

## Care Provider Information

# Quick Reference Guide: Tennessee UnitedHealthcare Dual Complete® ONE (HMO D-SNP)

Effective Jan. 1, 2020

Need to contact us? This reference guide provides you with quick access to a variety of helpful resources about the UnitedHealthcare Dual Complete® ONE (HMO D-SNP) Medicare Advantage plan.



### UHCprovider.com, Link and EDI

Use Link and Electronic Data Interchange (EDI) to perform secure transactions such as checking member eligibility and benefits, managing claims and requesting prior authorization. To learn more about using Link and EDI, please visit [UHCprovider.com/link](https://UHCprovider.com/link) and [UHCprovider.com/edi](https://UHCprovider.com/edi).



### Provider Services

Phone: 800-690-1606

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

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



### Network Referrals

Online: [UHCprovider.com](https://UHCprovider.com) > Find Dr. > Search for a Provider > Medical Directory > Medicare Plans > UnitedHealthcare Dual Complete®

Phone: 800-690-1606

To submit a behavioral health service referral, please call 800-690-1606.



### Eligibility and Benefits

Please use the eligibilityLink tool at [UHCprovider.com/eligibilityLink](https://UHCprovider.com/eligibilityLink), EDI 270/271 transactions or call 800-690-1606.



### Prescription Drugs

Formulary List

Online: [UHCprovider.com/TNDSNP](https://UHCprovider.com/TNDSNP) > Dual Complete Medicare Advantage Pharmacy Formulary



### Prior Authorization Requests

Online: [UHCprovider.com/paan](https://UHCprovider.com/paan)

Phone: 866-604-3267



### Claims Management and Reconsideration

Please use the claimsLink tool at [UHCprovider.com/claimsLink](https://UHCprovider.com/claimsLink) or call 800-690-1606.

### Claims Submission

Payer ID: 95378

**Electronic Claims:** Please submit claims within 180 days of service, or the time frame in your participation agreement. Claims can be filed as an EDI 837 transaction or by using the Claims Submission tool in Link.

### Paper Claims:

#### Please mail claims to:

UnitedHealthcare Community Plan  
Tennessee  
P.O. Box 5220  
Kingston, NY 12402-5240

### Appeals Submission

#### Mail formal appeals to:

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



### Model of Care Training

Please complete the required Model of Care training at [UHCprovider.com](https://UHCprovider.com) > Menu > Resource Library > Training > Special Needs Model of Care Training for Providers.



### Other Resources

For more information, please contact your Provider Advocate or visit [UHCprovider.com/TNcommunityplan](https://UHCprovider.com/TNcommunityplan) > UnitedHealthcare Dual Complete® Special Needs Plans.

## Key Contacts for Additional Benefits



### Dental

Phone: 844-275-8750  
Monday – Friday, 8 a.m. – 6 p.m.  
Online: UHCproviders.com



### Vision (MARCH®)

Phone: 844-966-2724  
Monday – Friday, 8 a.m. – 5 p.m.  
Online: marchvisioncare.com



### Non-Emergent Transportation (Tennessee Carriers)

Phone: 866-405-0238  
7 days a week, 24 hours a day  
Online: tenn carriers.com



### Virtual Doctor Visits

Phone: 855-635-1393  
7 days a week, 24 hours a day  
Online: amwell.com



### Hearing

Phone: 855-523-9355  
Monday – Friday, 8 a.m. – 8 p.m.  
Online: UHChearing.com



### NurseLine

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



### Personal Emergency Response System

Phone: 800-368-2925  
Monday – Friday, 8:30 a.m. – 6:30 p.m.  
Online: lifeline.philips.com



### Routine Chiropractic

Phone: 800-873-4575  
Monday – Friday, 8 a.m. – 8 p.m.  
Online: myoptumhealthphysicalhealth.com



### Behavioral Health

Phone: 800-690-1606  
Monday – Friday, 8 a.m. – 6 p.m.  
Online: providerexpress.com  
Virtual Visits Phone: 877-614-0484



### Meal Program

Phone: 877-913-7374  
Monday – Friday, 7 a.m. – 6 p.m.  
Online: momsmeals.com



### Health & Wellness Products Card (Solutran®)

Phone: 833-853-8587  
Monday – Friday, 8 a.m. – 8 p.m.  
Online: healthybenefitsplus.com/hwpcard



### Fitness Benefit

Online: myrenewactive.com

## Sample Cards

### UnitedHealthcare Dual Complete®

Community Plan	
Health Plan (80840): 999-999999-99	
Member ID: 999999999	Group Number: TND SNP
Member: SUBSCRIBER BROWN	
PCP Name: DR. PROVIDER BROWN	Payer ID: 95378
PCP Phone: (999)999-9999	Prescription Drug Coverage
	Rx Bin: 999999
	Rx Grp: XXXXXXXX
	Rx PCN: 9999
H0251 PBP# 004	UnitedHealthcare Dual Complete® ONE (HMO D-SNP)

### Medicaid

Community Plan	
Health Plan (99999) 999-999999-99	
Member ID: _____	
Member: _____	
PCP Name: _____	Payer ID: _____
Date Of Birth: _____	Effective Date: _____
COPAY: Office/ER/Hosp \$0/\$0/\$0	
0501	TennCare Medicaid, Benefit A Administered by UnitedHealthcare Plan of the River Valley, Inc.

### Medicare

MEDICARE HEALTH INSURANCE	
Name/Nombre: JOHN L SMITH	
Medicare Number/Número de Medicare: 1EG4-TE5-MK72	
Entitled to/Con derecho a: HOSPITAL (PART A)	Coverage starts/Cobertura empieza: 01-01-2020
MEDICAL (PART B)	01-01-2020

Doc#: PCA-1-015768-05072019\_06052019

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