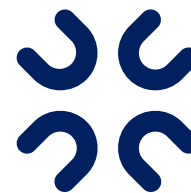


# Care Coordination News

October 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** 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, 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	December 11, 2025, 9 am-11 am
MSC+/MSHO and Connect/Connect + Medicare	CEU Event (optional)	<b>November 4 &amp; 6: <a href="#">Care Coordination Learning Day!</a></b>
MSC+/MSHO	Clinical Liaison Office Hours (optional)	<b>October 23, 2025, 11 am-12 pm</b>
Connect/Connect + Medicare	Clinical Liaison Office Hours (optional)	<b>October 23, 2025, 12:30 pm-1 pm</b>
MSC+/MSHO and Connect/Connect + Medicare	Housing Office Hours (optional)	3 <sup>rd</sup> Wednesday of every month from 1 pm-1:30 pm

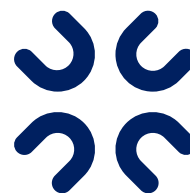


[Click here](#) to register for the **MSC+/MSHO Clinical Liaison Office Hours**

[Click here](#) to register for the **Connect/Connect + Medicare Clinical Liaison Office Hours**

**Housing Office Hours Registration TBD**

## ALL CARE COORDINATION NEWS



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

#### All products

- Care Coordination Manuals moved to REQUIREMENTS drawers on CT/CT+ MED and MSC+/MSHO Resources pages for easier navigation
- Transition of Care information is now located on the main page under TOC Spark for easier accessibility
- Model of Care Training is now located in the Meetings & Training Spark
- Numbers to Know (Revised 9/1/25)
  - Translations not available
- Transportation - Medical Job Aid (Revised 8/8/25)
- 3<sup>rd</sup> Quarterly All Care Coordination Meeting Recording & PPT (New 9/11/25)
- Housing Supports Comparison Grid (New 9/25/25)
- Who Pays First CEU FAQ (New 9/29/25)

#### MSC+/MSHO

- CFSS Care Coordination Guidelines (Revised 9/30/25)
- PCA/CFSS Communication Form (Revised 9/30/25)
- Waiver Service Approval Form (Revised 9/30/25)
- Assessment Checklist (Revised 8/28/25)

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### 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 the UCare Care Coordinator, Hannah Anger, LSW, for sharing your member story:

Care coordinator, Hannah, met with her member, "Susan," earlier this year. Susan was previously only getting home-delivered meals for services and support. Susan is on continuous oxygen and brought up issues with her mobility with her O2 tubing and tank, ability to complete deep cleaning, and lawn services/snow removal. Hannah was able to get her set up with monthly deep cleanings, snow removal/lawn care, a walker, and continued home-delivered meals. A few months later, Hannah got an update email from Susan,



"Good morning, Hannah,  
My walker arrived yesterday. It's my favorite color [blue]. Thanks. The cleaning ladies are coming again today. It's less than a month, but that's okay. They did a great job changing sheets, washing, and folding dirty ones. Also, my walk was shoveled the last time it snowed. It's amazing how relieved the stress is by having these things down. I feel my quality of life has improved tremendously because of your hard work!

Thank you,  
"Susan"  
P.S. Survivor starts next week."

Members with care coordinators like Hannah demonstrate skills of identifying needs, connecting to resources and following through. Their experiences also highlight the importance of strong relationships between members and their care coordinators. What a gift it is to be a care coordinator, to help others, and to show kindness.

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

### Reminder: Virtual Care Coordination Learning Day

Join DHS virtually for a two-day event with presentations to support Care Coordinators in their daily work.



When: Tuesday, November 4, 2025, 8:30 am-12:00 pm  
&  
Thursday, November 6, 2025, 12:00 pm-3:30 pm

To register, click [HERE](#) to receive session descriptions, times and session links.

