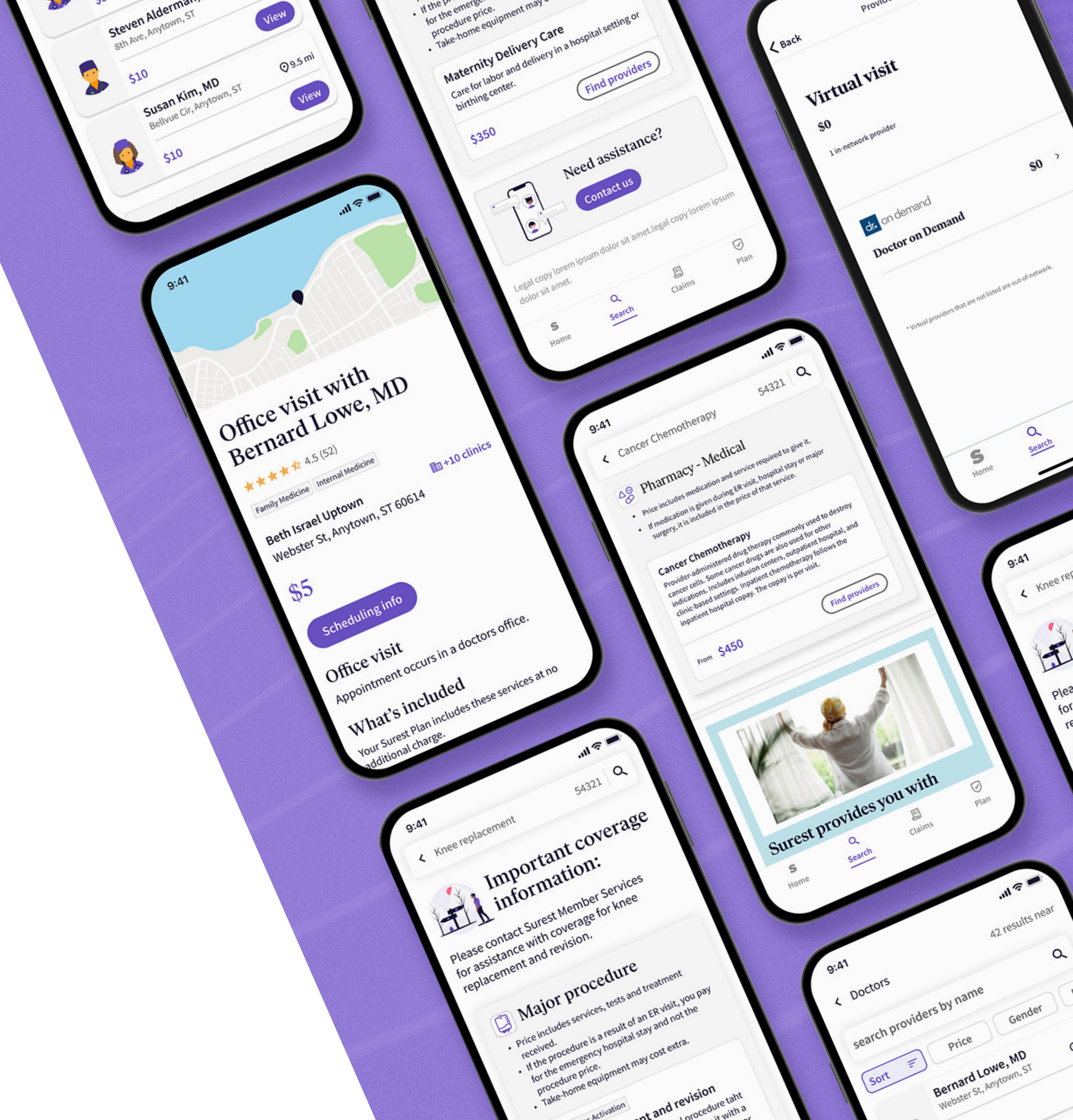


Surest Provider Guide





Get to know Surest

Use this provider guide to better understand our innovative health plan approach, find answers to common questions, help reduce confusion and administrative burdens, and to help avoid delays in registration, claims processing and payment.

Our goal with this guide is to help set you up for success, no matter what role you play within your organization.

