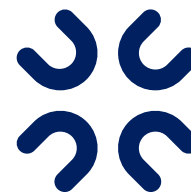


Care Coordination News

August 2025



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 or 1-866-613-1395
- **Connect/Connect + Medicare**: SNBCClinicalliaison@ucare.org or by phone: 612-676-6625 or 1-833-951-3190

Enrollment-related questions can be directed to:

- **MSC+/MSHO enrollment** 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 via recorded WebEx. An electronic verification is needed when viewing the recorded Quarterly All Care Coordination Meeting. CEU events and office hours are optional.

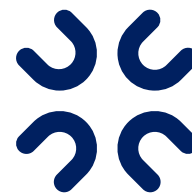
UCare Product	Meeting Type	Date & Time (Subject to change)
MSC+/ MSHO and Connect/Connect + Medicare	Live Quarterly All Care Coordination Meeting	September 11, 2025, 9 am-11 am December 11, 2025, 9 am-12 pm
MSC+/MSHO and Connect/Connect + Medicare	CEU Event (optional)	August 27, 2025, 9:30 am-11:30 am November (Dates to come)
MSC+/MSHO	Clinical Liaison Office Hours (optional)	October 23, 2025, 11 am-12 pm
Connect/Connect + Medicare	Clinical Liaison Office Hours (optional)	October 23, 2025, 12:30 pm-1:30 pm
MSC+/MSHO and Connect/Connect + Medicare	Housing Office Hours (optional)	3 rd Wednesday of every month from 1 pm-1:30 pm



[Click here](#) to register for the August CEU, Who Pays First: Understanding Medicare, Medical Assistance, Spenddowns and Waiver Obligations

[Click here](#) to register for the August Housing Office Hours

ALL CARE COORDINATION NEWS



New on the Care Coordination and Care Management Website

All products

- LSS Healthy Transitions Program Referral Form (Revised 7/2/25)
- LSS Healthy Transitions Flyer (Revised 7/7/25)
- In-Person Assessment Methods Decision Tree (Revised 7/16/25)
- MnCHOICES Guidance (Revised 7/8/25)
- Moving Home Minnesota Job Aid (Revised 7/11/25)
- SMART Carte (Revised 7/1/25)
- Care Coordination Manual Part 1 (Revised 7/9/25)
- Supplemental DTR Form (New 7/15/25)

MSC+/MSHO

- Assessment Checklist (Revised 7/1/25)
- Letters Guide (Revised 7/1/25)
- New Hire Training Guide (Revised 7/10/25)
- Transfer Member Job Aid (Revised 7/1/25)
- EW Provider Support Plan Cover Letter (Revised 7/1/25)
- Member Elderly Waiver Service Change Letter (Revised 7/1/25)
- CFSS Care Coordination Guidelines (Revised 7/1/25)
- 2025 Additional & Supplemental Benefits: MSC+ and MSHO (Revised 7/31/25)
- EW Budget Tool (Revised 7/30/25)

Connect/Connect+ Medicare

- Transfer Member Job Aid (Revised 7/15/25)
- 2025 Additional & Supplemental Benefits: Connect and Connect + Medicare (Revised 7/31/25)

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! Thank you to Amanda Lappen, MSHO/MSCH+ Care Coordinator with Blue Earth County, for sharing your member's story:

"My member has been living with Dementia for the last few years, and her memory has been increasingly getting worse, which has caused her to have to move into a SNF for care. Occasionally,



she also experiences behaviors due to her inability to process what is happening around her. The member has recently grown very attached to stuffed animals, and facility staff report that she lights up when animal therapy comes into the facility. I offered an animatronic cat, and the facility and the family thought she would enjoy it. CC received a call from her son, who said the cat had made a "world of difference." The member's son states that his mom lights up around the cat and that it brings a smile to her face every

day. He also states behaviors have decreased with the presence of the cat and expressed his gratitude for this UCare benefit.”

If care coordinators want to share a story, click the [People Powered Moments Form](#) link on the Care Coordination homepage.

Care Coordination Transportation Requests



UCare care coordinators may email requests for bus passes and rides that require a long-distance exception (LDE). Care coordinators should include the member’s name, UCare ID and the transportation provider for bus passes. The email should include the member’s name and UCare ID. For rides requiring a long-distance exception, also include pick-up and drop-off locations, and the appointment date and time. Care coordinators may email requests to health_ride@ucare.org.

Stretch & Stroll at the Minnesota State Fair

Thursday, August 28, 2025

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 28th, in Dan Patch Park. Come join the fun throughout the day for live music from the Pearl Brothers, senior fitness classes, entertainment, and giveaways.



