

Care Coordination News

July 2026

Issues of **Care Coordination News** often refer to different UCare forms. All UCare Care Coordination forms are on the UCare website under the [Care Coordination and Care Management](#) page. Care Coordination-related questions can be directed to the Clinical Liaison at:

- **MSC+** MSC_MSHO_Clinicalliaison@ucare.org or by phone: 612-294-5045
- **Connect:** SNBCClinicalliaison@ucare.org or by phone: 612-676-6625

Enrollment-related questions can be directed to:

- **MSC+ enrollment** by email CMIntake@ucare.org
- **UCare Connect enrollment** by email at connectintake@ucare.org

2026 UCare Care Coordination Meetings

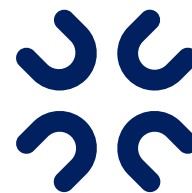
2026 UCare Meetings



At this time, UCare will not be offering CEUs, hosting Quarterly Care Coordination Meetings or Quarterly Clinical Liaison Office Hours. Ongoing communication and updates will instead be shared through the monthly Care Coordination Newsletter, and Office Hours will be scheduled as needed.

UCare Product	Meeting Type	Date & Time (Subject to change)
MSC+ and Connect	Clinical Liaison Office Hours (optional)	TBD

ALL CARE COORDINATION NEWS



New on the Care Coordination and Care Management Website

Connect

Transfer Member Process Flow (Revised 6/1/26)

MSC+

Transfer Member Process Flow (Revised 6/1/26)

Note: All documents related to Connect + Medicare and MSHO have been removed from the CC website. Documents will continue to be evaluated for appropriateness. Some documents may reference Connect + Medicare and/or MSHO. This can be disregarded and will be updated as time allows.

UCare Reports

Earlier this year, delegate leaders were sent an updated list of the reports that UCare will continue to share with delegates in 2026. Since that update, the following changes have been made:

Name of report	Report Subfolder on SFTP	Updates
Non-EW PCA CFSS Utilization	HCBS Initiatives	UCare discontinued this report
HCBS EW Capitation	HCBS Initiatives	UCare discontinued this report
HCBS Utilization	HCBS Initiatives	UCare discontinued this report
New to MSC+ with waiver CM	MA Eligibility	DHS discontinued the CM tab of this report now that this is available in MnCHOICES
New to CT with waiver CM	MA Eligibility	DHS discontinued the CM tab of this report now that this is available in MnCHOICES
Future Termination /MA eligibility	MA Eligibility	Pending – working to get reinstated
Gaps in Care	n/a	Pending – working to get reinstated

UCare Contact List Updates and Response Times

As the Medica acquisition of UCare continues to progress, the resources available to support some of these tasks continue to evolve. UCare remains committed to responding to all email inquiries within one business day; however, there may be times when responses take longer than usual. We appreciate your continued patience with any wait times.

Please note that DHS recently updated the process for submitting requests to the Security Liaison mailbox. As these changes are implemented, care coordinators may experience slightly longer response times than in the past.



As a reminder, the following resources can be used for questions and support in the noted areas:

- **Clinical Liaisons:** Resource for consultations regarding care coordination policies, CC requirements grids, case consults, SecFTP requests, or guidance on where to go for help.
 - msc_msho_clinicalliaison@ucare.org and snbcclinicalliaison@ucare.org
- **Enrollment Coordinators:** Support for questions related to UCare eligibility, the enrollment roster, member assignments, and transfer documentation.
 - cmintake@ucare.org and connectintake@ucare.org
- **Security Liaisons:** Assistance with UCare system access requests for MnCHOICES and MMIS, as well as password resets.
 - securityliaison@ucare.org

Disease Management Health Coaching Programs

Disease Management (DM) engages UCare members living with chronic conditions by providing health coaching programs for members across all product lines. DM programs focus on meeting members where they're at in their health journey. The goal is to promote healthy living, improve quality of life, promote self-care efforts, and support treatment plans to help members manage chronic conditions. Programs are available for members with a diagnosis of asthma, diabetes and/or heart failure.