Navigate this step-by-step guide by clicking on the links and arrows.

Let's jump in. >



About the Surest health plan

Clarity, options, opportunities to improve outcomes

Surest, a UnitedHealthcare® company, offers an ACA-compliant health plan to employers with 51+ employees. There are three types of funding arrangements: fully insured, self-funded and level-funded, and two plan designs — the Surest plan and Surest Flex, which includes the feature of flexible coverage.

With the plan, members access the UnitedHealthcare provider network, as well as other designated network providers.

The Surest plan provides coverage for:

- In-network preventive care
- Primary and specialty care
- Urgent, emergency and hospital care
- Chronic care for long-term and recurring illnesses
- Pharmacy
- Mental and behavioral health services
- Maternity care
- Cancer care
- Substance use disorder

How the Surest plan works:

- No deductible or coinsurance
- Members can check prices (copays) and compare care options in advance through the app, website or by calling Surest Member Services

Providers can easily check eligibility through UHCprovider.com or by calling the provider services number on the member's ID card.



Surest Flex: what to know

The Surest Flex plan includes the feature of flexible coverage. **For a limited number of plannable procedures, members must activate coverage at least three business days in advance.** For a sample list of coverages requiring activation, [go to page 13](#).



What you need to know

How Surest works with UnitedHealthcare and Optum

What's different about Surest

Tracking the patient journey through the revenue cycle

Surest, a UnitedHealthcare company, will be familiar in some ways and very different in others.

Members access the broad, national UnitedHealthcare and Optum networks. We are a UnitedHealthcare Company, but Surest operates separately from UnitedHealthcare.



To determine the network, flip the ID card over:

- California = Select network
- Utah = Options PPO network
- At this time, other states = UnitedHealthcare Choice Plus network

For questions about billing:

Make sure to use the correct payer ID and mailing address for claims.

For questions about eligibility and benefits:

Check [UHCprovider.com](https://www.uhcprovider.com) or call the provider service line at 1-844-368-6661.

For questions about prior authorization and advance notifications:

For most instances, these are the same as other UnitedHealthcare plans. But please call 1-877-237-0006 to confirm.

For administrative guide questions:

Check the UnitedHealthcare Provider Administrative Guide

For questions about flexible coverage:

Check out page 12.



What you need to know

How Surest works with
UnitedHealthcare and Optum

What's different about Surest

Tracking the patient journey
through the revenue cycle

It may be helpful to know how the Surest plan assigns prices to health services. After data points are analyzed, prices (copays) are lower for what the Surest plan considers higher-value options, such as those based on quality, efficiency and overall effectiveness of care.

Health services that often occur together — like combining the tests and services that go along with a major medical procedure — are grouped into a single price. This price is set in advance.

Verify member prices through UHCprovider.com or call the provider services line at 1-844-368-6661.





What you need to know

How Surest works with
UnitedHealthcare and Optum

What’s different about Surest

Tracking the patient journey
through the revenue cycle

Pricing can vary by service location.

Member prices may change based on careful analysis of data and a long-range view of how treatment information changes. For example, a quality care provider — as determined by national measures — might move to a new clinic. As a reflection of this move, a related price at the new location may go down. We believe this pricing model helps the care delivery community focus on value.

