

# Care Coordination News

## February 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](mailto:MSC_MSHO_Clinicalliaison@ucare.org) or by phone: 612-294-5045 or 1-866-613-1395
- **Connect/Connect + Medicare:** [SNBCClinicalliaison@ucare.org](mailto:SNBCClinicalliaison@ucare.org) 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](mailto:CMIntake@ucare.org)
- **UCare Connect/Connect+ Medicare enrollment by** email at [connectintake@ucare.org](mailto: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 activities. UCare care coordinators must participate in the Quarterly All Care Coordination Meetings presented live or by viewing the recorded WebEx. An electronic attestation 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	March 13 <sup>th</sup> , 2025, 9 am-12 pm June 12 <sup>th</sup> , 2025, 9 am-12 pm September 11 <sup>th</sup> , 2025, 9 am-12 pm December 11 <sup>th</sup> , 2025, 9 am-12 pm
MSC+/MSHO and Connect/Connect + Medicare	CEU Event (optional)	<b>February 11<sup>th</sup>, 2025, 10 am-12 pm</b> May (Dates to come) August (Dates to come) November (Dates to come)
MSC+/MSHO	Clinical Liaison Office Hours (optional)	April 24 <sup>th</sup> , 2025, 11 am-12 pm July 24 <sup>th</sup> , 2025, 11 am-12 pm October 23 <sup>rd</sup> , 2025, 11 am-12 pm
Connect/Connect + Medicare	Clinical Liaison Office Hours (optional)	April 24 <sup>th</sup> , 2025, 12:30 pm-1:30 pm July 24 <sup>th</sup> , 2025, 12:30 pm-1:30 pm October 23 <sup>rd</sup> , 2025, 12:30 pm-1:30 pm
MSC+/MSHO	Housing Office Hours (optional)	3 <sup>rd</sup> Wednesday of every month *Starting April 17 <sup>th</sup> from 1 pm-2 pm
Connect/Connect + Medicare	Housing Office Hours (optional)	1 <sup>st</sup> Wednesday of every month *Starting April 3 <sup>rd</sup> from 1 pm-2 pm

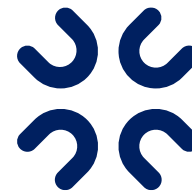


[Click here](#) to register for the February CEU "Introduction to Trauma-Informed Care"

(This CEU is limited to 500 participants)

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

## ALL CARE COORDINATION NEWS



### New on the Care Coordination and Care Management Website

#### All products

- Healthy Benefits Over the Counter (OTC) and Healthy Food Allowance Catalog: MSHO and CT+ Med (New 1/16/2025)
- 2025 Supplemental Benefits Training
- DHS System Access Request Form (Revised 1/23/25)
- MMIS Confidentiality Agreement
- Transition of Care Member Handout | Hmong | Somali | Spanish (New 1/24/25)
- UCare Clinical Phone List

#### MSC+/MSHO

- 2025 Additional & Supplemental Benefits: MSC+ and MSHO (Revised 1/16/2025)
- Homemaker Service Job Aid (Revised 1/8/2025)
- Monthly Activity Log Job Aid (Revised 1/22/2025)

#### Connect/Connect+ Medicare

- 2025 Additional & Supplemental Benefits: CT and CT+ Med (Revised 1/16/2025)
- 2025 comparison: UCare Connect and UCare Connect + Medicare (New 1/15/2025)

#### Coming Soon

- ILOS Post Discharge Meals Request Form CT/CT+ Med (New 2/1/25)
- ILOS Post Discharge Meals Instructions CT/CT+ Med (New 2/1/25)

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### Important MnCHOICES Updates



Everyone with access to MnCHOICES is required to have a supervisor assigned in the MnCHOICES profile. Please review to ensure one is assigned or edit as needed. DHS shared it is expected to have updates completed by **February 15, 2025**.



Care Coordinator (CC) MSHO/MSO+ role will gain the rights and abilities of a current certified assessor role with the next release. UCare Care coordinators should have the role of Care Coordinator MSHO/MSO+. County waiver case manager will be assigned the Certified Assessor role.



