Care Coordination News



August 2024

Issues of **Care Coordination News** often refer to different UCare forms. All UCare Care Coordination forms are on the UCare website under the <u>Care Coordination and Care Management</u> page. Care Coordination-related questions can be directed to the Clinical Liaisons at:

- MSC+/MSHO MSC MSHO Clinicalliaison@ucare.org or by phone: 612-294-5045 or 1-866-613-1395
- **Connect/Connect + Medicare**: <u>SNBCClinicalliaison@ucare.org</u> or by phone: 612-676-6625 or 1-833-951-3190

Enrollment-related questions can be directed to:

- MSC+/MSHO enrollment at 612-676-6622 or by email CMIntake@ucare.org
- Connect/Connect+ Medicare enrollment by email at connectintake@ucare.org

2024 UCare Care Coordination Meetings

UCare All Care Coordination Meetings are provided every quarter. These meetings are intended to provide ongoing education, benefit updates and topical information to support successful care coordination activities. UCare care coordinators must participate in the Quarterly All Care Coordination Meetings presented live or by viewing the recorded WebEx. When viewing the recorded Quarterly All Care Coordination Meeting, an electronic verification is needed. CEU events and office hours are optional.

UCare Product	Meeting Type	Date & Time (Subject to change)
MSC+/ MSHO and Connect/Connect + Medicare	Live Quarterly Meeting	September 10 th , 2024, 9 am – 12 pm December 10 th , 2024, 9 am – 12 pm
MSC+/MSHO and Connect/Connect + Medicare	CEU Event (optional)	August 13, 11:00 am – 12:30 pm November (Dates to come)
MSC+/MSHO	Clinical Liaison Office Hours (optional)	Oct 22 nd , 2024, 12:30 pm-1:30 pm
Connect/Connect + Medicare	Clinical Liaison Office Hours (optional)	Oct 22 nd , 2024, 11:30 am – 12:30 pm
MSC+/MSHO	Housing Office Hours (optional)	3rd Wednesday of every month from 1 pm-2 pm
Connect/Connect + Medicare	Housing Office Hours (optional)	1st Wednesday of every month from 1 pm-2 pm



<u>Click here</u> to register for the August CEU Event: Alternative Decision Makers and Health Care Directives

<u>Click here</u> to register for the August Housing Office Hours Connect/Connect + Medicare <u>Click here</u> to register for the August Housing Office Hours MSC+/MSHO

ALL CARE COORDINATION NEWS



New on the Care Coordination and Care Management Website

All products

- Health Ride Transportation Flyer (Revised 7/2/24)
- 2024 Supplemental Benefit Training (New 7/9/24)

MSC+/MSHO

- Community Care Coordination Requirements Grid (Revised 7/1/24)
- Institutional Care Coordination Requirements Grid (Revised 7/1/24)
- Unable to Reach Member Letter Support Staff (New 7/1/24)
- Release of Information Form (Revised 7/3/24)
- Support Plan Translation Request (New 7/1/24)
- Waiver Service Approval Form (Revised 7/9/24)
- PCA Communications Form (Revised 7/1/24)
- Additional & Supplemental Benefits: MSC+ and MSHO (Revised 7/10/24)
- New Hire Training Guide (Revised 7/12/24)

Connect/Connect+ Medicare

- Connect Requirements Grid (Revised 7/1/24)
- Unable to Reach Member Letter Support Staff (New 7/1/24)
- PCP/ICT Support Plan Cover Letter (Revised 7/17/24)
- Release of Information Form (Revised 7/3/24)
- Support Plan Translation Request (New 7/1/24)
- Assessment Checklist MnCHOICES (Revised 7/1/24)
- New Hire Training Guide (Revised 7/12/24)

Coming soon

Medicare/Medicaid 101 Recorded Training

Upcoming Care Coordination and Care Management Website Changes



Updates have been made to the Policy & Manuals spark! Included are updates to the chapter content to reduce duplication and streamline content. The previously mentioned Care Coordination Manuals for MSC+/MSHO and Connect/Connect + Medicare are nearing completion. The new manuals will be housed in the respective product chapters and will contain information to support onboarding new staff and answer questions beyond the Requirements Grids. The Care Coordination Manuals will be an additional resource and reference frequently asked questions like "What is the Secure FTP?" and "Am I a mandated reporter?" "When do I need a Release of Information?" and much more.