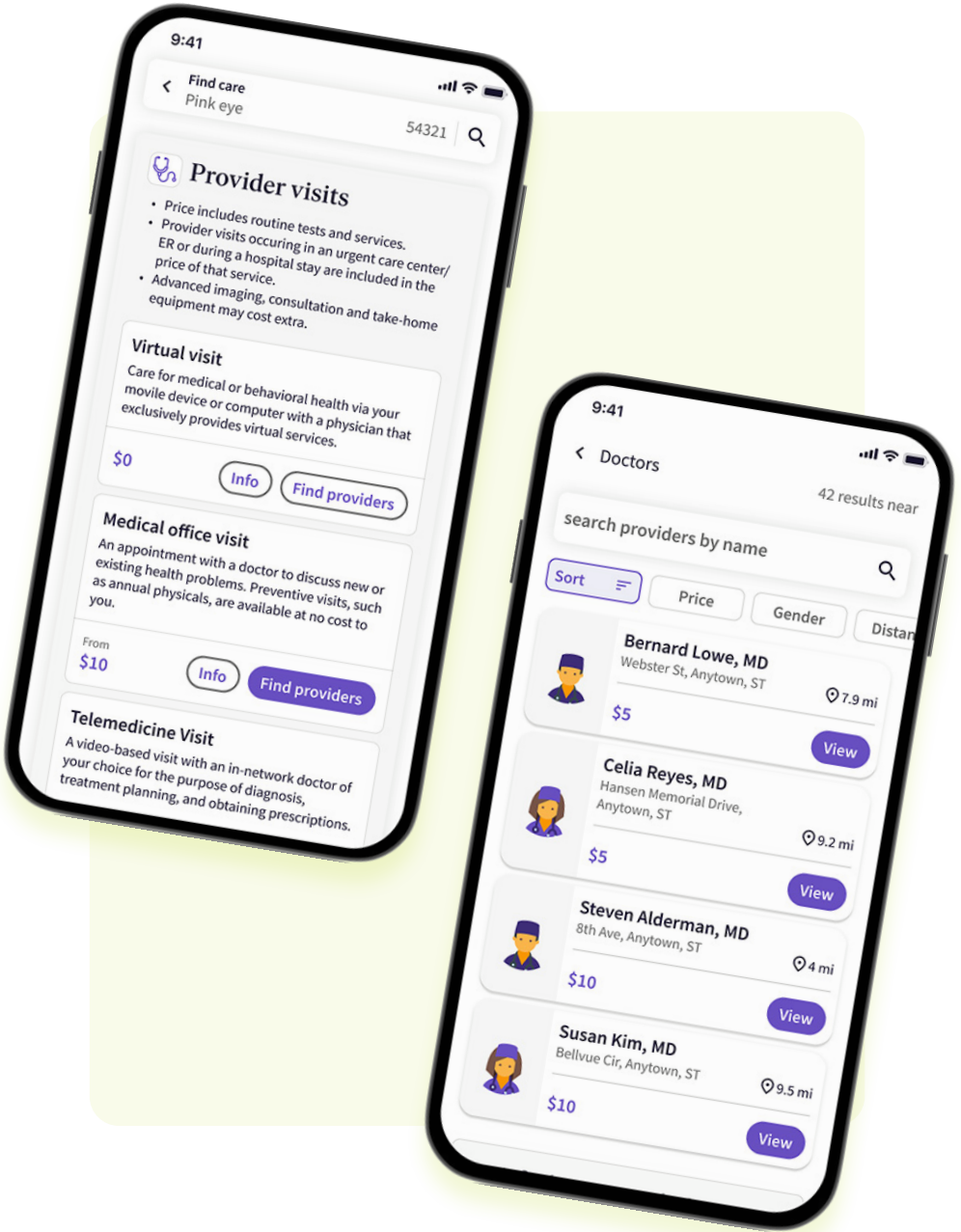
Example scenario



An MRI in Anytown may have a copay/member price of \$150, while the location down the street may have a copay/member price of \$375.



To understand how we score our providers for quality and efficiency rating, [view this document](#).





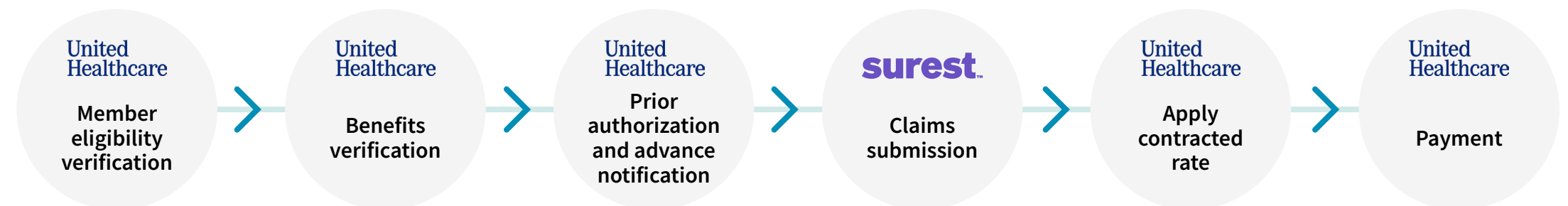
What you need to know

How Surest works with
UnitedHealthcare and Optum

What's different about Surest

Tracking the patient journey
through the revenue cycle

Understanding the systems you'll be accessing



Important contact information

For benefits verification, check UHCprovider.com or call 1-844-368-6661. (Search subscriber information, then identify the dependent.)