All members should have the staff assignment and location assignment updated upon enrollment, CC change, and member termination. This is a critical step for continuity of care, communication, and billing purposes.

For additional questions, contact the clinical liaisons at [mso\\_msho\\_clinicaliaison@ucare.org](mailto:mso_msho_clinicaliaison@ucare.org) or [SNBCClinicaliaison@ucare.org](mailto:SNBCClinicaliaison@ucare.org).

## Gaps in Care Calls

UCare's Quality Team is partnering with Axion to help support telephonic outreach for MSHO and



Connect + Medicare members as we start the new year. Axion will be conducting telephonic outreach for approximately 15,000 members who ended 2024 with at least two or more gaps in preventive care (e.g., breast and colon cancer screening, annual wellness visits, diabetic screenings). In addition to care coordination efforts, Axion will be providing education to the member about managing preventive care needs and connecting back with a provider. If a member needs additional support with setting up medical appointments, Axion will help refer the member back to the care coordinator, Health Improvement Team (if needed) or flag members for additional follow-up and support from the UCare's Quality Team. This program is expected to continue from February through the end of March.

## Virta Health - Virtual Clinic for Type 2 Diabetes Reversal

### Personalized nutrition planning for better health

UCare is teaming up with Virta Health to offer eligible members a type 2 diabetes reversal\* program at no additional cost to members. Virta is a virtual nutrition therapy clinic that helps lower members' blood sugar, helps them lose weight, and helps them rely less on prescription drugs. Virta's care plan is tailored to each member and offers support from medical providers, coaches, and digital health tools.

### Program Benefits

Eligible members who participate in the program receive:

- Nutritional education, including meal plans, shopping tips and recipe guides
- Medical supervision from a Virta physician, nurse, or physician's assistant
- Unlimited 1:1 health coaching
- Daily support with Virta's mobile app and health tools
- Access to a private online patient community
- Diabetes testing materials such as meters, strips and more

### Eligibility

UCare and EssentiaCare members between the ages of 18 and 79 who are currently diagnosed with type 2 diabetes are eligible for this program. UCare and EssentiaCare members are identified via claims, pharmacy, or other records. Identified members are provided information on how they may benefit from the Virta Health program. Some medical conditions would exclude patients from the Virta program. Members can learn more and register at [ucare.org/virta](https://ucare.org/virta)

## News U Can Use

### Over the Counter (OTC)/Healthy Food Allowance Catalogs

Two catalogs, located in the Benefits, Perks, and Member Handouts Spark, are posted on the care coordination (CC) website for CCs to reference. It is important to note that these are not all-inclusive of every item available under the benefit set. The catalogs serve as a guide, showing various popular items that members may be interested in purchasing. Many more products, brands, and quantities in-store and online are eligible for purchase through these benefits.

## DentaQuest Transition Updates



### **In-Network Providers**

As the DentaQuest network continues to grow, care coordinators can now search for providers using the UCare Provider Network Search Tool or by going to the [DentaQuest](#) website.

DentaQuest is eager to assist care coordinators with member dental concerns related to access, coverage, network and more!

For assistance, contact the appropriate product representative below.

**MSC+/Connect:** 888-227-3310

**MSHO/Connect + Medicare:** 855-209-3155

### **Dental Home**

The Dental Home Program is the process of suggesting a *dental home* assignment to each member. Having a dental home assigned is not required and will roll out in February 2025. DentaQuest will contact members via phone to educate them on the benefits of a dental home and the member's assignment. There will be a process for members to call Customer Service and/or complete a form to change their dental home, which will be communicated further as the program is implemented.

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## Using Interpreters

UCare provides interpreter services for American Sign Language and spoken language/limited English proficiency for members of MSC+, MSHO, Connect, Connect + Medicare plans for the purpose of completing assessments and ongoing care coordination (i.e., transition of care, mid-year review and other member/care coordination) communication needs.



