



Health Plan Questions

These frequently asked questions (FAQs) are for general informational purposes only.

Why do I need to select a primary care provider (PCP)?

When you enroll in the Navigate plan, you are required to select a PCP from the network to help you manage your health and get the right care at the right time. Your PCP will be your first point of contact when you need care and will oversee any treatment you may need. In addition, you must get an online referral from your PCP before you see another network PCP or specialist. **Depending on your plan, without a referral, your costs may be a lot higher or they may not be covered at all.** Check your health plan documents for more information on referrals.

How do I select a PCP?

Each covered family member must select a PCP in the network. Your PCP must be located in a town or city near where you (the subscriber) live. If you do not select a PCP or you have chosen a medical practice (not an individual PCP), we will assign one to you. You can find one today, before your effective date, by using our physician search tool, available in both English and Spanish, at welcometouhc.com/navigate. Or, you can call us for help.

Can each covered family member have his or her own PCP?

Yes. You can select one PCP for your entire family, or each covered family member may select his or her own. Please check with your PCP's office before enrolling to confirm that he or she is accepting new patients and if there are any patient age restrictions.

Can I select any type of provider as my PCP?

Your PCP must be a general practice physician, family practice physician, pediatrician or internal medicine physician. The PCP's name and telephone number will be listed on each family member's health plan ID card.

If I am covering a family member under my plan but they live out of state, can they select a PCP near where they live?

Unfortunately, no. They must choose a PCP in a town or city near where you, the subscriber, lives — not where the family member lives.

If I don't select a PCP at enrollment, how will one be assigned to me?

We will assign your PCP based on where you live. If you wish to change your assigned physician, you will have the option to select a new PCP after you enroll, but the new PCP must be in the area where you live.

After I enroll, can I change my PCP?

Yes. You can change your PCP once a month, effective the first day of the following month. To do so, call the number on your ID card or go to myuhc.com®. Change requests must be submitted by the 15th of the month to be effective the 1st of the next month.

If you change your PCP before the 15th of the month, the change will go into effect on the 1st of the next month. Otherwise, it will not take effect until the 1st day of the second following month. For example, a change request submitted on June 16 will not be effective until August 1.

To make a change, call the number on your ID card or go to myuhc.com.

For **ENGLISH**, please call: 1-855-828-7715

For **SPANISH**, please call: 1-800-940-1508

LEARN MORE at welcometouhc.com/navigate.

* The welcometouhc.com website provides content in English only, but you can access the provider directory in English or Spanish.

Health Plan Questions (Continued)

What is a referral?

A referral is an approval from your PCP for you to receive care from another network physician or health care professional.

Do I need a referral from my PCP before seeing another doctor?

Yes. Your PCP must submit an online referral before you can see another network provider. A referral is necessary to receive coverage or the highest level of benefit. Referrals may not be needed to see some network providers, including obstetricians/gynecologists (OB/GYN), substance use disorder clinicians and emergency care at an emergency room.

Do I need to complete any paperwork for referrals?

No. When you receive a referral through your PCP, he or she will handle the process for you.

Can I view and track my referrals?

After you enroll, you will be able to see all of your referrals online at myuhc.com. You can call Customer Care for assistance.

Who are the providers that I can see without a referral?

Referrals are not needed to see the following providers as long as they are in the network:

- ✓ Obstetricians/gynecologists (OB/GYNs)
- ✓ Behavioral health or substance use disorder clinicians
- ✓ Convenience care clinics
- ✓ Urgent care clinics
- ✓ Emergency room care (as appropriate)

What's the difference between "referral" and "prior authorization"?

Referral: If your PCP thinks you need treatment that is best provided by a network specialist, he or she will issue a referral for you to see another network physician or a specialist before your appointment.

Prior authorization: Prior authorization is the process in which UnitedHealthcare reviews certain health care services to determine medical necessity and eligibility for coverage before the service is received. Prior authorization is required for certain covered health services, as noted in your benefit plan documents. **If you do not get prior authorization before receiving one of these services, your benefit coverage may be reduced. You also may have no coverage if it's determined that the service is not medically necessary.** For information on which services require prior authorization, see your benefit plan documents.

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Have Questions?

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