

The logo icon consists of four blue, stylized, curved shapes arranged in a 2x2 grid, resembling a cross or a flower.

Uccare®



UCare
Connect/Connect + Medicare
& MSC+/MSHO

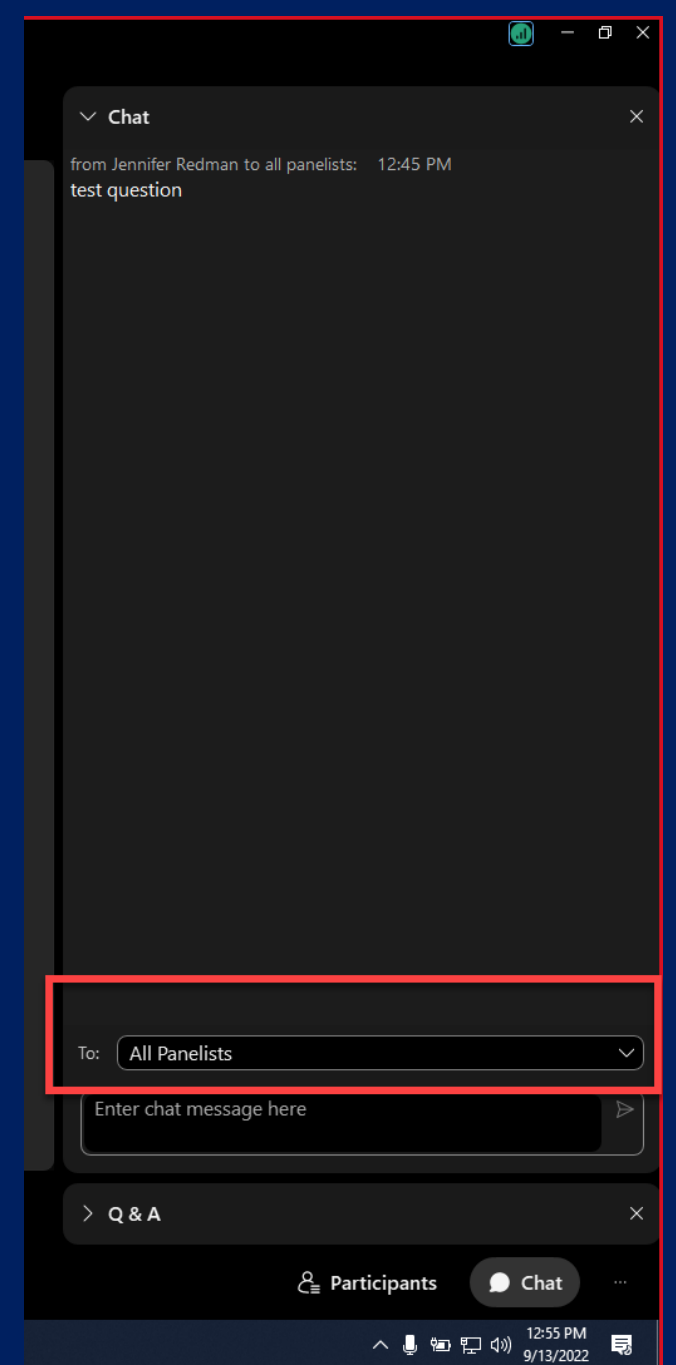
4th Quarterly All Care Coordination Meeting

December 12, 2024

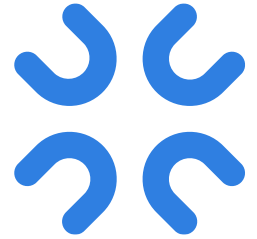


Questions welcome!

2024 4th Quarterly All Care Coordination
Outstanding Questions Form



Today's Agenda



Time	Topic	Audience	Presenter
9:00-9:05	Welcome	All	Clinical Liaisons
9:05-9:15	Qryde	All	Anthony Wilson/Jonathan Enering
9:15-9:45	Care Coordination Updates	All	Clinical Liaisons
9:45-9:50	Care Coordinator Questions	All	Clinical Liaisons
9:50-10:05	CFSS- MSC+/MSHO	15 min Break- Connect/Connect + MSC+/MSHO	Samantha Rue/Jenn Redman
10:05-10:20	DentaQuest	All	Bryan Strotbeck
10:20-10:35	Cologuard Campaign	All	Tara Nguyen
10:35-10:45	BREAK	All	
10:45-11:05	2025 DSNP Supplemental Benefits	All	Rob Burkhardt
11:05-11:25	2025 Health Promotion Program	All	Ashley Bruggman
11:25-11:30	Care Coordinator Questions	All	Clinical Liaisons



UCare Heathride Transportation: QRyde

SR Manager: Trent B

CSS Supervisor: Brent F

NOCCS Supervisor: Jonathan E, Kathy E

Booker Supervisor: Amber J, Anthony W, Avis G, Jena B

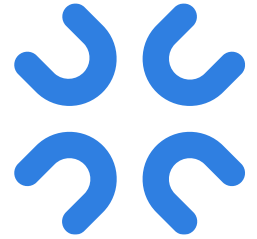
Welcome to QRyde transportation Application and Portal

We have two main methods for UCare Care Coordinators to access QRyde.

1. Access for internal UCare employees is via MYAPPS using once you are in the UCare network via VPN or direct connection. This access is read only and will allow you to look up your members in the system to review, client details, notification details, Authorization details, future ride details, standing order details, and past ride detail
2. Access for external representation and to request rides is via the Facility Portal. This portal uses 2 factor authentication and allows facilities/care coordinators to request rides, review future rides, review standing orders, and see any past rides.



Qryde Facility Portal



Process to request for Login to QRYde Facility Portal

1. Go to ucare.org > ?
2. Locate the UCare QRYde Facility Portal Log In access form???
3. Complete and submit the UCare Facility Portal request [form](#)
 - a. Request will be sent to the UCare QRYde Facility Portal ADMIN
4. UCare QRYde ADMIN will receive the [request](#)
 - a. ADMIN will generate the Facility Key
 - b. Confirmation email will be sent to the recipient's email [address](#)

Complete and Submit Login Access [form](#)

Facility Portal Registration Requests
When a facility requests access to the facility portal

1. Request
 New Registration
 Password Reset

2. Facility Name
Enter your answer

3. First Name
Enter your answer **Enter your First Name [here](#)**

4. Last Name
Enter your answer **Enter your Last Name [here](#)**

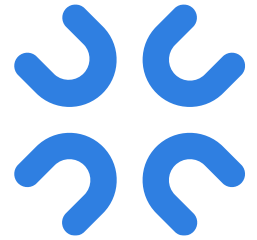
5. Email Address
Enter your answer **Enter your Email Address**

6. Cell Phone Number (For 2 Factor Authentication)
Enter your answer

Submit **Click Submit**

Callout boxes:
- Select New Registration or Password Reset (points to step 1)
- Enter your Facility Name i.e. Allina Clinic – (user name) (points to step 2)
- Enter your 10-digit cell phone number i.e. 612xxxxxx (points to step 6)
- Enter your First Name here (points to step 3)
- Enter your Last Name here (points to step 4)
- Enter your Email Address (points to step 5)
- Click Submit (points to the Submit button)

Qryde Facility Portal



2. 2FA Code validation
 - a. A 6-digit code will be sent to the cell phone included in the original access request.
 - b. Enter the code designated field, then click **Sign In**
 - c. If the code is not entered within 60 seconds, no code was received, OR the code does not work, click on **Resend Code** for another code to be sent to your cell phone.

Enter your QRYde 2FA code

We have sent QRYde 2FA code to your phone for signing into QRYde.

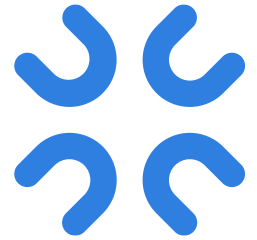
Code Sent. Check your SMS for the code

Enter 2FA code 58

Enter code

Sign In **Resend Code**

Qryde Facility Portal



Booking a Ride

1. Enter the member's 9-digit UCare Subscriber ID [number](#)
2. Click **Search**
3. Click the **Funding Source** dropdown arrow to select the member's primary health [plan](#)
 - a. If the requested ride is for AA/NA or Fitness for MSHO or [ConnectPlus](#) members, you will see an AA/NA or Fitness option in the dropdown [list](#)
 - b. The selected Funding Source also determines the Trip Purpose options in the Additional Information [section](#)

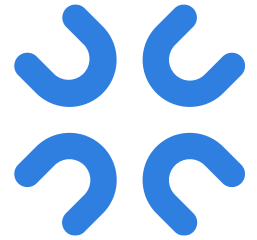
UCARE
Facility Portal

Enter Subscriber ID
876776576 Search

Pickup
Address

Funding Source *
Select
Select
CONNECT HEALTHRIDE 01
MNCARE HEALTHRIDE 03

Qryde Facility Portal



4. Enter ride's Pickup Address

- Start typing and the portal will provide a list of matching [results](#)
- Click on the matching [address](#)

Pickup

- 10050 59th Avenue North Plymouth, MN, USA
- 10050 59th Avenue North Brooklyn Center, MN, USA
- 10050 59th Avenue Northeast Fridley, MN, USA
- 10050 59th Avenue North New Hope, MN, USA
- 10050 59th Place North Crystal, MN, USA

5. Enter the ride's Destination (drop off address)

- Start typing and the portal will provide a list of matching [results](#)
- Begin with a clinic or facility [name](#)
- Click on the matching [address](#)

Destination

- HCMC Red Building South 8th Street, Minneapolis, MN, USA
- HCMC Parking Ramp Minneapolis, MN, USA
- HCMC Purple Medicine Clinic South 7th Street, Minneapolis, MN, USA
- HCMC Shapiro Building South 8th Street, Minneapolis, MN, USA
- Hennepin County Medical Center Emergency Room South 8th Street, Minn...

6. Enter Pickup Time

- Use the scroll bar to select pickup time from dropdown [window](#)
- If intending to indicate **Will Call**, select **00:00AM** [option](#)

Pickup Time

- 8:30 AM
- 8:35 AM
- 8:30 AM
- 8:45 AM
- 9:00 AM
- 9:15 AM
- 9:30 AM

7. Enter Pickup Date

- Click on the Calendar [icon](#)
- Calendar defaults to current month
- Can only book rides at least 2-business days out from date of request (date highlighted in **RED**)
- Use the single arrow to navigate to a different [month](#)

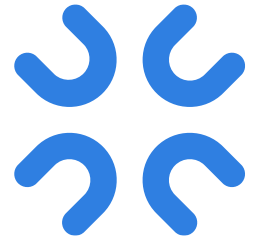
Pickup Date

Pickup Date

September 2024

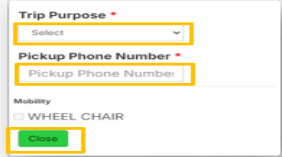
Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	1	2	3	4	5

Qryde Facility Portal



8. Click on **Additional Information**

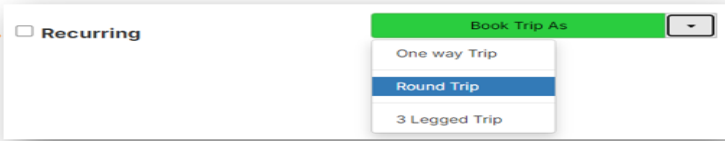
- a. Select Trip Purpose
 - i. Trip Purpose options are based on the Funding Source **selected**
- b. Enter Pickup Phone Number
- c. When done, click **Close**



9. Choosing One-way, Round Trip, 3-Legged Trip, or Recurring ride(s)

- a. One way Trip – select if intending to transport member **TO** a destination with no ride back **home**
- b. Round Trip – select if intending to bring member back home after **appointment**
- c. 3-Legged Trip – select if intending to transport member to more than one appointment (immediately following first appointment) before going back home
- d. Recurring – select if attempting to book a standing order (rides for multiple days, going to the same location, at the same scheduled time)

