

2024 Individual Exchange plans of Colorado

Quick reference guide

Please use this guide to quickly refer to the information you need to work with our UnitedHealthcare Individual Exchange plans, also referred to as UnitedHealthcare Individual & Family ACA Marketplace plans.



Example member ID cards

- 1 Plan name - includes the metal level of bronze, silver, gold or platinum
- 2 Group number - "ONEX" - plans offered on the Exchange, "OFEX" - plans offered off the Exchange
- 3 Referrals Required indicator (if applicable)*
- 4 Network

Colorado Doctors Plan HMO

Member:	Member ID: 111111377
	Group ID: COXXXX
1 RMHP Colorado Doctors Plan Gold Value-X Spec:DED+50%	
Copay:	Payer ID: 87726
PCP:\$0	Rx Bin: 610279
UC:\$75	Rx PCN: 7777
ER:DED+35%	Rx Grp: EXCCO
InPtHosp:DED+35%	
DED INDV/FAM \$2600/\$5200	OOPM INDV/FAM \$8700/\$17400
Med INN	
3 No PCP Referral Required 4 Colorado Doctors Plan HMO Network Underwritten by Rocky Mountain HMO, Inc.	
CO-DOI-508	

Monument Health HMO

Member:	Member ID: 111111111
	Group ID: COONEX
1 RMHP Monument Health Gold Value	
Copay:	Payer ID: 87726
PCP:\$0	Rx Bin: 610279
UC:\$50	Rx PCN: 7777
InPtHosp:DED + 20%	Rx Grp: EXCCO
Spec:\$50	
ER:\$500/DED + 20%	
DED INDV/FAM \$900/\$1800	OOPM INDV/FAM \$9450/\$18900
Tier 1:	
Tier 2:	\$2500/\$5000
3 No PCP Referral Required 4 Monument Health HMO Network Underwritten by Rocky Mountain HMO, Inc.	
Tier 2: Copays may vary	
HMO CO-DOI	

Monument ONE HMO

Member:	Member ID: 111111223
	Group ID: COXXXX
1 RMHP Monument One Gold Value-X	
Copay:	Payer ID: 87726
PCP:\$0	Rx Bin: 610279
UC:\$75	Rx PCN: 7777
InPtHosp:DED+35%	Rx Grp: EXCCO
Spec:DED+50%	
ER:DED+35%	
DED INDV/FAM \$2600/\$5200	OOPM INDV/FAM \$8700/\$17400
Med INN	
3 No PCP Referral Required 4 Monument ONE HMO Network Underwritten by Rocky Mountain HMO, Inc.	
HMO CO-DOI	

Rocky Mountain HMO Valley

Member:	Member ID: 111111111
	Group ID: COOFEX
1 RMHP Valley Gold Value-X	
Copay:	Payer ID: 87726
PCP:\$3	Rx Bin: 610279
UC:\$65	Rx PCN: 7777
InPtHosp:DED + 20%	Rx Grp: EXCCO
Spec:\$60	
ER:DED + \$300	
DED INDV/FAM \$1250/\$2500	OOPM INDV/FAM \$8700/\$17400
Med INN	
3 No PCP Referral Required 4 Rocky Mountain HMO Valley Network Underwritten by Rocky Mountain HMO, Inc.	
HMO CO-DOI	

Rocky Mountain Sky HMO

Member:	Member ID: 111111111
	Group ID: COOFEX
1 RMHP Sky Gold Value-X	
Copay:	Payer ID: 87726
PCP:\$3	Rx Bin: 610279
UC:\$65	Rx PCN: 7777
InPtHosp:DED + 20%	Rx Grp: EXCCO
Spec:\$45	
ER:\$500/DED + 20%	
DED INDV/FAM \$1350/\$2700	OOPM INDV/FAM \$9100/\$18200
Med INN	
3 No PCP Referral Required 4 Rocky Mountain Sky HMO Network Underwritten by Rocky Mountain HMO, Inc.	
HMO CO-DOI	

Sample member ID card for illustration only; actual information varies depending on payer, plan and other requirements.

