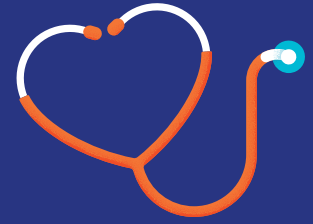


Frequently Asked Questions

For health care professionals | Iowa
UHC Dual Complete IA-S001 (HMO-POS D-SNP)

Effective Jan. 1, 2024



UnitedHealthcare offers a Medicare Advantage plan in your area known as **UHC Dual Complete IA-S001 (HMO-POS D-SNP)**, a **Dual Special Needs Plan (D-SNP)**, for individuals who are eligible for both **IA Health Link and Medicare**.

UHC Community Plan of Iowa manages the Medicare Advantage benefits and reimburses you according to your existing contracted rates. Please make sure to always validate eligibility and benefits before providing service.

Eligibility and benefits

Q. Who is eligible to participate in the plan?

A. D-SNP eligible members can include low-income individuals, ages 65 and older, and people with disabilities who are younger than age 65. Individuals must qualify for IA Health Link and Medicare separately. While most qualify for Medicare once they reach 65, some younger adults with disabilities also qualify.

Q. How can I check member eligibility?

A. Always verify eligibility before providing services to a plan member.

You can check member eligibility and benefits by:

- Using the Eligibility and Benefits tools on the UnitedHealthcare Provider Portal. To sign in, go to **UHCprovider.com** and click on the “Sign In” button in the top right corner. Then, click on Eligibility. If you haven’t registered for the portal yet, go to **UHCprovider.com/newuser**. You can identify Partial members through the Eligibility and Benefits tools on the Provider Portal. Members classified as Partial will display as shown.
- Calling Provider Services at **1-844-368-6883** or the number on the member’s ID card
- Asking for **all active** Health Insurance Cards at each visit including both primary and secondary **insurance** cards (IA Health Link)

We’ve included an example of the member ID card to help you identify these members. Please always refer to the member’s active ID card for current details.

A screenshot of the UnitedHealthcare Provider Portal. The top navigation bar includes 'HOME', 'ELIGIBILITY & BENEFITS', 'CLAIMS', 'REFERRALS', and 'PRIOR AUTHORIZATIONS'. The main content area shows a form with fields for 'Subscriber', 'Date of Birth', 'Gender: Female', and 'Member ID Selected'. Below these fields, it displays 'Policy Selected: UHC Dual Complete IA-S001 (HMO-POS D-SNP)' and 'Active (1/1/2024)'. There are tabs for 'Patient Demographics', 'Policies', 'Care Provider', 'Deductibles & Maximums', 'Coverage', and 'Detailed Benefits'. A 'Network Status' dropdown is set to 'In-Network', and 'View Benefits for' has radio buttons for 'Individual' (selected) and 'Family'.An example of a UnitedHealthcare UCard. The card displays the UnitedHealthcare logo and 'UCard' in a blue box. The member information includes: 'MEMBER A SAMPLE', 'Member ID 123456789-00', and 'Sample Plan Name with Dental'. It lists 'RxBIN 99999', 'RxPCN 9999', and 'RxGRP XXX'. The 'Group Number' is 'XXXXX H0000-000-000'. The 'PCP' is 'PROVIDER' and 'PCP: 999-999-9999'. There is a 'MedicareRx Prescription Drug Coverage' logo at the bottom right.

All member information in the sample is fictional for sample purposes.

Q. Are referrals required for the plan?

A. For HMO, HMO/POS, LPPO, RPPO (open access) plans, referrals are not required if the member seeks in-network care from a specialist. As part of the plan benefit design, members can decide who they wish to visit for their care. Please check eligibility and benefits before providing services.

Key points

UHC Dual Complete IA-S001 (HMO-POS D-SNP) is a **Medicare Advantage** plan.

See service area county list located on last page.



Q. What are the member advantages of the UHC Dual Complete IA-S001 (HMO-POS D-SNP) plan?

A. Members can continue to access core Medicare benefits along with Part D (pharmacy) benefits and targeted clinical programs and services. Additionally, the plan offers supplemental benefits and services that are not typically available through Original Medicare or IA Health Link at no extra cost. These may include:



Food, OTC and Utilities

\$216 credit for food, OTC and utilities



Dental benefits

\$4,000 for covered comprehensive dental



Renew Active® Fitness Program

Free gym membership



Routine transportation

24 rides for doctor or pharmacy visits



Routine vision benefits

Eye exam and \$300 eyewear allowance



Routine hearing benefits

\$2,500 allowance for hearing aids

Each member now has a designated Care Navigator to help guide them through the various questions they may have concerning their health and benefits.