Program Eligibility

Program Eligibility		
Product	Connect	MSC+
Asthma Health Coaching Program	X	
Diabetes Health Coaching Program	X	X
Heart Failure Health Coaching Program	X	X

Asthma, Diabetes and Heart Failure Health Coaching Program Overview

Members enrolled in a DM program receive personalized health coaching from a UCare health coach. Through coaching and education, members can:

- Create achievable goals based on motivation and readiness to change
- Identify and break down barriers and patterns of behavior that prevent change
- Be empowered to make lasting lifestyle changes and be held accountable to reach goals
- Receive condition-specific education and resources to support self-management

Referrals

We accept referrals for all our programs and assist members enrolled in our programs with referrals to other programs and resources as appropriate.

Program eligibility information is found at: [UCare® - Disease Management](#)

To send a referral, please contact:

- **DM Email:** Disease_mgmt2@ucare.org
- **DM Voicemail:** 612.294.6539 or 866.863.8303
- **Include with referral:** Member ID, phone number and program (asthma, diabetes or heart failure)
- **Program Exclusions:** Diagnosis of ESRD (End Stage Renal Disease), on hospice care, in Long-Term Care Facility or a Skilled Nursing Facility, or on dialysis
- **Online Member Enrollment:** Members may enroll online at [Health Coaching education | Personalized Coaching | UCare](#)

MSC+ NEWS

Support Plan Signature Compliance Changes

Beginning on 8/1/26, MN DHS has updated compliance requirements to support plan signatures. Within 60 calendar days of the assessment or from the initial assessment review (IAR), the care coordinator must provide the full support plan to and get the signatures from:



- Member
- Member's legal representative (if applicable)
- Case manager/care coordinator
- All providers responsible for delivering services under the plan

Managed care organizations (MCOs) have 60 calendar days to obtain signatures, aligning with the timeline for counties and Tribal Nations. All enrolled providers of waiver-funded services must sign the support plan and must keep a current copy of the support plan and signatures for their records. The provider signature requirement can no longer be met by signing the ICLS planning form.

DHS will consider support plans non-compliant if the full support plan is not:

- Provided to all required parties within 60 calendar days of the assessment/IAR.
- Signed by all required parties.

Note: DHS will not consider support plans to be compliant unless lead agencies obtain signatures within the required timeline. **Two attempts to obtain signatures from providers does not meet this requirement.**

DHS is making this change due to the federal Centers for Medicare & Medicaid Services (CMS) requirement, [CFR §441.301 \(c\)\(2\)\(ix\)\(x\)](#). This requirement strengthens safety, continuity of services and program integrity, while ensuring support planning truly reflects a whole-person, team-based approach. See the June 23, 2026 [AASD and DSD eList announcement](#) for additional details.

DHS has also shared that training will be available in early July for care coordinators related to this change. DHS will send out another eList when the training is available in TrainLink. When available, care coordinators are required to complete the **Updated Signature Requirement Policy for Support Plans** training in TrainLink by Oct. 31, 2026. **Note:** Lead agencies are responsible for tracking the completion of required trainings.

UCare is currently working on the updates needed for this change within the requirement grids and any impacted job aids. **UCare will send out more information as resources are finalized.**

Elderly Waiver Bus Pass Process



Minnesota Elderly Waiver (EW) covers bus passes as a supportive service to help members access community resources, appointments, and essential services. Rides must be approved by the waiver case manager and outlined in the member's support plan.

As Care Coordinators submit requests to UCare for passes, note that the request process depends on the specific bus company.

For any of the transit providers listed below, submit the request through the [Microsoft Form](#) and the transportation team will process the request.

