UnitedHealthcare 2027 Plan Year

Wisconsin | 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

185K
Dual Eligibles

166K
Full Dual Eligibles (90%)

4K
QMB Eligibles (2%)

14K
Partial Dual Eligibles (8%)

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

2027 Footprint

Medicaid-First Counties; New Enrollment Restrictions Apply

Counties with No UHC D-SNP

Summary of New 2027 Enrollment Requirements

New 2027 Alignment Requirements Apply in Wisconsin

- In 2027, there are new exclusively aligned enrollment CMS requirements for Full Dual eligibles (FBDE, QMB+, SLMB+) where UHC offers managed Medicaid. New requirements for Full Dual eligibles are:
  a. One Full Dual Plan per Service Area. Full dual members (FBDE, QMB+, SLMB+) will have only one UHC plan available per service area (excluding LTSS plans). Select plans will no longer accept full dual enrollments in 2027 (see Plan Information table below).
  b. New Full Dual Enrollment Must First Enroll in FFS or UHC Medicaid. During AEP, OEP and special circumstance SEPs, new full dual enrollees must enroll in either Fee-for-Service Medicaid or UHC's Managed Medicaid plan before they can enroll in a UHC D-SNP (detail on how to enroll is included below). Existing members can remain in their current Medicaid plan. ***Note:*** *In order to enroll using the Integrated Care SEP, consumers must have UHC Medicaid (be aligned).*

Use the Jarvis Medicare and Medicaid Verification Tool (MMV) to Verify Plan Eligibility Before You Submit the Application; See QR code above or navigate to Jarvis > Sales Tools > Medicare & Medicaid Eligibility Lookup.

Summary of UnitedHealthcare Medicaid Information

To enroll in UHC Dual Complete WI-YL or UHC Dual Complete WI-S1, clients must first enroll in either FFS Medicaid or UHC's Managed Medicaid plan.

Medicaid Enrollment Process: Agents may not assist clients in signing up for a Medicaid plan. Simply direct the client to the following resources where they can apply:

- ACCESS Wisconsin: https://access.wi.gov/s/?language=en_US
- Wisconsin Medicaid: 1-800-291-2002
- WI DHS Member Services Line: 1-800-362-3002

Medicaid Plan Name: UnitedHealthcare Community Plan

Medicaid Open Enrollment / Plan Switch Period: Medicaid Managed Care open enrollment occurs 90 days after initial enrollment, annually at their individual open enrollment period at redetermination (anniversary of signing up) or with just cause.

SLMB+ Considerations: The state of Wisconsin does not identify SLMB+ as having full Medicaid benefits. Therefore, these members may be subject to cost sharing and would be better suited on UHC Dual Advantage WI–V1.

Plan Information

Plan Name	Enrollment Eligibility Requirements	SEP Options
UHC Dual Complete WI-S1 (HMO-POS) **H3794-011-001** *Limited Footprint*	• **Eligible Membership:** Full Dual Only (FBDE, QMB+, SLMB+) • **Must have UHC Medicaid or FFS Medicaid** • **Plan Focus:** Must have full Medicaid benefits and Fee-For-Service Medicaid or UnitedHealthcare of Wisconsin, including SSI Medicaid, starting Jan. 1, 2027, to enroll in this 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. Consumers must have UHC Medicaid to use the Integrated Care SEP.
UHC Dual Complete WI-S1 (HMO-POS) **H3794-011-002** *Limited Footprint*	• **Eligible Membership:** Full Dual Only (FBDE, QMB+, SLMB+) • **Must have UHC Medicaid or FFS Medicaid** • **Plan Focus:** Must have full Medicaid benefits and Fee-For-Service Medicaid or UnitedHealthcare of Wisconsin, including SSI Medicaid, starting Jan. 1, 2027, to enroll in this 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. Consumers must have UHC Medicaid to use the Integrated Care SEP.
UHC Dual Complete WI-S1 (HMO-POS) **H3794-011-003** *Limited Footprint*	• **Eligible Membership:** Full Dual Only (FBDE, QMB+, SLMB+) • **Must have UHC Medicaid or FFS Medicaid** • **Plan Focus:** Must have full Medicaid benefits and Fee-For-Service Medicaid or UnitedHealthcare of Wisconsin, including SSI Medicaid, starting Jan. 1, 2027, to enroll in this 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. Consumers must have UHC Medicaid to use the Integrated Care SEP.

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Plan Information (Continued)

Plan Name	Enrollment Eligibility Requirements	SEP Options
UHC Dual Complete WI-Q1 (HMO-POS) **H3794-002-000**	• **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
UHC Dual Advantage WI-V1 (HMO-POS) **H3794-004-000**	• **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
UHC Dual Advantage WI-V2 (Local PPO) **H0294-027-000**	• **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.

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