Q. How can a member enroll in a Dual Special Needs Plan?

A. Prospective members can explore their options by visiting UHCCommunityPlan.com/IA or speaking to a licensed sales agent. In addition to individuals enrolling during the Annual Enrollment Period, Oct. 15–Dec. 7, plan members may enroll, disenroll or switch plans once per calendar quarter during the first 9 months of the year by following the Centers for Medicare & Medicaid Services (CMS) regulatory requirements.

Care provider reimbursement

Q. How will I be reimbursed for the UHC Dual Complete IA-S001 (HMO-POS D-SNP) plan?

A. We will reimburse you according to your existing Medicare Advantage contracted rates, for eligible and covered services, up to the defined benefit value. As the primary payer, we're responsible for the management and payment of the Medicare-covered and supplemental services. Since these members are dually eligible for Medicare and Medicaid, they'll have another managed Medicaid plan or state Medicaid agency as their secondary payer in Iowa. For this plan, we are also responsible for processing the Medicare cost share, payable by IA Health Link and up to Medicaid allowable reimbursement rates, for qualified, enrolled members. In this situation, you should expect to receive 2 provider remittance advices (PRAs).

Health care professionals may not attempt to collect additional reimbursement from D-SNP members whose IA Health Link benefits cover all Medicare cost-sharing components. These members are not responsible for Medicare cost sharing under CMS regulations. Medicare cost sharing includes the deductibles, coinsurance and copays included as part of Medicare Advantage benefit plans.

Q. As a health care professional, do I need to be enrolled in IA Health Link to receive the remaining reimbursement?

A. At a minimum, you are required to enroll or register with the state IA Health Link plan for Medicare secondary cost share billing purposes. Depending on the service and covered benefit level, many D-SNP health care professionals will be required to submit a secondary claim to IA Health Link. If there is a deductible, copayment or coinsurance, that amount is the responsibility of the IA Health Link payer to cover. This will depend on the member's IA Health Link eligibility levels. This may require registering for a care provider IA Health Link ID number for reimbursement. If you decide not to enroll or re-enroll with the state IA Health Link program, you'll give up your ability to seek the secondary payer reimbursement for a dually eligible member.

Health care professional resources

- To learn more about this new plan, visit UHCprovider.com/IA
- If you have questions, please call Provider Services at **1-844-368-6883** and select "Health Care Provider"
- Find further details around medical and reimbursement policies at UHCprovider.com/policies > Medicare Advantage Policies
- Find out more about doing business with us at UHCprovider.com/guides > Administrative Guide for Commercial, Medicare Advantage and D-SNP

Service area

Effective Jan. 1, 2024, the service area includes Adair, Allamakee, Appanoose, Benton, Black Hawk, Boone, Bremer, Buchanan, Buena Vista, Butler, Calhoun, Carroll, Cass, Cedar, Cerro Gordo, Cherokee, Chickasaw, Clarke, Clay, Clayton, Clinton, Crawford, Dallas, Davis, Delaware, Des Moines, Dickinson, Fayette, Floyd, Franklin, Greene, Grundy, Guthrie, Hamilton, Hancock, Hardin, Henry, Howard, Humboldt, Ida, Iowa, Jackson, Jasper, Jefferson, Johnson, Jones, Keokuk, Kossuth, Lee, Linn, Louisa, Lucas, Lyon, Madison, Mahaska, Marion, Marshall, Mills, Monona, Monroe, Muscatine, O'Brien, Plymouth, Pocahontas, Polk, Pottawattamie, Poweshiek, Sac, Scott, Sioux, Story, Tama, Van Buren, Wapello, Warren, Washington, Wayne, Webster, Winnebago, Winneshiek, Woodbury and Wright counties.



Sample member ID cards for illustration only; actual information varies depending on payer, plan and other requirements. Benefits and features vary by plan/area. Limitations and exclusions apply. For more information on benefits, go to UHCCommunityPlan.com/IA. Not for distribution to retirees or beneficiaries.

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