- Arrowhead Transit
- City of Hibbing
- City of Mankato
- City of Winona
- Crow Wing Transit
- Dial-A-Ride (St. Cloud Metro Mobility)
- DTA Stride
- Duluth Transit Authority
- Hiawathaland
- Paul Bunyan Transit
- Rochester Public Transit
- St. Cloud Bus Pass Dial-A-Ride
- St. Cloud Bus Pass - Fixed Route
- Trailblazer
- Unlimited Metro go to Bus Pass/Metro Mobility

For all other bus providers, submit the [Waiver Service Approval Form](#) using T2003UC and the monthly bus rate.

Note: Bus passes authorized under EW are for non-medical rides (e.g., grocery shopping, community errands). For medical appointments, members should utilize UCare Health Ride.

Extended PCA

In the June newsletter, UCare shared an update that the deadline for the transition from PCA to CFSS has been extended by an additional year. Members who have not completed the transition from PCA to CFSS now have until Sept. 30, 2027, to do so.

However, all members who receive extended PCA services must transition to CFSS by Sept. 30, 2026, to avoid a gap in their extended personal care services. UCare and Medica are working with DHS to develop a plan to assist these members in expediting their transition to CFSS. This plan includes providing care coordinators with a list of impacted members and working with Consultation Services providers to prioritize this group for transition.

Additional information will be shared with impacted delegates as it becomes available.

DHS News and Updates

Provider Revalidation

In the June newsletter, UCare shared information regarding the DHS Provider Revalidation 2026 initiative. CMS instructed the Minnesota Department of Human Services (DHS) to revalidate all providers delivering designated high-risk Medicaid benefits and services by May 31, 2026.

High-risk service providers included in Minnesota Revalidate 2026 that did not successfully complete revalidation by May 31, 2026, received a disenrollment notification from Minnesota Health Care Programs (MHCP). Some providers may choose to appeal and continue providing services, while others may discontinue services for members.

As UCare becomes aware of PCA/CFSS and Elderly Waiver approved service providers discontinuing services for members, the following process will be followed to ensure care coordinators are informed:

- An alert will be sent to all CC contacts that includes the specific provider information, impacted services, and the effective date of the service discontinuation.
- An impacted member list will be uploaded to the delegate SFTP.
- **Action for CCs:** Notify affected members, review each member's individual service needs, and support transition planning to a new provider, as appropriate.
- If a member transitions to a new provider, the member must transition to another UCare in-network provider. Members receiving Elderly Waiver (EW) services must transition to another DHS-enrolled EW provider.

The full extent of the impact is not yet known; however, the volume and frequency of these notifications is expected to increase beyond typical provider closure notifications.

June 2026 MnCHOICES Release Summary

Resolved Current Functionality items: Fixed in the release (3 fixes which includes 1 critical functionality items)

- MnCHOICES assessment: Assessment results heading-Description: Toileting and case mix were calculated incorrectly when a person younger than 48 months old (4 years old) has an ostomy, catheter or bowel program. The system assigns an LTC dependency in toileting based on the toileting score but does not change the value of "05" to indicate an ostomy, catheter or a bowel program is present. As a result, the system may not show a dependency in toileting and will provide an incorrect value for the [long-term care] LTC Screening Document. [DHS ID 170937 - This is a critical functionality item.]
 - ❖ Changes made: When a child has an ostomy, catheter or bowel program, the system will correctly:
 - Show the toileting value of "05" on the LTC Screening Document.
 - Calculate case mix using the correct toileting value.
- MnCHOICES assessment: Screening documents heading-Description: The system populates the activity type field of the LTC Screening Document with an incorrect response when "Resides in an institutional setting" is selected for the person's current living situation and any of the following are selected:

- Intermediate care facility for people with developmental disabilities (ICF/DD)
- Hospital
- Regional treatment center
- Correctional facility.

