



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

34K

Dual Eligibles

23K

Full Dual Eligibles (66%)

12K

QMB Eligibles (34%)

73

Partial Dual Eligibles (0.2%)

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 Washington DC

- In 2027, there are new exclusively aligned enrollment CMS requirements for Full Dual eligibles (FBDE, QMB+) where UHC offers managed Medicaid:
 - One Full Dual Plan Option per Service Area. Full dual members will have only one UHC plan available per service area. If a consumer has the EPD Waiver (see below for detail), they are eligible to join UHC Dual Choice DC-YL1; if a consumer is full dual, but does not have the EPD Waiver, then they are eligible to join UHC Dual Choice DC-Y2.
 - New Full Dual Enrollees Will Be Aligned with UHC for Both Medicare and Medicaid. Full Dual members who newly enroll in a UHC D-SNP must be enrolled with UHC for both their Medicare and Medicaid coverage. If a member joins a UHC D-SNP and is enrolled in a different Medicaid plan, their Medicaid coverage will automatically transition to UHC's Medicaid plan after D-SNP enrollment. **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.

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 number below.

- District Direct: 1-202-727-5355
- DC Health Link: 1-855-532-5465
- Medicaid Agency URL: <https://district.dc.gov/>

LTC Considerations: If your client qualifies or has qualified for the LTC Waiver (EPD Waiver), they should be considered for the UHC Dual Choice DC-YL1 plan.

- EPD Waiver: The Elderly and Persons with Physical Disabilities (EPD) Waiver Program allows DC residents, who would otherwise require nursing home care, to receive services and supports while living in their home or in assisted living communities. Services include Adult Day Health Program, Assisted Living Facilities, Case Management Services, Community transition Services, Environmental Accessibility Adaptation Services, Homemaker Services, Participant-Directed Services (PDS: also called Services My Way), Personal Care Aide Services and Respite Services, among others.
- If a client needs help with their EPD Waiver application, send an email with their name and contact information to dconrolleeservices@uhc.com.

2027 Footprint



■ **Medicare-First Counties;**
New Enrollment Must be
Aligned

Plan Information

Plan Name	Enrollment Eligibility Requirements	SEP Options
<u>UHC Dual Choice DC-YL1</u> (HMO) H7464-010-000	Eligible Membership: Full Dual Only (FBDE, QMB+) with EDP Waiver Plan Focus: Must have full Medicaid benefits and have Elderly Persons with Disabilities (EPD) waiver. Joining this plan will also enroll you in District Dual Choice for a combined Medicare and Medicaid experience.	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.
<u>UHC Dual Choice DC-Y2</u> (Local PPO) H2406-053-000	Eligible Membership: Full Dual Only (FBDE, QMB+) Plan Focus: Must have full Medicaid benefits. Joining this plan will also enroll you in District Dual Choice for a combined Medicare and Medicaid experience.	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.
<u>UHC Dual Choice DC-Q001</u> (Local PPO) H2406-099-000	Eligible Membership: QMB Only (QMB) Plan Focus: Must be a Qualified Medicare Beneficiary with \$0 Medicare-covered services but not full Medicaid.	Limited SEPs: Outside of AEP and OEP, consumers are limited to special circumstance SEPs.