### REEMO: Activity tracker plus personal emergency response system (PERS) device

#### CT+ MED and MSHO

Effective 1/1/2026, UCare will no longer offer the REEMO Smartwatch/PERS/Blood Pressure Monitor as a supplemental benefit to MSHO and Connect + Medicare members. UCare is exploring alternative, impactful PERS devices and programs for members. New referrals to REEMO will no longer be accepted starting 11/01/2025.

### SecFTP Changes: Multi-Factor Authentication (MFA)

Effective Monday, September 22, 2025, Multi-Factor Authentication (MFA) is needed as part of the SecFTP login process. MFA provides additional security when logging in and brings modern authentication to SecFTP. For UCare SecFTP users, follow the MFA setup instructions outlined in the [SecFTP User Instructions](#). Failing to follow these steps will prevent users from logging in to SecFTP. Contact the Clinical Liaisons if you have issues with SecFTP log-in or MFA set-up.



### Annual Notice of Change

#### CT + MED and MSHO



UCare has mailed the Annual Notice of Changes (ANOC) for the 2026 benefit plans to CT + MED and MSHO members. The ANOC is part of UCare's standard annual process to inform members about upcoming changes to benefits, coverage, rules, and costs. Given the significance of this year's updates, UCare is sharing this information to care coordinators earlier than usual to help plan and prepare for potential questions from members.

Because members have been mailed this information, care coordinators may begin addressing member questions. For additional support, members can also contact UCare Customer Service using the phone number provided in their ANOC letter and listed below.

- UCare's MSHO (HMO D-SNP) at 612-676-6868 or 1-866-280-7202
- UCare CT + MED (HMO D-SNP) at 612-676-3310 or 1-855-260-9707
- Both MSHO and CT+ MED TTY 612-676-6810 or 1-800-688-2534

## Care Coordination Resource Highlight

### Moving Home Minnesota (MHM)



Moving Home Minnesota (MHM) is a federal demonstration project that promotes the development and implementation of transition plans that reflect member preferences. Its goal is to create opportunities for members to move from institutions to their own homes in the community.

MHM is available to all care coordination products (MSC+, MSHO, CT, and CT + MED). Members must be in a qualified institution for 60 or more consecutive days to qualify for MHM. MHM often uses a Transition Services Coordinator provider who supports members in gaining access to medical, social, education, financial, housing, and other support necessary to move to the community. Once the member is discharged to the community, the MSHO/MSC+ Care Coordinator can open the member to Elderly Waiver (EW) and authorize additional Transitional Services to help obtain basic household items, as well as other EW services and supports. For members under age 65, the county case manager would perform lead agency responsibilities.

UCare covers MHM for MSC+ and MSHO members, while for CT and CT+MED members, MHM is paid for by Fee-for-Service Medical Assistance. UCare does not require authorization for non-EW MHM services. Providers, however, must be enrolled in UCare's claims payment system to submit claims for MHM services.

For more information, please see the recently updated [MHM Job Aid](#).

## CONNECT AND CONNECT + MEDICARE NEWS

### Connect + Medicare Service Area Reduction

UCare has made the difficult decision to reduce the service area of our UCare Connect + Medicare (integrated, Special Needs BasicCare) effective Jan. 1, 2026. This step reflects rising medical and pharmacy costs that have made it increasingly difficult to sustain certain products and is part of our broader strategy to strengthen our financial stability to ensure we can continue to deliver on our mission.

#### What is Changing in 2026

- Service Area Reduction: Beginning Jan. 1, 2026, UCare Connect + Medicare service area will remain available in **14 counties**:
  - Anoka, Benton, Carver, Chisago, Dakota, Hennepin, Isanti, Mille Lacs, Ramsey, Scott, Sherburne, Stearns, Washington, and Wright.
- Members impacted by the UCare Connect + Medicare service area reduction will not be able to transfer to our UCare Connect (non-integrated) product in frozen counties unless they qualify under an exception.
- If UCare Connect + Medicare is no longer available in your county, members may be able to switch to another Special Needs BasicCare (SNBC) option if one is offered and open for enrollment. If a member does nothing by mid-December, members will be moved to fee-for-service (FFS) coverage in January. If a member qualifies for SNBC but didn't choose a plan, the Department of Human Services (DHS) will send the member a letter explaining SNBC benefits, the plans available in their county, and how to enroll. UCare will work closely with DHS,

counties, and providers to make sure impacted members get clear information, help during the transition, and continuity of care.