However, the system correctly populates activity type 04 (AT 04) when the person lives in an institutional setting and “Nursing facility, including certified board and care” is also selected. [DHS ID 221882]

- ❖ Changes made: The LTC screening document now correctly displays activity type “AT 04” when the person’s current living situation is “Resides in an institutional setting” and any of the following are selected:
 - Intermediate care facility for people with developmental disabilities (ICF/DD)
 - Hospital
 - Regional treatment center
 - Correctional facility.
- Support plan printout heading-Description: Unique Minnesota Provider Identifiers (UMPI) are shown on support plan printouts when they should not. Some provider information — including their UMPI — is considered private/nonpublic data under the Minnesota Government Data Practices Act (MGDPA). However, National Provider Numbers (NPIs) are public data. [DHS ID 215419]
 - ❖ Changes made: Support plan printouts no longer display UMPI numbers.

Removed Current Functionality and Future Enhancements document items:

- MnCHOICES assessment heading - CFSS extended time due to behavior can vary. [DHS ID 229925]
 Description: MnCHOICES gives more time for CFSS when the response for extended time due to behavior in the ADL support time area in the daily living section of the functional assessment is “Presents behaviors that extend the time needed to complete ADLs” with a frequency of “4 or more times per week,” and Level I behavior is not present in the psychosocial health subsection.
 - ❖ This item has been removed. DHS determined this is working as intended and the assessment determines eligibility accurately.

Other changes made - not listed in the Current Functionality and Future Enhancements document:

- Description: In offline mode, the “Sync” and “Check in” buttons previously display at the top of the Offline Forms page and allowed users to both sync and check in an offline form from this page.
 - ❖ Changes made: FEI made a core product enhancement to Blue Compass, the platform that houses MnCHOICES, to offline functionality for forms for the “Sync” and “Check-In” functionality/navigation.
 - Offline Forms page only features “Offline Diagnostic” for selection.
 - For navigating to a form for sync and check in, user must select the ellipsis under the “Actions” column and select “Open record”.
 - Once the record is open, the “Sync” and “Check in” buttons display. These options will only display when there is internet connection.

- Description: In person record, contacts with a specific relationship type could continue to appear in the assessment summary after an end date was added to their effective date range.
 - ❖ Changes made: Contacts with an end date no longer carry over to the assessment summary.
- Description: Enhancements were needed to the Support Plan query and a new Health Risk Assessment (HRA) query was needed to allow Lead agencies the ability to monitor timely completion of Support Plans and HRAs.

Note: For the past several years, DHS has provided MnCHOICES Quality assurance reports to help agencies identify and close open forms. With enhancements to assessment and support plan queries, and the addition of health risk assessment queries, DHS will discontinue sending this report. Agencies can use these queries to access the same information and monitor the timely closure of open forms.

 - ❖ Changes made: The new Health Risk Assessment query is now available.

The Support Plan query was enhanced to provide users with additional input fields allowing them to produce additional results.

The following fields are now available in Support Plan query:

 - Person ID
 - First Name
 - Last Name
 - Middle Name
 - PMI
 - Programs
 - Status
 - Number of days in progress (only displays when “In Progress” status is selected)
 - Organization
 - Location
 - Created By
 - Plan Owner.

Note: For Support Plan queries, the Created By field only allows selection from the dropdown list. Users cannot type a name into the field to search.
- Description: In MnCHOICES Assessment, the date sent field in the Introductory letter subsection of Assessment Summary was only editable while the assessment status was In Progress.
 - ❖ Changes made: The date sent field is now editable when the assessment is in any of the following statuses:
 - In Progress
 - Completed – Ready for MMIS.
 - Pending MMIS Response.
- Description: Housing Stabilization Services program ended on October 31, 2025, therefore related services need to be removed from support plans.
 - ❖ Changes made: The following “Other” services were removed from all support plans:
 - Housing Consultation
 - Housing Transition

