Care Coordination News



April 2025

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 Liaison 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
- UCare Connect/Connect+ Medicare enrollment by email at connectintake@ucare.org

2025 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 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	June 12th, 2025, 9 am-12 pm
		September 11th, 2025, 9 am-12 pm December 11th, 2025, 9 am-12 pm
MSC+/MSHO and Connect/Connect + Medicare	CEU Event (optional)	May (Dates to come)
		August (Dates to come)
		November (Dates to come)
MSC+/MSHO	Clinical Liaison Office Hours (optional)	April 24 th , 2025, 11 am-12 pm
		July 24 th , 2025, 11 am-12 pm
		October 23 rd , 2025, 11 am-12 pm
Connect/Connect + Medicare	Clinical Liaison Office Hours	April 24th, 2025, 12:30 pm-1:30 pm
		July 24th, 2025, 12:30 pm-1:30 pm
	(optional)	October 23 rd , 2025, 12:30 pm-1:30
		pm
MSC+/MSHO and	Housing Office Hours (optional)	3 rd Wednesday of every month from
Connect/Connect + Medicare		1 pm-1:30 pm



<u>Click here</u> to register for the April Clinical Liaison MSC+/MSHO Office Hours

<u>Click here</u> to register for the April Clinical Liaison CT/CT+ Office Hours

<u>Click here</u> to register for the April Housing Office Hours

ALL CARE COORDINATION NEWS



New on the Care Coordination and Care Management Website

All products

- 1st Quarterly All Care Coordination Meeting Recording, PPT Slides, and Attendance Log
- Housing Stabilization Services and Statewide Resources Recorded Training and PPT Slides
- 2025 Health Promotion Benefit Handouts (New 3/1/25)

MSC+/MSHO

- Monthly Activity Log Job Aid (Revised 3/17/25)
- 2025 Monthly Activity Log (Revised 3/18/25)
- Home and Community-Based Service Exception Request (New 3/4/25)
- CFSS Care Coordination Guidelines (Revised 3/25/25)
- CFSS Follow Up Needed Letter (New 4/1/25)
- PCA/CFSS Communication Form and Instructions (Revised 3/17/25)
- Waiver Service Approval Form (Revised 2/28/25)

Connect/Connect+ Medicare

- Monthly Activity Log Job Aid (Revised 3/17/25)
- 2025 Monthly Activity Log (Revised 3/18/25)
- ILOS Post Discharge Meals Instructions (Revised 3/1/25)

Coming soon

- Assessment Checklist MSC+/MSHO
- Assessment Checklist CT/CT+
- CDCS Post Communication Form

UCare Introduces New Provider Search Tool

On March 27, UCare launched a new provider search on UCare.org. The new search contains the same provider information as the previous search tool but offers users enhanced filtering options and a more user-friendly experience.



The new search is available at https://search.ucare.org.

UCare is developing additional tools and resources to assist care coordinators using the new search tool and will publish them once they are available.

People Powered Moment!



UCare believes care coordination makes a difference in the lives of the members we serve. We want to celebrate the stories you share! Thank you to Alicia Johnson, SNBC care coordinator with UCare, for sharing a story that demonstrates how a Transition of Care is an opportunity to provide education and support!

Alicia shared, "I was recently informed that a member was discharged from a residential treatment program for SUD. I reached out to the member for TOC and confirmed that the member returned to their previous living situation/home. I happened to catch the member just as they were on their way home from the orientation meeting for an outpatient program. We had a good discussion, reviewing

pillars of care, and I empathized with the holidays and added stressors the member may be experiencing. At the end of the call, I asked if it would be okay to give them a call the next week to check in after they've been to a few outpatient sessions. The member told me yes, thanked me for calling, and stated, "It's bizarre that you called just as I finished that orientation. It's nice to know that somebody cares."

Thank you, Alicia, for providing additional follow-up based on your clinical judgment and for caring about UCare members. If care coordinators want to share a story, click the <u>People Powered Moments</u> <u>Form</u> link on the Care Coordination homepage.

