

Health Lines



October 2024

“A Salute to Excellence!” celebrates 23 providers

On Sept. 19, UCare held the 16th annual “A Salute to Excellence!” event at the Delta Hotels in northeast Minneapolis. The event honored 23 Minnesota clinics and care systems with top results in 2023 Healthcare Effectiveness Data and Information Set (HEDIS) measures. Awards were given for health care providers who delivered high-quality care to UCare’s Medicare, Medicaid and Special Needs Plan members.

Thrifty White Health – a pharmacy chain providing healthcare to small towns and cities in the rural Midwest – received UCare’s Innovation Award for helping UCare patients stay on track with preventive care and medication compliance.

This year’s event opened with a welcome from UCare President and CEO Hilary Marden-Resnik and featured a lively conversation with Dr. David Hilden from Hennepin Healthcare and UCare Executive Vice President/Chief Strategy Officer Marie Zimmerman about health care advocacy and how providers can make a difference for their patients and their practice.

UCare Executive Vice President and Chief Medical Officer Tenbit Emiru, MD, PhD, MBA, honored the following clinics and care systems across Minnesota and surrounding areas:

- Astera Health
- Avera Health System
- Axis Clinics
- Bluestone Physician Services
- CentraCare
- Cham Clinic & Urgent Care
- Children’s Health Network
- CommonSpirit Health
- Fairview Physician Associates Network
- Fairview Range
- Grand Itasca Clinic & Hospital
- HealthPartners/Park Nicollet
- HealthPartners/Stillwater Medical Group
- Lakewood Health System
- M Physicians
- Mankato Clinic
- Mayo Clinic
- Northfield Hospital and Clinics
- Olmsted Medical Center
- Riverland Community Health Center
- Sanford Health
- Voyage Healthcare
- Winona Health Services

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UCare provider website
www.ucare.org/providers

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

Medical drug prior authorization (ePA) request portal change

As of Oct. 1, providers must submit medical drug prior authorization (ePA) requests through www.EviCore.com; they can no longer be submitted through ExpressPath.

- Care Continuum (CCUM) will continue to manage the Medical Drug program and utilization review.
- www.EviCore.com serves as a single sign-on portal, allowing providers to submit prior authorization requests online.
- Requests can also be made via phone at 1-800-818-6747 or fax to 1-877-266-1871; there have been no changes for phone or fax requests.
- Technical support for the www.EviCore.com portal is available by phone at 1-800- 646-0418 option two or by email to EviCore's Portal Support team at portal.support@evicore.com.
- Case status or inquiries are available through the EviCore portal or by calling CCUM at 1-800-818-6747.

Providers are invited to attend the online orientation about using www.EviCore.com on Oct. 9 at 2 pm CT. This orientation session is complimentary, lasts about one hour and requires registration.

How to register

1. Go to evicore.webex.com.
2. Select "WebEx Training" from the menu bar on the left.
3. Click the "Upcoming" tab. Choose "UCare portal Migration Provider Orientation."
4. Click "Register" next to the session you wish to attend.
5. Enter the registration information.

Important: After registering, providers will receive an email. Keep this email as it contains the link to the web portion of the session and other important information.

Coding corner – replacement and void claims - facility

UCare uses Claims Editing System (CES), an automated claims editing software to adjudicate claims based on regulatory guidelines and industry standards. This periodic column highlights upcoming changes and tips to help providers submit clean claims.

UCare adheres to the Centers for Medicare & Medicaid Services (CMS) requirements for submitting adjusted or replacement claims.

The [Medicare Claims Processing Manual, Chapter 1](#) advises the following:

- *Section 130.1 – General Rules for Submitting Adjustment Requests (replacement claims)* - providers must submit all adjustment requests as bill type "xx7" provider (debit) or "xx8" provider (credit).
- *Section 130.1.2.1 – Claim Change Reason Codes* - with each adjustment request, claims must be submitted with a claim change reason code entered as a condition code on the hard copy Form CMS-1450 or the electronic equivalent. If not, the claim will be returned to the provider.
 - If the type of bill is equal to xx7, the claim change reason code must be equal to D0-D4, D7-D9 or E0.
 - If the type of bill is equal to xx8, the claim change reason code must be equal to D5-D6.

Additional guidance for submitting void and replacement claims is available in the [State of Minnesota Uniform Companion Guide](#), section 2.3.2.1 – *Adjustments*, and the Administrative Uniformity Committee (AUC) Best Practices.

Verification of health care provider information

The Minnesota Department of Health (MDH) regulates health plans to ensure they maintain adequate provider networks. Soon BetterDoctor, a division of Quest Analytics LLC, will contact Minnesota providers and direct them to verify their provider data on behalf of MDH.

Visit the [MDH Accuracy Fact Sheet](#) and [BetterDoctor FAQ](#) pages for more information.

Breast Cancer Awareness Month

October is Breast Cancer Awareness Month and early detection is key to fighting and preventing breast cancer. Therefore, UCare covers 2D mammograms, 3D mammograms and transportation services.

Members don't always see the importance of regular breast cancer screenings due to their lack of knowledge about the exam or barriers. Talk with your patients to try to address their barriers. Barriers may include misunderstanding the differences between a 2D or 3D mammography, embarrassment and fear or anxiety, lack of family support or time, or discomfort.

Simple ways to minimize patient anxiety include:

- Give the patient information during the examination
- Have clinical staff address the patient with a positive attitude
- Provide positive, factual data and statistics about breast cancer
- Be cognisant of the patient's potential discomfort

The [Health Improvement Team](#) helps schedule mammograms, transportation and interpreter services. They can be reached at 612-676-3481, 833-951-3185 or outreach@ucare.org with questions.

