UCare Connect/Connect + Medicare

Care Coordination and Long-Term Services and Supports

Title: Transfer Member Job Aid

Purpose: To aid in the process of determining when and how to complete a member Transfer Health Risk Assessment (THRA). The rules and regulations will be addressed, along with best practice tips.

Summary: The care coordinator (CC) may use a Transfer Health Risk Assessment (THRA), in lieu of a full assessment, when a Health Risk Assessment (HRA)-MCO was completed and obtained within the last 365 days. The purpose of the THRA is to capture the necessary information and member health risks with minimal disruption to the member. The THRA form is used to guide you through the review of the most current assessment, allowing the opportunity for the CC to make updates, fill in gap areas and create/modify goals. By completing the THRA, the CC is adopting the assessment and support plan as their own and attesting to the accuracy and regulatory compliance of the assessment. If, at any time, a care coordinator determines that a new assessment is necessary or in the best interest of the member, a new assessment may be conducted.

Definitions
Delegate to Delegate Transfer: Member transfers from one UCare delegate agency or county to another (e.g., Olmsted County to Wadena County). **MCO to MCO Transfer:** Member transfers from one Managed Care Organization (MCO)/health plan to another (e.g., Medica to UCare). **Product Change:** Member changes from one UCare product to another (e.g., Connect to Connect + Medicare or vice versa).

CC reviews the following documents to complete a THRA in lieu of a new assessment:
- HRA-MCO completed within the last 365 days (required)
- Support Plan
    - Care coordinator may complete a support plan if not received or at CC discretion due to significant updates
- Member signature sheet
    - If not received, CC must document two attempts to obtain the signature by the previous CC, or make two new attempts
- Relevant case notes (optional)
- DHS-6037 (optional)

When transfer documents are received, a THRA can be completed in the scenarios below:

Scenario	Complete THRA	New Assessment	Review & Document (follow CC change process)
Member transfers from one UCare delegate to another UCare delegate (example: Clay County to Olmsted County)			☑
Member has a product change within the same plan type (e.g., Connect to Connect + Medicare)	☑		
Member transfers from another MCO to UCare	☑		
Member moves from FFS to UCare		☑	
Member resides in a skilled nursing facility	☑		
Member was previously UTR/Refusal and transfers from one UCare delegate to another UCare delegate			☑

Transfer Health Risk Assessment: MnCHOICES HRA-MCO
- CC receives/reviews transfer documents from the previous entity and determines if a THRA is appropriate
- CC completes UCare's THRA document found on UCare's website with the member and makes updates to the Support Plan-HRA as needed. Attach UCare's THRA document in MnCHOICES.
  - o If the member is UTR or refused at the time of the THRA, do not complete UCare's THRA document or a UTR/Refusal support plan. Document attempts to reach the member to complete the THRA. Review the HRA-MCO and Support Plan independently. Document review in the member's record. Update the current MnCHOICES Support Plan as needed.
  - o Complete MnCHOICES entry
    - ▪ Start a new HRA-MCO form and complete the "assessment information" section
      - **HRA Type:** Transitional HRA
      - **Transitional HRA Type:** Choose appropriate type
      - **HRA method:** choose appropriate method
      - Complete remaining assessment information elements and completion requirements. Submit the assessment until the status is "Completed."
        - o Do NOT enter THRA activity in MMIS.

Additional Tasks for THRA Processes
- Add member to the Monthly Activity Log as appropriate (see additional detail in section below)
- Set reminder(s) to obtain signature page (as needed)
  - o **NOTE:** Required if not received (or documentation of two attempts) with transfer documents or after the first attempt made by the new CC
- Set a reminder to complete the re-assessment within 365 days of the previous assessment
  - o **NOTE:** The THRA does not reset the reassessment timeline schedule. When a THRA is completed or attempted at the time of a product change, the following assessment is completed based on existing timelines and is considered the INITIAL assessment on the current product with a new enrollment span. If that initial assessment results in a UTR or refusal, the following reassessment timelines are

calculated based on the new enrollment date for the first reassessment. See the Assessment Timelines Job Aid for additional details.

- o A new THRA form is required for each transfer/product change

THRA Entry on the Monthly Activity Log (MAL):

Scenario	Document on MAL	Do NOT Document on MAL
THRA is successfully completed.		☑
Connect + Medicare Member is unable to be reached for THRA	☑	
Member refused THRA.		☑

Entering data on the MAL when the member is unable to be reached for the THRA:

- **Activity Completion Date:** Date of last contact attempt
- **HS Code:** HP (code from last assessment)
- **Type of Activity:** THRA Attempted: UTR

Additional Resources:

Assessment Checklists

Monthly Activity Log Instructions

Requirements Grids

Assessment Timelines