All Individual Exchange plans require that members have an assigned primary care physician (PCP).

*We require referrals for the Colorado Option versions of Monument ONE HMO, Rocky Mountain HMO Valley and Rocky Mountain Sky HMO. We don't require referrals for the Colorado Option versions of Colorado Doctors Plan HMO or Monument Health HMO.



Individual Exchange plans page

Visit UHCprovider.com/exchanges to access the following resources:

- The 2024 Individual Exchange plans self-paced interactive guide
- State-specific prescription drug lists (PDLs)
- Our policies, coverage determination guidelines and prior authorization/notification requirements
- Individual Exchange plan news



UnitedHealthcare Provider Portal

UHCprovider.com/portal

The UnitedHealthcare Provider Portal allows you to quickly get the answers you need so you can save valuable time and get better documentation and visibility.

To access the secure portal and the following tools, please **create and/or sign in using a One Healthcare ID.**

Eligibility and benefits

UHCprovider.com/eligibility

We encourage you to verify member eligibility each time a patient presents for service.

Claims

UHCprovider.com/claims

To submit multi-payer transactions online or through a clearinghouse, please use the electronic data interchange (EDI) in the claims tool and enter the following:

- EDI 837 Health Care Claim Transaction
- Payer ID 87726

To learn more, please visit UHCprovider.com/edi.

You can also use the claims tool to submit reconsideration requests and appeals.

Prior authorization and notification

UHCprovider.com/paan

Call **800-711-4555** to request prior authorization for outpatient self-administered medications.

Unless otherwise allowed by state law, you must submit prior authorization requests electronically. We won't accept prior authorizations that require a referral unless a completed referral is on file.

To access prior authorization requirements and forms, please visit

UHCprovider.com/exchanges.

You can also use the claims tool to submit reconsideration requests and appeals.

Referrals

UHCprovider.com/referrals

Primary care physicians (PCPs) must submit referrals electronically, unless otherwise allowed by state law.

Referral requirements by plan*

Plan	Primary care physician (PCP) required?	Accessing care		
		Colorado plan	Colorado Option plan	Out-of-network benefits
Colorado Doctors Plan HMO	Yes	No referral needed	No referral needed	No coverage
Monument Health HMO	Yes	No referral needed	No referral needed	Coverage
Monument ONE HMO	Yes	No referral needed	Referral needed	Coverage
Rocky Mountain HMO Valley	Yes	No referral needed	Referral needed	Coverage
Rocky Mountain Sky HMO	Yes	No referral needed	Referral needed	Coverage

*We don't require referrals for Non-public Option plans.

Find in-network specialists

- **Online:** Visit UHCprovider.com/findprovider
- **Phone:** Call **888-478-4760**



Questions?

Connect with us through chat 24/7 in the [UnitedHealthcare Provider Portal](#). Call Individual Exchange plans Provider Services at **888-478-4760**, weekdays, 7 a.m.-7 p.m. CT.

UnitedHealthcare Individual & Family plans medical plan coverage offered by: UnitedHealthcare of Arizona, Inc.; Rocky Mountain Health Maintenance Organization Incorporated in CO; UnitedHealthcare of Florida, Inc.; UnitedHealthcare of Georgia, Inc.; UnitedHealthcare of Illinois, Inc.; UnitedHealthcare Insurance Company in AL, KS, LA, MO, NJ, and TN; Optimum Choice, Inc. in MD and VA; UnitedHealthcare Community Plan, Inc. in MI; UnitedHealthcare of Mississippi, Inc.; UnitedHealthcare of New Mexico, Inc.; UnitedHealthcare of North Carolina, Inc.; UnitedHealthcare of Ohio, Inc.; UnitedHealthcare of Oklahoma, Inc.; UnitedHealthcare of South Carolina, Inc.; UnitedHealthcare of Texas, Inc.; UnitedHealthcare of Oregon, Inc. in WA; and UnitedHealthcare of Wisconsin, Inc. Administrative services provided by United HealthCare Services, Inc. or its affiliates.