Virginia | D-SNP Enrollment At A Glance

Scan the QR code or follow the Jarvis path below to access the UHC D-SNP landing page and learn more about UHC D-SNPs

Jarvis > Knowledge Center > Medicare Product Resources > Dual Special Needs Plans



Information Valid for Plan Year 2026 Only

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

221K

Dual Eligibles

150K

Full Dual Eligibles (68%)

32K

QMB Eligibles (14%)

39K

Partial Dual Eligibles (18%)

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

2026 Footprint

Partial footprint of plans eligible to sell using the Integrated Care SEP



Counties with Integrated Care SEP

Counties with no UHC D-SNP Plan

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)

- If your client has a Medicaid plan and is Full Dual eligible (FBDE, QMB+, SLMB+), your client may be eligible for the
 monthly Integrated Care SEP and may enroll in many of the plans listed below. In order to enroll in UHC Dual
 Complete VA-Y001, your client must have a Waiver. Use the MMV tool linked in the QR code above to validate your
 client's eligibility before you submit the application. Consumers with the Waiver will show as eligible for UHC Dual
 Complete VA-Y001 in MMV.
- 2. Non-Full Duals (example: LIS and QMB only) are subject to the same SEP rules as MA.
- 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).

Summary of UnitedHealthcare Medicaid Information

To enroll in a UHC D-SNP plan, consumers must be enrolled in a Medicaid Managed Care plan.

Medicaid Enrollment Process: Agents may not assist clients in signing up for a Medicaid Managed Care plan. Simply direct the client to the Medicaid enrollment number below.

· Cardinal Care Managed Care Help Line: 1800-643-2273-| Monday - Friday, 8:30 am to 6:00 pm.

Medicaid Plan Name: UnitedHealthcare Community Plan

Does a consumer's D-SNP selection change their Medicaid plan? Yes, consumers who select a UHC D-SNP plan will automatically receive all their Medicaid covered services through their UHC D-SNP plan.

Unique Medicaid Considerations:

- In order to enroll a consumer into a D-SNP plan in Virginia, the State requires all agents complete a required training video. Reach out to your local UHC sales manager if you have not already watched the video.
- When enrolling members into UHC Dual Complete VA-Y001, ensure that your client's LTC home health care provider is in network by using the UHC provider look up tool Jarvis > Quick Access > Find a Doctor.
- · Consumers may only enroll in Medicaid during the open enrollment period for their locality, or with cause.

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

Plan Name	Plan Eligibility and Overview	Is Integrated Care SEP Available?
<u>UHC Dual Complete VA-Y001 (HMO-POS D-SNP)</u> H2445-001-000	Eligible Membership: Full Dual Only (FBDE, QMB+, SLMB+) with a Waiver Plan Focus: For those who have full Medicaid benefits with a Waiver. After joining this plan, you'll also be enrolled in the UHC Community Plan - Cardinal Care for a combined Medicare and Medicaid experience. \$407 credit every month for OTC, plus healthy food and utilities for qualifying members.	Yes, any Full Dual (FBDE, QMB+, SLMB+) consumer enrolled in Medicaid Managed Care with a Waiver may enroll in this plan using Integrated Care SEP
<u>UHC Dual Complete VA-Y002 (HMO-POS D-SNP)</u> H2445-003-000	Eligible Membership: Full Dual Only (FBDE, QMB+, SLMB+) Plan Focus: For those who have full Medicaid benefits and are in managed care. After joining this plan, you'll also be enrolled in the UHC Community Plan - Cardinal Care for a combined Medicare and Medicaid experience. \$371 credit every month for OTC, plus healthy food and utilities for qualifying members.	Yes, any Full Dual (FBDE, QMB+, SLMB+) consumer enrolled in Medicaid managed care may enroll in this plan using Integrated Care SEP
UHC Dual Complete VA-Y3 (HMO-POS D-SNP) H2445-005-000	Eligible Membership: Full Dual Only (FBDE, QMB+, SLMB+) Plan Focus: For those who have full Medicaid benefits and are in managed care. After joining this plan, you'll also be enrolled in the UHC Community Plan - Cardinal Care for a combined Medicare and Medicaid experience. \$250 credit every month for OTC, plus healthy food and utilities for qualifying members.	Yes, any Full Dual (FBDE, QMB+, SLMB+) consumer enrolled in Medicaid managed care may enroll in this plan using Integrated Care SEP
UHC Dual Complete VA-Y4 (PPO D-SNP) H0421-001-000	Eligible Membership: Full Dual Only (FBDE, QMB+, SLMB+) Plan Focus: For those who have full Medicaid benefits and are in managed care. After joining this plan, you'll also be enrolled in the UHC Community Plan - Cardinal Care for a combined Medicare and Medicaid experience. \$205 credit every month for OTC, plus healthy food and utilities for qualifying members.	Yes, any Full Dual (FBDE, QMB+, SLMB+) consumer enrolled in Medicaid managed care may enroll in this plan using Integrated Care SEP

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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.			
UHC Dual Complete VA- Q001 (HMO-POS D-SNP) H2445-002-000	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. \$92 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 VA-V001</u> (HMO-POS D-SNP) H2445-004-000	Eligible Membership: Partial Dual Only (SLMB, QI) Plan Focus: For those who don't have full Medicaid benefits but get help paying their Medicare Part B premium and pay some of their own Medicare-covered costs. \$61 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.