How UCare Clinical Liaisons Support Care Coordinators

The UCare Clinical Liaison team partners with care coordinators across the state in counties and care systems. Regularly scheduled meetings are one way the clinical liaisons help support care coordinators in being successful in their daily roles.

The Quarterly All Care Coordination Meetings are held in March, June, September and December. All care coordinators are required to attend live or view the recorded Webex on the <u>Care Coordination Quarterly Meetings page</u>. These informative meetings provide updates on UCare programs, benefits, and care coordination requirements. Due to the large attendance and structured agenda with presenters, answering questions may be limited during these quarterly meetings.



Office Hours are an opportunity to ask the clinical liaisons any care coordination-related questions in an open forum. Care coordinators may come with questions or simply attend to listen to the group discussion. The clinical liaisons host Office Hours in January, April, July and October. Office Hours are held the month following the Quarterly All Care Coordination Meetings. This is an opportunity for care coordination staff to ask questions related to information shared during the Quarterly All Care Coordination

Meetings. Separate Office Hours are held for Connect/Connect + Medicare and MSC+/MSHO care coordinators to ensure appropriate audiences for each question and discussed topics.

Daily Activity Report (DAR) File – Naming Convention Changes

Effective April 7, 2025, the UCare DAR file will feature a revised naming convention for product values. This change is designed to improve clarity and consistency across our systems.

UCare encourages all stakeholders to familiarize themselves with the new naming convention to ensure a smooth transition. Collaboration and understanding are greatly appreciated as this improvement is implemented.

Below is a table of current values vs. future values to cross-reference.

Current DAR: Product Values vs. Future DAR: CBH Values

Current Eligibility -Plan Name	CBH Eligibility - Plan Name
Connect	Connect Medicare Enrolled
Connect	Connect Medicaid Only
Connect + Medicare	Connect + Medicare_MM
MSC+	Minnesota Senior Care Plus Dual Cost Share
MSC+	Minnesota Senior Care Plus Dual No Cost Share
MSC+	Minnesota Senior Care Plus Non Dual Cost Share
MSC+	Minnesota Senior Care Plus Non Dual No Cost Share
MSC+	Minnesota Senior Care Plus with Elderly Waiver Dual Cost Share
MSC+	Minnesota Senior Care Plus with Elderly Waiver Dual No Cost Share
MSC+	Minnesota Senior Care Plus with Elderly Waiver Non Dual Cost Share
MSC+	Minnesota Senior Care Plus with Elderly Waiver Non Dual No Cost Share
MSHO	Minnesota Senior Health Options MSHO_MM

Minnesota DHS Preferred Drug List (PDL) Update

On 4/1/2025, DHS will update the preferred drug list (PDL). These changes apply to UCare Medical Assistance (non-dual eligible) plans. Notable formulary changes are listed below:

- Desvenlafaxine ER is being added as a preferred drug
- Paliperidone (oral) is being added as a preferred drug
- Buprenorphine transdermal patches are being added as a preferred drug
- Synjardy, Synjardy XR, and Xigduo XR are being added as preferred drugs
- Lialda is being moved from a preferred drug to a non-preferred drug. It is being replaced by its generic version (mesalamine) as a preferred option.

Diabetes Program

Cecelia Health Diabetes virtual support program



UCare is partnering with Cecelia Health to help members better manage health outcomes through the diabetes support program. This program is available to eligible members at no additional cost. Members will receive

virtual support from a Cecelia Health-certified diabetes care and education specialist (CDCES). Together, they'll develop a plan to help members manage diabetes and enjoy healthier lives.

