



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

214K

Dual Eligibles

144K

Full Dual Eligibles (67%)

32K

QMB Eligibles (15%)

38K

Partial Dual Eligibles (18%)

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 Virginia

- In 2027, there are new exclusively aligned enrollment CMS requirements for Full Dual eligibles (FBDE, QMB+, SLMB+) where UHC offers managed Medicaid:
 - One UHC D-SNP Option per Service Area. Full dual members will have one UHC plan available in each service area (excluding LTSS plans). UHC Dual Complete VA-Y4 will no longer accept new Full Dual enrollments in 2027.
 - 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 managed care plan, their Medicaid coverage will automatically transition to UHC's Medicaid plan after D-SNP enrollment.
Note: Consumers must already be enrolled in a Medicaid managed care plan before enrolling in a Full Dual D-SNP.

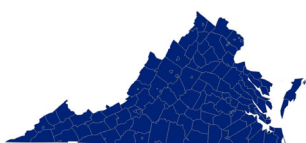
Any Dual-Eligible Consumer Can Enroll in a UHC D-SNP During AEP And MA-OEP

- Use the Jarvis Medicare and Medicaid Verification (MMV) tool to verify plan eligibility. See QR code above or navigate to Jarvis > Sales Tools > Medicare & Medicaid Eligibility Lookup.
- In order to enroll a consumer into a D-SNP 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.

Only Certain Dual-Eligible Consumers Can Enroll In A UHC Plan Using The Integrated Care SEP

- If your client is enrolled in Medicaid and is Full Dual eligible, they may qualify for the monthly Integrated Care SEP and may enroll in some plans listed below during SEP. To enroll in UHC Dual Complete VA-YL, your client must have a Waiver. Clients with a Waiver will show as eligible for UHC Dual Complete VA-YL in MMV.

2027 Footprint



■ Medicare-First Counties; New Enrollment Restrictions Apply

Summary of Medicaid Requirements

To Enroll In UHC Dual Complete VA-Y002, Client Must Be Enrolled In Medicaid Managed Care; To Enroll In UHC Dual Complete VA-YL, Client Must Be Enrolled in Medicaid Managed Care And Have A Waiver

- Full Dual consumers who select a UHC D-SNP will automatically receive all their Medicaid covered services through their UHC D-SNP.
- When enrolling members into UHC Dual Complete VA-YL, ensure that your client's LTC home health care provider is in network by using the UHC provider lookup tool Jarvis > Quick Access > Find a Doctor.

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. Consumers may only enroll in Medicaid during the open enrollment period for their locality, or with just cause.

- Cardinal Care Managed Care Help Line: 1-800-643-2273
- Medicaid Agency URL: <https://www.virginiamanagedcare.com/en>

Plan Information

Plan Name	Enrollment Eligibility Requirements	SEP Options
<u>UHC Dual Complete VA-YL</u> (HMO-POS) H2445-001-000	Eligible Membership: Full Dual Only (FBDE, QMB+, SLMB+) <u>w/ Waiver</u> Plan Focus: Must have full Medicaid benefits, be in managed care, and have a waiver. Joining this plan means you'll have UHC CardinalCare 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 Complete VA-Y002</u> (HMO-POS) H2445-003-000	Eligible Membership: Full Dual Only (FBDE, QMB+, SLMB+) Plan Focus: Must have full Medicaid benefits and be in managed care. Joining this plan means you'll have UHC CardinalCare 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 Complete VA-Q001</u> (HMO-POS) H2445-002-000	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.
<u>UHC Dual Advantage VA-V1</u> (HMO-POS) H2445-004-000	Eligible Membership: Partial Dual Only (SLMB, QI) Plan Focus: For those with partial Medicaid benefits who get help paying 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.
<u>UHC Dual Complete VA-Y4</u> (Local PPO) H0421-001-000	Frozen Enrollment: This plan isn't accepting new members starting January 1, 2027.	N/A: This plan isn't accepting new members starting January 1, 2027.