

Provider Quick Reference Guide

All Savers Insurance Company

All Savers Insurance Company (ASIC), administered by UnitedHealthcare Services, Inc., offers health plans built for small businesses. These plans can include built-in credit in the form of first dollar coverage to help employees pay for their everyday health care expenses before they meet their deductible.

- The All Savers plans are now being offered to employers in your area.
- Members with All Savers plans have access to the UnitedHealthcare Choice Plus network with the exception of Mayo Clinic facilities.
- No separate dental or vision plans are available.



Paper Claims Address

UnitedHealthcare - All Savers Plans
P.O. Box 31375
Salt Lake City, UT 84131-0375

Claims Reconsiderations

- **Customer Service**
800-291-2634
- **Formal Appeals Address**
United HealthCare Services, Inc.
Appeals Review
P.O. 31371
Salt Lake City, Utah, 84131-0371



Notification/Authorization Requirements

- Please refer to the All Savers Supplement in the 2014 UnitedHealthcare Administrative Guide for a full list of notification and authorization requirements.
- Notification: Call the number on the back of the member's ID card or **800-291-2634**.
- Hospitalizations require notification on the day of the admission or as soon as reasonably possible for emergency inpatient admissions. A notification of five days is required prior to transplant evaluations, clinical trials, durable medical equipment costing more than \$1000, and prosthetic devices.
- Benefits and Eligibility: Call the number on the back of the member's ID card or **800-291-2634**.
- Pharmacy Services: **myAllSavers.com** or call the pharmacy number on the back of the member's ID card.



Pharmacy Services

For pharmacy information, please refer to the back of the member ID card or call **800-797-9791**.



Online access to information at myAllSaversProvider.com

From the **myAllSaversProvider.com** home page, click on "Register Now" and follow the five steps of the registration process. The following resources:

- Verify member benefits and eligibility
- View and print claims detail and payment summaries
- Claim address
- Frequently asked questions
- Contact information including claim submission addresses and Provider Services phone numbers



Electronic Claim Submissions and Payer ID

For claims submitted electronically, please use payer ID 81400. If you have questions, call **800-291-2634**.



Member Identification (ID) Cards

UnitedHealthcare
 Health Plan (80840)911-81400-00
 MemberID: C00000000 Group Number:5400-000000
 Member:
 00 MEMBER SAMPLE

OPTUMRx
 Rx BIN: 610279
 Rx PCN: 9999
 Rx GRP: UGRI

Copay: Office: \$20
 ER: \$350

3010

UnitedHealthcare
 Choice Plus Network
 Effective Date: 02/01/2014
 Administered by UnitedHealthcare Services, Inc

All Savers Alternate Funding

Issued: 01/29/2014

Notification is required for inpatient stays at the time of admission and as soon as possible for emergency admissions. It is required 5 days before a transplant evaluation and selected medical services. Call the customer service number to avoid potential penalty. Notification does not guarantee coverage or payment.
 For Members: www.myallsaversmember.com 800-291-2634

For Providers: www.myallsaversprovider.com 800-291-2634
 CLAIMS: EDI # 81400, AMS PO Box 31375, Salt Lake City, UT 84131-0375

MultiPlan

Pharmacy Claims: OptumRX, PO Box 29044, Hot Springs, AR 71903
 Pharmacists: 855-816-6618

ALL SAVERS
 INSURANCE
 Health Plan (80840)911-81400-00
 Insured ID: C00000001 Group Number:5400-000000
 Insured:
 00 MEMBER R SAMPLE

OPTUMRx
 Rx BIN: 610279
 Rx PCN: 9999
 Rx GRP: UGRI

Copay: Office: \$40
 ER: \$200
 HOSP: \$400

3010

UnitedHealthcare
 Choice Plus Network
 Effective Date: 01/01/2014
 Underwritten by All Savers Insurance Company

Issued: 01/29/2014

Notification is required for inpatient stays at the time of admission and as soon as possible for emergency admissions. It is required 5 days before a transplant evaluation and selected medical services. Call the customer service number to avoid potential penalty. Notification does not guarantee coverage or payment.
 For Insureds: www.myallsaversmember.com 800-291-2634

For Providers: www.myallsaversprovider.com 800-291-2634
 CLAIMS: EDI # 81400, AMS PO Box 31375, Salt Lake City, UT 84131-0375

MultiPlan

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