Additional Updates: Consumer Directed Community Supports (CDCS) Toolkit

UCare is making progress toward completing the CDCS Toolkit. New care coordination (CC) materials include Care Coordinator CDCS Guidance, which outlines roles and responsibilities and reference links to forms/tools, steps for authorization and the processes for denying, terminating, or reducing CDCS services. In addition, the CDCS Toolkit will include a CC checklist, Member Checklist and a UCare Notification of Technical Assistance (NTA), which is a formal notification when a member needs more assistance and oversight with the DHS-6532-CSP. The NTA indicates noncompliance with CDCS requirements. Soon, a Member Guide to Allowed CDCS Expenditures and a UCare CDCS Plan Change Form will be released. Watch for an upcoming training session with the clinical liaisons and a UCare CDCS specialist!

People-Powered Moments!

UCare believes care coordination makes a difference in the lives of the members we serve. We want to celebrate the stories you share! If care coordinators wish to share a story, click the <u>People Powered Moments Form</u> link on the Care Coordination homepage.

Thank you to Anna Stahlmann, Care Coordinator from Bluestone Physician Services, for submitting a People Powered Moment. Anna's story highlights the importance of care coordination advocacy and its impact on her member's quality of life!



"Anna S had an annual assessment with a member, and during the visit, the member mentioned some concerns about a staff member. Anna talked with the director of nursing at the facility about the member's concerns. The next day, the member called Anna and left her a voicemail. The staff was removed from this member's caseload. The member was so appreciative and said Anna is saintly and has lifted a huge load from her shoulders. She even met with her Bluestone CNP, and her blood pressure was lower, and she believes it was what Anna did for her."

Support Plan Translation

The <u>Support Plan Translation Request Form</u> is ready for use by care coordinators as of 7/1/24 and is located in the Forms drawer on the <u>MSC+ and MSHO</u> or <u>Connect and Connect + Medicare</u> Resource pages.

The typical turnaround time for support plan translation is up to 2 weeks. To ensure compliance requirements are met, and the member receives a copy of the support plan within 30 days of the assessment, care coordinators should mail the English version of the support plan first. Then send the translated copy to the member once received. The Support Plan Cover Letter is currently translated into Hmong, Somali and Spanish and available on the Care Coordination Resources page under Letter Templates. Cover letters in Arabic, Russian, and Vietnamese are currently being translated and will be available soon.

Stretch & Stroll at the Minnesota State Fair

Thursday, August 29, 204 Dan Patch Park, Minnesota State Fair Grounds

It's Stretch & Stroll time at the Minnesota State Fair! UCare will host an all-day Stretch & Stroll program at the Minnesota State Fair on Seniors Day, Thursday, August 29th, in Dan Patch Park. Join us for live music from the Pearl Brothers, senior fitness classes, entertainment, and giveaways throughout the day.



Cecelia Health Weight Management Virtual Support Program

UCare is partnering with Cecelia Health to help members better manage their health through its weight management support program. Available to eligible members at no additional cost, members get virtual support from a Cecelia Health Registered Dietician (RD).

The weight management program offers one-on-one support and education to help members:

- Manage weight loss, with or without medication
- Design a personalized nutrition plan
- Access helpful guides, recipes and tips for maintaining motivation
- Get real-time feedback and chat with their clinical team through a secure app
- Ability to connect to smart devices and share results with their clinical team
- Set goals and track progress

Eligibility

Connect, Connect + Medicare, MnCare, MSC+, MSHO and PMAP members 18 years or older who are currently taking a weight loss medication are eligible for the Cecelia Health weight management virtual support program. UCare members are identified via claims, pharmacy or other records. Members are contacted about how they may benefit from a Cecelia Health virtual support program.

Members can learn more and register at <u>Weight Management Virtual Support Program | Cecelia Health | UCare</u>

<u>Commodity Supplemental Food Program (CSFP)</u>

Free Monthly Food Boxes for Seniors with CSFP

The Commodity Supplemental Food Program (CSFP) and the Nutrition Assistance Program for Seniors (NAPS) help reduce seniors' food insecurity.

Low-income seniors age 60+ can sign up and receive a free box of healthy, shelf-stable groceries each month. The Second Harvest Care Center team can help members enroll by calling 651-401-1411 or 1-866-844-FOOD or email naps@2harvest.org.

CONNECT AND CONNECT + MEDICARE NEWS

Preadmission Screening Notifications

When a Preadmission Screening (PAS) process is completed by UCare for Connect and Connect + Medicare members, care coordinators have been notified by an email from the Clinical Liaison Team for Transition of Care follow-up. Because this information is available in the Daily Authorizations Report (DAR), care coordinators will no longer receive additional communication via email. The PAS process completed by UCare internal staff remains the same.