For prior authorization, call 1-877-237-0006 or submit electronically through UHCprovider.com.

For claims submission, submit claims to payer ID 25463. Apply UnitedHealthcare and Optum contracted rates.

In the sections that follow, we'll lead you through a step-by-step process for each department.

Ready to get started?
Let's go.



Getting set up

FUNCTION

Load the Surest payer ID

Check eligibility

Determine benefits and coverage

Check prior authorization / admission notification

Surest Flex

Submit claims



- ✓ Avoid delays in claims processing
Add the Surest payer ID number into your systems
- ✓ Payer ID 25463
- ✓ Surest may be entered as the insurance carrier
- ✓ The payer ID may be attached to multiple networks (e.g. UnitedHealthcare Choice Plus)
- ✓ Find the specific network on the member ID card




What to look for on a Surest ID card:

Cards may look different depending on employer and member address.*

Care type field denotes the plan type, the Surest health plan or Surest Flex





Subscriber
Mia Swenson

ID number
123456789123

Group 12345678
Payer ID 25463

Service type Medical, Rx
Care type Surest Flex

Dependents
John Sample 1234567890
Samantha Sample 1234567890
Katie Sample 1234567890
Alejandra Sample 1234567890

ID number
SAMPL123456
SAMPL123456
SAMPL123456
SAMPL123456

Rx PHARMACY
RX BIN 123456
RX PCN RX
RX GRP RX
RX ID RX

Copay Variable
Deductible \$0


Out-of-pocket maximum
Individual Family
In-network \$4,000 \$8,000
Out-of-network \$8,000 \$16,000

Self-insured coverage

Payer ID and claim mailing address
Medical Claims
Payer ID 25463
Surest
P.O. Box 211758
Eagan, MN 55121

Network and provider resources (may depend on provider location)
Providers
UnitedHealthcare® Choice Plus Network
Provider portal
UHCprovider.com
Provider help/eligibility
844-368-6661
PreCert
877-237-0006

Pharmacy type and contact information
Pharmacy
Rx PHARMACY
Claims address
P.O. Box 123
Anytown, USA
12345-9999
Pharmacies/ prescribers
855-123-4567


surest.com

Members We're here to help. Visit us at **surest.com** or call 866-683-6440 to check copays, view claims and benefits, find a doctor, or ask a question.



Getting set up

FUNCTION

Load the Surest payer ID

Check eligibility

Determine benefits
and coverage

Check prior authorization /
admission notification

Surest Flex

Submit claims



Ensure patient is an enrolled Surest plan member.



Check if Surest member has the Surest plan or the Surest Flex plan. The Flex plan includes flexible coverage. This means, for a set list of procedures, treatments and tests, coverage must be activated at least three business days in advance. (See next page for Surest Flex plan details.)



Check eligibility and benefits through UHCprovider.com or by calling the provider services number at 1-844-368-6661.



Check eligibility and benefit inquiry (271) transaction for Surest subscribers or dependents. Use Surest payer ID 25463 or “Surest” mnemonic in certain systems.



For benefit verification and claim submission, take note of subscriber number, as well as dependent number.



Getting set up

FUNCTION

Load the Surest payer ID

Check eligibility

Determine benefits and coverage

Check prior authorization / admission notification

Surest Flex

Submit claims

Flexible coverage for Surest Flex plans only:

1. Verify members activated the flexible coverage at least three business days prior to the procedure or test. Verify coverage at 1-844-368-6661.
2. The coverage is specific to the member, provider and place of service.
3. To view a sample list of coverages requiring activation, [go to page 13](#).

For UnitedHealthcare networks

Refer to the [UHCprovider.com](#) portal for references to UnitedHealthcare networks, or call the provider services number listed on the ID card. Optum Behavioral Health network applies for behavioral health services.

Checking eligibility and benefits? Search by subscriber name or ID. (Dependents are under subscriber name.)