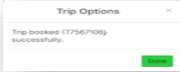
Click checkbox if booking a standing order



Click dropdown arrow to select type if trip

10. Upon selecting the Book Trip As option

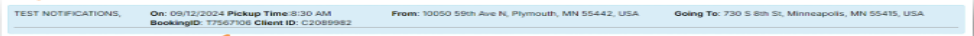
- a. Leg details of ride will **appear**
- b. If booking a **One way** Trip – Trip Options window will appear, click **Done**



Member Name

Pickup Address

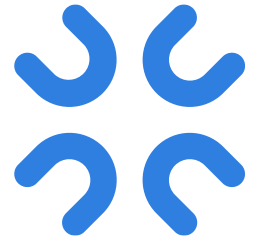
Dropoff Address



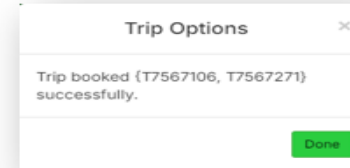
Trip Date, Pickup Time, Booking ID, Client ID (Internal Qryde ID#)

6

Qryde Facility Portal



- c. If booking a Round Trip
 - i. Enter the Pickup address, keep existing address, or enter a new Destination [address](#)
 - ii. Enter desired Pickup Time
 - iii. Click on Booking Round Trip to create the return [leg](#)
 - iv. If intending to indicate **Will Call**, select **00:00AM** [option](#)
 - v. Click **Done**

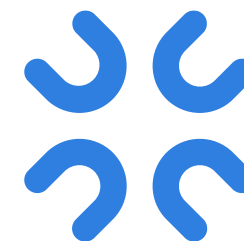


TEST NOTIFICATIONS,	On: 09/12/2024 Pickup Time: 8:30 AM	From: 10050 59th Ave N, Plymouth, MN 55442, USA	Going To: 730 S 8th St, Minneapolis, MN 55415, USA
	BookingID: T7567306 Client ID: C2089982		
Next-Leg.	On: 09/12/2024 Pickup Time: 00:00 AM	From: 730 S 8th St, Minneapolis, MN 55415, USA	Going To: 10050 59th Ave N, Plymouth, MN 55442, USA
	BookingID: T7567271 Client ID: C2089982		

- d. If booking Recurring rides
 - i. Enter **Pickup Time**
 - ii. Enter first **Pickup Date**
 - iii. Enter **Additional Information**
 - iv. Click on the **Recurring** [checkbox](#)
 - v. Select days of the week (Example: Mondays, Wednesdays, and Fridays)
 - vi. Select number of weeks intending to book (only allowed to book 30-days out from day of request)
 - vii. Click **Book Recurring Trip as**
 - viii. Select [One way](#), Round Trip, or 3-Legged Trip

- e. Refresh the page before booking for a different [member](#)

Questions?

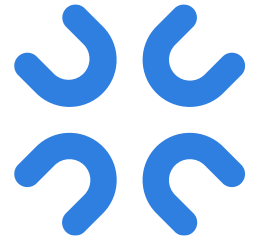




Care Coordination Updates

Presenters: Clinical Liaisons

Care Coordination Meeting Schedule



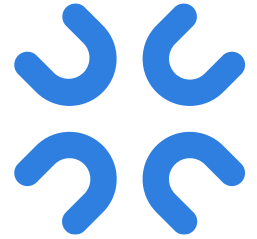
- UCare Quarterly All Care Coordination Meeting
 - Attendance **required** for all care coordinators.
- CEU Events
 - Attendance is optional for all.
- Office Hours
 - Attendance is optional for all
 - MSC+/MSHO and Connect/Connect + Medicare will be separate, offered same day at different times.
- Housing Support Office Hours

Schedule can be found on our [Meeting & Trainings Page](#)

Registration for all events can be found in the monthly care coordination newsletter.

UCare Product	Meeting Type	Date & Time (Subject to change)
MSC+ / MSHO and Connect/Connect + Medicare	Live Quarterly Meeting	March 11 th , 2025, 9 am-12 pm June 10 th , 2025, 9 am-12 pm September 9 th , 2025, 9 am-12 pm December 9 th , 2025, 9 am-12 pm
MSC+/MSHO and Connect/Connect + Medicare	CEU Event (optional)	February (Dates to come) May (Dates to come) August (Dates to come) November (Dates to come)
MSC+/MSHO	Clinical Liaison Office Hours (optional)	January 23 rd , 2025, 11 am-12 pm April 24 th , 2025, 11 am-12 pm July 24 th , 2025, 11 am-12 pm October 23 rd , 2025, 11 am-12 pm
Connect/Connect + Medicare	Clinical Liaison Office Hours (optional)	January 23 rd , 2025, 12:30 pm-1:30 pm April 24 th , 2025, 12:30 pm-1:30 pm July 24 th , 2025, 12:30 pm-1:30 pm October 23 rd , 2025, 12:30 pm-1:30 pm
MSC+/MSHO	Housing Office Hours (optional)	3 rd Wednesday of every month from 1 pm-1:30 pm
Connect/Connect + Medicare	Housing Office Hours (optional)	1 st Wednesday of every month from 1 pm-1:30 pm

Model of Care Training Requirements



- ❖ Requirement to view the MOC within 90 days of hire and annually thereafter

Quarterly Meetings

To access All Care Coordination recorded quarterly meetings, click below.

[View Meetings](#)

- ❖ 3rd Quarterly All Care Coordination Meeting Attendance
 - ❖ Live: No action needed
 - ❖ Recorded version: [Attendance Log](#)



Model of Care Training

Training and attestation for Care Coordinators on the UCare Model of Care.

[View Model of Care Training](#)

- ❖ 2024 [Model of Care Training for Care Coordinators](#)
 - ❖ [2024 Model of Care Attestation](#)

SecFTP Reports Update

❖ Live: 11/1/2024

- Reports: Date of death (EW)
- Clinic Closures Report
- EW/NF Discrepancy report
- Repeated Hospitalization & ER Admissions
- SNBC NU Codes and late HRA (CT/CT+MED)
- Future Termination /MA eligibility
- New to MSC+/MSHO with disability waiver CM
- Spend down report
- Members Turning 65 (CT/CT+MED)
- "GrandPad (MSHO only) and Grocery Ride (CT+/MSHO)/Utility Allowance Eligibility (MSHO)

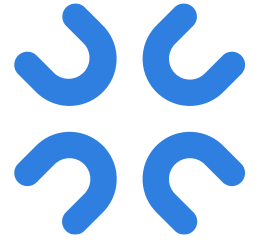
❖ Gaps in Care /Quality Action List

❖ Miscellaneous Reports

❖ Access to SecFTP

Having Issues? Contact the UCare Clinical Liaisons





Seamless
Care
Transitions



Better
Care
Outcomes

Transition to Point Click Care (PCC):

Early 2025!

Delegate partners will need to work with the PCC team for next steps

“Skinny DAR” coming in early 2025 and will still include:

- Service Authorizations
- Out of Network admissions/discharges
- Nursing home admissions that are not in PCC
- Mental health / SUD admissions – which are not in PCC


Importance of Identified PCP

Delegate Assignments:

- CT/CT + Med: Primarily based on geography
- MSC+/MSHO: Primarily based on primary provider

SNBC care coordinators play an important role in providing education to members turning 65. To reduce inaccurate member assignments during the transition to MSC+/MSHO, care coordinators should work with members to confirm the correct primary care clinic is identified.

Reminder: Submit the Primary Care Clinic Change Request Form to update the PCP as needed.

 **Primary Care Clinic / Care Coordination Change Request Form**

UCare Connect, UCare Connect + Medicare, UCare MSHO/MSC+: Fax to 612- 884-2228 or email pccformsmedicalid@ucare.org
UCare Medicare and Essentia Care members: Fax to 612-884-2274 or email to clinicchanges@ucare.org

Program: Select one

Person Requesting Change: Date:

Phone: Fax:

I have spoken to the member and confirmed the new PCC/Care Coordination information to be accurate.
 Ensure the PCC is in UCare's provider network, if not, the current CC should work with the member to establish care at an in-network provider, prior to completing a PCC change form.

Member Name:

UCare Member #: Date of Birth:

Current PCC/Care Coordination Information		New PCC/Care Coordination Information	
Current Primary Clinic		New Primary Care Clinic	
Current Care Coordination Entity		New Care Coordination Entity (if applicable)	
(If member is in nursing home) Facility Name		New Primary Care Physician (if known)	
Address		Address	
City		City	
State	Zip	State	Zip

Comments:

Effective Date of Change:

If requesting a retro effective date: The change will be effective the 1st of the current month if received on or before the 12th of the month, if it is the member's 1st month of enrollment or 1st month of a UCare plan change. If the member is not new to UCare or the UCare plan, the effective date will be the 1st of the following month.

Revised 8/2023

Gaps in Care

A Gap in Care is a missing preventative care measure identified using claims information for CT/CT + Med and MSC+ and MSHO Members.

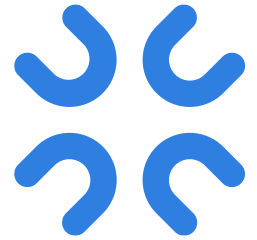
Star Ratings informs members about how UCare is doing in the quality of health services provided by UCare and our provider network.

Star Ratings support supplemental benefit offerings and help keep premium levels low for our members.





Using Gaps in Care Reports



Addressing Gaps in Daily Work

Annual Assessment

- Physical Health
- Preventative Care
- Vision

Support Plan

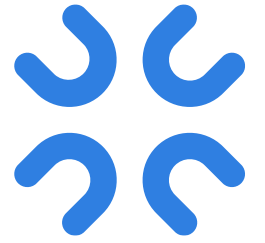
- My Goals
- Barriers to achieving goals

Transition of Care

- Address primary care
- Post-hospitalization follow-up care
- Mental health care visit after hospitalization



Assessment & Support Plan



Prepare before a visit:

- Review noted gaps from the report
- Address preventative care screenings during the assessment
- Assist with scheduling screenings
- Review barriers
 - Fear? Education? Transportation? Procrastination? Cultural beliefs?
- Review medication adherence – what's working well, or is support needed?
 - Consider Medication delivery

Support Plan

Create goals to achieve gap in care closure

Example:

I would like to have my Diabetic Eye Exam within the next 6 months.

Supports I would like:

- My care coordinator will review my vision and supplemental benefits
- My care coordinator will provide a list of options for eye exams within 3 weeks
- My CFSS worker will schedule my eye exam
- My care coordinator will arrange transportation to an eye exam

Mid-Year Review

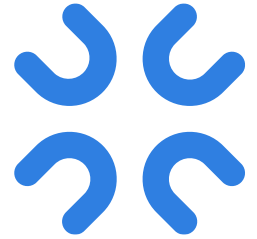
Review goals and if not complete ask:

What's getting in the way of completing XYZ?"

Consider what interventions you can do to help the member remove barriers.



Gaps in Care



Meetings & Trainings

Quarterly meeting schedule and recorded trainings.

[View Meetings & Trainings](#)

Meetings and Other Trainings

Quarterly Meetings

To access All Care Coordination recorded quarterly meetings, click below.

[View Meetings](#)

Other Care Coordination Trainings

Click below to access various care coordination trainings.

[View Trainings](#)



Reminder: Gaps in Care reports will conclude in December and resume end of February 2025

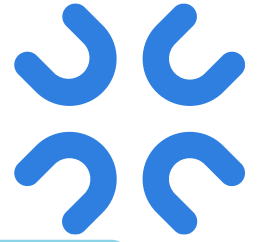


Compliance Audit Trends

Reminders across all products

- Complete initial assessment timely upon enrollment with UCare
 - Connect/Connect + Medicare: 60 days
 - MSC+/MSHO: 30 days
- SMART goals: measurable
 - Consider measurable verbs, such as take, perform, complete, use, state, lab values, or identify
- SMART goals: outcomes measurable
 - Include target dates for goal completion, including month/year
- CC credentials on signature page
 - CCs must indicate their credentials when signing their name
 - Unlicensed county social workers can use CSW

Requirements Grids Updates



Update: Connect + Medicare & MSHO only

- Transitions of care education and handout provided to member annually

MSC+/MSHO – EW and non-EW

- CFSS directions clarifications
- What and when to send documents to UCare following assessments for CFSS
- Direction on approving the Service Delivery Plan

MSC+/MSHO Institutional Requirements Grid

- Signature sheet upon transfers
- 4 actionable attempts to reach member upon Product Change



Service Rate & Budget Changes 1/1/25

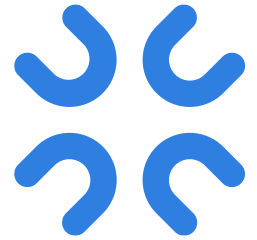
DHS has increased the following monthly budget caps and monthly service rate limits effective January 1, 2025:

- 4.53% increase to EW monthly case mix budget caps
- 4.53% increase to consumer directed community supports (CDCS) budgets under EW
- 4.53% increase to EW 24-hour customized living daily and monthly limits. This change will happen on a rolling basis as lead agencies renew service plans throughout the year.
- 6.195% increase to home-delivered meals
- 3.14% increase to home health aide, skilled nursing, occupational therapy, physical therapy, respiratory therapy and speech therapy (market basket adjustment)
- 4.37% increase to 1:1 PCA/CFSS
- 4.37% increase to PCA supervision and CFSS worker training and development

Reference: [November 12, 2024 eList announcement](#)



Action Required: CDCS Rate Change Process



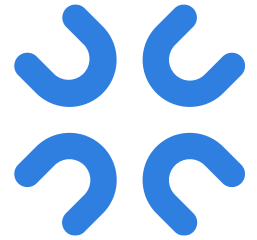
A list of members that have an active CDCS authorization was uploaded into the One Time Mailings folder in the SecFTP portal.

The care coordinator will need to identify all members that are receiving CDCS services and take the following actions:

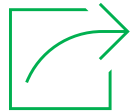
- CC completes the [DHS-6633A](#) CDCS CSP Addendum following all directions in the form.
- Provide the DHS-6633A CDCS CSP Addendum to the member.
- Upon return from member: Update member record and upload DHS-6633A to member file.
- CC sends completed DHS 6633A to FMS.
- If the member will be utilizing the increased funds the care coordinator must revise the Support Plan and complete a new [Waiver Service Approval form](#) and send to UCare at CLSIntake@ucare.org or by fax at 612-884-2185.

Reference: [UCare Care Coordinator CDCS Guidelines.](#)

MnCHOICES: Transfer/Ending Location and Staff Assignments



The sending Case Manager (CM)/Care Coordinator (CC) is responsible for updating staff and location assignments in MnCHOICES



Member is transferring to a new CM/CC entity

Staff Assignments

Location	Assignment Type	Initiated By	Assigned Staff Member	Effective Date	Expiration Date	Status
UCare	Certified Assessor	User37147 UCare	User37147 UCare	09/01/2023	--	Active
UCare	Certified Assessor	User37147 UCare	User37148 UCare	09/01/2023	--	Active
UCare	Certified Assessor	User37147 UCare	User37149 UCare	09/01/2023	09/22/2023	Inactive

Location Assignments

Location	Effective Date	Expiration Date	Status	Assignment Type	Transferred From	Initiated By
UCare	09/01/2023	--	Active	Managed care organization	--	User37147 UCare



Member termed-no known transfer

Staff Assignments

Location Assignm... **Staff Assignments**

Status: Active

Date: 09/15/2023

Unassign

Workflow History

Certified Assessor

From Staff Member --

Initiated Staff Member **User37147 UCare**

Assigned Staff Member **User37147 UCare**

Effective Date 09/01/2023

Expiration Date --

Is Primary

Location Assignments

Location Assignm... **Location Assignments**

Attachments 0 Status: Active

Location Assi...

Expiration Date --

Assignment Type **Managed care organization**

From Location --

Location **UCare**

Effective Start Date 09/01/2023

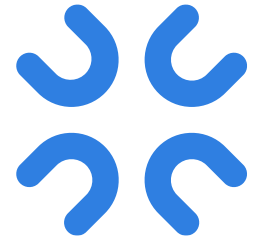
Note --

Date: 09/15/2023

Discharge

Workflow History

MnCHOICES: Adding Declined Goals to the Support Plan



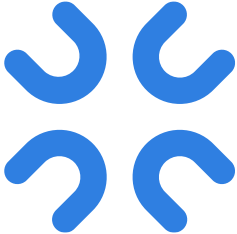
When there is an identified health and safety need that is important for the member, and the member does not accept intervention, the CC is to document in the “My Plan to Address Safety Needs.” In the Support Plan – MCO MnCHOICES (accompanied by a completed MnCHOICES Assessment), the system will automatically populate any unaddressed risks or will indicate if all needs are met.

✔ My plan to address needs

Enter a summary of the plan or agreement to address the person's identified assessed need(s) that are not being met by a service or informal support. Describe what has been offered to the person. Discuss with the person how they are involved in addressing their need(s), including who they may contact and how to contact them.

Jack has identified risks due to smoking with a diagnosis of Emphysema and being on continuous oxygen. The care coordinator discussed the safety concerns of smoking in the home while on oxygen and educated Jack on smoking cessation options. The Care coordinator provided the number for the Tobacco & Nicotine Quitline and education on using the Quit for Life mobile app. Jack declined a tobacco cessation goal at this time but may consider it in the future.

MnCHOICES: Adding Services to Support Plan



In the Support Plan, choose “Add service or support.” Select “People and community organizations that support me,” and type in the organization’s name. Include a support description that includes the service details. Then enter CFSS Consultation Services T1023.

Service Type
People and community organizations that support me

Person's Name: All About Caring Home
Relationship: Consultation Services Provider
Role: Support/Interdisciplinary care team

Organization's Name: All About Caring Home (21/750 Characters)

Support Description: CS Provider will assist in educating members on CFSS services and writing plans. CS provider will get the member's signature and attach the plan in MnCHOICES, notifying CC when it is attached. **CFSS Consultation Services T1023-6 units.** (234/10000 Characters)

Frequency: Other
Other (Frequency)*: As needed

Link Service

5162 Search Advanced Search

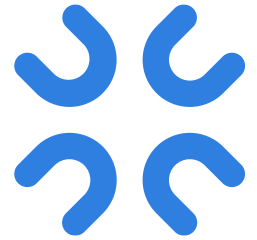
4 records found matching "5162".

Name	Procedure code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	
CFSS PERS Purchase Budget	S5162	UB	-	-	-	+ Link
Effective Start Date	Effective End Date					
10/01/2024	-					
CFSS PERS Purchase Agency	S5162	U9	-	-	-	+ Link
Effective Start Date	Effective End Date					
10/01/2024	-					
PERS Purchase	S5162					
Modifier 1	Modifier 2	Modifier 3	Modifier 4			

Done

Link service in “Services and Supports”

MnCHOICES Support Plan Revisions: Member Signatures



If the member elects CFSS at the time of the assessment and the member signature is received, a new signature is not needed for each CFSS service as they are added to the support plan (CS, CFSS Agency, FMS, PERS).

- When revising the support plan:
 - Are signatures required? Select “No” to bypass this requirement

A new signature is needed when CFSS is not elected at the time of assessment and is started mid-service period, starting a new service delivery plan outside of the assessment.

If open to EW, follow EW provider signature process

The screenshot shows a 'Revise' form with the following fields and values:

- Program: Elderly Waiver (EW)
- Reason for Support Plan*: Plan revision
- Revision Reason*: Adding CS provider
- Are Signatures required?*: No
- Start Date*: 10/14/2024
- End Date*: 09/13/2025
- Previous Effective Date Range: 10/14/2024 – 09/13/2025

The 'Are Signatures required?*' dropdown is highlighted with a red box. The 'Next' and 'Cancel' buttons are visible at the bottom of the form.

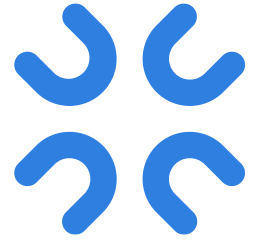
Certified Assessor Report: Monthly Monitoring

- All Certified Assessors (CA) are responsible to ensure CA status does not lapse
- Each delegate agency should have a procedure in place to pull the CA report within MnCHOICES monthly and resolve any discrepancies
- DHS will perform quarterly audits and notify UCare (and other lead agencies) of lapsed certifications. Supervisors and care coordinators will hear from UCare with a quick turnaround time to resolve in order to continue completing assessments.
 - DHS will be verifying certification completions during this audit.


Additional Info: [Lapsed certified assessor audit protocol](#)



Certified Assessor Report



1

Reports Bulk Assignments Help 

2

Name	Category	Description
Assessor Certification Status	Admin	Users who's DHS Certified Assessor training is coming due
MnCHOICES Users Last Sign In	Admin	Users of MnCHOICES by active/inactive status View Report

3

Assessor Certification Status

Organization	Location	Staff ID	Job Title	Staff Name	Credential	Type
UCare	UCare	PWES8MC	Care Coordinator	Elaine Swanson	Initial Certification	Assess
UCare	UCare	PWIGAMC	Care Coordinator	Ismail Abdi	Initial Certification	Assess
UCare	UCare	PWMKRCM	Care Coordinator	Mary Kay Rose	Initial Certification	Assess
UCare	UCare	PWSH5MC	Care Coordinator	Susan Herzog	Initial Certification	Assess
UCare	UCare	PWAXMMC	Supervisor	Anne Matzek	Initial Certification	Assess
UCare	UCare	PWK4LMC	Care Coordinator	Katherine Laney	Initial Certification	Assess
UCare	UCare	PWKS4MC	Care Coordinator	Kelly Schulz	Initial Certification	Assess
UCare	UCare	PWRJHMC	Care Coordinator	Rebecca Horning	Initial Certification	Assess
UCare	UCare	PWTLFMC	Care Coordinator	Tracy Fodstad	Initial Certification	Assess
UCare	UCare	PWTSUMC	Care Coordinator	Tammy Sullivan	Initial Certification	Assess
UCare	UCare	PWYL1MC	Care Coordinator	Yangmee Lor	Initial Certification	Assess
UCare	UCare	PWK2MMC	Mentor	Kaylin McAfee	Initial Certification	Assess
UCare	UCare	PWLXMMC	Care Coordinator	Linda Moua	Initial Certification	Assess
UCare	UCare	PWSJ1MC	Care Coordinator	Sammie Jurichko	Initial Certification	Assess
UCare	UCare	PWSLOMC	Care Coordinator	Sherri Overstreet	Initial Certification	Assess
UCare	UCare	PWAC1MC	Care Coordinator	Aimee Charbonneau	Initial Certification	Assess
UCare	UCare	PWCB0MC	Care Coordinator	Courtney Belisle	Initial Certification	Assess
UCare	UCare	PWCMOMC	Assessor	Chelsey Odell	Initial Certification	Assess
UCare	UCare	PWDT3MC	Care Coordinator	Denise Thales	Initial Certification	Assess
UCare	UCare	PWHCPMC	Assessor	Hannah Posterick	Re-certification	Assess
UCare	UCare	PWLMPMC	Care Coordinator	Lynn Peterson	Initial Certification	Assess
UCare	UCare	PWM4GMC	Care Coordinator	Megan Gruska	Initial Certification	Assess

Roles with access to reports:

- Agency reports
- Lead agency security admin
- Lead agency supervisor
- Delegate supervisor
- Contracted case management supervisor.

For new/updated access:

[DHS Systems Access Request Form](#)



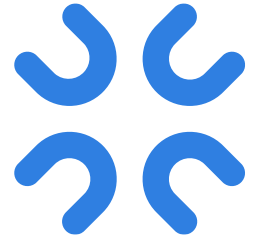


Connect/Connect + Medicare: 15 min break

MSC+/MSHO: CFSS

Jenn Redman & Samantha Rue

CFSS Resources



UCare has developed tools and resources to support you that are located on the [MSC+ MSHO Care Coordination Page!](#)

PCA/CFSS Authorization

Care Coordination resources


[CFSS Care Coordination Guidelines](#)  (Revised 11/27/2024)

[CFSS FAQ](#)  (Revised 12/4/2024)

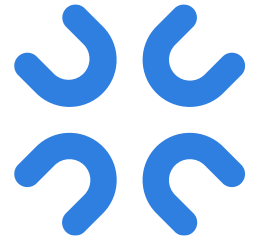
[PCA/CFSS Communication Form](#)  (Revised 12/3/2024) | [Instructions](#)  (Revised 12/3/2024)

Other links

[DHS CFSS Policy Manual](#) 

[UCare PCA/CFSS Provider Forms](#) 

Updated: PCA/CFSS Communication Form



ucare PCA/CFSS COMMUNICATION FORM

Incomplete, illegible, or inaccurate forms will be returned to sender. All applicable information must be included for timely processing of the request. Allow up to 14 calendar days for processing of this request. Refer to the instructions for the guidelines in completing this form. **Form must be completed by UCare care coordinator.**

Submit form and relevant documentation via:
 Fax: 612-884-2094
 Email: pca_cfss@ucare.org

For questions, call: 612-676-6705
 To reach a representative, choose option 2, then option 4

Member Information

Name:	Date of birth:
Member ID:	PMI:
MnCHOICES assessment date:	MnCHOICES/EW date span: to

Care Coordinator Information

Care coordinator name:	
Phone:	Fax:
Email:	

Reason for request - select all that apply

Approve Deny Terminate Reduce Change in model
 Reduced in lieu of waiver services Change in service provider Deny early reassessment

Description of request

Provide a description for all service requests. If multiple reasons for requests are selected above, please clarify each selection. Provide a detailed description of the request if the assessment results in denial, termination, or reduction of services. If a member receives CFSS from 2 agencies, please include 2nd agency information and the amount of hours for each service/procedure code here.

PCA Services - 6 months transition (T1019)

Provider Name:	Phone number:	Fax number:
Start date:	End date:	Total units:

Consultation Services - required for CFSS (T1023)

Initial Additional

Provider Name:	Phone number:	Fax number:	
Start date:	End date:	Total units:	Cost per unit:

Revision date: 11/25/2024 Page | 1

Reason for request - select all that apply

Approve Deny Terminate Reduce Change in model
 Reduced in lieu of waiver services Change in service provider Deny early reassessment

Description of request - required

Provide a description for all service requests. If multiple reasons for requests are selected above, please clarify each selection. Provide a detailed description of the request if the assessment results in denial, termination, or reduction of services. If a member receives CFSS from 2 agencies, please include 2nd agency information and the amount of hours for each service/procedure code here.

[Clear Service Information](#)

ucare PCA/CFSS COMMUNICATION FORM

Incomplete, illegible, or inaccurate forms will be returned to sender. All applicable information must be included for timely processing of the request. Allow up to 14 calendar days for processing of this request. Refer to the instructions for the guidelines in completing this form. **Form must be completed by UCare care coordinator.**

Submit form and relevant documentation via:
 Fax: 612-884-2094
 Email: pca_cfss@ucare.org

For questions, call: 612-676-6705
 To reach a representative, choose option 2, then option 4

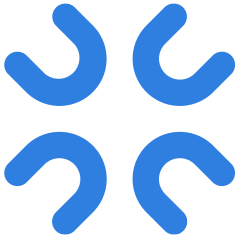
Member Information

Name:	Date of birth:
Member ID:	PMI:
MnCHOICES assessment date:	MnCHOICES/EW date span: to

Care Coordinator Information

Care coordinator name:	
Phone:	Fax:
Email:	

Locating an in-network CFSS agency



Locate DHS enrolled & UCare in-network CFSS provider agencies using our [Provider Search Tool](#).

ucare

People **Places** Pharmacies Drug List

Pick your plan: 2024 Minnesota Senior Care Health Options (MSHO)

Search by name (Optional): Community First Services

Choose a location: Minneapolis, MN, USA

Search

Home > Search Results [Email Results](#) [Print Results](#)

Filter The Results By:

[Clear Filters](#) **Filter**

Specialty

Search results display based on the location entered by distance. Showing 1-3 of 3

Big Brothers Home Health Care LLC

Personal Care Attendant Services

Accepting new patients

Essential Home Health Care Inc

Personal Care Attendant Choice

Accepting new patients

Distance (Optional)

> 60 miles

Select Distance

within 5 miles

within 10 miles

within 15 miles

within 20 miles

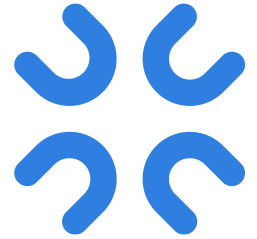
within 30 miles

within 45 miles

within 60 miles

✓ > 60 miles

45-day Temporary Start of CFSS



A process to allow a person not currently receiving services to begin CFSS services temporarily **until the CC can schedule and complete an in-person assessment.**

When a member is new to CFSS and has emergent needs to access services **prior to the MnCHOICES assessment being completed**, the CC may use clinical judgment to temporarily authorize CFSS for up to 45 days. The CC gathers information needed over the phone to determine the need and clearly documents justification in the member record.

- The [DHS-6893A](#) may be utilized as a tool to assist in determining hours.

REMINDER: A 45-day temporary start of CFSS cannot be extended. An in-person MnCHOICES assessment is needed to authorize ongoing CFSS. Unused units from the 45-day temporary start do not carry over to the CFSS service authorization.

[Reference: 45-day temporary start for PCA/CFSS services \(state.mn.us\)](#)

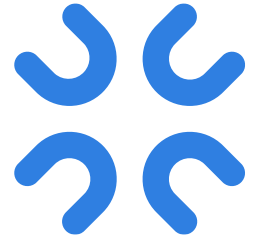
What and when to send to member?

DHS requires that member/legal rep receive a copy of their “CFSS eligibility” in writing within **10 business days** of the assessment.

1. Eligibility Results: Assessment Summary from MnCHOICES
2. [DHS list of enrolled Consultation Providers](#)
3. [DHS-8477A CFSS Fact Sheet](#) (available in 5 languages in eDocs)



Health Resource Letter




The Health Resource Letter is available to accompany any member mailings sent outside of the support plan posted to the CC website.

- Examples: Eligibility Info to member within 10 days, list of CS provider options, other resources needed by the member

Requesting EW provider signature: EW Provider Support Plan Letters

Requesting member signature: Support Plan Signature Letter

Reference: [Letters Guide](#)

 UCare.

<Date>

<Member Name>
<Member Address>
<City, State Zip>

Dear <Member Name>:

Thank you for talking with me recently about your health care needs. I enjoyed speaking with you. Based on our conversation, here is information about <list of relevant resources and/or health conditions>

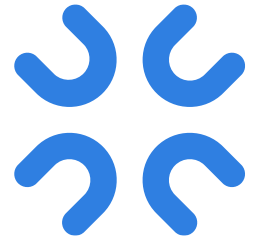
If you have questions about this information, please call me at <phone number>. If you get my voicemail, leave a message with your name, UCare member ID number and phone number. TTY users, call the Minnesota Relay at 711 or 1-877-627-3848 (speech-to-speech relay service).

Sincerely,

<Name>
<Job Title>
<County or Agency Name>
<Phone Number>
<E-mail address>

Enclosures:
<Enclosures>

Extension of 3 Month Transition PCA to 6 Months



As outlined in the [November 26, 2024 DHS eList announcement](#), effective immediately, members who currently use PCA services will receive up to six months of PCA services while they transition to CFSS.

DHS changed the service extension from three to six months to avoid gaps in service for members transitioning to CFSS.

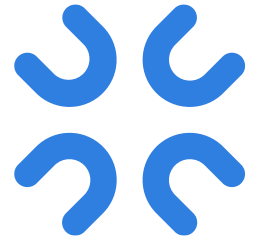
A member with a six-month PCA service authorization can choose to begin CFSS services before the end of the six months if they have an approved CFSS service delivery plan.

UCare will automatically extend all current PCA 3-month transition service authorizations for an additional 3 months.

All new PCA transition authorizations should be for 6 months, effective immediately.

IMPORTANT: If a CFSS provider needs to expedite their enrollment with DHS, the CFSS agency can email DHS to request at DHS.CFSS@state.mn.us.

Eligible Consultation Service Providers



The DHS list of Consultation Providers found [here](#) includes all providers that are contracted with DHS but who may or may not be *enrolled*.

Refer to the column titled *Enrolled?*

- Providers marked **YES** are enrolled with DHS and can be used for this service. Those marked **NO** are not enrolled with DHS and should not be used.
- The CS provider list will be updated regularly by DHS as providers submit their paperwork to enroll.

Organization	Address	Phone	Email	Languages	Enrolled?
					No

					Yes
--	--	--	--	--	-----

Reference: [CFSS CS Providers](#)

CFSS Service Delivery Plan & Authorization

A care coordinator must approve or deny the plan within **30 calendar days** of receipt.

The CC must send the signed copy of the approved DHS-6893P to the member, CS provider, and CFSS provider agency and/or FMS provider.

- Upload signed service delivery plan to MnCHOICES

The start date of the CFSS service lines for authorization is the date the CC approved the service delivery plan or the date providers are chosen, whichever is later.

Reference: [Assessment Checklist MnCHOICES \(Revised 12/3/24\)](#)



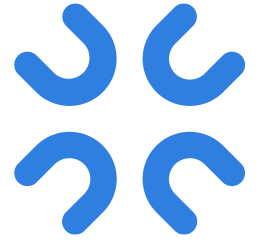




DentaQuest: New Dental Delegate

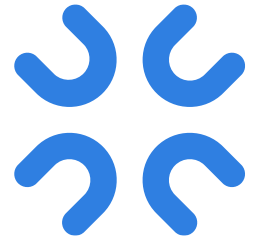
Bryan Strotbeck

UCare Project Team



- **Business Owners**
 - Cathy VonRueden
 - Bryan Strotbeck
- **Program Manager**
 - Carrie Mitchell
- **Project Managers**
 - Brett Kaminski
 - Genelle Gotham
- **Delegate Liaison**
 - Mary Jaeger
- **Business Analyst**
 - Amanda Willis
- **QA Lead**
 - Inge Rousseau
- **Business Readiness Change Lead**
 - Linnea Holt

Agenda



1 Introduction

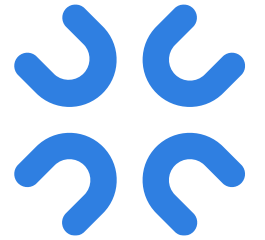
2 Why we chose DentaQuest

3 Network

4 Current work: internal and external

5 Resources

Why we chose DentaQuest



DentaQuest is an organization that has a national footprint, specializing in growth and expansion efforts.



The financial impact of the Delta Dental previous rate increase(s) is not sustainable.

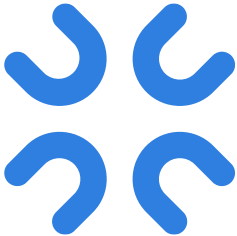


We are united by our missions and will work together to accelerate UCare's ability to provide the highest quality health care in the right setting.



DentaQuest is supportive of our plan to improve dental access across the state.