The diabetes program offers health coaching and education to help members:

- Monitor blood sugar
- Lower A1c and improve time in range (TIR)
- Reduce the number of sick days
- Adjust diabetes devices to ensure optimal usage
- Achieve healthy eating and exercise goals

Eligibility

UCare 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 members 18 years or older diagnosed with diabetes are eligible for the Cecelia Health Diabetes virtual support program. Members can learn more and register at <u>Diabetes Virtual Support Program | Cecelia Health | UCare</u>

News U Can Use

QRyde Portal Registration

The QRyde Facility Portal has launched, and HealthRide is actively processing registration requests for care coordinators. On March 3rd, leaders were emailed, requesting that all users be added to the registration spreadsheet. This process is for initial setup and is due by March 31st. All subsequent registration and offboard requests must use the individual ORyde Facility Portal Registration Request.

The Facility Portal allows care coordinators to submit ride requests for members and does not replace the ability to call HealthRide and book a ride. For security reasons, two-factor authentication (2FA) is required. Currently, the only available option is via cell phone.

There is a two-business day turnaround time for requests submitted via the Facility Portal. Rides must be submitted at least three days in advance and may be requested up to thirty days in advance. Methadone rides cannot be submitted via the portal. In addition to making ride requests, CCs will be able to see all rides requested, booked, and canceled for each member.

For more information, there is a demonstration in the first recorded <u>quarterly meeting</u> of 2025. The clinical liaison team is available to assist with questions regarding the registration process and can be reached at <u>MSC_MSHOClinicalLiaison@ucare.org</u> or <u>SNBCClinicalliaison@ucare.org</u>.

One Pass



Eligible members include UCare's MSHO and UCare Connect + Medicare, UCare Medicare (excluding UCare Advocate Plans), UCare Your Choice Plans, UCare Medicare Supplement, and EssentiaCare.

One Pass is a complete fitness solution for the body and mind, available at no additional cost for eligible members.

One Pass offers:

- Access to more than 23,000 participating fitness locations nationwide
- More than 30,000 on-demand and live-streaming fitness classes
- Workout builders to create personalized workouts
- Home Fitness Kits available to members who are physically unable to visit or who reside at least 15 miles outside a participating fitness location
- Personalized, online brain training program to help improve memory, attention and focus
- Over 30,000 social activities, community classes, and events available for online or in-person participation

Members can go to <u>ucare.org/onepass</u> to learn more and find participating fitness locations.

CONNECT AND CONNECT + MEDICARE NEWS

Breathe Easy with Asthma



After a cold winter, many welcome the chance to spend time outside in spring. However, for people with asthma, springtime allergies can be difficult to manage and may trigger an asthma flare-up. UCare's Asthma Education Program is designed to help members learn how to live well with asthma in the spring or any season.

Through the program, Asthma Educators reinforce the importance of developing an asthma action plan with a provider that may include instructions for seasonal changes. As part of the program, members receive asthma education and resources that are reviewed during each call. Education topics include:

- Asthma condition information
- How to identify and manage triggers
- How to self-monitor and avoid flare-ups
- How to keep track of asthma symptoms and medications

Providing UCare members with asthma education can lead to a better quality of life and improved asthma control.

The Asthma Education Program is available to members 5 – 64 years of age with an asthma diagnosis.

For more information about our Disease Management programs, please visit: https://www.ucare.org/health-wellness/special-programs/health-conditions

To make a referral, please reach out to:

• 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

Planned Home Birth Services Now Available for UCare Members

Effective Jan. 1, 2025, UCare covers low-risk pregnancy and low-risk delivery services provided at home for MHCP members. Low risk means a routine, uncomplicated prenatal course as determined by documentation of adequate prenatal care and the anticipation of a routine, uncomplicated labor and birth.

For additional information, see the MHCP Provider Manual for details on home birth coverage.



MSC+ AND MSHO NEWS

Extension of Six-Month PCA Transition



DHS allows the extension of PCA Transition in circumstances where the member has been unable to complete the transition to CFSS before the end of the six-month PCA authorization. Care coordinators are to use clinical judgment to determine if an extension is warranted. A checkbox to request an extension of the six-month PCA

transition has been added within the PCA Services, six-month transition section of the PCA/CFSS

Communication Form. Justification **must** be included on the PCA/CFSS Communication Form. The current six-month PCA transition can be extended in 3-month increments up to an additional 6 months, as appropriate. The total combined PCA transition authorization is a max of 12 months. The authorization extension will not appear on the Daily Authorization Report (DAR).

