

Care Coordination News

November 2024



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

Enrollment-related questions can be directed to:

- **MSC+/MSHO enrollment** at 612-676-6622 or by email CMIntake@ucare.org
- **UCare 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. An electronic verification is needed when viewing the recorded Quarterly All Care Coordination Meeting. 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	December 12 th , 2024, 9 am – 12 pm Please note the date change
MSC+/MSHO and Connect/Connect + Medicare	CEU Event (optional)	November 12 th , 2024, 10 am - 12 pm Registration is FULL*
MSC+/MSHO	Clinical Liaison Office Hours (optional)	2025 dates coming soon
Connect/Connect + Medicare	Clinical Liaison Office Hours (optional)	2025 dates coming soon
MSC+/MSHO	Housing Office Hours (optional)	3rd Wednesday of every month from 1 pm-1:30 pm
Connect/Connect + Medicare	Housing Office Hours (optional)	1 st Wednesday of every month from 1 pm-1:30 pm



[Click here](#) to register for the November Housing Office Hours CT/CT+

[Click here](#) to register for the November Housing Office Hours MSC+/MSHO

***If you registered for the CEU event and are unable to attend, please inform your Clinical Liaisons to remove your registration to make room for others. Thank you.**

ALL CARE COORDINATION NEWS



New on the Care Coordination and Care Management Website

All products

- Gaps in Care Recorded Training (New 10/15/24)
- 2024 Benefits by Condition (Revised 10/24/2024)

MSC+/MSHO

- Additional & Supplemental Benefits: MSC+ and MSHO (Revised 10/8/24)
- Assessment Checklist MnCHOICES (Revised 10/18/24)
- CFSS Care Coordination Guidelines (Revised 10/21/24)
- CFSS FAQ (Revised 10/23/24)
- Elderly Waiver DTR Form Instructions (Revised 10/4/24)
- Health Resource Letter (10/18/24)
- Healthy Food Allowance Catalog: MSHO and Connect + Medicare
- ILOS Request Form (Revised 10/2/24)
- Monthly Activity Log Job Aid (Revised 10/7/24)
- New Hire Training Guide (Revised 10/22/24)
- PCA/CFSS Communication Form (Revised 10/14/24)
- PCA/CFSS Communication Form Instructions (Revised 10/4/24)

Connect/Connect+ Medicare

- Additional & Supplemental Benefits: Connect and Connect + Medicare (Revised 10/8/24)
- Assessment Checklist MnCHOICES (Revised 10/1/24)
- Chapter 4: Care Coordination Manual Part 3: CT and CT+ MED Care Coordination

Coming soon

- MnCHOICES Guidance (Revised 10/23/24)
- 2025 Comparison of Benefits: Connect and Connect + Medicare
- 2025 Comparison of Benefits: MSC+ and MSHO

Model of Care (MOC) Reminder



All care coordinators are required to view the MOC within 90 days of hire, and annually thereafter. If the 3rd Quarterly All Care Coordination Meeting was attended live, nothing further is needed! If the recorded version of the Quarterly Meeting is viewed, the [attendance log](#) must be completed to receive credit for the MOC completion. Additional Model of Care information, including the recorded training and attestation, can be found on our [website](#). Contact the Clinical Liaisons with any questions.

Care Coordination Learning Day Inquiry

Take the Survey: [Care Coordination Learning Day Survey](#)



DHS is in the planning stages of the Care Coordination Learning Day event for the fall of 2025. The last time this conference was offered was in 2018. DHS is seeking feedback from care coordinators regarding interest in a one-day conference on a weekday in September or October of 2025. DHS plans to be mindful of MEA and other regional social services conferences when scheduling. This conference will likely be within the Twin Cities/Metro area. Feedback will be used to help determine the location, size of the venue, potential hotel blocks for those traveling, and the need and scale for a potential virtual option for this event. To help gather the requested information for DHS, we ask care coordinators to complete the survey prior to Wednesday, November 27th. If you work with multiple agencies requesting feedback, only complete **ONE** survey.

Gaps In Care Initiative and Reports Update

Gaps in Care Review

A “gap in care” is defined as the discrepancy between recommended best practices and the care that is provided. For example, some common gaps in care include:

- A person is overdue for a recommended screening such as an annual mammogram, colonoscopy, or annual wellness visit, which are recommended based on age or other risk factors
- A person doesn't follow the recommendations for taking a prescription medication to manage a specific condition like diabetes

Why is it Essential to Close Gaps in Care?

