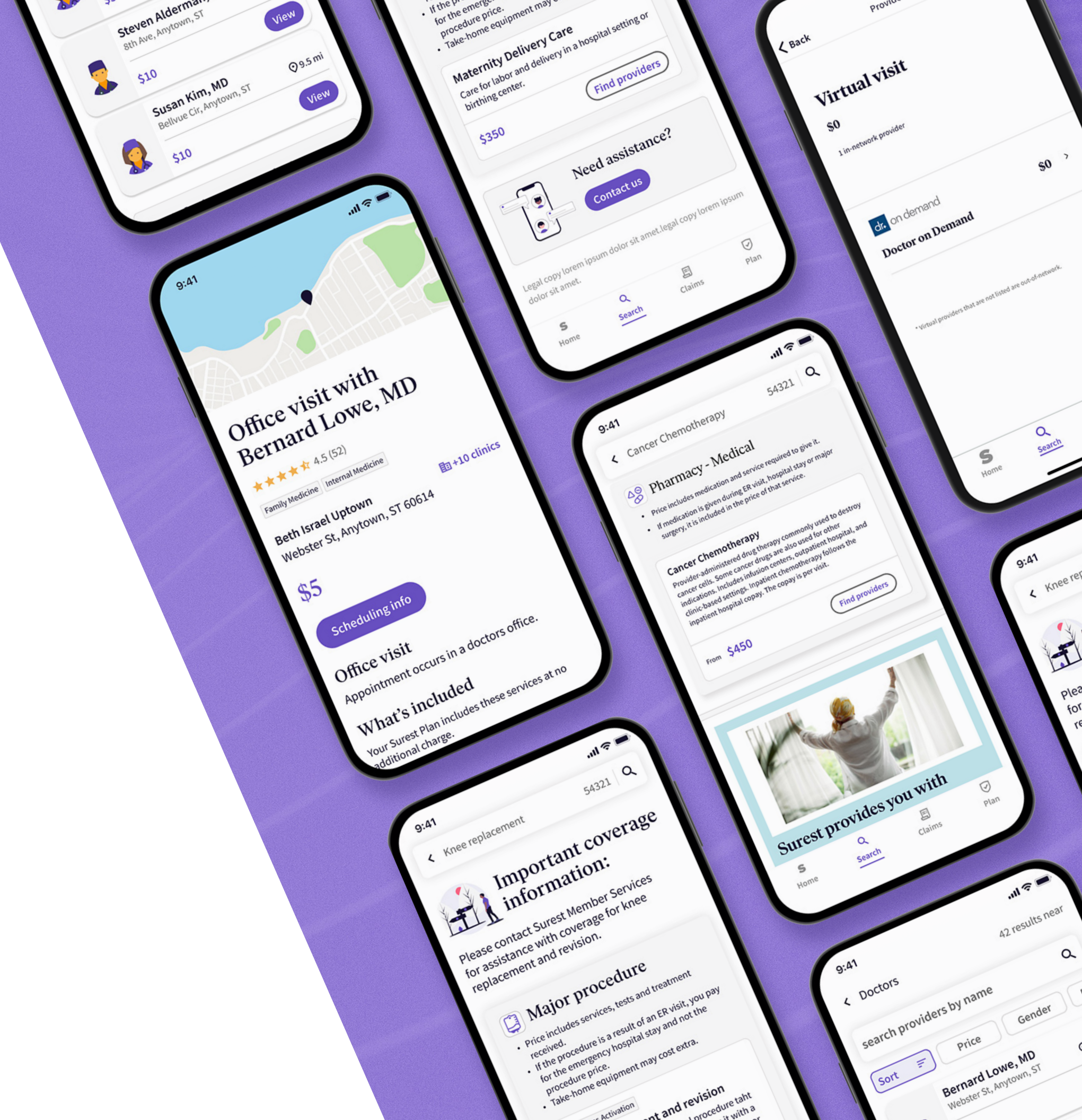


# Surest Provider Guide







# 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](https://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

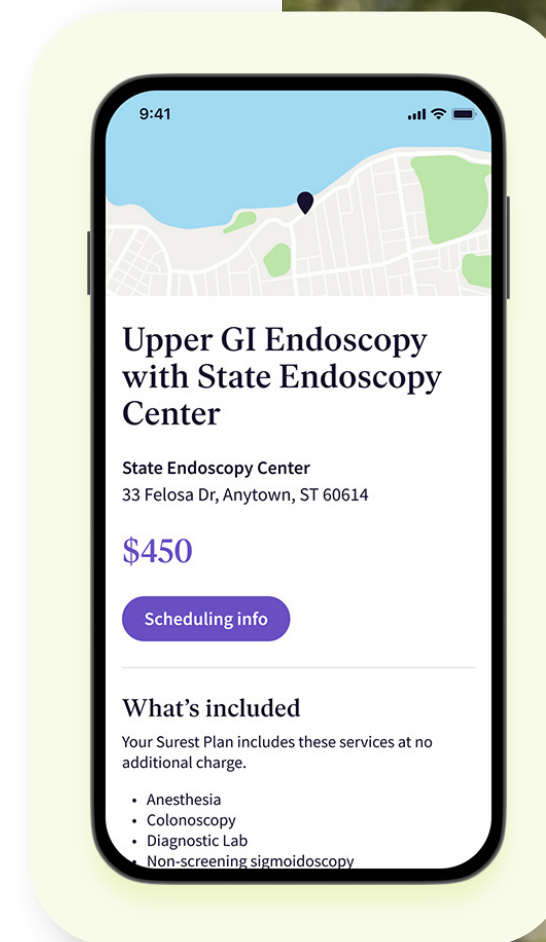
**What's different about Surest**

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](https://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.

