HCPCS codes. Hospitals and ancillary care providers, please use the UB-04 or CMS-1500 form.

**Electronic Claims:** Please submit electronic claims using the Claim Submission tool on Link. To sign in to Link, go to [UHCprovider.com](http://UHCprovider.com) and click on the Link button in the top right corner. You can submit claims electronically through clearinghouses RelayHealth, Payerpath® or Change Healthcare, formerly Emdeon.

**Payer ID:** 87726

**Paper Claims:** Please mail claims to:  
UnitedHealthcare Community Plan of Ohio  
P.O. Box 8207  
Kingston, NY 12402

For more information on electronic billing, visit UHCprovider.com > Health Plans by State > Ohio > Community Plan > [Forms, Billing and Reference Guides](#) or call **800-600-9007**.



### Claims Management and Reconsideration

**Online:** Please use the claimsLink tool on Link. To access claimsLink, sign in to Link by clicking on the Link button in the top right corner of UHCprovider.com.

**Phone: 866-815-5334**

You can mail your claims reconsideration request to:  
UnitedHealthcare Community Health Plan Ohio  
P.O. Box 31364  
Salt Lake City, UT 84131

# UnitedHealthcare Community Plan of Ohio

## Quick Reference Guide for Participating Care Providers



### Appeal Submission

**Online:** Please use the claimsLink tool on Link. To access claimsLink, sign in to Link by clicking on the Link button in the top right corner of UHCprovider.com.

**Mail:** Please send your appeal to:

UnitedHealthcare Community Plan of Ohio  
Attention: Provider Dispute  
P.O. Box 31364  
Salt Lake City, UT 84131-0364

**Fax:** 801-994-1082



### Other Care Provider Information

#### General Inquiries

**Fax:** 877-877-7697

**Mail:** UnitedHealthcare Community Plan

5900 Parkwood Pl

Dublin, OH 43016

#### Healthy First Steps Program

**Phone:** 800-599-5985

**Fax:** 877-611-4411

#### Optum Behavioral Health

**Phone:** 866-261-7692



### Member Services

#### Ambulance Services

**Phone:** 800-366-7304

Ambulance services are covered in emergency situations. Contact Utilization Management to authorize ambulance transportation for non-emergency situations at 800-366-7304.

#### Dental Services: DentaQuest

**Phone:** 800-341-8478

Routine dental services are covered by Ohio Medicaid. Anesthesia and facility charges associated with dental procedures performed at a hospital facility or ambulatory surgery center must meet medical necessity and be prior authorized by UnitedHealthcare Community Plan for services to be considered.

#### Durable Medical Equipment (DME)

**Phone:** 800-366-7304

**Fax:** 866-839-8058

Prior authorization is required for monthly rentals or purchases of \$500 or more.

#### Home Health Services

**Phone:** 800-366-7304

Prior authorization is required for all home health care services.

#### Incontinence Supplies

**Phone:** 844-564-1008

**Fax:** 614-553-6236

Incontinence supplies for United Healthcare Community Plan are provided by Edgepark.

# UnitedHealthcare Community Plan of Ohio

## Quick Reference Guide for Participating Care Providers

### Interpreter Services

Phone: 800-895-2017

### Member Services

Phone: 800-895-2017

Hearing Impaired Phone: 711

Available 7 a.m. to 7 p.m. Eastern Time, Monday through Friday

### Transportation Services

Phone: 800-269-4190

Available 7 a.m. to 7 p.m. Eastern Time, Monday through Friday

Members are eligible for 30 one-way or 15 free round trips per year to and from medical appointments.

Those include PCP visits, WIC and other visits such as vision or dental.

- Coordination of transportation services requires at least two business days' advance notice.
- Advise members to contact Member Services to coordinate transportation services.
- If members have to go more than 30 miles for a required medical appointment, they may be entitled to transportation services outside of the enhanced benefit.

### Vision Services

Phone: 844-756-2724

Prior Authorization is required for all routine eye exams and hardware. Authorizations must be obtained from March Vision Care at [marchvisioncare.com](http://marchvisioncare.com).

Members, both children and adults, are eligible for an annual routine vision exam. They have a choice of glasses or a retail allowance of \$125 to use once per year for any type of contacts.



### Additional Information

For more information on UnitedHealthcare Community Plan of Ohio, please contact your Provider Advocate or visit [UHCprovider.com](http://UHCprovider.com) > Health Plans by State > Ohio > [Community Plan](#).