Denial, Termination, or Reduction (DTR) of UCare Paid Services

The purpose of the DTR process is to provide members with information about how to appeal a denial, termination or reduction decision for services paid by UCare. Denied, terminated, or reduced services require a care coordinator to submit a DTR form based on the type of service (see table below) to UCare within **one business day** of determination. CCs are required to submit DTRs for EW, CFSS/PCA, In Lieu of Services (ILOS), and supplemental benefits paid for by UCare. If the service is being paid by another payor, UCare does not require DTRs.

Denial: Denying a requested service not currently authorized or an increase request to an existing service

Termination: Ending/stopping an existing service

Reduction: Decreasing an existing service

UCare recognizes the difference between educating members about what services they may or may not be eligible for and whether a formal denial of the request is necessary. The discussion between a CC and a member about why a service may not be appropriate and redirecting to alternate services is not a formal denial; this is collaborative service planning. When the CC provides member education about benefit eligibility and the member agrees with the outcome, the CC documents the conversation, and a formal denial is not needed. If a member continues to request a service after the CC has provided education about why the service is not appropriate/the member is not eligible, then a formal denial is required. Lastly, suppose a member is on a UCare product that does not offer the supplemental benefit the member is requesting. In that case, the member may file a grievance by contacting UCare customer service.

The EW DTR Notification Form needs to be submitted within one business day of the determination **and** at least 14 days before services end. UCare provides additional guidance on DTRs on the MSC+/MSHO Care Coordination Resources Page, Elderly Waiver drawer titled [DTR Instructions](#) and [DTR Waiver Situations: Reason Codes Decision Tool](#).

EW DTR Form	PCA/CFSS Communication Form	Supplemental Benefits DTR Form <i>*NEW*</i>	ILOS Request Form
<ul style="list-style-type: none"> •Used when denying, terminating or reducing an EW paid service •Also used for Extended EW services (e.g. extended HHA) 	<ul style="list-style-type: none"> •Used when approving PCA/CFSS and for denying, terminating or reducing PCA/CFSS •Also used for Extended CFSS •NOT required for temporary CFSS 	<ul style="list-style-type: none"> •Used when denying supplemental benefits •To identify supplemental benefits, see the Additional and Supplemental Benefits Summary 	<ul style="list-style-type: none"> •Used when approving ILOS and for denying, terminating or reducing ILOS

Community Education Allowance Reminder

All UCare Connect, Connect + Medicare, MSC+, and MSHO members are eligible for the \$100 per quarter Community Education Allowance; not all members will automatically have the allowance added to their Healthy Benefits+ Visa. Only Connect + Medicare and MSHO members will have the funds automatically added to their Healthy Benefits+ Visa. Connect and MSC+ members must request that the funds be added to their activated Healthy Benefits+ Visa by calling Healthy Benefits+ customer service at 1-833-862-8276 (TTY 711).



Heart Failure Remote Patient Monitoring Program



Our new remote patient monitoring (RPM) program for Connect, Connect + Medicare, MSC+, and MSHO members with a heart failure diagnosis launched in June. The 100plus program, through our partnership with Connect America, supports members with at-home heart monitoring to manage heart failure. UCare sends letters monthly to newly eligible members inviting them to participate in the program. Connect America follows up by phone to engage members in the program. The first mailing was sent to 402 members across all UCare product lines on 6/17/2025.

To inquire about member program eligibility or make a referral, please contact DM at disease_mgmt2@ucare.org. Program information can be found by visiting [Health Monitoring | Support for Living With Heart Failure | UCare](#).

Care Coordination Resource Highlight

My Health Decisions

UCare provides the My Health Decisions website as a resource that offers education, videos, and tools for various health conditions, as well as wellness and prevention information, life stages and more. Care coordinators and members may find useful information to aid in making educated decisions about their health. Visit the website to learn more: [Healthwise | Comprehensive Health Education | UCare](#)

Make Better Health Decisions



CONNECT AND CONNECT + MEDICARE NEWS

Connect Engagement Rates

Connect/Connect + Medicare engagement rates continue to increase due to the care coordinators' efforts to engage members. UCare wants to recognize the top four delegates with the highest engagement rates of over 70%!

- Lac Qui Parle County
- Pennington County
- Roseau County
- Marshall County

The hard work is paying off, as shown by the increase in counties that have met the four thresholds below. Thank you for all you've done, and continue to do, to make this a success!

Start of Engagement Program	
Threshold	# of Counties
35%	47
50%	20
65%	5
80%	2

Special Needs BasicCare (SNBC) UCare Connect Enrollment Update

UCare offers all six Medical Assistance/MinnesotaCare plans, including SNBC, MSHO, MSC+, Prepaid Medical Assistance Plan (PMAP), and MinnesotaCare. As news is shared in the media, it is important to note the plans being impacted by the change.