Getting set up

FUNCTION

Load the Surest payer ID

Check eligibility

Determine benefits and coverage

Check prior authorization / admission notification

Surest Flex

Submit claims

Check prior authorization and admission notification requirements.

With the Surest plan, prior authorization and admission notification requirements will correspond with the member's UnitedHealthcare network (Choice Plus, Select or Options PPO). This list changes periodically. Updates are communicated in UnitedHealthcare Network News.

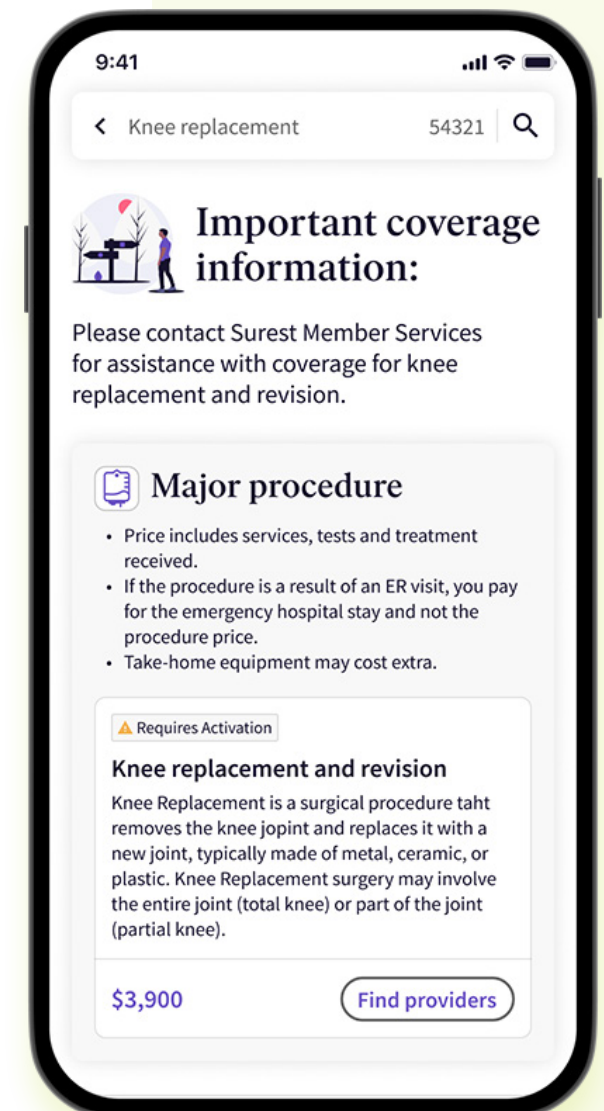
Surest has contracted with UnitedHealthcare Clinical Services to perform this function. **Call 1-877-237-0006 or visit UHCprovider.com for prior authorizations and admission notifications.**

Prior authorization and Surest Flex

In an outpatient setting, Surest Flex does NOT require prior authorization for procedures requiring activation. However, if the procedure is done in an inpatient setting, pre-admission notification is required. To check eligibility and confirm flexible coverage was activated in advance, call the provider services line at 1-844-368-6661.

If a Surest Flex plan member fails to activate flexible coverage for a medically-necessary procedure, their provider may receive a lack of coverage notification.

If you receive this notification, it means the member has not activated coverage for the procedure. Members **MUST** activate coverage at least three business days in advance. **If coverage is not activated, the claim(s) will be denied as member responsibility.**





Getting set up

FUNCTION

Load the Surest payer ID

Check eligibility

Determine benefits
and coverage

Check prior authorization /
admission notification

Surest Flex

Submit claims

Information about Surest Flex

Some Surest members have the Surest Flex plan,
which includes flexible coverage.

What treatments require coverage activation prior to treatment by the member? (Not applicable to all members.)

The Surest Flex plan includes the flexibility to activate coverage for a list of plannable treatments and procedures (think: knee replacement). Members activate coverage for their preferred provider at least three business days in advance of receiving the care. See a sample list on the next page. **Each employer may have a different list, so please consult the member's specific benefits.**

If a member activates coverage, has the procedure, then needs follow-up care, how is that handled? (E.g. If a member sees an orthopedic surgeon or physical therapist post-surgery.)