### **Telephone Interpreters:**

Care coordinators may use telephonic translation services when contacting members who speak a different language or to schedule a telephonic interpreter at a specific time. UCare partners with Certified Language Interpreters (CLI) to provide telephonic interpretation for members with limited English proficiency. For additional information, see the CLI Interpreting Service Delegate Instructions and CLI Pre-Scheduling Instructions. A customer code has been provided to each delegate agency. CLI recommends 1-2 weeks advance notice to schedule a telephonic interpreter service.

### **In-Home Assessment/Other Visit Interpreter:**

Care coordinators should contact a UCare contracted interpreter agency directly to schedule an in-person interpreter for American Sign Language or members with limited English proficiency. Use the [UCare Provider Manual](#) to search (control F) "Contracted Interpreter Service" to locate the most recently updated contracted interpreter service agencies. Care coordinators will need to review and sign interpreter work orders when using contracted interpreters. Interpreter agencies have individual requirements related to advance notice. UCare encourages care coordinators to schedule at least two weeks in advance to ensure interpreter availability.

## Support Plan Translation and Alternative Formats



As a reminder, the care coordinator (CC) can request a member's support plan be translated into another language. Soon this process will be expanded from six language options to additional languages and alternative formats, such as audio and braille. The Support Plan Translation Request Form will be updated to accommodate alternative format requests and will be available online for CC use.

It is located in the Forms drawer on the [MSC+ and MSHO](#) or [Connect and Connect + Medicare](#) Resource pages. Please submit one support plan document per request. Requests can be emailed to [UCareMaterialsDelivery@ucare.org](mailto:UCareMaterialsDelivery@ucare.org).

The typical turnaround time for support plan translation and alternative format requests is up to two 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 standard English version first. Once the updated version is complete and received by the care coordinator, send a copy to the member. The Support Plan Cover Letter is translated into Hmong, Somali, Arabic, Russian, Vietnamese, and Spanish and soon will also be available in additional languages. All translated letters are available on the Care Coordination Resources pages under the Letter Templates drawer.

## Member Information in UCare Systems

UCare receives a monthly enrollment file from DHS that includes member information, including their address and phone number. The DHS enrollment file pulls information from the systems that the county financial workers update, including MAXIS, MNITS and MMIS. This information is the source of truth. If a member needs to update an address or phone number that UCare has on file, it must be updated with their county financial worker. The updated information will be loaded into the UCare system the following month.

Care coordinators should continue to provide care coordination to members assigned to them on the enrollment roster until the roster shows the member as a transfer to another care coordination delegate or the member terms from UCare if the member moved to an area where UCare is not offered.

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## CONNECT AND CONNECT + MEDICARE NEWS

### In Lieu of Services (ILOS) Post Discharge Meals

#### CT and CT+ Med

ILOS are supports offered to members to help improve health outcomes and advance health equity. ILOS aims to reduce hospital readmissions and unnecessary emergency department visits related to proper nutrition.

UCare is partnering with Mom's Meals to provide two daily medically tailored home-delivered meals for up to 14 days after being discharged from an inpatient stay. The care coordinator identifies members during the transition of care activities. The referral process is made easy with a simple referral form titled "ILOS Post Discharge Meals". The referral form and Care Coordinator Instructions will soon be posted on the Care Coordination and Care Management homepage.

## Take Action to Control Asthma

An asthma action plan is one of the most important elements of asthma control. This personalized plan provides daily and emergency guidance for managing asthma. UCare's Asthma Education program reviews the importance of having an asthma action plan, helping members learn how to manage individual asthma triggers, symptoms, and medications.

UCare's Asthma Educators encourage members to visit their healthcare provider annually to update their asthma action plan and to share it with family members, daycare, school and sports teams so they are prepared for asthma symptoms.

The asthma program is available to members 5-64 years of age. Referrals are accepted for UCare's Asthma Education program, and educators will assist members with referrals to other programs and resources as needed.

