2026 UCare's Minnesota Senior Health Options (MSHO) (HMO D-SNP)

A Medicare Advantage Special Needs Plan that combines your Medicare and Medical Assistance (Medicaid) benefits

ucare®

Is UCare's MSHO right for you?

Enroll if you:

- ✓ Are at least age 65 or are turning 65 within the month you are requesting enrollment
- ✓ Have Medical Assistance and Medicare Part A and Part B
- ✓ Live in UCare's MSHO service area

Counties in UCare's MSHO service area

Aitkin
Anoka
Becker
Benton
Blue Earth
Carlton
Carver
Cass
Chippewa
Chisago
Clay
Cook
Cottonwood
Crow Wing
Dakota
Dodge
Faribault
Fillmore
Freeborn
Hennepin
Houston
Isanti
Jackson
Kandiyohi
Kittson
Koochiching
Lac Qui Parle
Lake
Lake of the Woods
Le Sueur
Lincoln
Lyon
Mahnomen
Marshall
Martin
Mille Lacs
Morrison
Mower
Murray
Nicollet
Nobles
Norman
Olmsted
Otter Tail
Pennington
Pine
Polk
Ramsey
Red Lake
Redwood
Rice
Rock
Roseau
Scott
Sherburne
St. Louis
Stearns
Swift
Todd
Wabasha
Wadena
Washington
Watonwan
Winona
Wright
Yellow Medicine

Join at no cost to you

Medicare Part B premiums will apply.

If you have Minnesota Senior Care Plus (MSC+), consider UCare's MSHO

Adults age 65 and older who have both Medicare and Medical Assistance can choose the one-plan convenience of UCare's MSHO. UCare's MSHO offers more benefits and services than MSC+.

Life is easier with UCare's MSHO

Get more to cover your everyday expenses for no extra cost.

- **Up to $560** per year for over-the-counter (OTC) items ($140 every three months)
- **$0** gym membership
- **One $0** dental crown per year
- **Rewards** loaded on your UCare Healthy Benefits+ Visa® card for taking care of your health

Extras for members who qualify

These supplemental benefits are offered only for members with certain chronic conditions on file with UCare. Not all members qualify. Call for more information.

- **$0** electronic tablet that connects to the internet
- **Up to $680** per year for healthy groceries ($170 every three months)
- **Up to $500** per year for utility bills and rent ($125 every three months)
- **Two $0** round-trip rides per week to visit an approved location, such as the grocery store or gym

Switch to UCare's MSHO any time, year-round. Call a licensed UCare specialist today to learn more.

1-866-857-2417
TTY 1-800-688-2534

Take advantage of our wide network

Go to **search.ucare.org** to look for:

People
Doctors, specialists, dentists, chiropractors and other care providers

Places
Hospitals, clinics, home health care, hospice, urgent care and more

Pharmacies
Community, hospital, clinical and online pharmacies

If you prefer, request a paper copy of the Provider and Pharmacy Directory at 1-866-857-2417 (TTY 1-800-688-2534).

Go to **ucare.org/searchdruglist** to find:

Drugs
Download the complete formulary or search the list of covered drugs

Care coordination supports your best health

Personalized, dedicated help to improve your quality of life and well-being

When you enroll in UCare's MSHO plan, you also get personalized care coordination and increased benefits. Your care coordinator helps to:

- Find or change your primary care clinic or doctor
- Arrange transportation, dental, mental health or other benefits and services
- Share information about preventive care, like annual checkups, vaccinations and screenings
- Ease the transition from hospital to home or nursing home, or other moves between care settings
- Support you to start exercising, quit smoking, find food or housing support, or take other steps to improve your health with your plan's programs
- Talk to your providers to improve your care

Care coordinators help caregivers support their loved one

Sylvia's story

Sylvia's* family was worried when they learned she was struggling to breathe and was taken by ambulance to the hospital. At the hospital, her doctor diagnosed her with blood clots. Sylvia's family knew she would need a lot of follow-up care, so they reached out to her care coordinator to help set up appointments and organize transportation.

Sylvia's treatment plan included follow-up appointments at multiple locations. The care coordinator set up no-cost rides to Sylvia's specialists. Sylvia's daughter shared that she was struggling to support her mother. The care coordinator referred her to a support group and connected her to services to help lighten the load.

Sylvia's care coordinator also made sure her family members and care team were all up to date with her care plan so her family could focus on being with Sylvia rather than organizing care.

*Member story is representative and based on real member experiences but is not a testimonial.

