



The UnitedHealthcare customer service team is here to help

Manual Transition of Care

When your new UnitedHealthcare member or existing member needs help and additional time to speak with their physician about switching to a preferred or covered alternative medication and/or satisfying their drug's clinical program requirements, the manual Transition of Care process (TOC) can help.

- Manual TOC allows UnitedHealthcare Customer Service to approve a one-time, one-month override on certain medications that are strategically excluded or have clinical review requirements (e.g. Prior Authorization, Step Therapy) when the member is new to UHC pharmacy benefits or the member is impacted by a Prescription Drug List (PDL) Cycle change.
- Manual TOC applies to both new and existing members
- Members simply call the number on the back of their ID card to request a TOC override.
- UnitedHealthcare Customer Service will work with your member to determine if their drug is eligible for a Transition of Care override.
- For existing members to be eligible, they must also have a paid claim within the last 120 days in their history. The override is not available for new medications.
 - Existing members should have a denied claim in their history for the drug under review in order to help streamline the process.

Contact your UnitedHealthcare representative for more information.