



# Medicare Advantage – prior authorization for home health services

**Effective Oct. 1, 2022**, Optum Care® Network of Connecticut 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 Connecticut.

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 Connecticut. We'll perform continuation of care reviews for Home Health Agencies (HHAs).



Reference member ID card for E3287 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



### 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 visiting the online Optum Provider Portal:

- Link: [NetScaler AAA \(optumcare-mso.com\)](https://netScalerAAA.optumcare-mso.com)
- Online portal requests are the preferred methods for authorization requests, but if needed, Optum can accept requests by phone call and fax
- Connecticut Phone Number: 1-888-556-7048
- Connecticut Fax Number 1-855-268-2904

Please include fax cover sheet and supporting documentation with all prior authorization requests.

<b>UnitedHealthcare Medicare Advantage Plans – Connecticut</b>	<b>CMS contract</b>	<b>Group Numbers</b>
MedicareComplete Plan 1 (HMO)	H0755-030	27151 or 27062
MedicareComplete Plan 2 (HMO)	H0755-031	27153 or 27064
MedicareComplete Plan 3 (HMO)	H0755-033	27100 or 27150
MedicareComplete Essential Plan (HMO)	H0755-032	27155 or 27156
AARP® Medicare Advantage Walgreens (PPO)	H3442-001	90125 or 90223
AARP Medicare Advantage (Regional PPO)	R7444-001	90150 or 90151

If you have questions, please call Optum Member Services

- Connecticut Market: 1-888-556-7048

Optum provider portal and select member state

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



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