Medicaid network

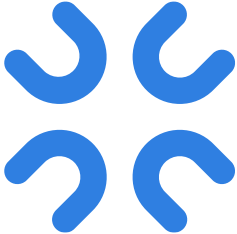


Current Medicaid Network					
Month	Leads contacted	Current out of network Locations not willing to join Medicaid network	Total Contracted locations	Locations Reviewing Materials	Total Contracted Unique providers
August	1247	200	37	499	191
Sept.	1247	315	186	515	520
Oct.	1247	457	275	513	599
Nov.	1265	457	331	349	748
748 contracted + 349 possible = 1,097 potential contracted providers					

Delta Dental network with UCare: 1,100 providers

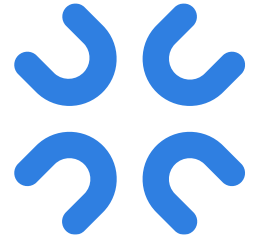
* Column 3 have not participated in the past. DentaQuest did additional outreach and providers still not interested.

DentaQuest network: Medicare and IFP



Current DentaQuest Network			
Month	MN Medicare	MN Exchange/IFP	WI Medicare/Aspirus
August	1,171	1,347	1,577
Sept.	1,171	1,347	1,577
Oct.	1268	1347	1577
Nov.	2879	1353	1569

Internal work



health and wellness > benefits and perks > dental benefits > dental

UCare Medicare dental coverage

All UCare Medicare Advantage plans provide dental coverage, and some give you the flexibility to purchase optional dental insurance coverage.

Medicare dental insurance benefits


Do Medicare plans cover dental? To get dental coverage or an allowance you can use on dental services, choose a [UCare Medicare Advantage plan](#). With Original Medicare or a [UCare Medicare Supplement Plan](#), dental coverage is not included, although these plans may cover certain emergency dental procedures in some cases.

[Find a dentist](#)

Covered dental services

What dental services are usually covered by Medicare Advantage plans? Dental benefits vary by plan and coverage level, but may include:

- **Routine services:** Many plans cover preventive care such as 1 – 2 oral exams per year and may include routine cleanings, X-rays and fluoride treatments
- **Basic restorative services:** This includes fillings, root canals and [periodontal \(gum\) services](#)
- **Major restorative procedures:** These include crowns, bridges, dentures and implants



UCare Medicare dental coverage

How does UCare cover dental services? Many UCare Medicare Advantage plans offer dental coverage for routine dental care such as annual cleanings and X-rays. Some UCare plans include (or have the option to purchase) additional coverage for restorative dental care such as fillings and dentures. Other UCare plans offer an [allowance](#) that can be used for eligible dental services.

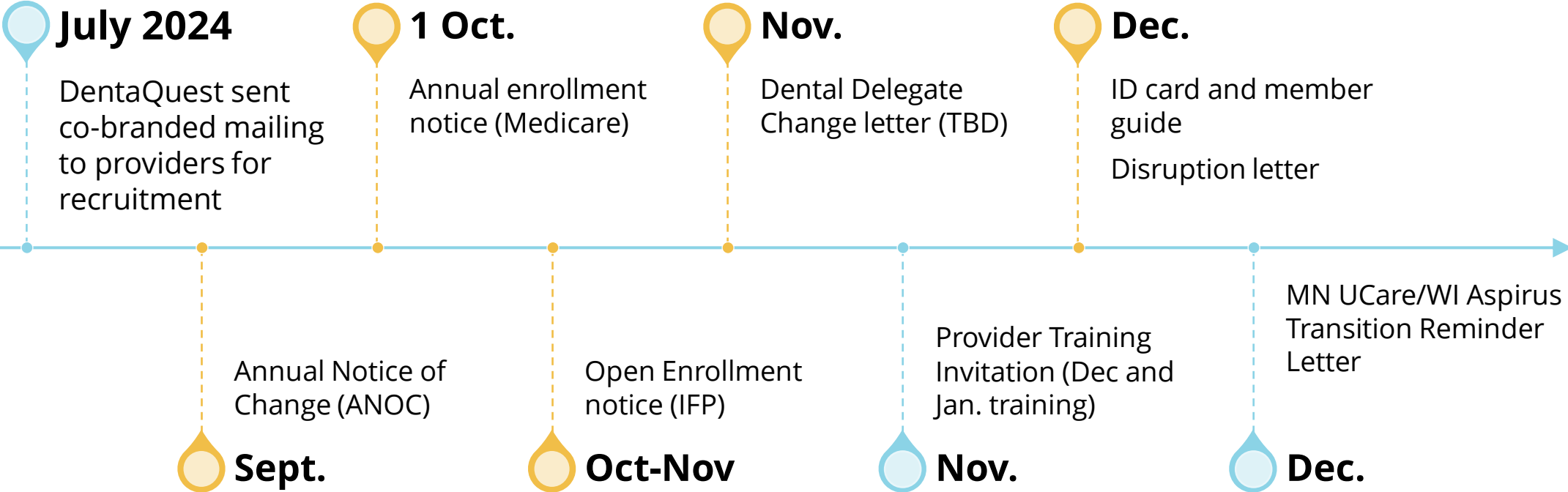
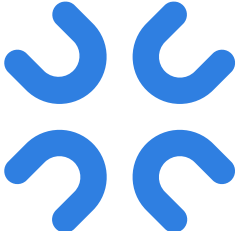
We know you want ease and flexibility when navigating your health insurance. That's why if you're enrolled in a UCare Medicare Advantage plan, you will automatically have access to dental coverage with no extra fees or sign-up requirements. However, if your plan includes routine coverage only and you want to [add additional restorative coverage](#), you will need to take action to enroll and pay the additional premium for this coverage.



[View 2024 UCare dental overview \(PDF\)](#)

[View 2025 UCare dental overview \(PDF\)](#)

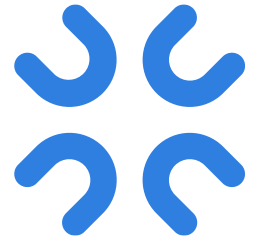
- Stakeholder support
 - Customer service training and ongoing communication
 - Readiness preparations for 1/1/25 go live
- Webpages
 - UCare and Aspirus website being updated with new dental information
 - Find a Doctor search is updated with DentaQuest network
- Testing
 - Eligibility transactions
 - Encounters
 - Invoicing
- Delta Dental Run-out
 - strategy is mapped

External Communications Featuring DentaQuest



 UCare: mailing to members
 DentaQuest: email to providers

DentaQuest Care Coordination



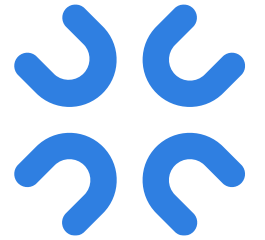
Program
Dental Home
Appointment Assistance
Member Placement
Gap In Care
Healthy Beginnings

Possible additions

- Digital Campaigns
- Tele-dentistry Options
- Mobile Dentistry

All services above are included in the contract

Recent accomplishments



Find a Dentist search
operational 10/1

Customer Service prepared
to handle dental-related
calls, with DQ information,
on 10/1/24

- Disruption letter submitted and
Approved

Network recruitment
efforts are successful;
adding providers

Online marketing materials
approved and in
production

DentaQuest has completed
configuration for Medicaid,
Medicare and IFP

- Testing will begin 10/15/24

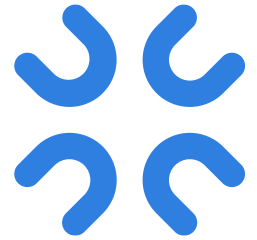
Park Dental: all locations
now included

Federally Qualified Health
Center (FQHC) contracted



Appendix

Resources



DentaQuest [information page](#) on the Hub

General information

FAQ

Stakeholder meeting presentations



[Introducing a New Dental Partner in 2025](#) Hub homepage post (7/26/24)

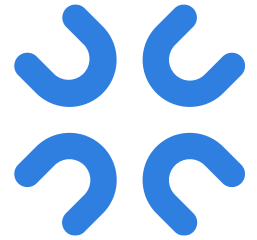


[UCare](#) and Aspirus member pages



Questions can be sent to Cathy VonRueden and Bryan Strotbeck

Subgroups



Joint Steering Committee	Care Coordination	Product: Medicaid Medicare (UCare) Medicare (Aspirus) IFP	Marketing and Customer Service	ID Cards (led by GR)	Encounters	Invoicing	IT and Architecture	IT: DentaQuest and UCare	ETL/BizTalk/ QA subgroup for outbound files to DQ	Medicaid Master PML/PECD for Dental subgroup
Provides strategic updates to leaders	Review Care Coordination Services	DentaQuest mapping, groups/subgroups, benefits	Communications and customer service deliverables alignment of dates between both teams, aligning with the member experience	Discuss and agree on changes to Member ID Card	Ensure Encounters requirements understood, alignment of dates	HCE and Accounting to determine how invoice should look to map to GL Entry and the corresponding claims detail file	Update call with technical folks at UCare; determine architecture/SDS needs	Joint call with technical teams from UCare and DentaQuest	834 Eligibility files (Medicaid, UCare Medicare, Aspirus Medicare, IFP), Accumulator Outbound file, and TPL (Third Party Liability) file To DentaQuest	Document agreement on filtering clarification of any changes, timing on files/production

Questions?



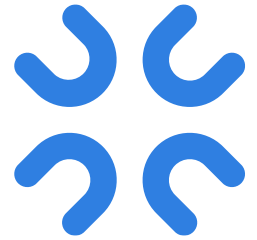


Cologuard – 2024 Initiative

Tara Nguyen

Exact Sciences

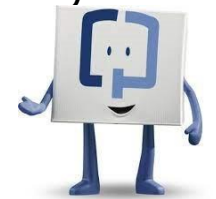
Exclusive vendor of Cologuard



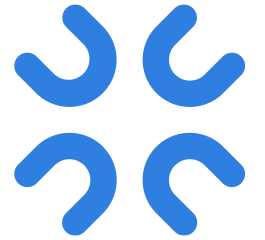
- **Launched:** October 2023
- **Target membership:** Members with gap in care according to HEDIS measure specifications
- **Programs:** Opt-In (Medicare) & Opt-Out (Medicaid)
- **Products:** All

- **Opt-In Program:** Members will receive a notification letter to inform of eligibility. Members are directed to an online portal to request a kit. ***Portal closed 9/23 at midnight***(UCM, Connect +, MSHO, IFP)

- **Opt-Out Program:** Members are notified that screening kits will be mailed to them, and they have the option to Opt-Out within a two-week window. (MSC+, Connect, PMAP, MNCare)



Opt-In Post Portal Closure



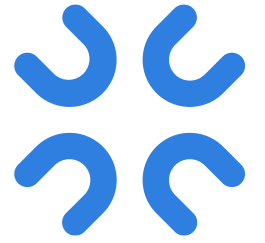
After the portal closed on September 23rd eligible members continue to have the opportunity to request Cologuard via two options:

1. Contact UCare directly to order. The Health Improvement Team will manage an internal tracker of member requests and share it directly with the vendor.

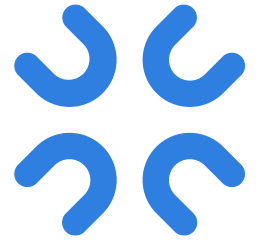
- ❖ There is a minimum threshold of kits that must be met to place additional orders via the vendor.
- ❖ There may be a 4–6-week lag between kit order and delivery

2. Encourage members to speak with their healthcare providers about obtaining a prescription for Cologuard.

Exact Sciences/Cologuard



- ❖ Once a Cologuard is requested by the member, the vendor initiates a Provider Navigation program to prompt kit completion (45-60 days)
- ❖ Kits come with pre-paid return postage via UPS, front door pick up can be scheduled
- ❖ Kits have a provider identification section on the return packaging
- ❖ Recommendation after a positive Cologuard screening is a colonoscopy, which is considered a preventative health benefit
- ❖ Members with positive results will be outreached to via medical professional.
- ❖ Negative Cologuard screening results are valid for 3 years
- ❖ If there is any doubt regarding the appropriateness of using Cologuard, UCare recommends members to speak with their providers.