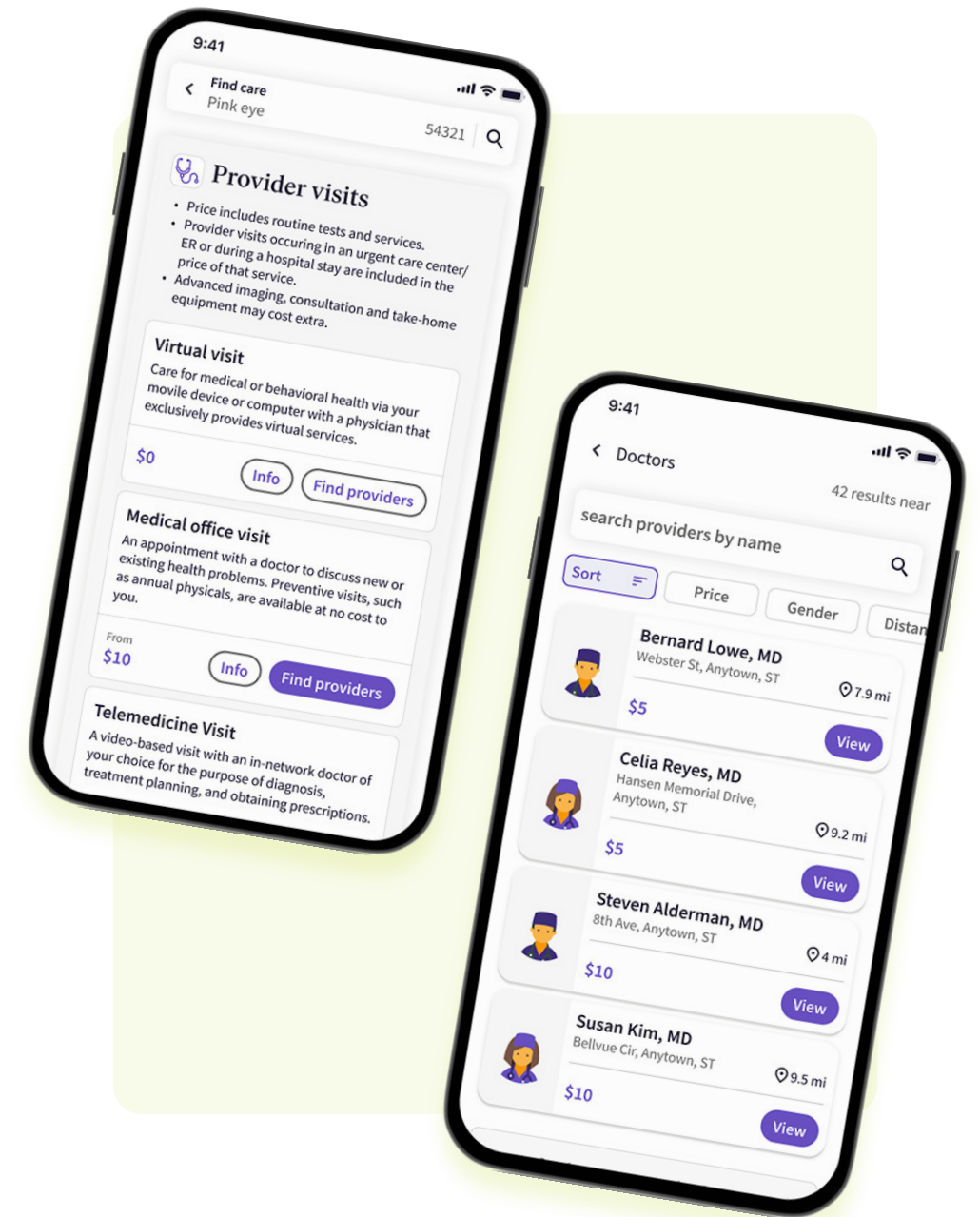
### Example scenario



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](#).





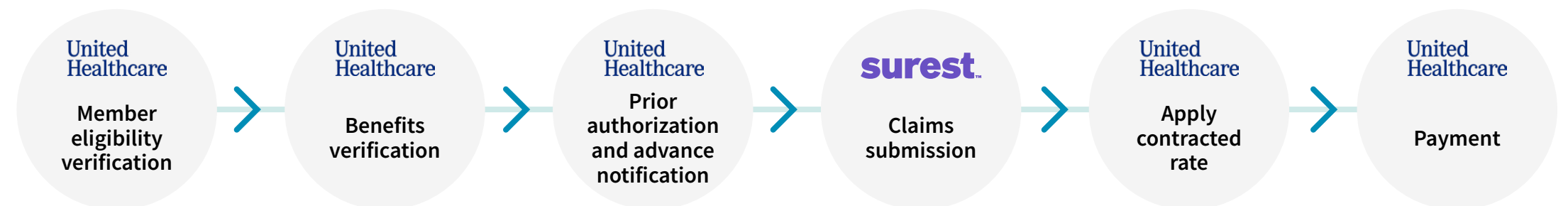
# What you need to know

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](https://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](https://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

<b>surest.</b>		Group <b>12345678</b> Payer ID <b>25463</b> Effective Date <b>00/00/0000</b>
<b>Subscriber</b> Mia Swenson	<b>ID number</b> 123456789123	<b>Rx PHARMACY</b> RX BIN 123456
<b>Dependents</b> Ty Swenson Benjamin Swenson Bella Swenson	123456789124 123456789125 123456789126	RX PCN RX RX GRP RX Copay Variable
<b>Service type</b> Medical Rx	<b>Care type</b> Surest health plan	<b>Deductible</b> \$0
<b>Access costs</b> Benefits.Surest.com	<b>Member Services</b> 1-866-683-6440	<b>Out-of-pocket maximum</b> Individual Family In-network \$4,000 \$8,000 Out-of-network \$8,000 \$16,000

Payer ID and claim mailing address

Network and provider resources (may depend on provider location)

Pharmacy type and contact information

**Claims**  
**Surest**  
Payer ID **25463**  
Surest  
P.O. Box 211758  
Eagan, MN 55121  
**Claims will only be accepted at the above Payer ID or address.**

**Networks**  
UnitedHealthcare® Choice Plus Net work  
**Provider Portal**  
UHCprovider.com  
**Provider Help/Eligibility**  
1-844-368-6661  
**PreCert**  
1-877-237-0006

**Pharmacy**  
**Rx PHARMACY**  
**Pharmacy Name**  
P.O. Box 123  
Anytown, USA  
12345-9999  
**Pharmacies/Prescribers**  
1-855-123-4567

This card does not guarantee coverage.





