



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.

Dual Eligibles

239K

Dual Eligibles

160K

Full Dual Eligibles (67%)

65K

QMB Eligibles (27%)

13K

Partial Dual Eligibles (6%)

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

2027 Footprint



■ Medicare-First Counties;
New Enrollment Restrictions
Apply

Summary of 2027 Enrollment Requirements

New 2027 CMS Alignment Requirements Apply in Indiana; However, there is No 2027 Impact As The UHC Portfolio Is Already Structured to Support Alignment Where Needed

Any Dual-Eligible Consumer Can Enroll In A UHC D-SNP During AEP and MA-OEP

- There are no changes to enrolling in D-SNP plans during AEP and MA-OEP in Indiana. 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 During the Integrated Care SEP

- If your client is enrolled in any Indiana PathWays for Aging (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 either UHC PathWays Dual Care IN-Y1 or IN-YL (for LTC clients). Use the MMV tool linked in the QR code above to validate your client's eligibility before you submit the application.
- Non-Full Duals (e.g., LIS and QMB only) and Full Duals not enrolled in Indiana PathWays for Aging are subject to the same SEP rules as MA.
- Special circumstance SEPs still apply to all D-SNP consumers; client must be Medicaid eligible.

Additional Medicaid Information

- Medicaid Agency:** <https://www.in.gov/medicaid/members/member-resources/managed-care-health-plans/>
- PathWays for Aging Phone #:** 877-284-9294
- Open Enrollment:** The annual health plan selection and open enrollment period for Indiana PathWays for Aging runs from mid-October through mid-December, matching the Medicare annual enrollment period.
- Switch Rules:** PathWays for Aging permits changes in the first 90 days, during an annual mid-October to mid-December selection period, for just cause, for Medicare / Medicaid alignment, and once per calendar year for any reason at a time.

Plan Information

Plan Name	Enrollment Eligibility Requirements	SEP Options
<u>UHC PathWays Dual Care IN-YL</u> (Local PPO) H2385-004-000	Eligible Membership: Full Dual Only (FBDE, QMB+, SLMB+) <u>with Indiana Pathways for Aging & LTSS</u> Plan Focus: Must have full Medicaid benefits and be eligible for Indiana PathWays for Aging with Long-Term Services and Supports. After joining this plan, you'll receive a combined Medicare and Medicaid experience	Integrated Care SEPs: 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 PathWays Dual Care IN-Y1</u> (Local PPO) H2385-003-000	Eligible Membership: Full Dual Only (FBDE, QMB+, SLMB+) <u>with Indiana Pathways for Aging without LTSS</u> Plan Focus: Must have full Medicaid benefits and be eligible for Indiana PathWays for Aging without Long-Term Services and Supports. After joining this plan, you'll receive a combined Medicare and Medicaid experience.	Integrated Care SEPs: 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 Complete IN-S002</u> (Local PPO) H2385-001-000	Eligible Membership: Full Dual Only (FBDE, QMB+, SLMB+) <u>without Indiana Pathways for Aging</u> Plan Focus: Must have full Medicaid benefits and must not be eligible for Indiana PathWays for Aging.	Limited SEPs: Outside of AEP and OEP, consumers are limited to special circumstance SEPs.
<u>UHC Dual Complete IN-Q1</u> (Local PPO) H2385-002-000	Eligible Membership: QMB or Partial (QMB, SLMB, QI, QDWI) QMB 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.

Underlined are the dual eligibles most suited for each plan.