



UCare to retire legacy Provider Portal

UCare is retiring its legacy Provider Portal. Starting Aug. 1, 2025, users will no longer be able to use the legacy Provider Portal as of that date and should plan to use the [current Provider Portal](#) instead. As a reminder, UCare will launch its Availity Provider Portal at a later date; the launch date has not yet been determined.

Provider Portal Administrators (Provider Admin) for an organization set up their organization's users and assign access. Users should contact their organization's Provider Portal Admin if they are a:

- Legacy Provider Portal user who does not have access to the current Provider Portal.
- Current Provider Portal User with questions about portal access.

For assistance, the Quick Reference, Admin and User Guides are available on the [current Provider Portal login page](#). Once users have access to the portal and are logged in, they can access a Frequently Asked Questions page by clicking the "?" in the upper right corner. This page covers common questions about the new portal and links to recorded training sessions.

Contact UCare's Provider Assistance Center for additional information.

How to access Provider News items when links are blocked

Companies have introduced enhanced security tools to prevent phishing schemes and stop "bad actors" from accessing their systems. These added protections make it challenging for some subscribers of UCare's provider newsletters and alerts to open links in emails for *Health Lines* and Provider Bulletins.

Providers who subscribe to receive these emails but are unable to open links within our emails have a few options:

- Work with your IT department to see if there's a way to add UCare to a safe sender list or something similar to prevent the links from being blocked.

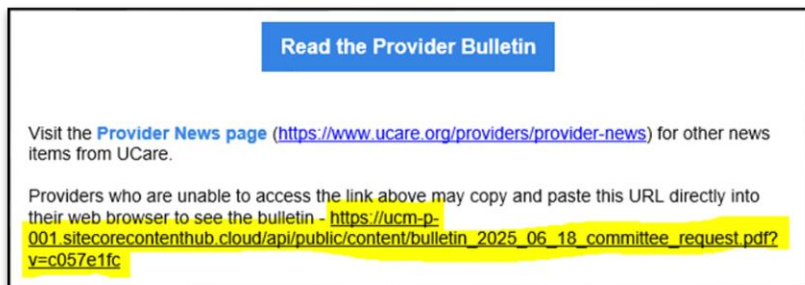
Table of Contents

UCare to retire legacy Provider Portal	1
How to access Provider News items when links are blocked	1
UCare partners with Carelon for utilization management of genetic testing authorizations	2
Coding corner	2
New Coverage Policies added	2
Ineligible Provider List updated June 25, 2025	2
UCare's provider training	3
Child and Teen Checkups (C&TC) ...	3
Ketamine infusion policy	3
Self-administered drug exclusion on medical benefit	3
Medical drug predetermination review process	4
Enhanced medical drug biosimilar step therapy criteria update	4
Documentation improvement: Focus on obesity	4
Model of Care training	5
Food access referrals through Second Harvest Heartland	5
Grocery discounts	6
Healthy Food Allowance	6
Fraud, waste and abuse reporting reminder	6

UCare provider website
www.ucare.org/providers

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

- Copy the URL listed below the “Read the Provider Bulletin/Newsletter” button and paste it into your browser. Do not click the link, as it is likely blocked, too.
- Visit UCare’s Provider News page (<https://www.ucare.org/providers/provider-news>), scroll to the



“News Archive,” and click the arrows in the “Date Published” column twice. All bulletins and newsletters will be listed in date order from newest to oldest.

UCare partners with Carelon for utilization management of genetic testing authorizations

As announced in the [May 1 Provider Bulletin](#), UCare has partnered with [Carelon](#) to perform utilization management review for genetic testing authorizations. This change applies to genetic testing services for members in all UCare products, except Medicare Supplement plans.

Providers ordering genetic testing should contact Carelon for prior authorization.

- Carelon provider portal: <https://www.providerportal.com/> registration required
- Phone number: 1-833-821-1954

Carelon will host training for providers on Friday, July 11, 2025, from 1-2 pm, [register here](#). All registrants will be sent Carelon solution training materials prior to their training date.

Coding corner

Reminder for billing Rural Health Clinic (RHC) services

This requirement applies to RHC claims submitted on an UB-04 or CMS-1450 for the following plans: UCare Individual & Family Plans, UCare Individual & Family Plans with M Health Fairview, UCare Connect + Medicare, UCare Medicare Plans, UCare Medicare with M Health Fairview & North Memorial and UCare’s Minnesota Senior Health Options.

RHCs are reminded to bill services to UCare in accordance with Centers for Medicare and Medicaid Services (CMS) guidelines, including all required data elements and reporting of modifier CG. At this time, CMS guidance is that RHCs should report modifier CG on one line with a medical and/or mental health HCPCS code that represents the primary reason for the medically necessary face-to-face visit.

Refer to the [CMS Claims Processing Manual](#) and [RHC Reporting Requirements FAQs](#) for details on the required elements.