Connect to Wellness Kit

Connect and Connect+Medicare members can order a Connect to Wellness Kit to help improve their health and wellness. Each kit includes engaging tools — at no additional cost to members. Members may choose one of the following kit options:



- Kit A: Fitness Kit
- Kit B: Sleep Aid Kit
- Kit C: Stress Relief Kit
- Kit D: Dental Kit
- Kit E: Amazon Echo Kit
- Kit F: 5-pound weighted blanket (Connect + Medicare members only)

To order a kit*, members can log in or create an online account at <u>member.ucare.org</u>, go to Health & Wellness, then Wellness, Rewards & Allowance, and place an order. Members can also call UCare Customer Service at the number on the back of the member ID card to order by phone.

*Members must have active coverage with their UCare plan at the time of the order. The limit is one kit per year per member. Kit contents may be subject to change. Please allow 4 – 6 weeks for delivery.

Asthma Peak Week

The third week of September is considered Asthma Peak Week. The American Lung Association says this week is when asthma-related flare-ups and hospital visits increase the most. While everyone with asthma needs to take extra precautions when this week arrives, the elderly and those with compromised immune function are especially vulnerable.

Reasons for this September spike include:

- September is the height of ragweed season, the most common fall allergy
- Flu season is beginning
- Young adults may come across smoking and vaping at school or on campus
- Stress and anxiety, which can worsen asthma, can increase during transitions



The UCare Asthma Education Program is designed for members ages 5-64 living with asthma. The program is a telephone-based program to help members better understand and manage their asthma. During the one-on-one phone calls with a UCare registered nurse or registered respiratory therapist, members learn how to identify asthma triggers and take steps to minimize triggers, especially during times such as peak week. Members are encouraged to

utilize resources such as the AirNow website or mobile App from the EPA (Environmental Pollution Control Agency) for current pollen counts and air quality.

In addition to asthma trigger management, our UCare Asthma Educators discuss the correct inhaler technique, how to handle an asthma flareup and the importance of developing an asthma action plan with their provider. Please contact us to learn more about UCare Asthma Education Programs or send a referral.

Referrals can be sent to Disease Management (DM):

- DM Email: Disease mgmt2@ucare.org
- DM Voicemail: 612-294-6539 or 866-863-8303
- DM Referral Forms: https://www.ucare.org/providers/policies-resources/disease-management

When a referral is received, the DM team identifies the appropriate program for the condition, reviews member eligibility, facilitates program enrollment, and follows up regarding the referral outcome.

MSC+ AND MSHO NEWS

Monthly MSHO Supplemental Benefit Highlight

LSS Healthy Transitions Program



Lutheran Social Service of Minnesota (LSS) offers coaching and support to assist MSHO members following discharge from an inpatient stay. Members can receive four sessions with an LSS Community Health Worker focused on safety assessment, follow-up visit coordination, and resource coordination.

Update: Care coordinators no longer need to submit authorization for this service. All MSHO members are referred to LSS after a hospitalization.

LSS then reaches out to the members and offers them the program. If a member chooses to participate, LSS will notify the CC. The CC will also see the authorization on the DAR services tab.

Training Opportunity

GrandPad is offering a one-hour virtual training session with care coordinators on Thursday, August 8th, at 9:00 a.m. or 3:00 p.m. This training will include an overview of GrandPad and tips and tricks specific to care coordinators. At the end of the presentation, there will be an opportunity for a Q&A.

Please RSVP for this optional training and submit any questions for GrandPad using the links below:



- Click here to register for the August 8th session at 9:00 a.m.
 Click here to register for the August 8th session at 3:00 p.m.

Elderly Waiver DTR Requirements

UCare care coordinators complete the EW DTR Notification Form in its entirety for any denial, termination, or reduction to Elderly Waiver services within one business day of the determination and at least 14 days before the ending of services. The DTR Notification Form is sent to the UCare CLS Intake team via email at CLSIntake@ucare.org or fax at 612-884-2185. Care coordinators should allow 14 calendar days for UCare to process the request. UCare will provide the member and the care coordinator with a copy of the DTR Notice once the DTR has been processed.

As clarified in the 7/1/2024 Care Coordination Requirements Grid, when a member is admitted to a hospital or nursing facility for more than 30 days, a DTR must be submitted to terminate all EW services on day 31. When a member is admitted to a hospital or nursing facility for more than 120 days, a DTR must be submitted to terminate EW eligibility on day 121. For more information, care coordinators can refer to the CBSM page for Temporary waiver exits and restarts: MMIS actions.

