



Medicaid providers required to enroll with Minnesota Health Care Programs (MHCP) – Deadline extended

The federal 21st Century Cures Act requires all Medicaid managed care organization (MCO) contracted network providers (organizations and individuals) to be screened and enrolled with State Medicaid programs. The Minnesota Department of Human Services (DHS) previously announced MCO network providers must enroll with Minnesota Health Care Programs (MHCP) by July 15, 2024 (see <https://mn.gov/dhs/health-care/provider-news>).

DHS has extended the enrollment requirement date to **Sept. 16, 2024**. You must enroll with MHCP or your contract with UCare may be discontinued and/or your claims may deny starting October 2024.

The Sept. 16, 2024, enrollment date does not apply to the following provider types that require a site visit from the Minnesota Department of Human Services (DHS):

- Provider type 10 – Community Mental Health Center
- Provider type 11 – Rehab Agency
- Provider type 46 – Day Treatment
- Provider type 64-O – Home Care Nursing Organization
- Provider type 82 – Medical Transportation

The providers in the bulleted list must enroll by Dec. 31, 2024. MHCP will conduct an announced site visit within 60 days of the referral date for those providers. These providers must complete both the enrollment process and site visit by Dec. 31, 2024.

Actively enrolled fee-for-service providers with an existing UCare contract do not need to repeat the screening and enrollment process.

Note: *When providers enroll with MHCP, it does not commit them to scheduling or serving patients with straight Minnesota Medical Assistance. MHCP enrollment is not a "[Fee-for-Service \(FFS\) only or FFS and Managed Care Organization In-Network Provider Agreement](#)."*

If you are a new provider, the DHS website has resources that explain how to enroll. Follow the link provided here: [New Organization Provider Enrollers](#).

Things to consider:

1. If you have more than one business location that provides a service, you must enroll at each business

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UCare provider website
www.ucare.org/providers

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

location, even if they share the same tax ID and/or National Provider Identifier (NPI).

2. Individual Practitioners only need to enroll once at a single location address to be eligible at all locations where they provide services to patients.

Existing providers who fail to comply with the federal enrollment mandate will be removed from the MHCP provider network and will no longer be eligible to receive payments for MHCP members.

Enrollment portal

The [MPSE portal](#) is the online application providers can use to enroll with MHCP. Providers can also use the MPSE portal to update enrollment information.

Training available

MPSE offers a variety of [training options](#) for providers, including:

- On-demand videos that provide quick instruction on a concept or technique.
- MPSE Weekly Question and Answer Sessions – Wednesdays from 1 to 2 pm on the portal training site; no registration is required. See the training site for details, rescheduled sessions or cancellations.

Additional resources and information

- Review the information and frequently asked questions on the [Enroll with Minnesota Health Care Programs webpage](#). Bookmark this page for future reference.
 - Click the + next to “Enrollment process for managed care organization (MCO) network providers.”
- Review the [Enrollment with MHCP](#) section of the MHCP Provider Manual.
- Sign up for [MHCP news and updates](#).
- Review the [MPSE FAQs](#).
- Contact the MHCP Provider Resource Center at <https://mn.gov/dhs/health-care/provider-resources> with additional questions.

Update to UCare’s Provider Manual

UCare has updated the Home Care Services chapter of the [Provider Manual](#). Specific updates are called out in the Appendix.

Flu season

An annual flu vaccine is one of the easiest and most effective ways to prevent the flu. Provider recommendations can impact patient decisions, so encourage your patients to protect themselves and their families by getting an annual flu vaccine.

UCare covers flu shot costs anywhere: at their doctor’s office, a local pharmacy or convenience clinics like Minute Clinic. Members show their UCare member ID card to receive their flu vaccine. It is also recommended that members age 65 or older receive a pneumococcal vaccine.

The [Health Improvement Team](#) helps members schedule flu shots, transportation and interpreter services. Advise members to call 612-676-3481 or 1-833-951-3185, or email outreach@ucare.org for assistance, or to call 1-800-864-2157 (TTY 1-800-688-2534) to arrange flu shot transportation.