- We will no longer offer the UCare Connect + Medicare (integrated) plan in all other counties across the state, including:
  - Aitkin, Becker, Blue Earth, Carlton, Cass, Chippewa, Clay, Cook, Cottonwood, Crow Wing, Faribault, Fillmore, Freeborn, Houston, Itasca, Jackson, Kanabec, Kandiyohi, Kittson, Koochiching, Lac qui Parle, Lake, Lake of the Woods, Le Sueur, Lincoln, Lyon, Mahnommen, Marshall, Martin, Morrison, Mower, Murray, Nicollet, Nobles, Norman, Olmsted, Otter Tail, Pennington, Pine, Polk, Red Lake, Redwood, Rice, Rock, Roseau, St. Louis, Swift, Todd, Wadena, Watonwan, Wilkin, Winona, and Yellow Medicine.

There are no UCare Connect + Medicare changes in 2025. Members enrolled in UCare Connect + Medicare can continue to use their UCare ID cards, providers, and benefits as usual through Dec. 31, 2025.

### Next Steps

- As required by the Minnesota Department of Human Services (DHS) and the Centers for Medicare & Medicaid Services (CMS), members will receive official communications from UCare beginning October 2025, with clear guidance on coverage and next steps.
- Please refer to the FAQ document and this article to ensure consistent messaging with members.

### More information

The following information and resources are available to assist enrollees and care coordinators:

- Members:
  - UCare Customer Services for UCare Connect + Medicare at 1-855-260-9707 and for UCare Connect at 1-877-903-0061
  - MNsure.org/free-help
  - Minnesota Aging Pathways (formerly Senior LinkAge Line) 1-800-333-2433
  - Medicare.gov
- Care Coordinators:
  - Care Coordination Liaisons are available to answer care coordination operational questions and provide resources as additional updates become available [snbclinicaliaison@ucare.org](mailto:snbclinicaliaison@ucare.org) or [MSC\\_MSHO\\_ClinicalLiaison@ucare.org](mailto:MSC_MSHO_ClinicalLiaison@ucare.org)
  - UCare Connect + Medicare service area reduction FAQ: (attached)

### Quit Smoking and Vaping Program for Maternity

UCare offers a special program to help UCare members who are planning a pregnancy, are pregnant or are postpartum to quit smoking, chewing tobacco, or vaping. Members have access to specially trained quit coaches, more intensive behavioral support with a focus on relapse prevention, and additional outbound coaching calls (unlimited inbound calls). Eligible pregnant and postpartum members who call the quit line to complete an initial assessment will receive a \$25 gift card.



To get started, members can enroll by calling the UCare Tobacco & Nicotine quit line at 1-855-260-9713, visiting [myquitforlife.com/ucare](https://myquitforlife.com/ucare) or downloading the Quit for Life mobile app on a smartphone.

## MSC+ AND MSHO NEWS

### Community First Services and Supports (CFSS) Early Reassessments

If a member reports a change in condition, prior to completing an early reassessment, care coordinators should first consider if the following will meet the member's needs:

- [45-Day Temporary Increase of CFSS](#)
- [Extended CFSS](#) (Elderly Waiver only)
- Other formal or informal services and supports



When a member has transitioned to CFSS and has a change in condition that warrants an early reassessment, the reassessment will restart the member's assessment/waiver span. An approved Service Delivery Plan is required prior to issuing a new authorization for CFSS services for the upcoming assessment span. The care coordinator should notify the consultation services provider as soon as an early reassessment is scheduled to advocate for the new Service Delivery Plan development to be expedited. The member must work with consultation services to update their Service Delivery Plan to reflect the member's assessment results for the new assessment/waiver span.

