



Overview

This guide will help you understand which consumers may be eligible to enroll in a UnitedHealthcare D-SNP plan and determine which plans can be offered during the Integrated Care Special Enrollment Period (SEP)

Dual Eligibles

1.19M

Dual Eligibles

1M

Full Dual Eligibles (87%)

98K

QMB Eligibles (8%)

55K

Partial Dual Eligibles (5%)

UHC D-SNP Service Area Only; estimates based on June 2024 CMS.gov data

Summary of D-SNP Enrollment Eligibility

Any dual-eligible consumer can enroll in a UHC D-SNP plan during AEP and MA-OEP

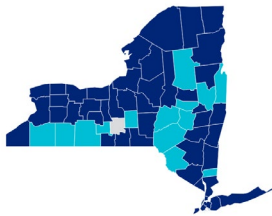
1. There are no changes to enrolling in D-SNP plans during AEP and MA-OEP. Use the Jarvis Medicare and Medicaid Verification (MMV) tool linked on the D-SNP landing page to verify plan eligibility (see QR code above or navigate to Jarvis > Sales Tools > Medicare & Medicaid Eligibility Lookup).

Only certain dual-eligible consumers can enroll in a UHC plan using the Integrated Care SEP (see below)

1. If your client has a UHC Medicaid plan and is Full Dual eligible (FBDE, QMB+), your client may be eligible for the monthly Integrated Care SEP and may enroll in UHC Dual Complete NY-S002. Use the MMV tool linked in the QR code above to validate your client's eligibility before submitting the application.
 - a. Full Dual eligible consumers with other Medicaid carriers will not be eligible to switch to a UHC D-SNP plan using the Integrated Care SEP unless they switch to the UHC Medicaid plan. Consumers are subject to Medicaid open enrollment period rules to switch to the UHC Medicaid plan (see below).
2. Non-Full Duals (example: LIS and QMB only) are subject to the same SEP rules as MA.
3. Special circumstance SEPs still apply to all D-SNP consumers; client must be Medicaid eligible. Refer to the D-SNP Landing Page for more information (QR code or Jarvis file path above).

2026 Footprint

Partial footprint of plans eligible to sell using the Integrated Care SEP (to UHC Medicaid Members Only) and plans ineligible for Integrated Care SEP



■ Counties with Integrated Care SEP available
■ Counties without Integrated Care SEP
■ Counties with no UHC D-SNP Plan

Summary of UnitedHealthcare Medicaid Information

To enroll in a UHC D-SNP plan using the Integrated Care SEP, clients must first enroll in the UHC Medicaid plan.

Medicaid Enrollment Process: Direct the client to the Medicaid enrollment number below, Monday through Friday: 8:30 am -8:00 pm local time, Saturday: 10:00 am to 6:00 pm

- NY Medicaid Choice 1-800-505-5678 | TTY: 1-888-329-1541
- Consumers can also call UHC Community Plan of NY at 1-888-617-8979 and speak to a Medicaid health plan representative who can answer questions and help enroll.
- **Medicaid Plan Name:** UnitedHealthcare Community Plan

Medicaid Enrollment Period: Year-Round: Open enrollment occurs 90 days (after enrollment), annually at their individual open enrollment period (anniversary of signing up), at redetermination, or with just cause.

Unique Market Considerations:

- **H3387-014-001** is non-commissionable for new enrollment in the following counties: *Clinton, Essex, Franklin, Lewis, and St. Lawrence.*
- **H3387-017-000** is non-commissionable for new enrollment in *Hamilton* county.
- **H2001-063-001 and H3387-015-001** are non-commissionable for new enrollment in the following counties: *Clinton, Essex, Franklin, Hamilton, Lewis, and St. Lawrence.*

Plan Information (Click plan name for details, additional plans on the following page)

Plan Name	Plan Eligibility and Overview	Is Integrated Care SEP Available?
UHC Dual Complete NY-S002 (HMO-POS D-SNP) H3387-014-001	Eligible Membership: Full Dual Only (FBDE, QMB+) Plan Focus: Must have full Medicaid benefits. \$149 credit every month for OTC, plus healthy food and utilities for qualifying members.	Yes , consumers must be enrolled in the UHC Medicaid plan to enroll in this plan using the Integrated Care SEP
UHC Dual Complete NY-S002 (HMO-POS D-SNP) H3387-014-002	Eligible Membership: Full Dual Only (FBDE, QMB+) Plan Focus: Must have full Medicaid benefits. \$118 credit every month for OTC, plus healthy food and utilities for qualifying members.	Yes , consumers must be enrolled in the UHC Medicaid plan to enroll in this plan using the Integrated Care SEP

See additional plans on the following page



Plan Information (Continued)

Plan Name	Plan Eligibility and Overview	Is Integrated Care SEP Available?
While Integrated Care SEP Opportunities do not apply to the below plans, all special circumstance SEPs still apply. Refer to the Jarvis MMV tool for more information.		
<u>UHC Dual Complete NY-S4</u> (HMO-POS D-SNP) H3387-017-000 **Limited Footprint**	Eligible Membership: Full Dual Only (FBDE, QMB+) Plan Focus: Must have full Medicaid benefits. \$125 credit every month for OTC, plus healthy food and utilities for qualifying members.	Limited - Outside of AEP and MA-OEP, consumers are limited to special circumstance SEPs to enroll in this plan
<u>UHC Dual Complete NY-S001</u> (PPO D-SNP) H2001-063-001	Eligible Membership: Full Dual Only (FBDE, QMB+) Plan Focus: Must have full Medicaid benefits. \$98 credit every month for OTC, plus healthy food and utilities for qualifying members.	Limited - Outside of AEP and MA-OEP, consumers are limited to special circumstance SEPs to enroll in this plan
<u>UHC Dual Complete NY-S001</u> (PPO D-SNP) H2001-063-002	Eligible Membership: Full Dual Only (FBDE, QMB+) Plan Focus: Must have full Medicaid benefits. \$53 credit every month for OTC, plus healthy food and utilities for qualifying members.	Limited - Outside of AEP and MA-OEP, consumers are limited to special circumstance SEPs to enroll in this plan
<u>UHC Dual Complete NY-Q001</u> (HMO-POS D-SNP) H3387-015-001	Eligible Membership: QMB Only Plan Focus: Must be a Qualified Medicare Beneficiary (QMB) who doesn't have full Medicaid benefits but gets all their Medicare-covered services provided at \$0. \$35 credit every month for OTC, plus healthy food and utilities for qualifying members.	Limited - Outside of AEP and MA-OEP, consumers are limited to special circumstance SEPs to enroll in this plan
<u>UHC Dual Complete NY-Q001</u> (HMO-POS D-SNP) H3387-015-002	Eligible Membership: QMB Only Plan Focus: Must be a Qualified Medicare Beneficiary (QMB) who doesn't have full Medicaid benefits but gets all their Medicare-covered services provided at \$0. \$35 credit every month for OTC, plus healthy food and utilities for qualifying members.	Limited - Outside of AEP and MA-OEP, consumers are limited to special circumstance SEPs to enroll in this plan

The healthy food and utilities benefit is a special supplemental benefit only available to chronically ill enrollees with a qualifying condition, such as diabetes, cardiovascular disorders, chronic heart failure, chronic high blood pressure and/or chronic high cholesterol, and who also meet all applicable plan coverage criteria. There may be other qualified chronic conditions not listed.