UCare will sponsor the following Flu Clinics this fall:

Location	Address	Date	Time
Asia Community Center	710 Arcade St. St. Paul, MN 55106	Sept. 11, 2024	10 am – 2 pm
Children’s Health Network - Minneapolis	2530 Chicago Ave. S. Minneapolis, MN 55404	Sept. 14, 2024	9 am – 1 pm
Kashia Adult Day Center	5650 Lilac Dr. Brooklyn Center, MN 55430	Sept. 17, 2024	10 am – 1 pm
Children’s Health Network - Maple Grove	12720 Bass Lake Rd. Maple Grove, MN 55369	Sept. 21, 2024	8:30 am – 5 pm
United Cambodian Association of Minnesota	1385 Mendota Heights Rd. #500 Mendota Heights, MN 55120	Sept. 24, 2024	10 am – 12 pm
Southdale YMCA	7355 York Ave. S. Edina, MN 55435	Sept. 25, 2024	9 am – 2 pm
Children’s Health Network - Minnetonka	6060 Clearwater Dr. Minnetonka, MN 55343	Sept. 26, 2024	8 am – 12 pm
Midway YMCA	1761 University Ave. W. St. Paul, MN 55104	Oct. 1, 2024	9 am – 12 pm
Shoreview YMCA	3760 Lexington Ave. N. Shoreview, MN 55126	Oct. 5, 2024	10:30 am – 12:30 pm
Hmong Elders Adult Day Center	1337 Rice St. St. Paul, MN 55117	Oct. 7, 2024	10 am – 12 pm
New Hope YMCA	7601 42 nd Ave. N New Hope, MN 55428	Oct. 10, 2024	10 am – 12:30 pm
Centro Tyrone Guzman	1915 Chicago Ave. Minneapolis, MN 55404	Oct. 18, 2024	3 pm – 6:30 pm
Children’s Health Network - Brooklyn Park	8500 Edinbrook Pkwy. Brooklyn Park, MN 55443	Oct. 19, 2024	8 am – 12 pm
Children’s Health Network - Maple Grove	12720 Bass Lake Rd. Maple Grove, MN 55369	Oct. 20, 2024	8 am – 5:30 pm
Children’s Health Network – Rogers	13980 Northdale Blvd. Rogers, MN 55374	Oct. 26, 2024	8 am – 12 pm
Southdale YMCA	7355 York Ave. S. Edina, MN 55435	Oct. 29, 2024	9 am – 2 pm
University YMCA - Minneapolis	1801 University Ave. SE Minneapolis, MN 55414	Nov. 7, 2024	3:30 pm – 6 pm

Coding corner – Medically Unlikely Edits

UCare uses Claims Editing System (CES), an automated claims editing software to adjudicate claims based on regulatory guidelines and industry standards. Additionally, UCare adheres to frequency limitations or requirements set forth by both the Centers for Medicare & Medicaid Services (CMS) and Minnesota Health Care Programs (MHCP). This periodic column highlights upcoming changes and tips to help providers submit clean claims.

Medically Unlikely Edits (MUE) for a HCPCS/CPT code are the maximum units of service (UOS) that a provider would report under most circumstances for a single person on the same date of service.

UCare’s claim processing system adjudicates **Medicare** claims as follows when an MUE limitation has been exceeded:

- The MUE files on the [CMS National Correct Coding Initiative \(NCCI\) website](#) display an "MUE Adjudication Indicator" (MAI) for each HCPCS/CPT code.
 - An MAI of "1" indicates that the edit is a claim line MUE.
 - An MAI of "2" or "3" indicates that the edit is a DOS MUE.
- If a HCPCS/CPT code has an MUE that is adjudicated as a claim line edit, (i.e., MAI of "1") appropriate use of HCPCS/CPT modifiers (i.e., 59 or XE, XP, XS, XU; 76, 77, 91, anatomic) may be used to report the same HCPCS/CPT code on separate lines of a claim. Each line of the claim with

that HCPCS/CPT code will be separately adjudicated against the MUE value (maximum units per day) for that HCPCS/CPT code.

UCare's claim processing system adjudicates **Medicaid** claims as follows:

- The MUE files on the [CMS NCCI website](#) publish the assigned MUE value. Each line of a claim is adjudicated separately against the MUE value located for the HCPCS/CPT code reported on that line. If the unit of service on that line exceeds the MUE value, the entire line is denied.

Please bill according to the MUE/MAI guidelines. If billing guidelines are not followed, regardless of whether billed on a single line or multiple lines, **all units will be denied if the MUE value is exceeded.**

Correct billing is required. Providing medical records alone will not ensure adjustment.

When reviewing claims/services denied due to exceeding the number of allowable units/days, providers may refer to the following sources for guidance:

- CMS National Correct Coding Initiative (NCCI) Medically Unlikely Edits
- Medicare Administrative Contractor (MAC) – Celerian Group Services (CGS), National Government Services (NGS)
- MHCP Provider Manual
- MHCP Medical Supply Coverage Guide
- [National Correct Coding Initiative Policy Manual](#)
- [UCare Provider Manual](#)

UCare Seats, Education and Travel Safety (SEATS) Program

Eligible for Prepaid Medical Assistance Program, MinnesotaCare, Individual and Family Plans, UCare Connect and UCare Connect + Medicare members.

