

Quick Reference Guide

Agent Information | Texas | UnitedHealthcare Dual Complete® (HMO D-SNP) H4590-022

Service areas include: Atascosa, Bexar, Comal, Guadalupe, Kendall, Wilson

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

Texas

P.O. Box 30975

Salt Lake City, Utah 84130-0975

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, QDWI, QI, SLMB

Member Support

Customer Service

Phone: **1-866-480-2064**

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: **1-800-508-0088**

24 hours a day, 7 days a week

Online: VirtualVisitsMentalHealth.UHC.com

Dental

Phone: **866-480-2064**, TTY 711

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

Online: www.myuhcadvantage.com

OTC Benefit

FirstLine – Debit Card

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

Healthy Food Benefit

Solutran

Phone: **1-855-473-4369**, TTY 711

8 a.m. – 8 p.m., local time,

7 days a week, October – March;

Monday – Saturday, April – September

Online: HealthyBenefitsPlus.com/HWPCard



Benefit Contact Information (continued)

Vision (UnitedHealthcare Vision®)

Phone: **1-866-480-2064**
8 a.m. – 8 p.m. local time, 7 days a week

Non-Emergent Transportation (PMG)

Phone: **1-866-480-2064**
8 a.m. – 8 p.m., Monday – Friday

Hearing

Phone: **1-866-480-2064**
8 a.m. – 8 p.m. local time, 7 days a week
Online: www.myuhcadvantage.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/UHCMedicare

Fitness Benefit

Online: myrenewactive.com

Meal Program

Phone: **855-428-6667**
7 a.m. – 6 p.m., Monday – Friday
Online: momsmeals.com

Virtual Doctor Visits

Phone: **1-866-480-2064**
8 a.m. – 8 p.m. local time, 7 days a week
Online: www.amwell.com/cm

NurseLine

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

Prescription Drug Information

Formulary Lookup



Online: UHCCommunityPlan.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): 999-999999-99
Member ID: 999999999	Group Number:
Member: SUBSCRIBER BROWN	Payer ID:
PCP Name: DR. PROVIDER BROWN PCP Phone: (999)999-9999	

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

Texas Medicaid

	Member name:
Member ID:	Note to Provider: Ask this member for the card from their Medicaid medical plan. Providers should use that card for billing assistance. No medical plan card? Pharmacists can use the non-managed care billing information on the back of this card.
Issuer ID:	Date card sent: