Health Lines

Welcome, Dr. Tenbit Emiru

Tenbit Emiru, MD, PhD, MBA, joined UCare as the Executive Vice President and Chief Medical Officer. Dr. Emiru will lead the Medical Director team and its Clinical Services, Equity and Inclusion, Mental Health and Substance Use Disorder Services, Pharmacy, Population Health and Quality Management departments.

"Dr. Emiru is a skilled physician, visionary leader, and – most importantly – she is passionate about the members we serve and the communities we support," said Hilary Marden-Resnik, UCare President and CEO. "We are thrilled to have her join our team."

Dr. Emiru has been a Critical Care Neurologist and Chief of Neurology at Hennepin Healthcare (formerly HCMC) in Minneapolis. Dr. Emiru was a member of Hennepin Healthcare's Senior Strategy Team and served on their Finance and Audits/Compliance Committee of the Board. Prior to Hennepin Healthcare, Dr. Emiru was a Medical Director for HealthPartners/Regions Hospital.

In 2018 and 2020, Dr. Emiru was named a "Top Doctor" by Minnesota Monthly. She was also among the "Top Docs and Rising Stars" by Minneapolis St. Paul Magazine in 2017 and 2018.

Dr. Emiru serves on the Board of Directors for the Minnesota Board of Medical Practice and Creating Healthy Communities (CHC), and the Board of Hennepin Healthcare Foundation. She has also been a member of UCare's Quality Improvement and Advisory and Credentialing Committee (QIACC) of the UCare Board of Directors.

In addition to, Dr. Emiru earned a PhD in Psychology and her MD degree from the University of Minnesota. She also completed an Executive Master's in Business Administration (MBA) at the Kellogg School of Management at Northwestern University.

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UCare Provider Website
www.ucare.org/providers

Provider Assistance Center
612-676-3300
1-888-531-1493 toll free

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How To Access the UCare for Providers Webpage

The easiest and most efficient way to access the UCare for Providers webpage, is to visit www.ucare.org/providers.

If you typically reach the provider page via the member home page, www.ucare.org, please review the following steps as our site navigation recently changed:

- Scroll ¾ of the way down the UCare home page (www.ucare.org)
- Within the "For our partners" section, you'll see the "Provider information" box
- Select "Provider tools" and you will be directed to the provider portion of the site (www.ucare.org/providers)

For our partners

Our providers and brokers serve a vital role in our mission to improve the health of UCare members. Find everything you need to team up with us.

Provider information	Broker portal
Information for our health care providers to help deliver the highest quality care.	Resources and tools to help brokers guide clients to the best plan for them.
Provider tools →	Broker tools →

UCare Provider Portal Will Be Unavailable

UCare's Provider Portal will be unavailable from 6 pm, Saturday, Sept. 10, through 9 am, Sunday, Sept. 11, for maintenance testing. Plan to access the portal before or after that time. We apologize for any inconvenience.

Ineligible Provider List Updated August 31, 2022

Contracted UCare providers must make sure that they, their company, owners, managers, practitioners, employees and contractors are not on the UCare Ineligible Providers List.* Providers should search the list of UCare Ineligible Providers on a regular basis, and before hiring or entering into contracts with individuals to provide services or items to UCare members. The most current list can be found under Provider Inquiries on the Provider Portal. Please reference the Provider Responsibilities chapter of the UCare Provider Manual for additional information.

Questions regarding the UCare Ineligible Provider List should be directed to compliance@ucare.org.

*Please note: This list is in addition to any prior and ongoing communications regarding ineligible individuals that network providers may receive.

Update to Prior Authorization Process for Acupuncture Services

In June, UCare notified acupuncture providers that beginning Aug. 8, 2022, UCare's partner, Fulcrum Health, would begin performing medical necessity review on prior authorization requests for acupuncture services, after the threshold limit has been met. This applies to members within UCare's Prepaid Medical Assistance Program, MinnesotaCare, UCare Connect, Minnesota Senior Care Plus, UCare's Minnesota Senior Health Options and UCare Connect + Medicare plans. Reference the June 21, 2022 provider bulletin for additional information on how to submit prior authorization to Fulcrum, out-of-network or non-participating provider prior authorization requests, and claim reconsiderations or appeals.

This change from visits to units occurred on Aug. 8, 2022 and only impact new authorization requests received on or after Aug. 8 2022. When a provider has an existing visit authorization on file for a member and the

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authorization has not been exhausted, UCare will honor the remaining visits. If a member started acupuncture services prior to Aug. 8 2022, the member is eligible for the threshold of 20 visits prior to requiring authorization.

A correction has been made to UCare's medical services prior authorization grids for acupuncture services that require authorization or notification. The grids now state, "Authorization required beyond threshold of 20 **units** per calendar year."

If you believe an authorization or claim was denied between Aug. 8, 2022, and Aug. 23, 2022, based on previous requirements, please contact the Provider Assistance Center at 612-676-3300 or 1-888-531-1493 toll-free or visit www.ucare.org/providers.

Waivered Services Transportation Billing Requirements

There are differences between documentation required for Non-Emergency Medical Transportation (NEMT) services and transportation services that are reimbursed through waivers.

If providers render transportation services and are reimbursed through waivers, providers must maintain specific documentation that meets the requirements to support a member's individual service or plan of care (detailed within MN Statute 256B.4912, subd. 13). UCare may request this documentation at any time.

Inadequate documentation to support claims billed to UCare may be subject to recovery.

Providers should report any suspected fraud, waste, or abuse against UCare or UCare members. Call 1-877-826-6847 for an anonymous reporting option or email compliance@ucare.org.

Real-Time Prescription Benefit Available for UCare Members

Real-Time Prescription Benefit delivers patient-specific benefit information into provider's prescribing workflow, the Electronic Health Record (EHR).

By bringing actionable data to the point of care, this gives providers access to:
- Patient out-of-pocket costs
- Coverage alerts
- Therapeutic options
- Pharmacy choices

With true prescription price transparency, providers are more informed on the correct prescription that should be prescribed. This instills greater patient confidence regarding therapy cost and making them more likely to adhere to it.

For EHRs enabled with Real-Time Prescription Benefit, during the e-prescribing process, patient-specific data is pulled directly from the pharmacy benefit manager to the EHR in less than two seconds. With real-time benefit and cost information, including up to three medication options in the same therapy class along with three pharmacy options, providers can feel confident selecting an ideal medication and know it is covered under the patient's pharmacy benefit plan.

Ensure your EHR has Real-Time Prescription Benefit activated to take advantage of the tool for patients and UCare members.

UCare's Language Profile and Resources

UCare integrates data from several distinct data sources to better understand the language needs and preferences of members. UCare has nearly 91% of its population indicating that they speak English, while the

state statistics from U.S. Census data show that that approximately 89% speak English. The top foreign languages spoken in Minnesota according to U.S. Census data include Spanish, Hmong, Cushite, German and Vietnamese. UCare's top foreign languages spoken among members include Somali (African), Spanish, Hmong, Russian and Vietnamese. As a percentage of membership, the languages spoken by UCare members has remained fairly stable over the last two years. UCare continues to analyze language data to identify any emerging trends or changes in language needs among UCare members.

The following resources are available to support providers in serving UCare's linguistically and culturally diverse members:

Language Assistance Resources on Culture Care Connection
UCare and HealthPartners worked together to identify a collection of language resources for Minnesota health care providers. The language resources are displayed on Culture Care Connection, an online learning and resource center that supports clinical and non-clinical health care professionals to reduce health disparities and promote health equity.

The collection of language resources is intended to support you in advancing culturally responsive care in your practice and provide the health care community with tools to improve communication with individuals and families who speak a language other than English. The sampling of language resources includes patient-facing communication tools and educational resources. There is a language resource available for each threshold language. Threshold languages are languages other than English spoken by 1,000 individuals based on U.S. Census data.

In addition, Culture Care Connection offers a variety of training resources for health care professionals on the provision of language services and providing culturally congruent care. Check out these and many other resources at http://www.culturecareconnection.org/cultural-responsiveness.

Interpreter Services and Resources
To support UCare providers in providing culturally and linguistically appropriate care, UCare provides information on Interpreter Services, including training on how to access interpreter services, professional standards for interpreters, and how to work with interpreters. Refer to the Interpreter Services chapter in UCare's Provider Manual for more information.

Medical and Pharmacy Benefit Duplicate Payments and Recoupment Process Reminder

UCare performs quarterly duplicate payment audits of medical benefit and pharmacy benefit claims submitted for all plan types except Medicare Supplement Plans.

This quarterly audit has a lookback period of 12 months. Duplicate claims are recouped under the medical benefit, or Medicare Part C, and are identified on the Explanation of Payment (EOP) with CARC OA18 and RARC N522.

Providers are expected to bill with the FB modifier when submitting medical claims to UCare in situations where the item or medication is provided without cost to the provider. A $0 reimbursement will be applied to claim lines appended with modifier FB.

Please contact UCare's Provider Assistance Center at 612-676-3300 or 1-888-531-1493 with questions.

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Identify Hidden Health Care Gaps with Risk Screening Tools and Resources

The initial step to identify risk, is to have patients complete (independently or with assistance) a screening process. Once risk factors are clear, they can be translated into social needs, and providers can connect individuals with the most appropriate community resources.

Through Culture Care Connection, physicians and other clinical and non-clinical health care professionals can find risk screening tools to help them provide linguistically and culturally appropriate care to patients. This online learning and resource center was co-developed by UCare and Stratis Health.

Below are samples of risk screening aids:
- CMS Accountable Health Communities Health-Related Needs Screening Tool
- PRAPARE Training and Resources
- Implicit Bias in Health Care Quiz

Falls Prevention Awareness Month

Falls are the leading cause of fatal and non-fatal injuries for older adults. Each year one in three adults, age 65 or older, experiences them. Since falls are common, many older adults develop a fear of falling. This fear may cause them to limit their activities which leads to reduced mobility, loss of physical fitness and an increased risk of falling. Dangerous falls can happen to anyone, at any time.

UCare encourages providers to assess every patient over 65 years of age for fall risk and talk to them about falls prevention measures. For more information visit www.ucare.org/falls.

UCare offers the following tools to help prevent falls.

Strong & Stable Kit
UCare Medicare Plans, UCare Medicare with M Health Fairview & North Memorial Health, UCare Advocate Choice, UCare Advocate Plus, UCare's Minnesota Senior Health Options (MSHO) and Minnesota Senior Care Plus (MSC+) members are eligible for one kit per year.

Members can contact their care coordinator or case manager to order a kit. Kits include:
- Resistance bands
- Tip sheets with helpful falls prevention advice
- Tub grips
- Nightlight
- Medication box

Juniper®
UCare's Minnesota Senior Health Options (MSHO) members have access.

The Juniper® program includes evidence-based health management and wellness classes. These resources help members get fit, better manage their chronic conditions and prevent falls.

Encourage members to visit www.yourjuniper.org to register. Online classes are available.

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Lutheran Social Service - Community Companion
UCare's Minnesota Senior Health Options (MSHO) members are eligible.

Lutheran Social Service of Minnesota's Community Companion service offers individualized support, education and resources to all UCare MSHO members during the first, critical, 30 days after a stay in the hospital or a short-term rehabilitation center. The member who returns home from the hospital or rehabilitation center, is paired with a trained and certified Community Health Worker. This worker provides a series of four touchpoint visits (two in-home and two telephone). Several topics are reviewed and shared with the member's Care Coordinator including:

- Discharge documentation
- Home safety
- Fall risks
- Nutrition
- Medications
- Socialization
- Appointment setting
- Appointment transportation
- Short-term goal setting
- Resources and referrals to other providers
- Additional member considerations

UCare MSHO members who qualify for the Community Companion service must meet the following criteria:
- Be enrolled as a UCare MSHO member
- Have recently been, or will soon be, discharged from a hospital or skilled nursing facility
- Will return to an independent living environment, such as a home or assisted-living facility
- Can actively participate in the service

If you know a member who may benefit from this program, contact their Care Coordinator or Customer Service at 612-676-3200.

Documentation Improvement: Neoplasm (Cancer)

Proper documentation of neoplasm or a cancer diagnosis is required for accurate reporting. The primary step to complete documentation and coding is to determine if the cancer is current or historical. Patients receiving active treatment for cancer, should be documented with the appropriate neoplasm diagnosis. Once there is no evidence of the cancer and the patient is no longer undergoing active treatment, documentation should reflect a "personal history of malignant neoplasm" with the associated site. The appropriate Z code per anatomical site would be used for reporting.

When documenting an active cancer, include the following:
- **Anatomical site:** document the location of the cancer (e.g., breast, colon, prostate, etc.).
- **Behavior or cell type:** note whether the cancer is primary or secondary malignant, in situ, benign, of uncertain behavior, or of unspecified nature or behavior.
- **Metastatic sites:** be sure to include any secondary (metastatic) sites in the medical record.
- **Related conditions:** conditions related to, or caused by, the cancer are often discussed and treated but not documented (e.g., protein-calories malnutrition, diabetes mellitus secondary to cancer, anemia due to cancer, etc.).

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- **Treatment:** active treatment includes chemotherapy, radiation therapy, adjunct therapy or surgical treatment.
- **Complications:** cancer and its treatment can cause several complications such as weight loss, nausea and/or fatigue.

Strengthen the integrity of your patient's medical record by understanding these documentation needs. Documenting cancer to the highest degree of specificity will reflect the patient's true health status and improve patient care.

ONLINE	Call	EMAIL	MAIL
www.ucare.org/providers	612-676-3300, 1-888-531-1493	providernews@ucare.org	UCare, P.O. Box 52, Minneapolis, MN 55440-0052

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