UnitedHealthcare®	Risk Solutions
	Effective Date: 01/01/2021 Group Name: Azimuth
Member: Darren Anderson Dependent(s): N/A	UnitedHealthcare ID: 691802051439 UnitedHealthcare ID: N/A
	UnitedHealthcare Group Number: 76570127
	Payer ID Number: USN01 Prescriptions: Reimbursement only
	UnitedHealthcare Options PPO Network

Pre-certification Requirements: All Hospitalizations, Surgical Procedures, CT Scans, MRI's, PET Scan, Chemo/Radiation Therapy, Extended Care Facility, Organs Transplants, Artificial Limb(s). A provider or insureds failure to notify Azimuth of a pre-notification within 48 hours may result in a 50% reduction of eligible benefits.
Important Notice: A pre-notification does NOT guarantee eligibility.
For Non-UnitedHealthcare Claims, or International Claims, or Dental Claims submit to: Azimuth Risk Solutions
P.O. Box 627
Indianapolis, In 46206
service@azimuthrisk.com / 317-644-6291
Please mail/email all claims, itemized bills, medical records and complete Azimuth claims form(s) within 90 days of the date of service
For US Providers: www.usnetworksuhc.com
Medical Claim Address:
P.O. Box 30526
Salt Lake City, UT 84130-0526

Please call 1-844-251-8339 toll free for eligibility, benefits or claims status.