Adhering to recommended preventive care, such as getting an annual cancer or diabetes screening, leads to better health outcomes due to early diagnosis or maintenance of a chronic condition. Treatment can start sooner when certain conditions are caught early, leading to lower healthcare costs and higher quality of life.



UCare wants members to be healthy and achieve their best health outcomes. UCare uses quality measures in CMS' Star Ratings program to help achieve this. CMS rewards health plans monetarily for high Star Ratings performance. Plans with high Star Ratings are able to offer robust supplement benefit offerings and keep low costs for their members.

Care Coordination Efforts

UCare asks care coordinators (CCs) to address gaps in care during member contacts, such as the annual health risk assessment and to use the support plan to create goals to close gaps in care. UCare also encourages care coordinators to support members in scheduling:

- An annual wellness visit with their primary care physician;
- Recommended cancer screenings for colorectal cancer and breast cancer;
- Annual recommended diabetes screening including an annual eye exam, HbA1c check-ups, and kidney health evaluation;
- An appointment with their primary care physician or specialist supporting the management of their hypertension, ensuring the member routinely checks their blood pressure and is supported in its management; and
- An appointment with their primary care physician or pharmacist to address any concerns the member is having remaining adherent to their medications.

UCare provides monthly Gaps in Care (GIC) reports to delegates, including the most up-to-date member statuses on each gap based on UCare claims. GIC Reports provide CCs with essential information to understand how members use their health care and to address gaps in care.

NEW Gaps in Care Training



A new 30-minute gap in care training is available on the UCare website! This training reviews all current measures available in the reports, how to utilize the reports effectively, and the resources available to CCs and members. Please have all new hires complete this training, as well as use it for any re-education and reviews needed for current staff. LINK: [Gaps in Care - UCare](#)

Gaps in Care Goal Progress and 2024 Focus



Gap trends for several of the measures were reviewed using data through July. The measures that need heightened care coordination focus through the end of 2024 include Colorectal Cancer Screening – **COL** and Diabetes Eye Exam – **EED**. It is also very important that our members complete an annual Health Risk Assessment.

Measure: Colorectal Cancer Screening (COL)

UCare has partnered with Exact Sciences, Cologuard's exclusive vendor, to provide in-home kits for colorectal cancer screening to eligible UCare members. Cologuard is intended for members of average risk with no family history of colorectal cancer.

County delegates received a list of eligible members for Cologuard on 10/11.



UCare encourages CCs to work with these members to discuss Cologuard as an option for colorectal cancer screening. If a member would like to request a Cologuard Kit, securely email jdeniz@ucare.org with the subject "Cologuard Kit Request."

Include the following in the email:

- Member First and Last Name
- Member ID Number
- Member Date of Birth
- Verified Address

Notes:

- This program is voluntary and available at no extra cost to eligible members
- CCs can send multiple Cologuard requests in one email
- Ensure members are aware there may be a delay between requesting a kit and shipping it
- Members can also speak with their healthcare provider about ordering a Cologuard test. We encourage our members to talk with their healthcare providers about appropriate colorectal cancer screening.
- The Exact Sciences Customer Care Team is available 24 hours a day, 7 days a week, to provide support at [1-844-870-8870 \(toll-free\); available 24 hours](tel:1-844-870-8870). If you have questions, please contact our Quality Team at UCare- ucarequality@ucare.org. **We ask that you please not share email addresses with members.**

UCare is here to help CCs obtain the resources needed to assist members in closing gaps. We thank you for your hard work in helping members access the best care possible! Please contact the clinical liaisons for additional training, gap education, and concerns about reporting.

2024 Gaps Reports

The final Gaps in Care report for 2024 will be sent in November. CCs can continue to work from this report through the end of the year.

2025 Planning



CCs can expect the first Gaps in Care report to be sent out at the end of February or early March 2025. This delay accounts for the time needed to receive claims and identify the 2025 gaps for members.

UCare heard feedback during the annual delegate meetings about suggestions for making the GIC report more user-friendly. This feedback was shared with UCare's data team to review updates that could be incorporated into the 2025 report updates. More to come!

