

Quick Reference Guide

Agent Information | Indiana | UnitedHealthcare Dual Complete® (PPO D-SNP) H0271-005

Service areas include: Adams, Allen, Bartholomew, Benton, Blackford, Boone, Brown, Carroll, Cass, Clark, Clay, Clinton, Crawford, Daviess, De Kalb, Dearborn, Decatur, Delaware, Dubois, Elkhart, Fayette, Floyd, Fountain, Franklin, Fulton, Gibson, Grant, Greene, Hamilton, Hancock, Harrison, Hendricks, Henry, Howard, Huntington, Jackson, Jasper, Jay, Jefferson, Jennings, Johnson, Knox, Kosciusko, La Porte, Lagrange, Lake, Lawrence, Madison, Marion, Marshall, Martin, Miami, Monroe, Montgomery, Morgan, Newton, Noble, Ohio, Orange, Owen, Parke, Perry, Pike, Porter, Posey, Pulaski, Putnam, Randolph, Ripley, Rush, Scott, Shelby, Spencer, St. Joseph, Starke, Steuben, Sullivan, Switzerland, Tippecanoe, Tipton, Union, Vanderburgh, Vermillion, Vigo, Wabash, Warren, Warrick, Washington, Wayne, Wells, White, Whitley

Agent Tools/Marketing Support

Producer Help Desk (PHD)

Phone: **1-888-381-8581**

7 a.m. – 9 p.m. CT, Monday – Friday

Email: phd@uhc.com

Contact the Producer Help Desk (PHD) if you are looking for producer portal access, enrollment kits, customer eligibility or application status.

Jarvis

Online: UHCJarvis.com

Jarvis is the go-to for all support resources like UnitedHealthcare Toolkit, LEAN, training, prescription drug list, provider look-up and more.

UnitedHealthcare Toolkit Support

Phone: **1-877-249-5419**

8 a.m. – 5 p.m. CT, Monday – Friday

Email: customerservice@uhcagenttoolkit.com

Contact if you need help navigating the website or customizing your marketing material.

Compliance

Email: compliance_questions@uhc.com

For questions or to report a non-compliant activity.

Provider Information

Provider Lookup

Online: UHCprovider.com

Claim Submissions

Electronic: 87726

Hard Copy: UnitedHealthcare Community Plan

Indiana

P.O.Box 31350

Salt Lake City, UT 84131-0350

Enrollment Support

Product Information

Online: UHCCommunityPlan.com

UnitedHealthcare Enrollment

Fax: **1-501-262-7070**

Application Cancellation and Withdrawals

Phone: **1-888-867-5554**

Agent is **NOT** permitted to assist members on call.

Medicaid Eligibility

QMB Plus, SLMB Plus, FBDE, QMB

Member Support

Customer Service

Phone: **1-866-480-1086**

8 a.m. – 8 p.m. local time, 7 days a week

Online: UHCCommunityPlan.com

Member Portal

Online: myuhc.com/CommunityPlan

Help your members register their secure website to access plan information, benefits, search providers, print/view ID cards and more.

Benefit Contact Information

Behavioral Health

Phone: **800-496-5841**

24 hours a day, 7 days a week

Online: VirtualVisitsMentalHealth.UHC.com

Dental

Phone: **866-480-1086**, TTY 711

8 a.m. – 8 p.m. local time, 7 days a week

Online: www.myUHCmedicare.com

OTC Benefit

FirstLine – Catalog

Phone: **1-844-368-7171**, TTY 711

8 a.m. – 8 p.m., local time,

7 days a week, October – March;

Monday – Saturday, April – September

Online: ShopFirstLineBenefits.com

Vision (UnitedHealthcare Vision®)

Phone: **1-866-480-1086**

8 a.m. – 8 p.m. local time, 7 days a week

Non-Emergent Transportation (LogistiCare®)

Phone: **866-418-9812**

8 a.m. – 5 p.m., Monday – Friday

Online: logisticare.com



Benefit Contact Information (continued)

Hearing

Phone: **1-866-480-1086**
8 a.m. – 8 p.m. local time, 7 days a week
Online: **www.myUHC Medicare.com**

Personal Emergency Response System

Phone: **1-855-596-7612**
8 a.m. – 8:30 p.m. ET, Monday – Friday
9 a.m. – 5:30 p.m. ET, Saturday
Online: **www.lifeline.philips.com/UHC Medicare**

Fitness Benefit

Online: **myrenewactive.com**

Virtual Doctor Visits

Phone: **1-866-480-1086**
8 a.m. – 8 p.m. local time, 7 days a week
Online: **www.amwell.com/cm**

NurseLine

Phone: **877-365-7949**
24 hours a day, 7 days a week

Prescription Drug Information

Formulary Lookup



Online: **UHCCCommunityPlan.com**

Prescriptions – Mail Order

Phone: **1-877-889-6358, TTY 711**
24 hours a day, 7 days a week
Online: **OptumRx.com**


Sample Member ID Card

UnitedHealthcare Community Plan

	
Health Plan (80840): 999-99999-99	
Member ID: 999999999	Group Number:
Member: SUBSCRIBER BROWN	
Payer ID:	
PCP Name: DR. PROVIDER BROWN PCP Phone: (999)999-9999	
Rx Bin: 999999	Rx Grp: XXXXXXXX
Rx PCN: 9999	

Sample Eligibility Cards

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) MEDICAL (PART B)	Coverage starts/Cobertura empieza 01-01-2019 01-01-2019

Indiana Medicaid