- Housing Stabilization Transition- Moving Expenses
 - Housing Sustaining.
- Description: The standard mileage rate for 2026 was increased to 72.5 cents (\$0.73) per mile.
 - ❖ Changes made: Effective July 1, 2026:
 - The mileage rate for HCPC S0215 UC Transportation, Mileage (Noncommercial) will be \$0.73 for the following programs AC/BI/CAC/CADI/DD/EW.
 - The 1:1 mileage rate for T2031 Customized Living and T2031 TG 24-Hour Customized Living will be \$0.73 for the following programs BI/CADI.
 - The 1:1 non-medical transportation mileage component rate for T2031/T2031 TG Customized Living and S5140 U9/S5140 Foster Care will be \$0.73 for the following program EW.
- Description: In the Safety and Wellbeing section of the Support Plan, the Rights Modification subsection displayed when a person was enrolled in an aging program (AC, Temp AC, ECS, or EW) and a user added Customized Living (including 24-Hour Customized Living), Adult Day, or Adult Foster Care services. The subsection should not have displayed for Adult Day services. Additionally, the Rights Modification subsection did not display for any services when a person was enrolled in a disability program (CAC, CADI, BI, or DD), even though it should have displayed for certain services.
 - ❖ Changes made: The Rights Modification attribute was updated to ensure the Rights Modification subsection displays only when the following services are added to the support plan.
 - Aging programs (EW):
 - Customized Living, T2031
 - Customized Living, 24-Hour, T2031 TG
 - Foster Care, Adult, Corporate, S5140 U9
 - Foster Care, Adult, Family, S5140.

Help Center updates:

- Current Functionality and Future Enhancements v.06.2026 document: Will be loaded into the MnCHOICES Help Center during the week following the release on June 25, 2026.
- MnCHOICES Practice Guide: Support Plan Notice of Action v.3 (Loaded date 6/8/2026)
 - ❖ Statuses section (p. 11): The Discard status was updated to "Discard: A user must select this status if a notice of action form was created in error. Once the form is moved into "complete" status, the user cannot discard the form."
 - ❖ Statuses section (p. 11): The Complete status had this sentence inserted "This means the form is finalized and was sent to the person and their legal representative (if applicable)."
- MnCHOICES Practice Guide: AC Program Eligibility Forms Instruction v.3 (Loaded date 6/9/2026)
 - ❖ Fee schedule table (p. 7): Update the dollars amounts of AC adjusted income for each income level associated with federal poverty guidelines.
 - ❖ Months of ineligibility (p. 9): A user must divide the amount transferred by was updated to: \$11,869.00.
 - ❖ After the form is complete section (p. 18): The language block reference is updated.

- MnCHOICES Smart Guide: Person Attachments v.2 (Loaded date 6/19/2026)
 - ❖ Overview section: Added CBSM page - Documents for LTSS assessments, eligibility and support planning for list of example documents that should be uploaded to a person's MnCHOICES attachment section. Follow your agency protocols or best practices for attaching other documents to a person's record.
- MnCHOICES Practice Guide: MnCHOICES Assessment v.12 (Loaded date 6/25/2026)
 - ❖ Assessment Summary section (p. 117-118): Timelines and the Introductory letter subsections were updated.
- MnCHOICES Smart Guide: Production Adding staff and managing access v.10 (Loaded date 6/24/2026)
 - ❖ System change: MN Service Hub was changed to ServiceNow.
 - ❖ Step 2: Enter staff information section: Supervisor: Added instructions for when the staff member's supervisor is not available on the Relationships dropdown menu.
 - Before the supervisor can be selected, the lead agency security admin must add the supervisor as staff in your organization. If the supervisor is not currently in MnCHOICES and will not be using MnCHOICES, add them as staff but do not submit an activation ticket.
 - Once the supervisor has been added, return to the staff profile's Relationships section. The supervisor's name will then be available in the Relationships dropdown menu for selection.
- MnCHOICES Smart Guide: Offline Forms v.5 (Loaded date 6/23/2026)
 - ❖ Update to match the functionality implemented in FEI core product release.

Training updates in the following TrainLink courses with module titles indicated:

Note: To review updated training modules, delete browsing data including "cached images and files" and then log into TrainLink.