Cecelia Health Chronic Kidney Disease (CKD) Virtual Support Program



UCare is partnering with Cecelia Health to help members better manage their health through their chronic kidney disease (CKD) support program. Available to eligible members at no additional cost, members get virtual support from a Cecelia Health registered dietician (RD). Together, they'll develop a plan to help members better understand their health needs and help manage their CKD.

What to Expect

The CKD support program offers guidance, education, and support to help members:

- Make healthy food choices to help prevent the progression of kidney disease
- Understand a kidney-friendly diet and how it fits into their daily life
- Understand labs related to CKD
- Prevent or slow down the progression of CKD
- Recognize the importance of regular doctor visits
- Achieve healthy eating and physical activity goals

Eligibility

UCare and EssentiaCare members are identified via claims, pharmacy, or other records, and communications are sent on how they may benefit from a Cecelia Health virtual support program. UCare or EssentiaCare members 18 years or older diagnosed with CKD are eligible for the Cecelia Health CKD virtual support program.

Members can learn more and register at ucare.org/ckdprogram

Diabetes Health Coaching

Eligible for **UCare Connect**, **UCare Connect + Medicare**, UCare Medicare with M Health Fairview & North Memorial Health, UCare Medicare Plans, MinnesotaCare, **Minnesota Senior Care Plus (MSC+)**, **UCare's Minnesota Senior Health Options (MSHO)**, Prepaid Medical Assistance Program (PMAP), UCare Individual & Family Plans (IFP) and UCare Individual & Family Plans with M Health Fairview plans.

November is national diabetes month, a time when communities seek to bring attention to diabetes. This year, the focus is on taking action to prevent diabetes-related health problems. UCare offers a variety of programs that help members who are diagnosed with diabetes gain better control of their overall health and well-being.

One program available to members is diabetes health coaching. Eligible members receive personalized health coaching through monthly scheduled telephone calls.

The health coaches meet members where they are at in their health journey and explore growth opportunities during coaching sessions. They guide members to highlight motivation, assess readiness for change, elicit strengths and reduce barriers.

Through UCare's Health Coaching Program, members better understand how diabetes and medication adherence affect their health, confidence, and lifestyle. This program helps members understand their lifestyle choices in diet, physical activity, sleep, and stress.



To make a referral to UCare's Disease Management team:

- Phone: 612-676-6539 or 866-863-8303
- Email: Disease_mgmt2@ucare.org
- Online: [UCare's Disease Management page](#), under the Resources section

If diabetes health coaching is not the right fit for the member's needs, other programs are available. View the "[Live Your Healthiest Life](#)" member handout for additional programs offered.

Community Education Class Allowance

Starting January 1st, 2025, the community education discount will be moving to the Healthy Benefits+ Visa Card as an allowance program.

- UCare MSHO and Connect + Medicare members will receive a quarterly allowance of \$100 preloaded to their Healthy Benefits+ Visa card.

Current UCare members who used the community education discount program in 2024 will receive a letter in December to inform them of the program change and details on how to use the Healthy Benefits+ Visa card. Members will not be sent a new card; they can continue using their current Healthy Benefits+ Visa card. The UCare Healthy Benefits+ Visa Card works until it expires or upon UCare plan termination. The allowance amounts and expirations vary by program. If your plan is terminated, all funds on your Healthy Benefits+ Visa ® card will expire.



Visit healthybenefitsplus.com/ucare or call 1-833-862-8276 (TTY 711) to:

- Learn more about eligible allowance and reward programs
- Check card balance
- Go over recent transactions

UCare Sales Updates



It's that time of year again in the sales department. The Annual Election Period (AEP) runs from October 15th through December 7th. As a reminder, during the fourth quarter, dual-eligible members do not have a quarterly special election period to use. However, there might be another special election period for them outside of the annual election. Contact UCare's Special Needs Plans at 612-676-3554 for assistance.

UCare's Retention team is here to help current members with medical assistance renewals. Portico is on-site at UCare's 500 building to help members the 1st and 3rd Tuesday of the month from 11:00 am-4:00 pm.

CONNECT AND CONNECT + MEDICARE NEWS

UCare Connect + Medicare 2025 Supplemental Benefit Changes

UCare is proud to share that existing supplemental benefits for Connect + Medicare will continue in 2025 and will be expanding coverage of high-value benefits! Coming soon, the 2025 Comparison Grid will be posted to the "Member Handouts" section of the Care Coordination (CC) Website. These are for CC awareness, and additional benefit details will be provided at the December Quarterly Meeting.