PMAP and MinnesotaCare

Starting **July 1**, UCare and the Minnesota Department of Human Services (DHS) expanded the current enrollment freeze to a hard freeze (new members and re-enrolled members) for:



- **PMAP:** All counties served by UCare, including Hennepin County
- **MinnesotaCare:** Anoka, Benton, Carver, Chisago, Crow Wing, Dakota, Hennepin, Pennington, Ramsey, Roseau, Scott, Sherburne, Stearns, St. Louis, Wadena, Washington and Wright (counties with 2+ health plan options)

Starting **September 1**, UCare will reduce the service area for **PMAP** and **MinnesotaCare**. This means UCare will exit until the next procurement in Benton, Chisago, Crow Wing, Pennington, Ramsey, Roseau, Sherburne, Stearns, St. Louis, Wadena and Wright counties for these products.

The only remaining exceptions are newborns for current UCare enrollee parents and individuals eligible for MinnesotaCare who have a family member already enrolled in UCare.

Special Needs BasicCare (SNBC) UCare Connect

Starting **July 1**, UCare and the Minnesota Department of Human Services (DHS) expanded the current enrollment freeze to a hard freeze (new members and re-enrolled members) for:

- **UCare Connect (non-integrated SNBC):** Anoka, Benton, Carver, Chisago, Dakota, Hennepin, Ramsey, Scott, Sherburne, Stearns, Washington, and Wright

As members have continued to enroll at higher rates than anticipated, and medical expenses have continued to increase, UCare and DHS have continued to discuss potential further freezes for additional counties serving UCare SNBC Connect members. There was a provider notification ([Provider Bulletin](#) revised 7/28/2025) that shared that, effective July 1, 2025, all counties have implemented a UCare Connect (non-integrated SNBC) enrollment freeze. This was not communicated to our Care Coordination Partners, as discussions were ongoing, and UCare continued to receive enrollment.

Effective **September 1**, the UCare Connect hard enrollment freeze will expand to include additional counties where there is another plan option for SNBC. This freeze includes the following counties: Aitkin, Becker, Carlton, Chippewa, Cook, Cottonwood, Crow Wing, Fillmore, Freeborn, Isanti, Jackson, Kanabec, Kandiyohi, Kittson, Koochiching, Lac qui Parle, Lake, Le Sueur, Lincoln, Lyon, Mahnomon, Mille Lacs, Morrison, Murray, Nicollet, Nobles, Norman, Olmsted, Red Lake, Redwood, Rice, Rock, St. Louis, Swift, Todd, Wadena, Wilkin, Yellow Medicine.

In the counties where UCare is the only Health Plan option, Connect enrollment will not be frozen. These include Blue Earth, Cass, Clay, Faribault, Houston, Itasca, Marshall, Martin, Mower, Otter Tail, Pennington, Pine, Polk, Roseau, Watonwan, and Winona.

As a reminder, the Connect+ plan (SNBC integrated) is not frozen and will continue to receive enrollment in this plan each month. The service area for Special Needs BasicCare (SNBC), UCare's Minnesota Senior Health Options (MSHO) or Minnesota Senior Care Plus (MSC+) **will not** be reduced.

MSC+ AND MSHO NEWS

Transfer Health Risk Assessment (THRA) with MnCHOICES Assessments



The [MnCHOICES Guidance](#) document has been updated to clarify that a THRA may be completed for members who are new to UCare and have completed an MnCHOICES Assessment with the Staying Healthy section in the past 365 days, regardless of whether the member transferred from Fee-For-Service or another MCO. This clarification will be included in a future Requirements Grid update.

UCare's Partnership with Benelynk

Benelynk is a national provider of health solutions for Medicare and Medicaid plans to improve serving members through connection and social supports. UCare has had an ongoing partnership with the Benelynk organization for almost 3 years, specifically to better understand the care needs of Veteran members in the Medicare Advantage population. As of July 2025, we have expanded this work to a targeted subset of MSHO members, primarily our male members.

If a member is a Veteran receiving care through a Veterans Affairs (VA) facility, the member's health information is not systematically shared with UCare or providers outside the VA. UCare is working to make the sharing of that information easier to improve the care and experience of members.

Through a mailed questionnaire and follow-up telephonic campaigns, Benelynk requests members to voluntarily identify themselves as Veterans or confirm they are not. If a member is a Veteran using a VA facility for some health care services, the member will also be asked to authorize UCare to request and retrieve a copy of the VA medical record with the VA 10-5345 form.

- Identifying Veterans from the broader population
- Securing member authorization to communicate with the VA
- Retrieving medical records from VA facilities across the country
- Providing comprehensive medical records to UCare and their care teams



The medical records received from the VA are used to help close HEDIS/quality gaps in care and can provide insight into how UCare could serve veteran members better under our care models. Nothing about this program will affect a member's benefits under UCare or the VA. UCare only wants to help veterans get the most out of their care and help to navigate the complex healthcare landscape our veterans experience.

