UnitedHealthcare 2027 Plan Year

Colorado | 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 2027 Only

Overview

This guide will help you understand key changes for D-SNP enrollment eligibility beginning January 2027, as well as which consumers may be eligible to enroll in a UnitedHealthcare D-SNP and how to enroll.

Dual Eligibles

134K
Dual Eligibles

95K
Full Dual Eligibles (71%)

23K
QMB Eligibles (17%)

15K
Partial Dual Eligibles (11%)

UHC D-SNP Service Area Only; estimates based on June 2026 CMS.gov data

Summary of 2027 Enrollment Requirements

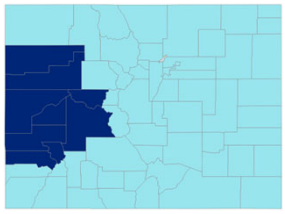
New 2027 CMS Alignment Requirements Apply in Colorado

- In 2027, there are new exclusively aligned enrollment CMS requirements for Full Dual eligibles (FBDE, QMB+, SLMB+) where UHC offers managed Medicaid (Delta, Garfield, Gunnison, Mesa, Montrose, Ouray, Pitkin, Rio Banco and San Miguel counties only). UHC's managed Medicaid program is known as Rocky Mountain Health Plans (RMHP) PRIME:
  a. One Full Dual Plan Option per Service Area. Full dual members will have only one UHC plan available per service area.
  b. New UHC Dual Complete CO-S5 Enrollees Will Be Aligned with UHC for Both Medicare and Medicaid. Full Dual members who newly enroll in UHC Dual Complete CO-S5 must be enrolled with UHC for both their Medicare and with RMHP PRIME for their Medicaid coverage. ***Note:*** *Consumers must already be enrolled in Medicaid before enrolling in a Full Dual D-SNP.*

Any Dual-Eligible Consumer Can Enroll During AEP And MA-OEP, With Limitations During SEP

- See Plan Information table below for SEP enrollment availability detail by plan. Use the Jarvis Medicare and Medicaid Verification (MMV) tool to verify plan eligibility before you submit the application. Navigate to Jarvis > Sales Tools > Medicare & Medicaid Eligibility Lookup.

2027 Footprint



Medicare-First Counties; Enrollment Restrictions Apply

No UHC Medicaid; No New Enrollment Restrictions

Summary of Medicaid Requirements

To enroll in a UHC D-SNP, consumers must be Medicaid eligible.

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 resources below.

- Health First Colorado: https://www.healthfirstcolorado.gov/apply-now/
- Member Contact Center: 1-800-221-3943 / State Relay: 711 | Available Monday - Friday 8am to 4pm

Medicaid Switch Rules: For members enrolled in a Medicaid MCO, Colorado rules use a 12-month assignment cycle, with no-clause changes in the first 90 days and at least every 12 months.

Plan Information

Plan Name	Enrollment Eligibility Requirements	SEP Options
UHC Dual Complete CO-S5 (HMO-POS) **H0624-007-000** *Limited Footprint*	• **Eligible Membership:** Full Dual Only (FBDE, QMB+, SLMB+) • **Plan Focus:** Must have full Medicaid Benefits. Starting January 1, 2027, joining this plan will also enroll you in UHC's Medicaid plan.	**Integrated Care SEP:** Full dual consumers are eligible to join this plan outside of AEP and OEP using the Integrated Care SEP, in addition to special circumstance SEPs.
UHC Dual Complete CO-S4 (HMO-POS) **H0624-008-001** *Limited Footprint*	• **Eligible Membership:** Full Dual Only (FBDE, QMB+, SLMB+) • **Plan Focus:** Must have full Medicaid benefits.	**Limited SEPs:** Outside of AEP and OEP, consumers are limited to special circumstance SEPs.
UHC Dual Complete CO-S4 (HMO-POS) **H0624-008-002** *Limited Footprint*	• **Eligible Membership:** Full Dual Only (FBDE, QMB+, SLMB+) • **Plan Focus:** Must have full Medicaid benefits.	**Limited SEPs:** Outside of AEP and OEP, consumers are limited to special circumstance SEPs.
UHC Dual Complete CO-Q1 (HMO-POS) **H0624-001-000** *Excludes RMHP PRIME Counties*	• **Eligible Membership:** Full Dual or QMB Only (FBDE, QMB+, SLMB+, QMB) • **Plan Focus:** Designed for Qualified Medicare Beneficiaries (QMBs) with $0 Medicare-covered services but not full Medicaid. • Starting January 1, 2027, **this plan is not accepting full Medicaid recipients in RMHP PRIME Counties.**	**Limited SEPs:** Outside of AEP and OEP, consumers are limited to special circumstance SEPs.

Underlined are the dual eligibles most suited for each plan.

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Plan Name	Enrollment Eligibility Requirements	SEP Options
UHC Dual Complete CO-Q2 (Local PPO) **H2001-053-000** *Limited Footprint*	• **Eligible Membership:** Full Dual or QMB Only (FBDE, QMB+, SLMB+, QMB) • **Plan Focus:** Designed for Qualified Medicare Beneficiaries (QMBs) with $0 Medicare-covered services but not full Medicaid.	**Limited SEPs:** Outside of AEP and OEP, consumers are limited to special circumstance SEPs.
UHC Dual Advantage CO-V1 (Local PPO) **H2001-052-000** *Limited Footprint*	• **Eligible Membership:** All Dual (FBDE, QMB+, SLMB+, QMB, SLMB, QI) • **Plan Focus:** Designed for partial Medicaid recipients who get help with their Medicare Part B premium and pay some of their own Medicare-covered costs.	**Limited SEPs:** Outside of AEP and OEP, consumers are limited to special circumstance SEPs.

Underlined are the dual eligibles most suited for each plan.