IMPORTANT: The coverage changes below will not go into effect until 1/1/2025

Expanded Coverage:

- Part D cost share elimination – **All Part D co-pays eliminated**
- Healthy food allowance **increased to \$75 per month** for members with hypertension, diabetes, or lipid disorders
- Expanded Community Education Class Allowance - **\$100 allowance per quarter** on eligible classes through local school districts. Quarterly allowance added to member's Healthy Benefits+ Visa card

New Coverage:

- Connect to Wellness Kit option – **ADHD and Autism Support kit**, includes metal roller, teething tube, phone cord bracelet, acrobatic fidget, and an ADHD planner (care coordinator suggestion)
- Caregiver Support – Includes up to **12 visits per year of M Health Fairview Caregiver Assurance** with a caregiver advisor, resource information and advice, service referrals and stress reduction tips.
- Post-discharge Healthy Transitions Program – Up to **4 re-admission prevention sessions** with a Community Health Worker - Individualized support, education and resources following hospital inpatient discharge during the first 30 days (Care coordinator suggestion)

Note: Supplemental crown coverage for 2025 will be two high noble metal fused to porcelain crowns per year

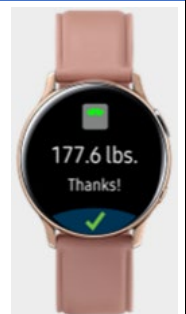
As always, UCare welcomes and appreciates feedback and suggestions on our benefits. Please provide feedback to the Clinical Liaisons at quarterly meetings and/or through the annual care coordinator survey!

MSC+ AND MSHO NEWS

Monthly MSHO Supplemental Benefit Highlight

Reemo Smartwatch Activity Tracker Plus PERS Device

Members can get an easy-to-use activity tracker with personal emergency response support. The device combines some of the best features offered in traditional activity trackers with the protection of a wireless emergency call button. The device features 24/7 emergency call-for-help support directly through the watch, step and heart rate tracking to help the member reach their health goals, and built-in GPS to offer support inside and outside of the home. To order a Reemo smartwatch, care coordinators complete the [Reemo Smartwatch and/or Blood Pressure Monitor Order Form](#), which is located in the Supplemental Benefits Forms drawer on the [Benefits, Perks & Member Handouts page](#).



UCare MSHO 2025 Supplemental Benefit Changes

UCare is proud to share that existing supplemental benefits for MSHO will continue in 2025 and will be expanding coverage of high-value benefits! Coming soon, the 2025 Comparison Grid will be posted to the “Member Handouts” section of the Care Coordination (CC) Website. These are for CC awareness, and additional benefit details will be provided at the December Quarterly Meeting.

Expanded Coverage:

- Part D cost share elimination – All Part D co-pays eliminated
- Healthy food allowance increased to \$75 per month and now available to ALL members (qualifying conditions removed)
- Utility Allowance – Increased to \$55 per month, now available to ALL MSHO members (qualifying conditions removed). Rent is now an eligible utility.
- Over the Counter Allowance – Increased to \$70 per quarter
- Healthy Food Allowance Transportation – Up to 1 ride per week to participating healthy food allowance participating grocery stores now available to ALL members (qualifying conditions removed)
- Expanded Community Education Class Allowance - \$100 allowance per quarter on eligible classes through local school districts. The quarterly allowance will be added to the member’s Healthy Benefits+ Visa card.
- New Items added to \$750 Home and Bath safety – Carbon monoxide detectors and smoke alarms are now eligible items (care coordinator suggestion)
- Eyewear Upgrade Replacement – 1 replacement per year due to loss, theft, or damage (care coordinator suggestion)
- Supplemental Lifeline/PERS (non-EW) Replacement coverage – 1 replacement per year due to loss, theft, or damage (care coordinator suggestion)

Note on HB+ Card allowances: UCare is not currently offering combined allowances based on vendor feedback, and enrollees having difficulty managing multiple allowances from a single pool of dollars. Our goal is to work on keeping these benefits easy to access. We are monitoring and may update our approach based on member and care coordinator feedback.