New Coverage Policies added

UCare posted the following new Skin-Substitute Grafts coverage policies, effective Sept. 1, 2025:

- UCare Individual and Family Plans (IFP) - CP-IFP25-044A
- Medicare - CP-MCR25-012A

UCare Coverage Policies clarify and specify the benefit sections of the UCare product contract. The specific contract is noted on each new or updated coverage policy. All UCare Coverage Policies are available on the [UCare website](#).

Ineligible Provider List updated June 25, 2025

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.

For the most current list, contact providercontracts@ucare.org for assistance. For additional information, refer to the Provider responsibilities chapter of the [UCare Provider Manual](#).

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

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

UCare's provider training

In 2025, UCare kicked off monthly, virtual training opportunities for participating providers, as well as separate training specifically designed for Elderly Waiver (EW) providers. These trainings give providers a better understanding of the following:

- UCare programs available for members
- UCare enrollment processes and requirements
- UCare provider portal and clearinghouse requirements
- Authorization and notification information
- General UCare claim processing overview and tips
- How to notify UCare of administrative changes
- How to access resources and assistance within UCare

Upcoming trainings are scheduled for July 17 and Aug. 21. Providers can visit UCare's [Training and education](#) page to register for live trainings. Open the "Elderly Waiver Services (+)" accordion for the EW training schedule and registration links or the "Working with UCare Provider Training (+)" accordion for the schedule and links for all other providers.

Note: The same information will be shared at each monthly offering. Providers interested in the training need only to sign up for one session.

Child and Teen Checkups (C&TC)

UCare members from birth through age 21 need regular C&TC to ensure they are healthy and receive their immunizations. C&TC are free for UCare members. Members can also receive gift cards through [UCare's C&TC Rewards](#) when current on shots and tests that can be done at C&TC screenings.

Advise members to call their primary care clinic or local public health agency to schedule a C&TC visit. If members have questions, advise them to contact UCare Customer Service at the phone number on the back of their UCare member ID card.

If you know a member who needs additional support finding resources, advise them to contact the [Health Improvement Team](#) at outreach@ucare.org, 612-676-3481 or 1-833-951-3185. The team finds and makes referrals for food, housing, transportation and other community resources that align with the member's needs and cultural or ethnic background.

Ketamine infusion policy

On July 1, 2025, UCare's Ketamine intravenous drug policy took effect for all UCare plan members. Ketamine is considered investigational for the following conditions and will not be covered for:

- Psychiatric disorders (including, but not limited to depression, bipolar disorder and post-traumatic stress disorder).
- Chronic pain (including, but not limited to non-malignant pain, fibromyalgia, neuropathic pain, Complex Regional Pain Syndrome and Reflex Sympathetic Dystrophy).
- Headaches, prior authorization is not applicable for Ketamine infusions as it is considered excluded for these investigational uses.

Additionally, UCare will not review excluded uses for medical necessity. Policy providers can find this policy and others in UCare's [Medical Drug Policies](#) library.

Self-administered drug exclusion on medical benefit

Applies to members in Medical Assistance (Medicaid) and UCare Individual and Family Plans (IFP).

As of July 1, 2025, UCare requires self-administered drugs to be obtained through a pharmacy and not from health care providers during office or outpatient visits. Self-administered drugs are already excluded from the Medicare line of business and will continue to be excluded. Claims for self-administered drugs submitted under the medical benefit after July 1, 2025, will be denied.

Self-administered drugs are medications patients can take on their own without the supervision of a health care professional. UCare identifies self-administered drugs in alignment with the Centers for Medicare and Medicaid Services' (CMS) list of self-administered drugs identified [here](#).

- Providers should direct patients to receive self-administered drugs through an in-network specialty Pharmacy or retail pharmacy, as appropriate. UCare communicated this change to impacted members prior to July 1, 2025.
- Prior authorization for self-administered drugs on the medical benefit will be honored on the pharmacy benefit.
- Future prior authorizations for applicable self-administered drugs will need to be submitted through the pharmacy benefit channel.

Find this policy and others in UCare's [Payment Policies](#) library.

Medical drug predetermination review process

UCare no longer reviews predetermination requests for medical injectable drug services that do not require prior authorization for members in UCare's Medical Assistance (Medicaid) and UCare's Individual and Family Plans (IFP). Reviews are only completed for drugs that require a prior authorization per the Medical Injectable Drug Authorization List, found on the [Pharmacy page](#). UCare continues to review predetermination requests for all UCare Medicare plans.

Refer to the plan materials to review coverage requirements within the [Medical Drug Policies](#) library.