# 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](https://www.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](https://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.

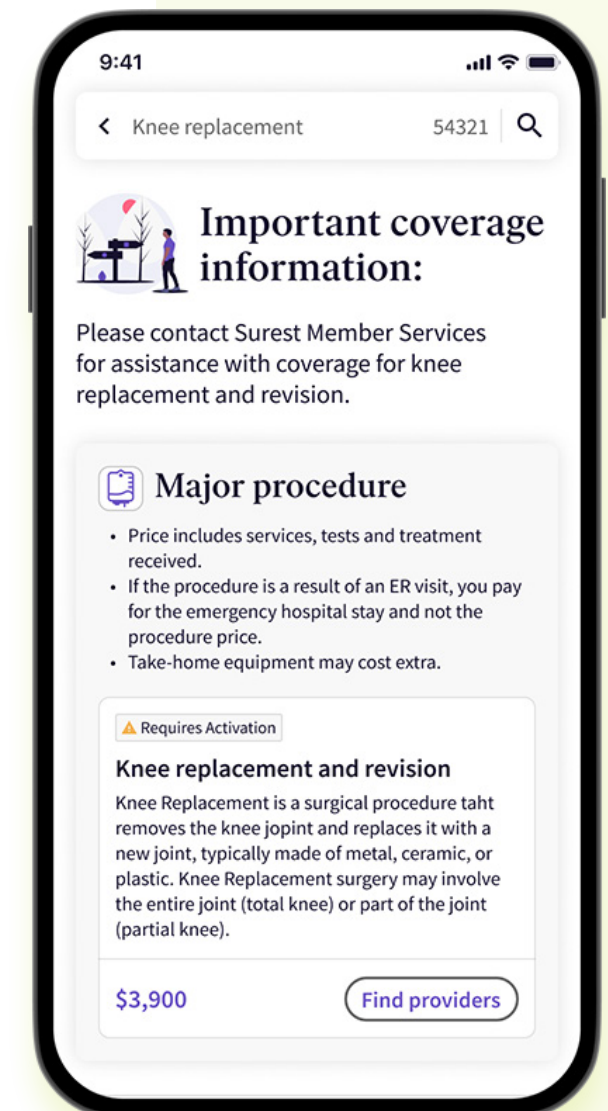
Surest has contracted with UnitedHealthcare Clinical Services to perform this function. **Call 1-877-237-0006 or visit [UHCprovider.com](https://UHCprovider.com) for prior authorizations and admission notifications.**

## 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 Suresure payer ID

Check eligibility

Determine benefits and coverage

Check prior authorization / admission notification

**Suresure Flex**

Submit claims

## Information about Suresure Flex

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

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

The Suresure 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. Suresure 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 Suresure 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](https://www.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](https://www.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](https://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](https://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](https://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](https://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  
PO 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.

Please submit claim reconsiderations in the portal by clicking Sign In at the top right of this page. For more information, see our [Claims reconsideration quick start guide](#).

Or, send claim reconsiderations by mail to:

**Mail:**

UHSS

Attn: Claims

P.O. Box 30783

Salt Lake City, UT 84130

**Fax:** 866-427-7703

If applicable, please send the claim to the attention of the representative you spoke with.

### Where do I send claims?

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

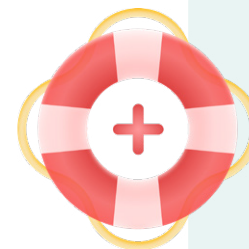
**Electronic claims to:** 25463

**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).