



Medicare Advantage – prior authorization for home health services

Effective Oct. 1, 2022, Optum Care® Network of Midwest will require prior authorization for home health services with service dates on October 1 or after for members enrolled in UnitedHealthcare® Medicare Advantage and Dual Special Needs Plans who reside and receive services in Indiana and Ohio.

The visits included in the prior authorization will be:

- Continuation of care
- Resumption of care (ROC)
- Additional services
- Recertification

Note: Start-of-care (SOC) visits do not require prior authorization.

Impacted plans

This new process will apply to members enrolled in Medicare Advantage plans, including D-SNP members, who reside and receive services in Indiana and Ohio. We'll perform continuation of care reviews for Home Health Agencies (HHAs).



Reference member ID card for LIFE1 payor ID. For all other Payer IDs, please reference <https://www.uhcprovider.com/en/resource-library/news/2022/ct-fl-in-oh-home-health-prior-auth-review.html>

1. Participating health plan logo
2. Payer ID
3. Network name
4. Plan name
5. Medicare assigned H contract number
6. Provider services toll-free number
7. Medical claims address

1. **AARP Medicare Advantage** UnitedHealthcare

Health Plan (99999): **999-99999-99**

Member ID: **999999999-00** Group Number: **XXXXX**

Member: **SAMPLE A MEMBER** [UHC Dental Benefits]

3. PCP Name: **SAMPLE, M.D., PROVIDER**

PCP Phone: (999) 999-9999

OPTUM CARE NETWORK

Copay: PCP \$XX ER \$XX

Spec \$XX

5. **HXXXX-XXX-XXX**

2. Payer ID: **LIFE1**

4. **AARP Medicare Advantage Choice (PPO)**

Medicare limiting charges apply.

Medicare National Network

MedicareRx Prescription Drug Coverage

RxBIN: 610097
RxPCN: 9999
RxGrp: COS

Customer Service Hours: 24 hours a day, 7 days a week Printed: xx/xx/xxxx

For Members

Website: **www.memberurl.com**

Customer Service: **1-999-999-9999 TTY 711**

NurseLine: **1-999-999-9999 TTY 711**

Behavioral Health: **1-999-999-9999 TTY 711**

Dental: **1-999-999-9999 TTY 711**

7. For Providers **www.OptumCare.com** **1-866-566-4715**

Medical Claim Address: **P.O. Box 30781, Salt Lake City, UT 84130-0781**

Provider Authorizations: **1-866-566-4715**

[UHC Dental Providers: **www.dentalurl.com** **1-999-999-9999**]

UHC Renew Active

NO Referral Required

OPTUM

6. For Pharmacists **1-999-999-9999**

Pharmacy Claims OptumRx P.O. Box 999999, Healthcare, US 99999-9999

Important points

- Start-of-care visits will not require preauthorization – you can perform a comprehensive evaluation of your patient in their home setting. This visit should be conducted before contacting Optum.
- After the start-of-care visit, providers must contact Optum for authorization for all subsequent services with dates of service on or after October 1, including:
 - Continuation of care requests
 - Resumption of care requests
 - Recertifications
- If you do not obtain authorization from Optum before services are rendered, claims may be denied

Completing the initial authorization process

You can request prior authorization by visiting the online Optum Provider Portal:

- Link: <https://optumcare.linkplatform.com/home>

Online portal requests are the preferred methods for authorization requests, but if needed, Optum can accept requests by phone call and fax.

- Indiana market: phone number: 1-866-565-3361
- Ohio market: phone number: 1-866-566-4715

Indiana and Ohio fax number 1-855-248-4063 (PA fax cover sheet and all documentation)

Optum Care Network – Ohio (OCN-OH) Plan name and type	CMS contract	Group numbers
AARP® Medicare Advantage Plan 1 (HMO)	H5253-050	90007
AARP® Medicare Advantage Plan 2 (HMO)	H5253-109-001	90046
AARP® Medicare Advantage Plan 2 (HMO)	H5253-109-002	90047 90048
AARP® Medicare Advantage Plan 3 (HMO)	H5253-051	90044 90045
AARP® Medicare Advantage Choice Plan 4 (PPO)	H8768-033	92017 96564
AARP® Medicare Advantage Plan 5 (HMO)	H5253-062	90043
AARP® Medicare Advantage Plan 6 (HMO)	H5253-052	90074 90075
AARP® Medicare Advantage Plan 7 (HMO)	H5253-049	90005
AARP® Medicare Advantage Plan 8 (HMO)	H5253-115	90063
AARP® Medicare Advantage Choice (PPO)	H8768-006	90136
AARP® Medicare Advantage Choice (PPO)	H8768-007	90049
AARP® Medicare Advantage Walgreens (PPO)	H8768-014	90138
AARP® Medicare Advantage Walgreens (PPO)	H8768-015	90139 90140

American Health Network IPA (AHN IPA), Plan name and type	CMS contract	Group numbers
AARP® Medicare Advantage Profile (HMO-POS)	H2802-007	00746
AARP® Medicare Advantage Plan 1 (HMO-POS)	H2802-008, 010, 012, 016, 018, 020	00744, 00745, 00748, 00749, 00750, 00751, 00755, 00756, 00758, 00761, 00762
AARP® Medicare Advantage Choice Plan 1 (PPO)	H2228-019, 021, 022, 064	67026, 67030, 67034, 90101, 90102
AARP® Medicare Advantage Focus (PPO)	H2228-020	74000
AARP® Medicare Advantage Choice (PPO)	H2228-065, 066	90103, 90105, 90106
AARP® Medicare Advantage Choice Plan 2 (PPO)	H2228-080, 081, 110, 111	90126, 90127, 90128, 92018, 92019, 92020, 92021
AARP® Medicare Advantage Patriot (PPO)	H2228-091	90041
UnitedHealthcare Dual Complete® (PPO D-SNP)	H0271-005	90006

If you have questions, please call Optum Member Services

- Indiana market 1-866-565-3361
- Ohio market: 1-866-566-4715

Or go to the Optum provider portal and select member state:

- Link: <https://www.optum.com/sign-in/optum-care-professionals.html>



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