In-Home Kit Key Takeaways

- ❖ Goal to improve access and reduce barriers for members
- ❖ Provide a convenient alternative to complete screenings
- ❖ Kits are voluntary and not required
- ❖ Eligibility is based on claims
 - ❖ UCare does not have access to testing prior to becoming a member
 - ❖ UCare has excluded members with certain diagnoses that may put them in a high-risk category
- ❖ No out-of-pocket cost to the member
- ❖ UCare always encourages members to share their results with their provider

Questions & Follow Up

If there are any questions,
please reach out via the UCare
Quality Inbox at:

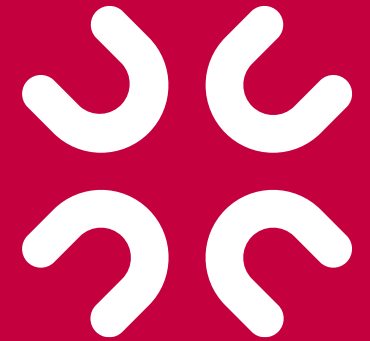
ucarequality@ucare.org



10-minute Break

10:35-10:45

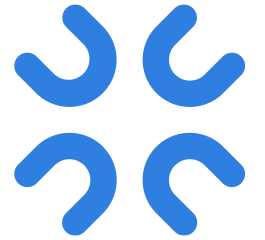




MSHO, Connect + Medicare 2025 Supplemental Benefits Changes

Rob Burkhardt

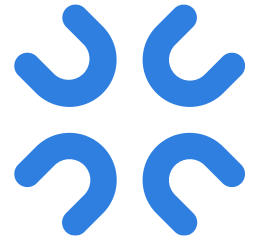
MSHO



Enhancements:

- Monthly food allowance: increased to \$75/ mo, available to all members
- Utility allowance: increased to \$55 / mo, available to all members, includes rent
- Grocery store rides: 1/week, available to all members
- Part D co-pays: eliminated for all members
- OTC allowance: increase to \$70 / qtr
- Eyewear upgrades: (tint, coating, progressive) – 1 replacement/year covered
- Supplemental PERS (non-EW): 1 replacement / year covered

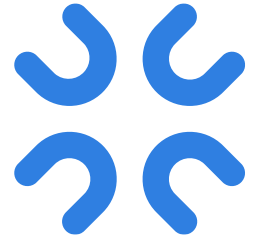
UCare Connect + Medicare



Enhancements:

- Monthly food allowance: increased to \$75/ mo, for members with hypertension, diabetes and lipid disorders
- Part D co-pays: eliminated for all members
- Healthy Transitions – post-discharge CHW visits – now covered
- Caregiver Assurance – caregiver support - now covered, all members
- Connect to Wellness Kits – ADHD, Autism options
- Eyewear upgrades: (tint, coating, progressive) – 1 replacement/year covered

MSHO and Connect + Medicare



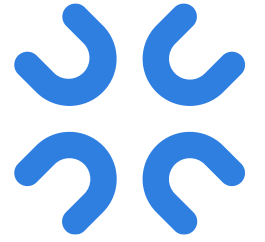
Changes:

- Dental coverage: comp oral exam, full mouth and panoramic x-ray, gross removal of plaque, crown repair.
- Crowns continue 2/year – porcelain fused to high noble metal

Reminder:

- OTC now on the Healthy Benefits card
- Community Education allowance (\$100/qtr) also on Healthy Benefits card

In Lieu of Services (ILOS)



- **MSC+/MSHO:** Elderly Waiver services for members not enrolled in EW but at risk for needing more costly / acute services that could be avoided with targeted EW services.
- **PMAP, SNBC (all):** (coming in 2025) up to two meals per day for up to 14 days following discharge – care managers/care coordinators determine eligibility

Resources:

ucare.org > health and wellness

ucare.org/providers > care managers



health and wellness

Care Coordination and Management

Our resources help you work effectively. coordination-related job aids, training perks.

Benefits, Perks & Member Handouts

Links to member benefits, incentives, referral forms and member facing handouts and flyers.

2025 Additional / Supplemental Benefit Summary

Benefit Details	MSHO	MSC+
Members will need to activate the UCare Healthy Benefits+ Visa card before using it. Activate the card online, in the app or by calling. <ul style="list-style-type: none"> HealthyBenefitsPlus.com/ucare Healthy Benefits+ App 1-855-256-4620 	✓	✓
To check allowance balance or request a card: <ul style="list-style-type: none"> Visit healthybenefitsplus.com/ucare Call 1-833-862-8276 (TTY 711) Download Healthy Benefits+ App. 		

UCare's MSHO offers more benefits

Additional benefits to improve your health	UCare's MSHO	MSC+
50 premiums, deductibles and Medicaid (Medical Assistance) cost-sharing*	✓	✓
One member identification (ID) card for Medicaid, Medicare and prescription drugs	✓	—
50 Part D prescription drugs	✓	—
Up to \$900 per year for healthy groceries (\$75 per month) on your UCare Healthy Benefits+ Visa® card	✓	—
Up to \$600 per year for utility bills and rent (\$50 per month) loaded to your Healthy Benefits+ card	✓	—
Up to \$280 per year for over-the-counter (OTC) health items (\$70 every quarter) loaded to your Healthy Benefits+ card	✓	—
Rewards loaded to your Healthy Benefits+ card for taking care of your health	✓	✓
50 rides to medical appointments, grocery stores, gyms, health education classes, Alcoholics Anonymous and Narcotics Anonymous meetings (limits apply)	✓	—
50 gym membership with access to gym locations nationwide, online classes, at-home fitness kits, brain training, no-cost social events, activities and more	✓	—
Up to \$750 per year for safety equipment to keep you safe in the bathroom, bedroom and on the stairs	✓	—
Two 50 dental crowns per year, plus one crown repair	✓	—
Adult Dental Kit — electronic toothbrush and charger, replacement brush heads, toothpaste and dental floss. One kit every three years	✓	—
Adult Dental Refill Kit — replacement brush heads, toothpaste and dental floss. One kit per year on the years you don't get the Adult Dental Kit	✓	—
50 glasses upgrades like progressive lenses, non-glare coating and photochromic tinting	✓	—
50 monthly routine foot care	✓	—
Stress and Anxiety Kit — get help with anxiety and managing stress by choosing from our Sleep Aid Kit, Stress Relief Kit or Smart Home Device Kit. One per year for qualifying members.	✓	—

UCare Connect + Medicare offers more benefits

Additional benefits to improve your health	UCare Connect + Medicare	UCare Connect
No premiums or deductibles*	✓	—
Transportation at no added cost to medical, dental and pharmacy appointments	✓	—
Keep Your Coverage team to help members with Medicaid (Medical Assistance) renewal paperwork	✓	✓
One member ID card for Medicaid, Medicare and prescription drugs	✓	✓
Part D prescription drug coverage with no copays or exams	✓	—
Earn rewards for completing certain preventive screenings, tests or exams	✓	—
\$60 over-the-counter (OTC) allowance added to your UCare Healthy Benefits+ Visa® card each quarter to purchase eligible items in-store, online or by phone at participating retail locations	✓	—
Additional dental coverage — two crowns per year, one crown repair per year	✓	—
Eyewear upgrades — non-glare coating, photochromic tinting and progressive lenses	✓	—
Routine foot care at no added cost once monthly	✓	—
Up to seven round-trip rides per week to Alcoholics Anonymous or Narcotics Anonymous	✓	—
Post-discharge medication reconciliation with a pharmacist	✓	—
12 routine chiropractic visits per year, including additional exams and extremity adjustments for members with musculoskeletal disorders	✓	—
Acupuncture for low back pain — up to 12 additional visits per year	✓	—
Post-discharge Healthy Transitions — four re-admission prevention sessions with a community health worker	✓	—
12 50 visits with a caregiver advisor per year through Caregiver Assistance. Get help with care coordination, service referrals, stress reduction tips and more.	✓	—

2025 Additional / Supplemental Benefit Summary

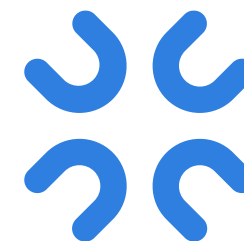
Benefit Details	Connect	CT-Used	Eligibility / How to obtain Member / Care Coordinator
Members will need to activate the UCare Healthy Benefits+ (HIB+) Visa card before using it. Activate the card online, in the app or by calling. <ul style="list-style-type: none"> HealthyBenefitsPlus.com/ucare Healthy Benefits+ App 1-855-256-4620 	✓	✓	Connect + Medicare members will receive a UCare Healthy Benefits+ Visa card during the first month of their plan.
To Check Card balance or request a replacement card: <ul style="list-style-type: none"> Visit healthybenefitsplus.com/ucare Call 1-833-862-8276 (TTY 711) Download the Healthy Benefits+ App. 			Connect members will receive a card upon their first earned reward, if no reward has been earned, members can request a card. Limitations: Healthy Benefits+ Visa not be used for cash-back or cash equivalents, casino, online gaming, firearms, tobacco, nicotine replacement products, alcohol, copays, deductibles, premiums. Other restrictions apply.

UCare Liaison handouts

Member brochures

UCare Liaison handouts

Resources



Annual Benefit Summaries – Liaisons will post the 2025 Additional & Supplemental Benefits Summary with information on eligibility/access in the [Benefits & Perks drawer](#) for care coordination use

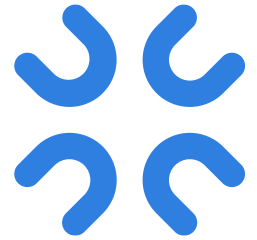
Health & Wellness Benefits - Many of the supplemental benefits and rewards can be found on the [Health and Wellness page](#)

Member Resources – Side-by side 2025 MSC+/MSHO and Connect/Connect+ Comparison Grids will be located in the [Member Handouts drawer](#)

Please provide feedback to the Liaisons team throughout the year – what works / what doesn't? – we try to design and adjust to ensure that benefits support you and the members

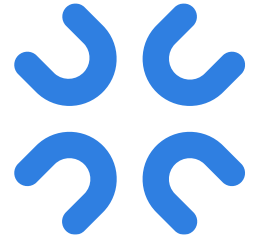
Thank you for helping UCare members understand and use their benefits!