Documentation improvement

Documentation and coding compliance: breast cancer

In recognition of Breast Cancer Awareness Month, we focus on documentation and coding compliance for breast cancer.

Compliant documentation should include:

- Primary site (including the organ affected and the location in the organ)
- Laterality
- Histology
- Malignant or benign
- Stage and grade
- Treatment or treatment plan
- Any secondary sites noting the primary site
- Any lymphatic involvement

For both males and females, active malignant neoplasms of the breast are under ICD-10-CM code category C50.

Category C50, Malignant Neoplasm Breast, contains an instructional note to use additional code to identify estrogen and other hormones and factors receptor status (Z17.0, Z17.1).

Providers should **not** document "history of neoplasm" or "no evidence of disease (NED)" if the neoplasm is still being actively treated, even if it has been excised. Instead, document the continuum of care, noting what has been done and what is left to do.

If targeted or immunotherapy is prescribed, document whether the medication is treatment for active cancer or prophylaxis against the cancer's return.

- Active treatment would result in an active neoplasm code.
- Prophylaxis would result in a history of cancer code.

According to the [ICD-10-CM coding guidelines](#), "When a primary malignancy has been previously excised or eradicated from its site and there is no further treatment (of the malignancy) directed to that site and there is no evidence of any existing primary malignancy at that site, a code from category Z85, Personal history of malignant neoplasm, should be used to indicate the former site of the malignancy."

UCare Tobacco & Nicotine Quit Program for maternity

This program helps members who are planning a pregnancy, are pregnant or postpartum, quit smoking, chewing tobacco and vaping. Members have access to specially trained quit coaches, behavioral support with relapse prevention, as well as outbound and inbound coaching calls.

Eligible members can call the UCare Tobacco & Nicotine Quit Line at 1-855-260-9713, download the Quit for Life mobile app on a smartphone or visit myquitforlife.com/ucare to get started. Members who complete an initial assessment will receive a \$25 gift card.

Model of Care training

UCare provides annual training on UCare's Model of Care for Dual Eligible Special Needs Plans (D-SNP) and Institutional Special Needs Plans (I-SNP). The Model of Care training gives an overview of the plan's population, network and UCare's approach to supporting members.

UCare's SNP members face a host of unique challenges and barriers to access the care they need. UCare's Special Needs Plans are designed with a unique set of benefits and services to help reduce barriers and assist members in managing their care.

UCare and the Centers for Medicare & Medicaid Services (CMS) **require** that all providers who work with UCare's Minnesota Senior Health Options (MSHO), UCare Connect + Medicare, UCare Advocate Choice and UCare Advocate Plus members complete Model of Care training and submit a completed Model of Care Attestation form, which can be found on the [UCare Model of Care Training for Providers page](#).

Providers have three options to complete the training:

- Access a recorded training on our [website](#).
- Register for a scheduled live WebEx event using the calendar links on the [UCare Model of Care Training for Providers page](#).
- Email MOCAtestation@ucare.org to request in-person or virtual training.

Fraud, waste and abuse reporting reminder

UCare takes a proactive approach toward stopping [fraud, waste and abuse](#) (FWA). Health care resources are limited, we ensure they are devoted to meeting genuine health needs. Providers should call 1-877-826-6847 for an anonymous reporting option or email compliance@ucare.org to report any suspected FWA against UCare or UCare members.

How to search UCare's website libraries

The UCare website houses numerous content libraries ([Provider News](#), [Medical Drug Policies](#), [Coverage Policies](#), [Payment Policies](#), etc.). When searching for specific content within those libraries, type a keyword in the Search bar in the upper left-hand corner of the library. The library defaults to showing all entries alphabetically by the first column. Providers can sort the library by any column, using the up and down arrows to sort in ascending or descending order.

News Archive

To find a specific provider communication, use the "Document Name," "Date Published" or "Communication Type" columns or enter a key word in the search box.

Search:

Show 10 entries

Sort button

Document Name	Date Published	Communication Type
2024 Authorization and Notification Requirement Grids Now Available	2023-11-13	Bulletin
2024 Code and Editing Updates	2023-12-01	Bulletin
2024 Product and Benefit Changes	2023-11-08	Bulletin

UCare Provider News emails

If you know someone who could benefit from receiving news and alerts from UCare Provider Communications, invite them to sign up for UCare provider emails [here](#). Once they sign up, they will receive monthly *Health Lines* newsletters and bulletin updates from UCare.

Note: Workplace security often filters emails that could be spam. As a result, emails providers signed up to receive can end up in spam or junk folders. Add the providernews@ucare.org email address to the safe senders or contact list to ensure this doesn't happen with UCare Provider Communications emails. Each email platform's settings differ; check with your IT department or email provider for instructions on how to do this.

This email inbox is not monitored and should not be used as a way to communicate with UCare departments. Please contact the Provider Assistance Center instead.

Upcoming holidays

UCare and the Provider Assistance Center (PAC) will be closed on the following days:

- Thursday, Nov. 28, 2024 – Thanksgiving Day
- Friday, Nov. 29, 2024 – Day after Thanksgiving
- Tuesday, Dec. 24, 2024 – Christmas Eve Day
- Wednesday, Dec. 25, 2024 – Christmas Day

If you need assistance during this time, self-service will be available through the Interactive Voice Response (IVR) system or by logging into the Provider Portal to verify eligibility, check claims status or send a message to PAC.