UCare's MSHO offers more benefits

UCare's MSHO compared to MSC+

Additional benefits to improve your health		UCare's MSHO	MSC+
Key perks	**$0 premiums,* deductibles and Medical Assistance (Medicaid) cost-sharing**	✓	✓
	One member identification (ID) card for Medical Assistance, Medicare and prescription drugs	✓	—
Help paying for everyday expenses/ more money in your pocket	**Up to $680 per year for healthy groceries** ($170 every three months) loaded to your Healthy Benefits+ card**	✓	—
	Up to $500 per year for utility bills and rent ($125 every three months) loaded to your Healthy Benefits+ card**	✓	—
	Up to $560 per year for over-the-counter items (OTC) items ($140 every three months) loaded to your Healthy Benefits+ card	✓	—
	Rewards loaded to your Healthy Benefits+ card for taking care of your health	✓	✓
	Two $0 round-trip rides per week to an approved location, such as the grocery store or gym**	✓	—
	$0 gym membership with access to gym locations nationwide, online classes, at-home fitness kits, brain training, no-cost social events, activities and more	✓	—
Additional coverage	**One $0 dental crown per year, plus one crown repair**	✓	—
	$0 glasses upgrades like progressive lenses, non-glare coating and photochromic tinting	✓	—
Health and home support	**Stress and Anxiety Kit** — get help with anxiety and managing stress by choosing from our Sleep Aid Kit, Stress Relief Kit or Smart Home Device Kit. Once per year for qualifying members.	✓	—
	Memory Support Kit to help members living with memory loss	✓	—
	Strong and Stable Kit to help prevent falls and stay strong	✓	✓
Help after hospital stay	**$0 meals** — two meals a day for four weeks after a hospital stay	✓	—
	Four $0 sessions with a community health worker upon discharge from an inpatient stay to help you transition to life at home	✓	—
	$0 medication review with a pharmacist — review all your medications to ensure they are safe, effective and affordable, and get medication questions answered by a pharmacist	✓	✓

*You must continue to pay your Medicare Part B premium unless that premium is paid for you by Medical Assistance or another third party.

**These supplemental benefits are offered only for members with certain chronic conditions on file with UCare. Call to find out if you qualify.

Have questions? We can help.

1-866-857-2417 (TTY 1-800-688-2534)
snpsales@ucare.org | ucare.org/getmsho

UCare's Minnesota Senior Health Options (MSHO) (HMO D-SNP) is a health plan that contracts with both Medicare and the Minnesota Medical Assistance (Medicaid) program to provide benefits of both programs to enrollees. Enrollment in UCare's MSHO depends on contract renewal.

Two ways to enroll in UCare's MSHO

mail

Fill in the UCare's MSHO enrollment form. Then mail it in the postage-paid envelope.

online

Visit **ucare.org/getmsho** or scan the QR code with the camera on your phone. Click "Enroll now." Complete and submit the online enrollment form.

What's next

If you enroll by mail or online, here's what you can expect:

1. We make sure your enrollment form is complete and will let you know if anything is missing.
2. We'll send your completed form to the Minnesota Department of Human Services (DHS). They will send it to the Centers for Medicare & Medicaid Services (CMS).
3. If DHS and CMS determine you're eligible for UCare's MSHO, DHS will send you a letter confirming your enrollment.
4. You'll get a UCare member identification (ID) card. It's the only card you'll need for your medical, dental and pharmacy needs. You'll also get a member guide to help you make the most of your coverage.

Toll free 1-800-203-7225, TTY 1-800-688-2534

Attention. If you need free help interpreting this document, call the above number.

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ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه.

သတိ။ ဤစာရွက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ် ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមហៅទូរស័ព្ទតាមលេខខាងលើ ។

請注意，如果您需要免費協助傳譯這份文件，請撥打上面的電話號碼。

Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, veuillez appeler au numéro ci-dessus.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ဟ်သူဉ်ဟ်သးဘဉ်တကွၢ်. ဖဲနမ့ၢ်လိဉ်ဘဉ်တၢ်မၤစၢၤကလီလၢတၢ်ကကျိးထံဝဲဒဉ်လ်ာ် တီလ်ာ်မီတခါအံၤန္ဉ်,ကိးဘဉ်လီတဲစိနိၢ်ဂ်ၢ်လၢထးအံၤန္ဉ်တကွၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 위의 전화번호로 연락하십시오.

ໂປຣດຊາບ. ຖ້າຫາກ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ຟຣີ, ຈົ່ງ ໂທຣໄປທີ່ໝາຍເລກຂ້າງເທິງນີ້.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, lakkoobsa gubbatti kenname bilbili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda (afcelinta) qoraalkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.

Civil Rights Notice

Discrimination is against the law. UCare does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. You can file a complaint and ask for help filing a complaint in person or by mail, phone, fax, or email at:

UCare
Attn: Appeals and Grievances
PO Box 52
Minneapolis, MN 55440-0052
Toll Free: 1-800-203-7225
TTY: 1-800-688-2534
Fax: 612-884-2021
Email: cag@ucare.org

Auxiliary Aids and Services: UCare provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs. **Contact** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

Language Assistance Services: UCare provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. You may also contact any of the following agencies directly to file a discrimination complaint.

U.S. Department of Health and Human Services Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion (in some cases)

Contact the OCR directly to file a complaint:

Office for Civil Rights
U.S. Department of Health and Human Services
Midwest Region
233 N. Michigan Avenue, Suite 240
Chicago, IL 60601
Customer Response Center: 800-368-1019, TTY: 800-537-7697
Email: ocrmail@hhs.gov

CBS (MCOs) (10-2021)

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MDHR if you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights
540 Fairview Avenue North, Suite 201
St. Paul, MN 55104
651-539-1100 (voice)
800-657-3704 (toll-free)
711 or 800-627-3529 (MN Relay)
651-296-9042 (fax)
Info.MDHR@state.mn.us (email)

Minnesota Department of Human Services (DHS)

You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- religion (in some cases)
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. We will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator
Minnesota Department of Human Services
Equal Opportunity and Access Division
P.O. Box 64997
St. Paul, MN 55164-0997
651-431-3040 (voice) or use your preferred relay service

DHS_Approved_11/24/2021

500 Stinson Blvd
Minneapolis, MN 55413
1-866-857-2417 | TTY 1-800-688-2534
ucare.org

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