Additional services are covered following the procedure. Surest members pay a copay for post-procedure services and follow-up visits.

Are members covered in emergency situations that would otherwise require activating coverage?

If a procedure occurs within an emergency encounter or when related to cancer treatment, activation of coverage is not required for eligible Surest members.





Getting set up

FUNCTION

Load the Surest payer ID

Check eligibility

Determine benefits
and coverage

Check prior authorization /
admission notification

Surest Flex

Submit claims

Information about Surest Flex

If a member needs a procedure on the list of flexible coverages, when should I call the pre-certification number?
Providers should call to verify eligibility and benefits for members under the Surest Flex plan. **Coverage must be activated at least three business days before treatment occurs and is active for a period of 120 days.** Prior authorization is not required for these procedures under a Surest Flex plan, but advance notification is required for inpatient services.

Surest Flex coverages that require activation

Note: List is sample only and may vary based on customer and plan year.

Musculoskeletal

- Ankle and Foot Bone Fusion
- Ankle Arthroscopy and Ligament Repair
- Ankle Replacement and Revision
- Bunionectomy and Hammertoe Surgery
- Carpel Tunnel Surgery
- Cervical Spine Disc Decompression
- Cervical Spine Fusion
- Elbow Arthroscopy and Tenotomy
- Elbow Replacement and Revision
- Ganglion Cyst Surgery
- Hip Arthroscopy and Repair
- Hip Replacement and Revision
- Knee Arthroscopy and Repair
- Knee Replacement and Revision
- Lumbar Spine Disc Decompression
- Lumbar Spine Fusion
- Morton's Neuroma Surgery

- Plantar Fasciitis Surgery
- Shoulder Arthroscopy and Repair
- Shoulder Replacement and Revision
- Spinal Cord Stimulator
- Wrist and Hand Joint Replacement
- Wrist Arthroscopy and Repair

Cardiovascular

- Cardiac Ablation
- Carotid Endarterectomy and Stents
- Coronary Artery Bypass Graft Surgery
- Coronary Catheterization and Percutaneous Coronary Interventions
- Pacemakers and Defibrillators
- Valve Replacement

ENT

- Sinus and Nasal Septum Surgery
- Tonsillectomy and Adenoidectomy

Gastrointestinal

- Bariatric Surgery
- Gallbladder Removal Surgery (Cholecystectomy)
- Hernia Repair
- Reflux and Hiatal Hernia Surgery

Other

- Breast Reduction Surgery
- Cataract Surgery
- Fibroid Removal (Myomectomy)
- Hysterectomy
- Kidney Stone Ablation and Removal (Lithotripsy)
- Prostate Removal Surgery
- Sling Surgery for Female Urinary Incontinence



Getting set up

FUNCTION

Load the Surest payer ID

Check eligibility

Determine benefits
and coverage

Check prior authorization /
admission notification

Surest Flex

Submit claims

Your checklist



Ensure claims are going to Surest payer ID 25463 or PO Box 211758, Eagan, MN 55121



Include the rendering address if different than billing. (This will confirm the copay.) If not included, the member price may be incorrect on claim processing.



For Surest Flex, utilize the list of procedures provided to help members activate flexible coverage.



Claims are based on contracted TINs, per network contracts. **To ensure correct payment, manage adds, terms or changes in a timely fashion directly through UnitedHealthcare or Optum.**



Submit claims with subscriber information.
If for a dependent, include the dependent's name in the appropriate field.

Ready to start
submitting claims?



Frequently asked questions

What to know about Surest and pricing

The Surest pricing model:

Prices are typically lower for what we consider higher-value options, such as those based on quality, efficiency and overall effectiveness of care.

With this data, prices can vary within the same practice.

The member price does not impact payment to providers. Payment is contract-based (UnitedHealthcare and Optum Behavioral Health).

Other important factors:

- If you contract with UnitedHealthcare or Optum Behavioral Health, you're a participating provider for Surest plan members.
- Separate credentialing is not required.
- You do not need to adjust your system if you're already set up for ERAs and electronic funds transfer (EFT).
- Payment is set for the network contract rates you have in place. The member copay does not affect the active fee schedule.

How do I change my price?