Note: Supplemental crown coverage for 2025 will be two high noble metal fused to porcelain crowns per year

ILOS Reminder: UCare can provide short-term coverage of specific Elderly Waiver benefits to MSHO and MSC+ members not on EW via In Lieu of Services (ILOS) benefits. ILOS benefits may be covered by UCare when they are a cost-effective alternative to a more expensive Medicaid-covered service (for example, nursing home stay or hospital admission). More information is available here: [ILOS Job Aid](#).

Lutheran Social Services: Healthy Transitions Program

MSHO members discharged from the hospital get access to a community health worker (2 in-person and 2 telephonic visits) within the first 30 days of discharge, with the goal of reducing hospital re-entry. LSS outreaches members post-discharge for enrollment, and emails care coordinators for awareness upon enrollment.

Keeping U Informed: Moving forward, LSS will also send the pre/post survey completed with members to care coordinators! LSS is a temporary member of the care team once a member agrees to use this benefit, and sharing these surveys will help all parties ensure the member's continuity of care.

Stress and Anxiety Kit

MSHO members can order a Stress & Anxiety Kit to help improve health and wellness at no cost. Each kit includes engaging tools to help members living with stress or anxiety. MSHO members may choose one of the following kit options:

- Kit 1: Sleep Aid Kit
- Kit 2: Stress Relief Kit
- Kit 3: Amazon Echo Kit

To order a kit, log in or create an online member account at member.ucare.org. Then, go to Health & Wellness, Wellness, and Rewards & Allowance to place an order. Members can also call UCare Customer Service at the number on the back of their member ID card to order by phone. Care coordinators can also order kits for their members.



*Must be an eligible UCare member at the time of the order. Limit one kit per year per member. Kit contents may be subject to change. Please allow 4 – 6 weeks for delivery.

Falls Prevention

Falls are the leading cause of fatal and nonfatal injuries for older adults. Each year, 1 in 3 adults 65 or older experience falls. Since falls are all too common among older adults, many people develop a fear of falling. This fear may cause them to limit their activities, which leads to reduced mobility, loss of physical fitness, and an increased risk of falling. Dangerous falls can happen to anyone at any time. Make sure to assess every patient over 65 years for fall risk and talk to members about fall prevention measures.

For more information, visit ucare.org/falls

UCare offers tools to help prevent falls:

Strong & Stable Kit:

UCare Medicare (excluding UCare Your Choice Plans and Medicare Supplement), UCare Medicare with M Health Fairview & North Memorial, UCare Advocate Choice, UCare Advocate Plus, **MSHO**, and **MSC+** members are eligible for one kit per year. Members can contact their care coordinator or case manager, who can order the kit.

- Resistance band strength kit
- Tip sheets with helpful fall prevention advice
- Tub grips
- Nightlight
- Medication box



Osteoporosis Management: In-home Bone Density Scans (BDS)

UCare offers an in-home bone density scan for female **MSHO members ages 67-85** who have suffered a recent fracture. The goal of this program is to provide education on the importance of screening for early detection and treatment of Osteoporosis, a disease that causes bones to become weak and brittle. When bones are weak, fractures can occur.



UCare conducts telephonic outreach to assist members in scheduling a follow-up appointment, post fracture, for a DEXA scan with their primary care provider. Eligible members receive a letter when due for a bone mineral density test and a voucher form for a \$100 incentive for completing the scan. If members do not want to schedule an appointment with their primary care provider, a trained UCare Health Improvement Specialist may be available to perform the scan with a portable ultrasound machine within the convenience and comfort of the member's home. The scan

measures the strength of the bones through the member's non-dominant forearm. The results are then sent to the member and the member's primary care provider, in which the health improvement specialist encourages follow-up with their provider.

Eligible members for this outreach program are identified through the Osteoporosis Management In Women Who Had a Fracture (OMW) measure and have not completed a bone density scan (BDS)/ or have not completed a BDS done in the last 2 years or are not on a prescription for a drug to treat osteoporosis in the six-months following the fracture. The BDS is free to the member, whether completed with their primary care physician or with a UCare Health Improvement Specialist.

In-home screening is available to members who reside within the seven-county metro area. Depending on the screener's availability, appointments may be available for outer-metro counties.