Appendix: Continuing MSHO Supplemental Benefits



- **Nutritious Food Allowance** - **\$75/mo** all members qualify + **1 ride/wk** to grocery store
- **Grocery Discounts** - save up to \$50/week on healthy food (Healthy Benefits card)
- **Utilities Allowance: \$55/ mo** – all members, now includes rent!
- **OTC Allowance: \$70/qtr** – now on Healthy Benefits card, and w/ in-store option
- **NEW No Part D co-pays** – for all members!
- **Community Education allowance** – **\$100/quarter** now on Healthy Benefits card!
- **OnePass** - Health club membership, fitness kits, videos, brain training
- **GrandPad** – age-appropriate tablet for video calls, games, web access. Depression or anxiety
- **Dental Benefit**
 - Comprehensive exam (1/year)
 - Full mouth x-ray, panoramic film (1/year)
 - Crowns – 2/yr, porcelain to noble metal
 - Crown repair
 - Gross Removal of plaque and calculus
 - One electric toothbrush /three years, two replacement heads/year
- **Routine foot care** - one visit/month for diagnoses not already covered by Medicare.
- **Post-discharge Rx reconciliation** - post-discharge medication reconciliation in pharmacy
- **Post-discharge meals** - Two meals a day for up to four weeks following discharge.
- **Post-discharge community companion** – four CHW sessions following discharge
- **Transportation** up to three rides per week to participating fitness center
- **Max 7 rides / week to AA/NA** – care coordinator identifies as part of care plan – care coordinator must request rides for member
- **PERS (non-EW)** - Personal Emergency Response System for members not eligible for EW (includes 1 replacement/yr for loss / damage).
- **Eyewear** - Anti-glare lens coating, lens tinting, progressive lenses (1/year each, 1 replacement/yr for loss / damage)
- **Bath & Home safety items** - Up to **\$750** / year for bath safety and home safety items.
- **Kits:**
 - **Memory Support** choose from a number of products for members with dementia
 - **Strong & Stable** - 1 kit/year – falls prevention
 - **Stress & Anxiety** – **1/yr** sleep, stress, smart home options
- **Caregiver training / support** – for caregivers of all MSHO members
- **Reemo Health Smartwatch** – activity tracker / PERS
- **Blood Pressure Monitor** – Links to Reemo watch – members with hypertension
- **Juniper** evidence-based health education classes
- **Therapeutic Massage** – up to six 60-min sessions / year – qualifying chronic pain
- **Additional Acupuncture-** up to 12 additional visits/year for acute low back pain
- **Routine Chiropractic** – up to 12 visits/year – includes exams and adjustment of extremities for musculoskeletal disorder

Appendix: Continuing Connect + Supplemental Benefits



- **Nutritious Food Allowance** - **\$75/mo** all members qualify + **1 ride/wk** to grocery store
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- **Eyewear** - Anti-glare lens coating, lens tinting, progressive lenses (1/year each, 1 replacement/yr for loss / damage)
- **Connect to Wellness Kit:** sleep, stress, fitness, dental, smart home, **NEW** ADHD & autism options
- **NEW Caregiver training / support** - for caregivers of all Connect + members
- **Reemo Health Smartwatch** - one watch/year - activity tracker, PERS
- **Blood Pressure Monitor** - Links to Reemo watch - members with hypertension
- **Therapeutic Massage** - up to six 60-min sessions / year - qualifying chronic pain
- **Additional Acupuncture**- up to 12 additional visits/year for acute low back pain
- **Routine Chiropractic** - up to 12 visits/year - includes exams and adjustment of extremities for musculoskeletal disorder

Questions?





2025 Health Promotion Program

Ashley Bruggman



2025 Programs

Car Seat program

Community Education

CVS OTC

Food Access

Healthy Benefits+

- Allowances
- Grocery Discounts

LSS Community Companion Post
Discharge

Mobile Dental Clinic

MOMS Program

Mom's Meals

One Pass

Juniper Classes

Reemo

- Smart watch activity tracker
- Blood pressure monitor

Rewards & Incentives

Tobacco/Nicotine Cessation

Wellness Kits

- o Adult Dental Kit
- o Connect to Wellness Kit
- o Medication Toolkit
- o Memory Support Kit
- o Stress & Anxiety Kit
- o Strong & Stable Kit



2025 Supplemental Benefits + Value Added Programs

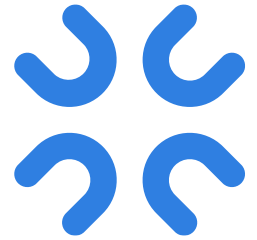


Reemo

Activity Tracker plus PERS device and optional Blood Pressure Monitor

Reemo Activity Tracker + Blood Pressure

Eligible: MSHO, Connect + Medicare



- MSHO and Connect + Medicare members are eligible for the activity tracker plus personal emergency response system (PERS) watch through care coordination referral. No authorization is needed.
- MSHO and Connect + Medicare members with hypertension who already use the activity tracker plus Personal Emergency Response System (PERS) device are eligible for a blood pressure monitor with a diagnosis of hypertension on file with UCare.
- Blood pressure monitor syncs with activity tracker to capture results supporting self-management and condition awareness
- Available through care coordination referral. No authorization for either the activity tracker or blood pressure monitor is needed.





Healthy Benefits+ Visa Card

Replacing the UCare Rewards Benefit Mastercard and the Healthy Savings card

Healthy Benefits+ Visa Card

- **The card is reloadable** - to not throw the card away
- **The card can be used anywhere a Visa debit card is accepted**
 - This card can't be used for cash or any cash equivalent
 - This card will not work at liquor, firearm and tobacco/vaping retailers
 - Other limits may apply (no Target or Amazon Purchases)
 - Walmart is back in under their S3, UPC level network
- **How do members receive a card**
 - All members with an allowance will automatically be issued a card.
 - Members without an allowance will be issue a card upon earning a reward.
 - Members who only have the Grocery Discount program and have not earned a reward will only be issued a card upon request.
 - Members needs to opt into the Community Education program and a card will be mailed to them.



Healthy Benefits+ Visa Card

- Allowances
 - Food Allowance (monthly)
 - Utilities Allowance (monthly)
 - OTC (quarterly) **New(ish)!**
 - Community Education **NEW!**
- Rewards
- Grocery Discount Program



healthy benefits+

PO Box 52
Minneapolis, MN 55440-9682
Ucare.
Important Plan Information

<<Firstname Lastname
Address 1
Address 2
City, State, Zip>>

Activate your card to start spending

Your UCare Healthy Benefits+ Visa® card is here. When your 2024 coverage begins, you'll get:

- <<\$XXX>> twice a year on over-the-counter (OTC) items
- <<\$XXX>> annually on prescription eyewear expenses
- weekly discounts on groceries

Coming to your mailbox soon. Keep an eye out for your 2024 OTC catalog.

If prompted, your PIN is the last 4 digits of your card number.

Your allowance will automatically load onto your card. Your OTC allowance expires on June 30 and December 31. Your prescription eyewear allowance expires on December 31. Allowances expire upon termination of your plan.

The easiest way to activate your card

Scan the QR code to download Healthy Benefits+™ mobile app.

You can also activate your card at HealthyBenefitsPlus.com/UCare or by calling 1-855-256-4620 (TTY 711).

Shopping instructions on the back

UCR2001

Healthy Benefits+ Visa Card (2025)



Plan	OTC Allowance	Food Allowance	Rewards	Grocery Discount	Eyewear Allowance	Combined Flexible Benefit Allowance (D/V/H)	Utilities Allowance	Transportation Allowance	Community Education Allowance
UCare Medicare	\$45-\$70		X	X	\$100-\$200				\$45
EssentiaCare	\$50		X	X	\$100-\$200				\$45
Aspirus Essentials Rx	\$75		X	X	\$250				
Aspirus Elite	\$75		X	X	\$175				
ISNP	\$75			X	\$200-\$225			\$500	
Medicare PPO	\$75		X	X		\$1,200-\$1,600			
EC Access plan	\$50		X	X		\$600			
MSHO	\$70	\$75	X	X			\$55		\$100
Connect + Medicare	\$60	\$75*	X	X					\$100
Connect			X	X					\$100
PMAP			X	X					\$100
MNCare			X	X					\$100
MSC+			X	X					\$100
IFP			X	X					\$45

*With eligible chronic condition

Gray = quarterly allowance. Expires at the end of March, June, September, and December

Yellow = semi-annual allowance. Expires June 30 and December 31

Blue = monthly allowance. Expires at the end of each month

Red = annual allowance. Expires at the end of each calendar year



Program & Allowance Descriptions



Food Allowance

Eligible:

MSHO: Diagnosis removed for 2025! All members \$75 per month

Connect + Medicare with eligible conditions \$75 per month

- Eligible conditions: diabetes, hypertension, lipid disorder

Unused funds expire at the end of the month and do not roll over to the next month.

Benefit can be used in store, online, over the phone

Must be used at a participating location (S3 network)

Eligible items include:

- Fresh fruit & vegetables
- Canned fruit & vegetables
- Frozen produce & meals
- Fresh salad kits
- Dairy products
- Meat & Seafood
- Beans & legumes
- Pantry staples (flour, spices, etc.)
- Soups
- Healthy grains (bread, cereals, pasta, etc.)



OTC Allowance

Eligible:

MSHO: \$70 quarterly

Connect + Medicare: \$60 quarterly

- Unused funds expire and do not roll over into the next allowance period. Funds expire at the end of March, June, September, and December.
- Can be used in store, online, or over the phone
- Must be a participating location (S3)
- Eligible item categories include:
 - Allergy & Sinus
 - Cold, cough, & flu
 - Oral care
 - Ear & eye care
 - First aid
 - Pain relief & management
 - PPE
 - Skin & sun care
 - Vitamins & supplements
 - Digestive health
 - Stop smoking
 - Weight management



Utilities Allowance

Eligible: MSHO NEW! Diagnosis removed for 2025

- All MSHO members: \$55 per month. Unused funds expire and do not roll over into the next month.
- Can use to pay utility bills such as
 - Gas/electric/fuel oil
 - Water/sanitary/sewer
 - Internet & telecommunications
 - Government services/municipalities
- Ways to pay bills
 - Online at healthybenefitsplus.com/ucare through bill payer tool
 - Over the phone by calling Healthy Benefits+
 - Over the phone or online directly through their utility provider



Community Education

Eligible: MSHO, Connect, Connect + Medicare, MSC+

- **NEW!** \$100 quarterly allowance. Expires at the end of March, June, September, and December
- Unused funds do not carry next allowance period.
- Runs through Visa network on allowable MCCs
- If the member has an allowance, earns a reward, or requests the card for the Grocery Discount program, the Community Education allowance will be preloaded onto the card. If the member does not have a card, they need to opt into the Community Education allowance in their Member Online Account or by calling UCare customer service.



Grocery Discounts

Eligible: MSHO, Connect, Connect + Medicare, MSC+

- Can only be used in store only at participating locations (S3)
- Similar to digital coupons
- Change weekly and are automatically loaded to the card
- Discounts can be found online or in the app
- For those with only grocery discounts (no allowance)
 - Member will receive a Healthy Benefits+ card and the grocery discount program will activate when they earn a reward OR they can call CS to request activate the grocery discount program and request a new card.



Rewards

Eligible: MSHO, Connect, Connect + Medicare, MSC+

- Members can earn rewards for a variety of preventative visits
- Cannot be used at Target or Amazon
- **NEW!** Walmart is in network through S3
- If the member has allowance programs, the rewards dollars will automatically be pulled from if they spend over their allowance amount or if they purchase items that the allowance does not cover.
- Rewards earned in 2024 or before will expire when a member's plan is terminated.
- Rewards earned in 2025 will expire 365 from the date of issuance.



MOMS: Management of Maternity Services

Eligible: Connect, Connect + Medicare

Overview

- MOMS Handbook
- Caring for Your Baby guide
- SEATS Car Seat Program



SEATS Program (car seats)

Eligible: Connect, Connect + Medicare

Free car seat - *Car seat education required by a UCare SEATS Partner before receiving a seat.*

See Customer Service SEATS page for Car Seat Partners List

Eligible:

Pregnant member:

- 1 seat every 12 months during third trimester; Choice between infant carrier or convertible car seat

Child member until age 8:

- 2 seats up until age 8
- Ages birth – 1 year old
- Choice between infant carrier or convertible car seat
- If child member receives infant carrier, they are eligible at any point for second seat
- Age 1 – 2 years old: Member eligible for a convertible car seat
- Ages 2 up until age 8
- Choice between convertible or combo car seat
- They are eligible for second seat in 3 years or by exception for height and weight.

