

**GOVERNMENT OF THE DISTRICT OF COLUMBIA**  
**Department of Health Care Finance**



Office of the Senior Deputy Director/Medicaid Director

Transmittal # 22-04 (rev.)

**TO:** All District Medicaid Providers

**FROM:** Melisa Byrd  
Senior Deputy Director and State Medicaid Director

**DATE:** March 8, 2022

**SUBJECT: REVISED: Continuity of Care for Beneficiaries in District Dual Choice (D-SNP) and Provider Reimbursement**

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This transmittal supersedes Transmittal # 22-04. This revision updates the transition period to be between February 1, 2022 and July 31, 2022.

On February 1, 2022, DHCF entered into a new contract with a Medicare Advantage Organization (MAO) operating a Highly Integrated Dual Eligible Special Needs Plan (HIDE SNP), UnitedHealthcare. Under this new contract, UnitedHealthcare will cover both Medicare and Medicaid services for eligible enrollees.

The D-SNP program, District Dual Choice, is officially in a transition period between February 1, 2022 and July 31, 2022. During this time, continuity of care (COC) is a priority and there are COC requirements to ensure access to ongoing care is seamless. This is particularly relevant with the new contract as beneficiaries previously enrolled in UnitedHealthcare for their Medicare benefits only will be accessing their Medicaid benefits through the plan for the first time.

**During the transition period, UnitedHealthcare will reimburse for services rendered to covered beneficiaries regardless of your contracted status with the health plan.** Prior authorizations, provider-beneficiary relationships and ongoing services in place on January 31, 2022 will be honored. Providers are expected to maintain existing services between now and July 31, 2022, and providers can expect to be reimbursed for services provided. Additional details are provided below.

**Continuity of Care Requirements**

DHCF has instituted the following COC provisions for the Dual Choice program:

- **Health care providers should not cancel appointments or services with current patients.** UnitedHealthcare will honor any ongoing treatment that was authorized prior to the beneficiary's enrollment into the Medicare-Medicaid integrated program for up to 180 days after the transition.
- **Providers will be paid.** Providers should continue providing any services that were previously authorized, regardless of whether the provider is currently participating in UnitedHealthcare's network. UnitedHealthcare will pay for previously authorized services at 100 percent of the current Medicaid rate throughout the continuity of care period.
- **Providers will be paid promptly.** During the continuity of care period, UnitedHealthcare is required to follow all timely claims payment contractual requirements. DHCF will monitor complaints to ensure that any issues with delays in payment are resolved.

If you have questions for the health plan, they can be addressed to UnitedHealthcare via the Executive Director for the DC HIDE SNP, Erin Henderson Moore at [erin\\_hendersonmoore@uhc.com](mailto:erin_hendersonmoore@uhc.com). All other questions may be addressed to Katherine Rogers at [katherine.rogers@dc.gov](mailto:katherine.rogers@dc.gov) or Melisa Byrd at [melisa.byrd@dc.gov](mailto:melisa.byrd@dc.gov).