Using clinical judgment, if a CC determines the member has neglected to complete the required tasks to transition to CFSS successfully, the CC will follow the DTR process using the PCA/CFSS Communication Form to deny CFSS. For example, the member refuses to select a Consultation Service (CS) Provider or is nonresponsive to the care coordinator and/or CS provider.

CFSS Care Coordination Guidelines have been updated and are posted online on the MSC+/MSHO Care Coordination page, PCA/CFSS Authorization drawer.



CFSS Additional Follow-Up Needed

UCare has created an optional use follow-up letter for CCs to use when a decision from the member is needed to continue to move toward the transition to CFSS. This new letter is located in the <u>MSC+/MSHO Letter Templates</u>. Additional languages coming soon!

Effective 4/1/25: Providing Final CFSS Authorizations to Consultation Service (CS) Providers

6893W vs PCA/CFSS Communication Form

As indicated during the 1st Quarterly All Care Coordination Meeting, DHS does not require UCare to use the DHS-6893W lead agency addendum to the CFSS Individual Service Delivery Plan. The UCare Service Authorization Letter (SAL) generated to the member and CFSS providers by PCA/CFSS Intake meets the requirement of providing the member and providers with the approved start and end date and the final unit or dollar amounts approved.

Use the DHS <u>CFSS Calculator</u> to accurately reflect start and end dates along with the approved service delivery plan information and carry over to the PCA/CFSS Communication Form for authorization. This ensures the SAL has accurate information sent to the members and providers.



4/1/25 Be on ALERT! While UCare is not required to use the 6893W and upload it to MnCHOICES, care coordinators are required to provide the final approved CFSS authorizations to Consultation Service (CS) providers. To mirror DHS practices for Counties and Tribes, starting 4/1/25, UCare's practice will include PCA/CFSS Intake returning the final PCA/CFSS Communication Form in an uneditable PDF format. The receiving care coordinator is required to upload the final version to MnCHOICES. For additional details, review UCare's ALERT sent to all care coordinators on 3/31/25.

Home and Community-Based Service Exception Request



UCare has combined the Additional or Substitute Home and Community Based Service Exception Request and the Request to Exceed Case Mix Cap forms. The new form is named Home and Community-Based Service Exception Request. Care coordinators should complete this form in its entirety. In addition to using it for an exceeds case mix request,

this form is for MSC+/MSHO care coordinators to request a service or item/good that the member requests UCare pay for that exceeds EW budget limits, **and** the care coordinator supports the need for the service or item/good. The form should be submitted to CareCoordinationReviews@ucare.org.

DHS NEWS AND UPDATES

AASD and Minnesota Board on Aging Online Courses

AASD and the Minnesota Board on Aging offer online courses and training materials for staff from counties, tribal nations, managed care organizations, providers and other interested parties about how to better serve and support older adults. All courses are available in the <u>Older Adult Programs</u> <u>Learning Center in TrainLink</u>. For additional information, refer to <u>DHS – AASD training and webinars</u>.

MnCHOICES Release Summary Highlight

Description: In the staff assignment tab of a person's record, users must follow a specific order when adding a new staff assignment. First, they select the assignment type (role), then the staff member's name, and finally, the location and effective start date. If a staff member works at multiple locations (for example, as a county staff member and a delegate to four different MCOs), their name will appear without showing which location is linked to it. After choosing the name, the location dropdown will show the available locations associated with that staff member. The system did not allow users to filter the staff list by location, so they might need to repeat the steps multiple times to find the staff member in the correct location.

 Changes made: The staff member dropdown in the New Staff Assignment window will now show both the staff member's name and organization. This will make it easier to choose the correct staff member for the location. After selecting the name, the location dropdown will display the locations associated with that staff member and organization.

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. 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 <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 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 <u>UCare's Secure email Message</u> Center.

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.