The SEATS program provides free car seats, installation, and safety education from certified car seat technicians through trusted partners to all eligible UCare members.

The following members are eligible to receive a free car seat; limits may apply:

- Pregnant members within their third trimester
- Children age seven and younger

Encourage members to call the UCare Customer Service phone number on the back of their UCare member ID card for car seat partner information.

Effective Oct. 1, 2024: Over-the-counter (OTC) allowance will be available on the UCare Healthy Benefits+ Visa card

Eligible for Minnesota Senior Health Options (MSHO) and UCare Connect + Medicare members.

To improve member experience, UCare will move the \$60 quarterly OTC allowance to the UCare Healthy Benefits+ Visa card beginning Oct. 1, 2024. The affected members received a letter mailed at the end of August to notify them of the program enhancement.

Currently, members can only use the OTC allowance online or over the phone through CVS OTC Health Solutions. Starting Oct. 1, 2024, members will be able to use the allowance, in person, online or over the phone at multiple participating retailers, including Walmart, CVS and more.

The OTC allowance expires at the end of each quarter or upon plan termination. The Healthy Benefits+ card won't work for non-UCare members.

The Healthy Benefits+ card offers the flexibility and convenience of one card for:

- **OTC allowance** (effective Oct. 1, 2024)



- **Healthy food allowance** (for MSHO and UCare Connect + Medicare members with eligible chronic conditions)
- **Utility bill allowance** (for MSHO members with eligible chronic conditions)
- **Grocery discounts**
- **Rewards**

Members who already have a Healthy Benefits+ card can continue to use it. Members who haven't received a card will be mailed one at the beginning of October.

Learn more about the UCare Healthy Benefits+ Visa card:

- It is reloadable, members can use the card year after year
- UCare does not automatically send new cards each year
- It works until it expires or the plan terminates – it won't work for non-UCare members
- It is not linked to the member's bank account
- Allowance amounts and expiration dates vary by program

Encourage members to visit healthybenefitsplus.com/ucare, call 1-833-862-8276 (TTY 711) or log into their UCare online member account to:

- Learn about eligible allowance and reward programs
- View eligible health items online and place an order
- Request a catalog
- Check their balance
- Go over recent transactions
- Find participating locations

Disease Management overview

Disease Management (DM) engages with UCare members across all product lines who are living with chronic conditions. These programs focus on meeting members where they are in their health journey. Our program aims to promote healthy living, improve quality of life and promote self-care efforts and treatment plans to help members better manage their conditions.

Program topics include:

- Asthma
- Chronic obstructive pulmonary disease (COPD)
- Chronic kidney disease (CKD)
- Diabetes
- Hypertension
- Heart failure
- Migraines
- Weight management

Delivery modes include reminder mailings, newsletters, phone apps, interactive voice response (IVR) or text message education, one-to-one telephonic education and coaching programs.

The DM team works closely with Case Management, Pharmacy, Health Improvement, Health Promotion and provider teams to assist members in self-management of their chronic conditions. The team accepts referrals for all programs and assists members with referrals to other programs and resources.

Visit the [Managing health conditions](#) page for more information. To send a referral, visit the [Disease Management page](#), email Disease_mgmt2@ucare.org or leave a voicemail at 612-294-6539 or 866-863-8303.

Accurate member information is key to smooth claim submissions

Each time a member presents for services, providers should ask for a current insurance card. This allows you to update information in your electronic records system, which can reduce rejected claim submissions or delayed claims processing.

When submitting a claim, the UCare member ID number listed on the card, or given on the electronic eligibility and benefit transaction, should be submitted exactly as provided; no digits should be added or excluded. Please note that all UCare members have their own unique member ID number. Do not submit claims using the subscriber ID number with a dependent code.

Maintaining current insurance information for members is imperative to successful and timely claims processing. Incorrect member information can initiate suspected fraudulent claims investigations and HIPAA violations. Please remember to verify that the information on the claim submission matches the information of the member receiving the service (name, member ID number, birth date, address, etc.).

Reminder: UCare Medicare Part D vaccine information

As a reminder, UCare denies claims for providers administering Part D vaccines in their clinics.

The preferred method is to have Part D vaccination provided at a pharmacy. A member would buy a Part D vaccine and have it administered at the pharmacy. The member would only be responsible for the coinsurance or copayment.

Shingrix and Tetanus vaccines are covered as Tier 1 medication for Medicare members when the member is vaccinated at a pharmacy.

Additional information about Part D vaccines is available in the Claims and payment chapter of the [Provider Manual](#).

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.