Eligible MSHO members can expect:

- A UCare Health Improvement Specialist will reach out and provide education on osteoporosis management
- Calls will be completed Monday – Friday (except for holidays) from 8 am to 5:30 pm
- Caller ID to reflect **612-294-5000** and will be identified as UCare

- The Health Improvement Specialist will try and leave a voice message and return call back number as applicable

Please call **Cindie Kouame, Health Improvement Specialist, at 612-294-5000** to learn more about osteoporosis management and member eligibility.

QUALITY REVIEW CORNER



Thank you to all the delegates participating in the 2024 Quality Reviews. Below are 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!

All Products

- ★ **Olmsted County:** Care coordinators advocated for their members and assisted in care coordination activities such as: setting up medical rides, ordering wellness and dental refill kits, Healthy Benefits+ Cards, One Pass information, and providing the CVS OTC catalog.
- ★ **Lake County:** For members that refused an assessment, the care coordinators reviewed the MSC+/MSHO comparison handout, discussed the Safe Disposal of Medication, reviewed Supplemental Benefits, and collaborated with the Waiver Case Manager.
- ★ **Nobles County:** At the mid-year review, care coordinators discussed MSHO Supplemental Benefits, Safe Disposal of Medications, falls, ER visits, and hospitalizations and provided updates on the Support Plans.
- ★ **Wabasha County:** A community care coordinator documented quarterly case notes and progress notes in MnCHOICES for an MSC+ member. A SNF care coordinator documented care conference notes and other updates before required annual contact with all SNF members.
- ★ **Wilkin County:** By educating members on the benefits of care coordination and conducting investigative outreach to find updated contact information, care coordinators were able to complete assessments with members who previously declined or were unable to be reached for an assessment.

Care Coordination Trends & Tips

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

'My Plan to Address Safety Needs' (Writing a Safety Plan)

If there are identified health and safety risks, document how these will be addressed with a goal, services, or the member's plan for managing risk. If the member doesn't have a plan because they don't have risks identified or don't believe they have any risks, the CC should note that in the "My Plan to Address Safety Needs" section of the Support Plan. If the CC offers a service critical to the member's health and safety that the member does not accept, this should be noted in this section. Within the Support Plan-MCO MnCHOICES Assessment, address all the person's remaining needs and document a plan in the "My Plan to Address Safety Needs" section. MnCHOICES system will indicate if all needs are met.

Examples:

- CC assessed Sally and identified risks related to cognitive decline and her inability to evacuate safely on her own. The care coordinator offered assisted living with 24-hour care and monitoring. Sally and her daughter, Suzie, both declined 24-hour assisted living and preferred that Sally remain living with family. Sally and Suzie will contact CC with any new concerns or service needs.
- No safety needs were reported or identified during the assessment. The care coordinator provided contact information and instructed the member on whom to contact with any needed changes.

DHS NEWS

MnCHOICES Release Notes

Support plan heading:

- **Description:** The system would not save “Date support plan shared” in a revised support plan when a user selected “No” or did not enter a date for an original support plan in “My care team” in an SP — MCO/MnA or SP — HRA. [DHS ID 146753]
 - **Changes made:** The date the support plan was shared with the primary doctor or support team member is now editable on revised support plans.

Updated Current Functionality and Future Enhancements document items:

- **Description:** A user cannot choose a consultation services provider in the support plan as a service provider for a person using CFSS. [DHS ID 146502]
 - **Directions:** In the Support Plan, choose “Add service or support.” Select “People and community organizations that support me,” and type in the organization’s name. Include a support description that includes the service details. Then, enter CFSS Consultation Services T1023.

New additions to the Current Functionality and Future Enhancements document (8 additions, which include 1 critical functionality item):

- **Person record: Progress Notes-Description:** In the “Note” field of Progress Notes, when typing a date (e.g., 1/2/2024), using a forward slash (/) will convert some dates into a fraction. [DHS ID 154683]
 - **Directions:** When typing a date in the “Note” field, instead of using the forward-slash (/), use a dash (-) or period (.) between the date, month, and year (e.g., 1-2-2024 or 1.2.2024).

Smart Guide:

Transfer Guidance for MSHO/MS+ Care Coordinators (loaded to Help Center 9/26/2024): Provides transfer scenarios and instructions for MSHO/MS+ care coordinators.

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](#). You can 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. This will ensure you are using the most up-to-date version.

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. 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 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.