Enhanced medical drug biosimilar step therapy criteria update

As of July 1, 2025, UCare updated the biosimilar step therapy criteria within medical drug policies to require a trial of a preferred biosimilar product when all medical necessity criteria are met. This includes, but is not limited to, an allergic reaction to a specific inactive ingredient in the preferred biologic or use for a diagnosis not approved for the preferred biosimilar product. The facility's unwillingness to order or stock the preferred product(s) will not be considered. The updates will be implemented for all UCare plan members. Find this policy in UCare's [Medical Drug Policies](#) library.

Documentation improvement: Focus on obesity

According to a 2024 study in the Lancet Medical Journal, by [Henry Ford Health Staff](#), three in four adults are considered overweight or obese. Approximately two-thirds of adult Americans are overweight or obese and, as a result, spend more than \$150 billion on health care every year.

Documenting obesity and the associated chronic conditions should be common practice. The medical record needs to reflect the complete patient health profile, not just the chronic condition, but also any contributing factors, such as obesity.

Clinical documentation of obesity should include:

- Weight gain or loss
- Physical exam signs
- Body mass index (BMI)
- Related laboratory values
- Severity
- Notation of any underlying medical conditions
- Conditions associated with

- Treatment plan

The patient's medical record ideally records height and weight with a calculated BMI at every visit, but at a minimum, should be documented once or twice a year. When obesity is addressed, it should always be documented. A diagnosis of obesity or morbid obesity cannot be assigned based on the BMI value alone and needs to be documented by the provider if valid.

[Proper documentation and reporting](#) of all active conditions and relevant historical conditions support the medical needs of your patients. Obesity affects the majority; ensure your documentation accurately reflects the patient population's prevalence.

Coding example: 44-year-old female presents today for follow-up of her diabetes. She states she has gained 30 pounds in the last 4 years. She believes this is medication-related. She states she is tired all the time and has not been successful with losing weight in the past.

Vitals: BP 120/80, height 4'11", weight 240 lbs, BMI 49.2.

Coding scenario: E11.9-Type 2 diabetes mellitus without complications; E66.01- Morbid (severe) obesity due to excess calories; Z68.42-Body mass index [BMI] 45.0-49.9, adult.

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

Food access referrals through Second Harvest Heartland

Available to EssentiaCare, MinnesotaCare, Minnesota Senior Care Plus, Minnesota Senior Health Options, Prepaid Medical Assistance Program, UCare Connect, UCare Connect + Medicare, UCare Individual & Family Plans, UCare Medicare, UCare Medicare with M Health Fairview & North Memorial and UCare Your Choice members.

Through this partnership, members can receive over-the-phone help to apply for Supplemental Nutrition Assistance Program (SNAP) benefits and find community food resources (e.g., food shelf, Fare for All, etc.).

There are two referral avenues to Second Harvest Heartland (SHH). Members can:

- Call the SHH Care Center directly at 1-866-844-FOOD toll-free; or
- Email shhcarecenter@2harvest.org (providers, do not email SHH on behalf of the member as SHH is not able to open encrypted or secure emails through this inbox).

Providers should only send SNAP referrals on a member's behalf if the member states they have been unsuccessful with getting help via the SHH Care Center or if they are not in urgent need of food and prefer UCare to send a referral. If that's the case, email the referral to wellness@ucare.org. SHH will reach out to these members within two to three weeks of receiving the referral files.

Grocery discounts

Available to members in EssentiaCare, MinnesotaCare, Minnesota Senior Care Plus, Minnesota Senior Health Options, Prepaid Medical Assistance Program, UCare Connect, UCare Connect + Medicare, UCare Individual and Family Plans and UCare Medicare (excluding UCare Medicare Supplement).

UCare members can save on healthy foods like milk, whole-grain bread, lean meat, eggs, yogurt, fruits, vegetables and more at participating grocery stores. Weekly discounts are pre-loaded to the UCare Healthy Benefits+ Visa® card. Members simply scan the Visa card or app at checkout to access available discounts. For more information, members can visit healthybenefitsplus.com/ucare or call 1-833-862-8276 (TTY 711).

Healthy Food Allowance

Available to Minnesota Senior Health Options and UCare Connect + Medicare members with diabetes, hypertension or lipid disorders.

Eligible members receive a welcome letter that includes the UCare Healthy Benefits+ Visa® card used to access this benefit, and monthly allowances are pre-loaded. On average, members saved \$438 on healthy food in 2024.

The monthly Healthy Food Allowance can be used toward the purchase of approved healthy foods and produce, including fruit, vegetables, healthy grains, dairy, beans and more. These items can be purchased at participating retailers including Cub, Hy-Vee and Walmart. Eligible members simply scan their UCare Healthy Benefits+ Visa® card or app at checkout. This allowance is effective the first day of each month and does not roll over into the next month. Unused funds will expire at the end of the month or when the plan terminates. Inactive members can not use the allowance.

To learn more about the allowance, members can visit healthybenefitsplus.com/ucare, call 1-833-862-8276 (TTY 711) or visit their UCare online member account.

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.