For more information, please visit:

<https://www.ucare.org/health-wellness/special-programs/health-conditions>

To send a referral, please reach out to:

- **DM Email:** [Disease\\_mgmt2@ucare.org](mailto: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>

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## MSC+ AND MSHO NEWS

### In Lieu of Services (ILOS) Update

Elderly Waiver (EW) services may be covered under ILOS for up to 45 days. ILOS may be considered for MSC+ and MSHO members following a hospitalization, an outpatient procedure, anesthesia, or when a member is at risk of hospitalization without the service(s). In lieu of services are interventions that would support seniors who are not eligible for Elderly Waiver (EW) or who are pending a UCode removal and would benefit from waiver services to avert future health care costs. Services include, but are not limited to, homemaking, respite out of home or hospital, ICLS, chore services and specialized equipment & supplies (one-time purchase).

UCare reviews each request for ILOS services and notifies care coordinators within seven days if the request is approved or denied.

UCare recently updated the [ILOS Request Form](#) and instructions. Forms are located on the [MSC+ and MSHO Care Coordination Resources page](#). The updates emphasize the importance of a robust justification/explanation of the need. UCare asks care coordinators to ensure a MnCHOICES assessment has been completed to determine if the member is or is not eligible for an Elderly Waiver. In addition, the updated form adds clarity around the amount and frequency of the requests. For additional questions about ILOS, please email [MSC\\_MSHO\\_ClinicalLiaison@ucare.org](mailto:MSC_MSHO_ClinicalLiaison@ucare.org).



## CFSS Provider Enrollment Process Change

Effective immediately, if a member selects an in-network PCA agency that is not yet enrolled with DHS for CFSS, the **provider agency** can contact the MHCP Provider Resource Center at 651-431-2700 to expedite their enrollment. As previously stated, care coordinators and provider agencies should no longer email DHS to expedite.

## QUALITY REVIEW CORNER



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

- ★ **Freeborn County:** Care coordinators documented a review of care coordination benefits with all members, including those who refused the health risk assessment. When an informal caregiver was identified during the health risk assessment, care coordinators utilized the Caregiver Questionnaire for Connect and Connect+ members.
- ★ **Todd County:** Care Coordinators discussed MA renewal with members and followed up with them to ensure the required paperwork was submitted.
- ★ **Wadena County:** A Care Coordinator assisted a member who needed contact information for a specialty pharmacy. CC also requested the annual Wellness Kit and OnePass membership for this member.

## 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.

### Writing Measurable Goals

Measurable goals should be written in a way that allows for tracking progress and identifying completion.

**Consider using measurable verbs:** take, perform, complete, use, list, state, self-report, identify

**Consider using measurable rates:** 3 days/week, 8/10, 10 minutes per day, lab values.

**Examples:**

Not Measurable	Measurable
I will have a healthy blood pressure.	I want to reduce my blood pressure from 140/90 to 130/80 by next review.
I will be pain-free.	I would like to decrease my foot pain from 8 to 4 in the next year.
I will complete my annual exam.	I will self-report scheduling an annual exam with Dr. Smith within 6 months.

**Resources:**

[SMART Carte](#), [SMART Goals Job Aid](#), [SMART Goals Recorded Training](#)

## DHS NEWS AND UPDATES

### MnCHOICES Release Summary: Resolved Current Functionality Items

**Support plan: Services and supports, Service type – Services that support me heading - Description:** A user could not choose a consultation services provider in the support plan as a service provider for a person using CFSS.

**Changes made:** CFSS consultation service providers are now available to choose from in support plans. Use the service type “Services that support me” when adding the service or support.

**MnCHOICES assessment heading-Description:** A user must select a response to “Additional information provided and discussed as needed” in the assessment and program acknowledgement section to fulfill completion requirements for an assessment.

**Changes made:** A new response option, “N/A,” will display under “Additional information provided and discussed as needed” and should be selected when the person is not provided one of the listed resources or any other additional information or resource. Selecting “N/A” will fulfill the completion requirements of this portion of the assessment and program acknowledgment.

## 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](mailto: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](mailto:MSC_MSHO_Clinicalliaison@ucare.org) & [SNBCClinicalLiaison@ucare.org](mailto:SNBCClinicalLiaison@ucare.org).