- MnCAT Step 1 (MNCH100) Introduction, title of section: (Published date 6/12/2026)
 - ❖ Updated to meet statute changes for assessor education effective July 1, 2026.
- MnCHOICES New mentor training (MNCH900) Mentors who facilitate assessor certification: (Published date 6/15/2026)
 - ❖ Updated to meet statute changes for assessor education effective July 1, 2026.
- MnCHOICES Access and navigation (MNCH900) Navigation header: (Published date 6/22/2026)
 - ❖ Added slides for the queries associated with the HRA and support plan.
- MnCHOICES Content - Assessment (MNCH301/301A) Assessment Summary: (Published date 6/16/2026)
 - ❖ Slide 4: The "Date sent field" can be edited in specific statuses.
- MnCHOICES Workflow - Assessment (MNCH303/303A) Assessment Results and Assessment Summary: (Published date 6/16/2026)
 - ❖ New slide - Statuses: Updated to includes that the "Assessment interview time" and "Intake and post-interview time" as well as the "Introductory letter" date sent may be edited when the assessment is in a status other than "In progress".
 - ❖ Completion requirements slide: Updated to indicate that when the "Assessment and Program Acknowledgment" section displays in the assessment it is included in the completion requirements.

- MnCHOICES Workflow (MNCH303/303a, MNCH921, MNCH911) Taking forms offline and online: (Published date 6/17/2026)
 - ❖ Updates made to reflect the functionality changes in FEI core product release.

MnCHOICES PartnerLink Page:

- MnCHOICES PartnerLink page: MnCAT Sample Tracking document: (Updated 6/12/2026)
 - ❖ Updated to meet statute changes for assessor education effective July 1, 2026.

Web Page updates:

- Partners and providers: MnCHOICES certified assessor training: (Updated 6/17/2026)
 - ❖ Updated to meet statute changes for assessor education effective July 1, 2026.

REMINDERS

Forms Frequently Change

Forms are updated regularly. Please remember to download forms directly from UCare's website to ensure the most up-to-date versions are used.

Monthly Activity Logs (MAL)

As MnCHOICES data has become more readily available, UCare updated the MAL process effective February 2026. These changes eliminated the requirement for MAL submissions for members enrolled in CONNECT and reduced reporting requirements to institutional activities only for members enrolled in MSC+.

UCare has noted that MSC+ MALs have not been consistently received from all delegates. Please review the reminders below regarding the remaining MSC+ MAL requirements.

MSC+: Effective 2/1/2026

- Support plan updates are no longer required on the MAL.
- Institutional member information will continue to be required, as activities for these members are not tracked within MnCHOICES.
- MALs should continue to be submitted by the 10th of each month to assessmentreporting@ucare.org.
- If there are no institutional activities to report for a given month, please submit a blank MAL or send an email to the address above indicating that there are no activities to report for that month.

Updating Primary Care Clinic

All Care Coordinators should confirm members' primary care clinics and complete the Primary Care Clinic Change Request form located on the [UCare website](#) in the Care System or County PCC/Care Coordination Change Process drawer. This will ensure members (MSC+/MSHO) are correctly assigned for care coordination while in the program and when they age in. Although SNBC does not make delegate assignments based on PCC, it is equally important to ensure accuracy for continuity of care and initial assignment if/when they transition to MSC+/MSHO.

Care Coordination Questions?

The Clinical Liaisons are a great resource when care coordinators have questions. To help you best, please include as much detail as possible when submitting a question(s): e.g., member name and ID number, date of birth, product, details about the situation, and care coordinator name, phone number, and email address.

All emails sent to UCare that include private member information **must** be sent using secure messaging. There may be times when UCare is unable to open secure third-party emails. If your agency does not have a secure messaging system or UCare is unable to open the third-party secure message, care coordinators can create a secure email account using [UCare's Secure email Message Center](#).

UCare Care Coordination Contact Numbers

Please refer to the [Care Coordination Contact List](#) for delegate contact information.

Newsletter Article Requests

Is there a topic that should be covered in this newsletter? Please send all suggestions to MSC_MSHO_Clinicalliaison@ucare.org & SNBCClinicalLiaison@ucare.org.