Price changes are based on performance data. Surest uses the UnitedHealthcare Choice Plus network, along with historical data, to assign prices and reflect up-to-date understanding of the value of treatment a provider offers. At this time, Surest is not able to modify copays/member prices and cannot change copays at the request of the provider.

What if I want a different copay/member price? Can decisions be reconsidered?

Copay/member price ranges are ultimately the decision of the plan sponsor. Surest cannot change the copay/member price range. At this time, Surest is not able to modify copays/member prices within the range and cannot change copays at the request of the provider. Surest will evaluate scenarios such as a provider location moving from one address to another and billing from the same tax ID.

What treatments require coverage activation prior to treatment by the member? (Not applicable to all members.)

The Surest Flex plan includes the flexibility to activate coverage for a list of plannable treatments and procedures (think: knee replacement). Members activate coverage for their preferred provider at least three business days in advance of receiving the care. [See sample list on page 13.](#) Each employer may have a different list, so please consult the member's specific benefits.



Frequently asked questions

Benefits and coverage

Are there medical policies that need to be followed to indicate medical necessity?

Surest follows medical necessity and utilization management guidelines from UnitedHealthcare. The medical policies are publically available on UHCprovider.com.

Can you tell me how many members are in my state? Region? City?

Please contact your UnitedHealthcare provider advocate for this information. The Surest plan is offered nationwide to employers with 51+ employees and currently serves more than 200,000 members.

Are referrals required for a member to see a specialist?

Referrals are not required for Surest members.

Does the Surest plan provide coverage for vision or dental services (either routine or medical)?

We encourage providers to verify benefits on UHCprovider.com or via the Surest Provider Line at 1-844-368-6661.

If a service doesn't require prior authorization, how do I know that it's covered?

Verify eligibility and coverage by calling the Surest Provider Line at 1-844-368-6661.



Frequently asked questions

Information about claims, appeals and retrospective reviews

How can I check the status of a claim?

After a claim has been submitted, quickly check claims status on UHCprovider.com or call 1-844-368-6661 to speak with a specially trained UnitedHealthcare Shared Services Provider Service Representative.

For details on how to file an appeal, visit Surest.com/provider-appeals.

When do I call Surest versus using the portal?

Providers may call the provider service phone number on the member ID card for benefits and eligibility, or if they are unable to find the information they need from UHCprovider.com or 271 response.

Is there a way to see how facilities and physicians rank in comparison to others?

Currently, there is no way to see how facilities and physicians rank.

Where do provider claim reconsiderations go?

UHCprovider.com

Claim Payment Disputes: 844-368-6661

Clinical Appeals: Please reference the instructions provided in the denial letter.

UHSS - Claims
P.O. Box 30783
Salt Lake City, UT 84130
Fax: 866-427-7703

How to file a clinical appeal

If you are a provider filing a clinical appeal (for prior authorization or other), you can:

Mail:

Surest Appeals
P.O. Box 31270
Salt Lake City, UT 84131
Fax: Urgent appeal: 866-748-7304 Non-urgent appeal: 866-748-7820
Phone: 800-808-4424 ext. 15227

Please remember to attach all supporting materials to the appeal request, including member-specific treatment plans or clinical records.



Frequently asked questions

Information about claims

What's the difference between claim reconsiderations and clinical appeals?

Claim reconsiderations are when a provider disagrees with the outcome of a processed claim (payment, correction or denial), where applicable. Clinical appeals are only for services that were not approved following a medical necessity review. Follow the instructions in the denial letter:

Mail:

Surest Appeals

P.O. Box 31270

Salt Lake City, UT 84131

Fax: Urgent appeal: 866-748-7304 Non-urgent appeal: 866-748-7820

Phone: 800-808-4424 ext. 15227

Where do I send claims?

All claims should be routed to Surest following the instructions on the member ID card.

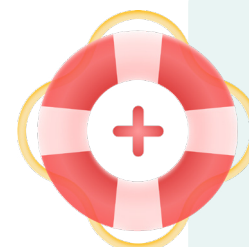
Electronic claims to: 25463

Paper claims to:

Surest

P.O. Box 211758

Eagan, MN 55121



Still have questions? Get in touch.

Please contact the Surest Provider Line at 1-844-368-6661.

For more information about Surest, visit [Surest.com/providers](https://www.surest.com/providers).