

November 01, 2022

Reconsideration and appeal submissions going digital

Affects network commercial and Medicare Advantage health care professionals and facilities

Last modified: Jan. 18, 2023.

Updates: Article now includes additional benefits to digital submissions, reconsideration and appeals-specific training guide, updated instructions for accessing API Marketplace and Medicare Supplement plan exclusion.

In 2023, our work to replace paper with digital tools will shift to eliminating paper you send to us. This change:

- Eliminates postal delays, lost mail, and processing time for UnitedHealthcare to receive and scan the documents into our system
- May make it easier for health care professionals to meet reconsideration and appeal timely filing deadlines by eliminating mail times

As a result, beginning Feb. 1, 2023, you'll be required to submit claim reconsiderations and post-service appeals electronically. This change affects most* network health care professionals (primary and ancillary) and facilities that provide services to commercial and UnitedHealthcare® Medicare Advantage plan members. This does not affect pre-service clinical appeals.

Please share the following changes and digital workflow options with your team, including outside vendors, such as revenue cycle management companies.

Electronic submission options


1. **UnitedHealthcare Provider Portal:**

- Go to UHCprovider.com > Select Sign In at the top-right corner
- Sign in to the portal with your One Healthcare ID and password
 - If you are a new user and don't have a One Healthcare ID, visit UHCprovider.com/access to get started
- In the menu, click Claims & Payments > Look up a Claim to search by the claim number and click Act on Claim

2. **Application Programming Interface (API):** Consider submitting reconsiderations and appeals through API. Data can be distributed to your practice management system or any application you prefer. API requires technical programming between your organization and

UnitedHealthcare.

To get started:

- Go to the [API Marketplace](#) 
- Sign in to the marketplace with your One Healthcare ID and password
- Click **Start Registration Request** button on the homepage
- On the “Welcome” screen, select your organization type and click **Register**
- Enter the tax ID number (TIN) and click **Next**
- Follow the prompts to complete the registration process

Please allow 2 business days for our API Consultants team to contact you.

Note: Attachments cannot be sent for other types of claim submissions.

Reminder: Submission requirements

There is a 2-step process for network health care professionals and facilities if they don't agree with the outcome of the original claim payment or denial. (Claim reconsiderations don't apply to some states based on applicable state law.)

Step 1 is to file a claim reconsideration request. Step 2 is to file an appeal if you disagree with the outcome of the claim reconsideration decision. The 2-step process allows for a total of 12 months for timely submission of both steps. More information can be found in the Network Administrative Guide at UHCprovider.com/guides.

What's ahead in paperless

In 2023, you can expect more paper submissions and mailings we send you to go digital. Later in 2023, we'll require you to submit claims and claim attachments electronically. We'll also continue to encourage UnitedHealthcare commercial members to use digital ID cards.

All required paperless transitions will be announced in [Network News](#) at least 90 days prior to the change. We encourage you to explore our digital solutions and review your workflows so that your team is prepared. Review the most up-to-date information, exclusions and schedule at UHCprovider.com/digital.

Questions?

Please contact UnitedHealthcare Provider Services at **877-842-3210**, TTY/RTT **711**, 7 a.m.–5 p.m. CT, Monday–Friday.

For help accessing the portal and technical issues, please contact UnitedHealthcare Web Support at providertechsupport@uhc.com or **866-842-3278**, option 1, 7 a.m.–9 p.m. CT, Monday–Friday. Primary Access Administrators may also contact Web Support for help updating notification emails.

***Currently excludes: UnitedHealthcare commercial and Medicare Advantage Plans of Colorado, Pharmacy, Behavioral Health, Overpayment Reconsiderations & Appeals requests, Capitated and delegated health care professionals, All Savers, Medicare Supplement plan, OneNet PPO, Preferred Care Network, Preferred Care Partners (delegated), Rocky Mountain Health Plan, Sierra Health & Life, Student Resources, Surest (formerly Bind), UnitedHealthcare FlexWork, UHC Global, UHC West, UMR, and UHOne/Golden Rule.**



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