













**2016 Plan Year Enrollment Application Submission Guidelines**

Check with your manager or up line for preferred enrollment application submission method based on specific plan. If advised to send paper applications directly to UnitedHealthcare, refer to the information below and send application to the appropriate enrollment center, based on plan type. Use the "Preferred Submission Method" column whenever possible.

**Ensure each enrollment application is complete, accurate, and legible.  
Submit applications within 24 hours of receipt.**

Do **not** fax a copy of the enrollment application with the Scope of Appointment.

Plan Name	Preferred Enrollment Application Submission Method	Non-preferred Enrollment Application Submission Method (Use if fax is not an option)	Scope of Appointment instructions
 <b>UnitedHealthcare Medicare Advantage (MA)</b>			
 <b>UnitedHealthcare Care Improvement Plus</b>			
			
 <b>UnitedHealthcare Chronic (Includes Legacy UHC &amp; Legacy CIP 2016)</b>	Fax to:  <b>1-501-262-7070 or 1-866-994-9659</b>	<b>Overnight</b> delivery* to: UnitedHealthcare Medicare Enrollment Attn.: Xerox/ACS 3315 Central Avenue Hot Springs, AR 71913	Fax Scope of Appointment form to: <b>1-866-994-9659</b>
 <b>UnitedHealthcare Dual Special Needs Plans (DSNP)</b>  Alabama, Colorado, Florida, Georgia, Hawaii, New Jersey, New Mexico, North Carolina, Ohio, Texas, Washington, Washington D.C., Wisconsin (H5253-024, H3794-002), Pennsylvania (H3313-009)			
 <b>UnitedHealthcare/AARP Prescription Drug Plan (PDP)</b>			

Plan Name	Preferred Enrollment Application Submission Method	Non-preferred Enrollment Application Submission Method (Use if fax is not an option)	Scope of Appointment instructions
 <b>UnitedHealthcare DSNP</b> New York, Tennessee, Wisconsin (H4837-001)	Fax to: <b>1-248-733-6133</b>	<b>Overnight</b> delivery* to: UnitedHealthcare Medicare Enrollment Attn.: C&S Medicare 1300 River Drive Suite 200 Moline, IL 61265	Fax Scope of Appointment form <b>only</b> (without application attached) to: <b>1-866-994-9659</b>
 <b>UnitedHealthcare DSNP</b> Arizona (H0321-002/004)	Fax to: <b>1-855-210-5123</b>		
 <b>UnitedHealthcare Senior Care Options (Massachusetts)</b>	Fax to: <b>1-855-250-2168</b>	<b>Standard</b> Delivery to: UnitedHealthcare Attn: Enrollment Department 950 Winter Street Suite 4840 Waltham, MA 02451	Fax Scope of Appointment form <b>only</b> (without application attached) to: <b>1-866-994-9659</b>
 <b>Medicare Supplement Plans</b> <b>Insured by UnitedHealthcare</b>	<b>Standard</b> delivery to: UnitedHealthcare Insurance Company Enrollment Division P.O. Box 105331 Atlanta, GA 30348-5331  <b>Overnight</b> delivery* (must arrive by 9am) to: UnitedHealthcare Insurance Company Enrollment Division 4868 GA Highway 85, Suite 100 Forest Park, GA 30297	Fax to: <b>1-888-836-3985</b>	N/A
 <b>SENIOR DIMENSIONS®</b> <small>HMO/HMO-POS - a product of Health Plan of Nevada, Inc.</small>	Fax to: <b>1-702-304-7460</b> Attn.: Government Programs	<b>Overnight</b> delivery* to: Senior Dimensions (HPN) 2716 N Tanya Way Las Vegas, NV 89128	Fax Scope of Appointment form <b>only</b> (without application attached) to: <b>1-866-994-9659</b>
 <b>SIERRA Spectrum®</b> <small>PPO Plan - a product of Sierra Health and Life Insurance Company, Inc.</small>		<b>Overnight</b> delivery* to: Sierra Spectrum (SHL) 2716 N Tanya Way Las Vegas, NV 89128	

Plan Name	Preferred Enrollment Application Submission Method	Non-preferred Enrollment Application Submission Method (Use if fax is not an option)	Scope of Appointment instructions
 <b>Medica Health Care Plans</b>	Fax to: <b>1-305-715-1807</b>	<b>Overnight</b> delivery to: Medica Health Care Plans 9100 South Dadeland Blvd Suite 1250 Miami, FL 33156	Fax Scope of Appointment form <b>only</b> (without application attached) to: <b>1-866-994-9659</b>

\*Agents are responsible for covering the cost of overnight mail service.