Community First Services and Supports (CFSS) Implementation 10/1/24

The Minnesota Department of Human Services (DHS) plans to implement CFSS on October 1, 2024. Members who receive PCA services will transition from PCA or CSG to CFSS during the regularly scheduled annual assessment on or after 10/1/24. CFSS allows for increased member choice in the utilization of goods and services to support their independence in their homes and communities. CFSS will be assessed through the Revised MnCHOICES platform.

Members who use CFSS will have more options and support:

- Members who want to continue to receive support from a provider agency may still do so using the CFSS agency model
- The <u>CFSS budget model</u> allows people more choice and control as the employer of their support workers

These new options are available in either model:

- In CFSS, a member's spouse or the parent of a minor may serve as that person's support worker
- A member who uses CFSS may serve as the support worker for another person who uses CFSS
- Members may choose to buy goods and services to aid in their independence
- Members may choose to buy a personal emergency response system (PERS) to provide backup
- The state provides a worker training and development budget that the provider agency (agency) model) or the person (budget model) may use to train workers on the individual needs of the
- The <u>consultation services provider</u> will provide education on the member's options and support in writing their service delivery plan

CFSS Training: DHS has prepared several interactive videos to learn more about CFSS. All MSC+/MSHO care coordinators should complete the Community First Services and Supports (CFSS) for Lead Agencies training courses (Course Code: CFSS_LA) in TrainLink prior to launch. This will give care coordinators an overview of CFSS and the approval process of the service delivery plan. Care Coordinators can also learn more about CFSS by visiting the DHS Programs and Services Page.



QUALITY REVIEW CORNER



Thank you to all the delegates who participated in the 2024 Quality Reviews. Below are some examples of exceptional best practices found during the Quality Reviews. Watch for these shout-outs in future newsletters as we continue to feature best practices!

Notable Highlights

- ★ **Koochiching County:** Care Coordinators documented the options (in-person, televideo, or telephonic) offered to refusal members to encourage engagement with assessments, including at the mid-year review.
- ★ Bluestone Physician Services: Care Coordinators did an excellent job summarizing in the note section of HRA assessments member's goals or when a member was declining goals.
- ★ Altair-Hammer: Care Coordinators explained their role to the member or member representative and often other members of the ICT. A good example was when a Care Coordinator mailed the 'When to Contact Care Coordinator' document to the member, their provider, and the member's guardian.
- ★ Altair-Accord: When members were transferred from another delegate, the Care Coordinators reviewed goals, noted commitments made by previous Care Coordinators, and followed through until completed.
- ★ Pine County: Case Notes and notes in description boxes on assessments are professionally written, clear, concise, and informative.

Care Coordination Trends & Tips

The Quality Review Team analyzes the overall trends found in the 2024 Quality Reviews. Monthly, an opportunity for improvement trend will be presented to provide care coordinators with guidance on improving care coordination compliance.

SMART Goals: Specific

Specific goals should be stated clearly, and a person-centered statement should be used. Specifically, the goal should include what needs to be accomplished and who is responsible for it.

Tip: Use Motivational Interviewing Techniques to assist the member in developing specific, meaningful goals. Use open-ended and reflective statements to help the person state the goal clearly and summarize if needed. Help the person articulate their goal. Use verbiage such as 'I will' and 'I would like' or use the member's name. Example: "I will have an exam in the next year." This is not specific, but adding more detail makes the goal specific: "I will complete an annual exam with my Primary Care Physician in the next year."

Resources: Smart Carte and Smart Goals Job Aid

REMINDERS

Keep Your Coverage Team

Keep Your Coverage (KYC) specialists are dedicated to helping members maintain Medical Assistance (MA) eligibility and health plan enrollment. KYC specialists work with members on UCare Connect, Connect + Medicare, MSC+, and MSHO plans. Additional details are located in the Keep Your Coverage Program Referral Guide. Refer a member to the KYC team by calling 612-676-3438 or emailing KeepYourCoverage@ucare.org.

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.

Updating Primary Care Clinic

All Care Coordinators should confirm members' primary care clinics and complete the Primary Care Clinic Change Request form on the <u>UCare website</u> 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. For us 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 protected health information **must** be sent using secure messaging. There may be times UCare is not able 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 use UCare's Secure email Message Center to create a secure email account.

UCare Care Coordination Contact Numbers

Please refer to the <u>Care Coordination Contact List</u> 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.