Health Lines

November 2025

Pharmacy formulary and benefit changes for 2026

The 2026 UCare formularies and other pharmacy-related documents are now available on ucare.org. The formularies are subject to change throughout the year and are updated the first of each month.

Reference the Pharmacy formulary and benefit changes for 2026 bulletin for more information.

Diabetes Awareness Month

November is National Diabetes Awareness Month, a time to raise awareness about diabetes, its risk factors and how to manage it.

UCare covers 100% of preventive care to prevent, manage and treat diabetes, there are no additional costs for an in-network doctor or clinic. Some UCare members can also receive a reward when they complete the following screens for diabetes:

- A1C test
- Kidney health evaluation
- Dilated eye exam

UCare Health Improvement Specialists educate members on the importance of diabetes screenings and about rewards they may be eligible for when they complete the screenings. If you know a member who could benefit from help and support in finding resources, please contact the Health Improvement Team at 612-676-3481, 1-833-951-3185 or outreach@ucare.org. The team connects members to social services to find and make referrals for food, housing, transportation and other community resources that align with the member's needs and cultural or ethnic background.

Activity tracker plus personal emergency response system (PERS) device

Minnesota Senior Health Options (MSHO) and UCare Connect + Medicare members will no longer have the Reemo Activity Tracker plus personal emergency response system (PERS) benefit in 2026. As of Jan. 1, 2026, Reemo devices will no longer work. Starting Nov. 1, please do not send new orders to Reemo.

If a member wishes to explore alternative payment options for their device through a HCBS Waiver, CFSS Waiver or private pay, please contact Reemo Support at support@reemohealth.com or 1-877-697-3366.

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UCare provider website
www.ucare.org/providers

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

Documentation improvement: congestive heart failure (CHF)

CHF is a chronic condition that occurs when the heart muscle is no longer able to pump blood properly. Heart failure usually starts with the left ventricle, causing fluid to back up and can cause breathing problems. Left heart failure can lead to right or combined congestive heart failure.

To determine the correct code assignment for documenting CHF:

- Is the patient's condition acute, chronic or acute on chronic for the current visit?
- Where is the disease's etiology (left, right, both sides of the heart; systolic, diastolic, or both sides of the heart)?
- Is there a known cause(s) for the condition? What led to CHF, is the CHF secondary to another condition; "due to" hypertension, diabetes, obesity or other comorbidity; "associated with" bacterial or viral infection, embolism, myocardial infarction, substance abuse or medication? If so, document how these conditions are related.
- Is the patient experiencing any current complications(s) (cardiac arrhythmias, respiratory failure, edema in the lower extremities, fluid on the lungs or lower abdomen)? These conditions can be life-threatening and require immediate medical attention.
- Is the heart failure compensated, decompensated or is there an exacerbation?
- Did the patient have surgery that required implants or replacements, such as artificial valves, stents, LVADs, pacemakers or transplants? If so, document an assessment of them.
- How are you treating the patient (ACE inhibitors, beta blockers, lifestyle change, etc.)?

When documenting for CHF, provide clear and concise documentation. Include the above elements in documentation and provide complete and accurate reporting of the condition. Accurately documenting and reporting of the condition, reflects the patient's true health status and can improve patient management.

Coding example:
A 73-year-old male presents today for follow-up of decompensated systolic heart failure, chronic kidney disease stage 3 and hypertensive heart disease. Patient reports no new symptoms. He has an appointment with his cardiologist next week for congestive heart failure. Blood test ordered to check the patient's creatine levels and eGFR. Follow-up visit planned to discuss eGFR levels.

Correct coding scenario:

- I13.0: Hypertensive heart and CKD with heart failure and stage 1-4 CKD, or unspecified CKD
- I50.23: Acute on chronic systolic (congestive) heart failure
- N18.30: CDK, stage 3 unspecified

Resources:
https://www.findacode.com/search/search.php
https://www.cms.gov/files/document/fy-2025-icd-10-cm-coding-guidelines.pdf

Training for participating providers working with UCare

UCare offers monthly virtual training opportunities for new providers and long-standing partners working with UCare. These trainings will give providers a better understanding of the following:

- UCare programs available for members
- UCare enrollment and onboarding process
- UCare provider portal and clearinghouse requirements
- Service authorization and prior authorization process within UCare
- General claim processing overview and tips
- How to notify UCare of administrative changes
- Information regarding how to access resources and assistance within UCare

Providers can register for the live WebEx on UCare's Training and Education webpage. Please choose the session that best fits your UCare enrollment.

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.

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.

Upcoming holidays

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

- Thursday, Nov. 27, 2025 – Thanksgiving Day
- Friday, Nov. 28, 2025 – Day after Thanksgiving
- Wednesday, Dec. 24, 2025 – Christmas Eve Day
- Thursday, Dec. 25, 2025 – 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.