



Overview

This guide will help you understand which consumers may be eligible to enroll in a UnitedHealthcare D-SNP plan and determine which plans can be offered during the Integrated Care Special Enrollment Period (SEP).

Dual Eligibles

69K

Dual Eligibles

43K

Full Dual Eligibles (62%)

14K

QMB Eligibles (21%)

12K

Partial Dual Eligibles (17%)

UHC D-SNP Service Area Only; estimates based on June 2024 CMS.gov data

Summary of D-SNP Enrollment Eligibility

Any dual-eligible consumer can enroll in a UHC D-SNP plan during AEP and MA-OEP

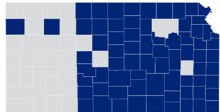
1. There are no changes to enrolling in D-SNP plans during AEP and MA-OEP. Use the Jarvis Medicare and Medicaid Verification (MMV) tool linked on the D-SNP landing page to verify plan eligibility (see QR code above or navigate to Jarvis > Sales Tools > Medicare & Medicaid Eligibility Lookup).

Only certain dual-eligible consumers can enroll in a UHC plan using the Integrated Care SEP (see below)

1. If your client has the UHC Medicaid plan and is Full Dual eligible (FBDE, QMB+, SLMB+), your client may be eligible for the monthly Integrated Care SEP and may enroll in any of the plans listed below. Use the MMV tool linked in the QR code above to validate your client's eligibility before you submit the application.
 - a. Full Dual eligible consumers with other KanCare Medicaid carriers will not be eligible to switch to a UHC D-SNP plan during SEP and are subject to Medicaid open enrollment period rules to switch to the UHC Medicaid plan (see below).
2. Special circumstance SEPs still apply to all D-SNP consumers. Refer to the D-SNP Landing Page for more information (QR code or Jarvis file path above).

2026 Footprint

Partial footprint of plans eligible to sell using the Integrated Care SEP (to UHC KanCare Medicaid)



Counties with no UHC D-SNP Plan
Counties with Integrated Care SEP available

Summary of UnitedHealthcare KanCare Medicaid Information

To enroll in a UHC D-SNP plan using the Integrated Care SEP, clients must first enroll in the UHC Medicaid plan.

Medicaid Enrollment Process: Agents may not assist clients in signing up for a KanCare Medicaid Managed Care plan. Simply direct the client to the KanCare Enrollment Center number below.

- 1-866-305-5147 or TDD/TTY 1-800-766-3777 | Hours: Monday-Friday 7:30am-5:30pm

Medicaid Plan Name: UnitedHealthcare Community Plan

Medicaid Enrollment Period: Enrollees can change plans during their initial Choice Period and each year during their Annual Open Enrollment. For more information, direct client to contact the KanCare Enrollment Center number above.

Plan Information (Click plan name for details)

Plan Name	Plan Eligibility and Overview	Is Integrated Care SEP Available?
<u>UHC Dual Complete KS-S001</u> (HMO-POS D-SNP) H0169-004-000 **Limited Footprint**	Eligible Membership: Full Dual Only (FBDE, QMB+, SLMB+) Plan Focus: Must have full Medicaid benefits. \$243 credit every month for OTC, plus healthy food and utilities for qualifying members.	Yes , consumers must be enrolled in the UHC Medicaid plan to enroll in this plan using the Integrated Care SEP
<u>UHC Dual Complete KS-S002</u> (HMO-POS D-SNP) H5322-029-000 **Limited Footprint**	Eligible Membership: Full Dual Only (FBDE, QMB+, SLMB+) Plan Focus: Must have full Medicaid benefits. \$197 credit every month for OTC, plus healthy food and utilities for qualifying members.	Yes , consumers must be enrolled in the UHC Medicaid plan to enroll in this plan using the Integrated Care SEP
<u>UHC Dual Complete KS-Q1</u> (HMO-POS D-SNP) H0169-010-000 **Limited Footprint**	Eligible Membership: QMB Only Plan Focus: Must be a Qualified Medicare Beneficiary (QMB) who doesn't have full Medicaid benefits but gets all their Medicare-covered services provided at \$0. \$122 credit every month for OTC, plus healthy food and utilities for qualifying members.	Limited - Outside of AEP and MA-OEP, consumers are limited to special circumstance SEPs to enroll in this plan

The healthy food and utilities benefit is a special supplemental benefit only available to chronically ill enrollees with a qualifying condition, such as diabetes, cardiovascular disorders, chronic heart failure, chronic high blood pressure and/or chronic high cholesterol, and who also meet all applicable plan coverage criteria. There may be other qualified chronic conditions not listed.