While participating in this process is completely optional, the ask is that Care Coordinators be aware of this initiative and assist members in responding to the questionnaires should they receive one. Because Benelynk has a corporate office in Florida, some members may be concerned it is not a safe organization to speak with, but they are, in fact, a trusted UCare partner.

The Benelynk partnership is managed at UCare by the Quality Management Population Health team and the HEDIS Senior Manager. If you have any questions, please do not hesitate to contact the Clinical Liaisons or the HEDIS Senior Manager at HEDIS@UCare.org.

QUALITY REVIEW CORNER



Thank you to all the delegates who participated in the 2025 Quality Reviews. Below are just some of the things that were discussed during the Quality Reviews. Watch for these shout-outs in future newsletters as we continue to feature best practices!

All Products

- ★ **Mower County:** Care coordinators collaborated closely with the members, ICT, and support providers.
- ★ **Cass County:** Care coordinators did an excellent job documenting additional resources and information provided to members during the assessment, including advance directives materials and supplemental benefits.
- ★ **Morrison County:** Care coordinators followed up with Economic Assistance to inquire about members' inactive Medical Assistance (MA) and then met with the member in their home to help complete MA renewal paperwork.
- ★ **Altair-Accord:** Care coordinators documented good engagement strategies. CCs were able to complete HRAs with members who were previously a Refusal or unable-to-reach (UTR) member.
- ★ **Altair-Hammer:** Care coordinators documented efforts to contact members using good investigative research strategies, utilizing multiple sources to obtain contact information.

DHS NEWS AND UPDATES

PCA Update to Avoid Gaps in Services

The July 22, 2025, DHS [AASD and DSD eList Announcement](#) relayed that members currently receiving PCA services who do not have an approved CFSS service delivery plan before their next assessment will be able to continue receiving PCA services while they continue to work on transitioning to CFSS. All members receiving PCA services must transition to CFSS by September 30, 2026. DHS is working on providing additional information that will be shared in a future eList announcement and update to the CFSS Manual.

Initial Assessment Review (IAR) for Home and Community-Based Services (HCBS)

MnCHOICES initial assessments validity extension

Effective July 1, 2025:

- MnCHOICES initial assessments will be valid up to 365 days from the initial assessment interview date to establish program eligibility.
- Eligibility updates (EUs) will no longer be available in the MnCHOICES application.
- A new assessment type called "initial assessment review" will be available in MnCHOICES and Medicaid Management Information System (MMIS). This new assessment type is a remote activity that the lead agency uses after an initial assessment when the person has a delay in opening to a waiver, CFSS, AC or ECS

DHS will host a webinar on Tuesday, August 5th, from 9 to 10:30 a.m. Registration for the webinar can be found [here](#).

For additional information: [AASD and DSD eList Announcement](#)

MnCHOICES Release Summary Highlights

Description: New services must be added to [Moving Home Minnesota \(MHM\)](#).

- Changes made: The following six Moving Home Minnesota (MHM) services are now available for selection in the support plan using the service type “Services that support me”:
 - Pantry Stocking
 - Records and Fees
 - Transition Integration
 - Community Education and Integration Costs
 - Pre-Transition Environmental Modifications Deposits
 - Pre-Transition Clean-Up Services.

(Note: These new MHM services will be available July 1, 2025, for people who are enrolled in MHM and:

- Have fee-for-service coverage.
- Are enrolled in Special Needs Basic Care (SNBC).
- Are enrolled in Families and Children (i.e., Prepaid Medical Assistance Program [PMAP]).

Effective Aug. 1, 2025, the supplemental services will be available to people enrolled in Minnesota Senior Health Options (MSHO) and Minnesota Senior Care Plus (MSC+). This timeline gives managed care organizations adequate time to prepare for the launch, as required in their seniors managed care contract.)

Description: MnCHOICES initial assessments were valid for 60 days, and Eligibility updates were valid between the 60th and 90th day.

- Changes made: An extension to the duration of MnCHOICES initial assessment validity will go into effect on July 1, 2025:
 - MnCHOICES initial assessments will be valid up to 365 days from the initial assessment interview date to establish program eligibility.
 - Eligibility updates (EUs) will no longer be available in the MnCHOICES application.
 - A new assessment type called initial assessment review (IAR) will be available in MnCHOICES and Medicaid Management Information System (MMIS). This new assessment type is a remote activity that the lead agency uses after an initial assessment when the person has a delay in opening to a waiver, CFSS, AC or ECS.

(Additional details regarding MnCHOICES initial assessments validity extension were provided in the email communication sent to mentors on June 23.)

REMINDERS

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 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. 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.