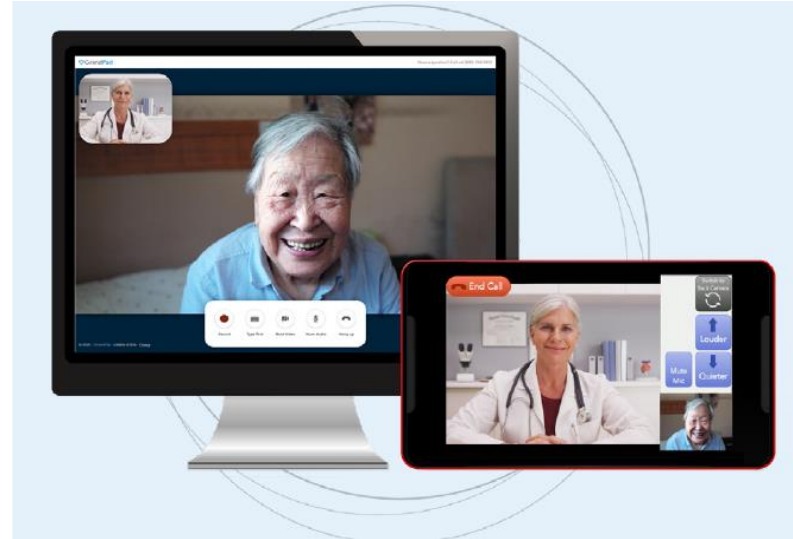
Child member between ages 7-9:

- Backless booster car seat, no education required



GrandPad

Eligible: MSHO with depression or anxiety diagnosis on file with UCare



A tablet designed for seniors is offered to MSHO members who have a depression *or* anxiety diagnosis.

GrandPad is a full-service solution that reduces the devastating impact of social isolation on the health and well-being of older adults. The customizable platform of GrandPad allows healthcare companies to keep patients and families engaged, and to improve clinical workflows and outcomes.

Available through care coordination or by calling 1-888-501-3273.

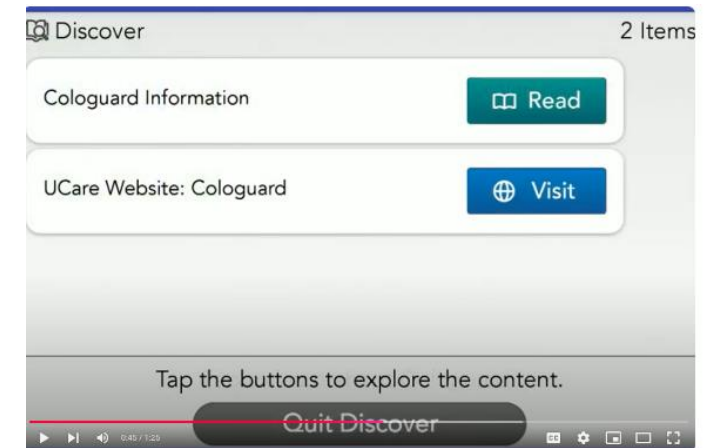
GrandPad – New & Favorite Features

- **New Features:**

- **Grandie:** Grandie Chat is a digital assistant designed specifically for seniors. It offers a unique blend of social interaction, information sharing, and entertainment. More than AI, Grandie Chat is an empathetic companion with many features that make it a groundbreaking tool in senior care.
- **Preventive Care Initiatives with Quality:**
 - Cologuard and flu shot clinic alerts and reminder

- **Care Coordinator Favorite Features:**

- **Make HIPAA Compliant Video Calls** – and add up to 2 other people to the call with the GP user.
- **Create a calendar reminder on the GP** – and include a link to a website or Zoom call.
- **Send a message (email) to the member's GP** – and include a video or image attachment.





Juniper Classes (Supplemental Benefit)

Eligible: MSHO

- Evidence-based health management and wellness classes
 - Falls Prevention
 - Chronic Pain and Disease Management
 - Diabetes Prevention and Self-Management
- Statewide network of community-based classes available at participating facilities including customized living facilities, community centers, senior centers, churches, and fitness centers



Caregiver Assurance

Eligible: MSHO, Connect + Medicare



- Partner with a dedicated Caregiver Assurance Advisor who is a clinical professional experienced in aging and caregiving. The advisor will help address the member's top caregiving concerns, collaborate with care coordination and offer suggestions, informational resources and referrals. Advisors are available by phone M – F, 9 am – 7 pm at 612-672-7996.
- Members qualify for 12 no-cost visits per calendar year
- Examples of what's available for caregivers:
 - Stress management
 - Emotional Support
 - Self-care guidance
 - Financial resources
 - Family support
 - Resource coordination
 - Problem solving



LSS Healthy Transitions – Post discharge (Supplemental Benefit)

Eligible: MSHO and Connect + Medicare

- Members discharged from hospital get access to community health worker (2 in person and 2 telephonic) within the first 30 days of discharge.
- Individualized support, education, and resources to members during the first critical 30 days after a stay at the hospital or short-term rehabilitation center.
- LSS does member outreach from DAR and connects with Care Coordinator once member is enrolled.



Moms Meals

Eligible: Non-waiver, MSHO members: No diagnosis needed for eligibility; handled through care coordinator

Post-discharge meals include 56 meals (4 weekly coolers of 14 meals)

Meal types include:

- General Wellness
- Heart Healthy
- Diabetes Friendly
- Gluten Free
- Renal Friendly
- Pureed
- Vegetarian



MISSION

Improving life through better nutrition at home.



Mobile Dental Clinic

Eligible: All UCare plans

- Offers basic dental care – checkups, cleanings, simple restorative care
- 15 locations across MN
- Operates 48 weeks of the year
- Check ucare.org/mdc for calendar and scheduling info.





Mobile Dental Clinic

Seven greater MN sites

- Duluth
- Rochester
- Mankato
- Winona
- Walker
- St. Cloud
- Austin

Eight metro sites

- South Minneapolis
- North Minneapolis
- Blaine
- Forest Lake
- West St. Paul
- Eden Prairie
- Roseville
- Apple Valley

One Pass™



Eligible: MSHO, Connect + Medicare



Connect members will NOT have One Pass access in 2025

One Pass is a complete fitness solution for body and mind, available at no additional cost for eligible members. One Pass offers:

- Access to more than 20,000 participating fitness locations nationwide
- More than 20,000 on-demand and live-streaming fitness classes
- Mobile app with a gym locator, daily health summaries, workout trackers, online workout classes, meal planning and nutrition, and achievement tracking.
- Workout builders to create personalized workouts
- Home Fitness Kits
- Personalized, online brain training program to help improve memory, attention and focus
- Over 30,000 social activities, community classes, and events available for online or in-person participation



One Pass

Connect members will NOT have One Pass access in 2025

- Member will lose access to all components of the program including the One Pass app, gym access, online fitness access, social community through Fitbit and the Cognitive Brain Games.
- UCare will send a letter to all members who utilized One Pass at least once in 2024 to inform them of the change.
- Members are not required to submit any financial information or card when registering for a gym membership through One Pass so they should not be charged any gym fees due to this change unless they choose to keep their membership. They would need to transfer their membership type at their gym location.



Send Food Access Referrals

Eligible: All UCare plans

- Partnership with Second Harvest Heartland
- If member is experiencing food insecurity, they can get 1-1 help with SNAP application or finding local food resources via a 2HH advocate.
- Members in need can call the SHH Care Center directly 651-401-1411 or 1-866-844-FOOD (toll free) or email shhcarecenter@2harvest.org
- **For program questions** wellness@ucare.org
 - If there is a specific member question, please include:
 - Name and UCare ID
 - Address (if different from record)
 - Best phone number to reach, email
 - Need help w/ SNAP application?
 - Need help w/ local food resources?
 - Ask for member permission before sending referral



Healthy benefits of quitting

20 MINUTES

Your heart rate drops.

12 HOURS

Carbon monoxide level in your blood decreases to normal.

48 HOURS

Nerve endings start to regrow and the ability to smell and taste is enhanced.

14 TO 90 DAYS

Your heart attack risk drops and lung function begins to improve.

1 TO 9 MONTHS

You may cough less and you don't get short of breath as easily.

1 YEAR ♥

The excess risk of coronary heart disease is half that of a continuing smoker.

Tobacco/Nicotine Cessation

Eligible: All UCare plans

- Call **1-855-260-9713** or visit **myquitforlife.com/ucare**
- 1-on-1 quitting support with a coach via phone or web support
- Free Patches and Gum support to help with quitting
- 4 programs: Adult, Pregnancy, Behavioral Health, & Youth (ages 13-17)
- Mobile app, text support
- Message coaches online, member-only
- Website/resources/workbooks
- E-cigarette/Vaping support



Wellness kits

[Member Fitness Resources for an Active Lifestyle | UCare](#)



- **Connect to Wellness Kits**
 - Eligible: Connect, Connect+Medicare
 - Fitness, Sleep Aid, Stress Relief, Dental, Smart Home Device (SHD **CT+ only**)
 - Weighted Blanket (CT+ only)
- **Memory Support Kit**
 - Eligible: MSHO, ordered by care coordinator
 - Photo album, memory training game, books; weighted blanket, etc.
- **Adult Dental Kit**
 - Eligible: MSHO, Connect+Medicare,
 - Electric toothbrush, charger, toothpaste, floss – 1 every 3 years
 - Refill kit – replacement heads, toothpaste, floss
- **Medication Toolkit**
 - Eligible: MSHO, Connect+Medicare
 - Pillbox alarm, pill splitter, pillbox(2), medication tracker, bag, etc.
- **Strong & Stable Kit** (*Falls prevention*)
 - Eligible: MSHO, MSC+
 - Nightlight, bathtub grips, medication box, simple strength exercises with TheraBand, tip sheets
- **Stress & Anxiety Kit**
 - Eligible: MSHO
 - Sleep Aid, Stress Relief, Smart Home Device
- **ADHD/Autism Kit**
 - Eligible: Connect, Connect + Medicare
 - Metal hand roller, acrobatic fidget, teething tube, phone cord bracelet, ADHD planner

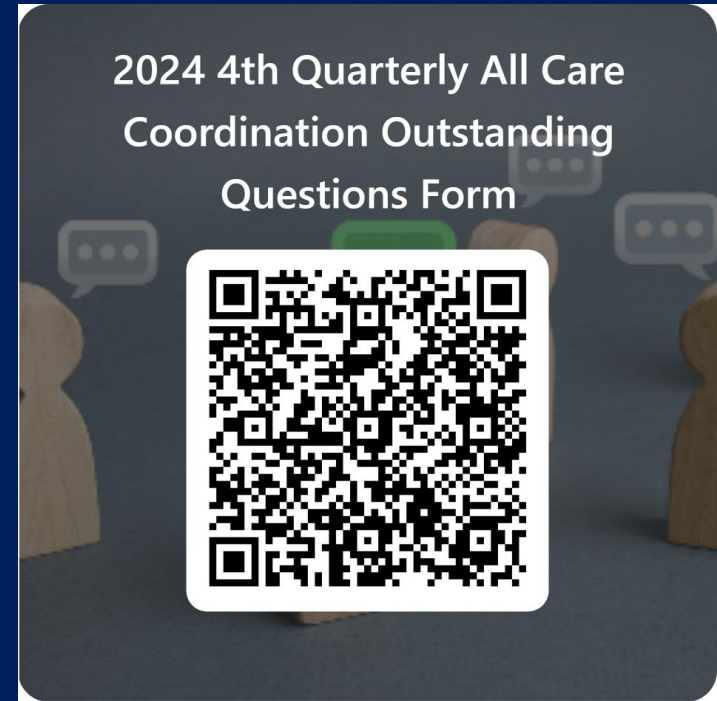


Questions?



Questions?

[2024 4th Quarterly All Care Coordination Outstanding Questions Form](#)



Clinical Liaison Contacts

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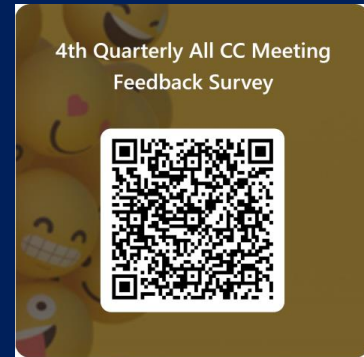
Connect/Connect + Medicare

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We appreciate your feedback!



Please take some time to complete the 4th Quarterly All CC Meeting Feedback Survey