**IMPORTANT:** Care coordinators should determine the effective date of the early assessment to avoid a gap in essential services. The effective date of the early reassessment may be delayed, if needed, to ensure time for a new Service Delivery Plan to be approved.

### CFSS Mid-Year Changes



In the September 16, 2025, [eList announcement](#) regarding CFSS implementation updates, DHS published a [CFSS mid-year changes resource page](#) for members who are enrolled in a Managed Care Organization. Care coordinators should refer to this resource to determine when a Service Delivery Plan needs to be updated for a mid-year change. This resource provides directions on whether the consultation services provider must revise the CFSS Service Delivery Plan, if the care coordinator must review the CFSS Service Delivery Plan, and if there are additional actions required for the following situations:

- Moving units/dollars between personal care, goods/services, personal emergency response systems (PERS) and financial management services (FMS) fee
- Changing the cost of a specific good/service or PERS services
- Changing a good/service or worker training and development class
- Adding more consultation services sessions
- Adding more worker training and development
- Adding failed background study (budget model only)
- Changing models
- Changing or adding an FMS provider
- Changing or adding a CFSS provider agency
- Changing or adding a consultation services provider
- Changing or adding a PERS provider
- Changing the participant's representative

### Durable Medical Equipment: Medical Assistance vs Elderly Waiver

If a durable medical equipment (DME) item is covered under Medical Assistance (MA), it must be provided under the MA benefit. Care coordinators can review the [MHCP Provider Manual – Equipment](#)

[and Supplies](#) and/or the [Medical Supply Coverage Guide](#) to identify equipment and supplies that can be covered under MA. To determine if a prior authorization is needed, care coordinators should review the [MSC+ Authorization and Notification Requirements grid](#) or [the MSHO Authorization and Notification Requirements grid](#).

Lost, stolen or broken DME items can be replaced under MA. The [Durable Medical Equipment/Supply Prior Authorization Form](#) is completed to request that the replacement be covered under MA. This may be completed by the DME Provider or Medical Provider.

Elderly waiver covers specialized equipment and supplies that are for the direct benefit of the member and allow the member to do one of the following:

- Communicate with others
  - Examples: Communication board, pocket talker
- Perceive, control or interact with their environment
  - Examples: door opener, light switch cover
- Perform activities of daily living
  - Examples: Sock aid, adaptive utensils, grab bar



Care coordinators can refer to the [EW T2029 Equipment and Supplies Guide](#) and/or the [EW T2029 Equipment and Supplies Coverage Process](#) for guidance regarding approving specialized equipment and supplies under EW.



**Senior Linkage Line has a New Name**  
[Minnesota Aging Pathways](#)  
 800-333-2433

Minnesota Aging Pathways (formerly the Senior LinkAge Line) is a free, statewide service of the Minnesota Board on Aging, in partnership with Minnesota's area agencies on aging. It connects older Minnesotans and their caregivers with the services and support they need.

## QUALITY REVIEW CORNER



Thank you to all the delegates who participated in the 2025 Quality Reviews. Below are some of the highlights observed in the Quality Reviews. Watch for these shout-outs in future newsletters as best practices continue to be featured!

### All Products

- ★ **Mental Health Resources:** Care coordinators demonstrated excellent documentation in all comments and description boxes throughout assessments and support plans.
- ★ **Fillmore County:** Care coordinators documented discussing Supplemental benefits with over 90% of members.
- ★ **Bluestone:** Care coordinators documented a detailed member summary in the 'About Me -Staying Healthy' comment section of the Support Plan.

## DHS NEWS AND UPDATES

### Housing Support Services Benefit Ending



Effective October 31, 2025, the Minnesota Department of Human Services has ended the Housing Stabilization Services (HSS) benefit under the Medical Assistance program. UCare has updated Member Handbooks to reflect that Housing Stabilization Services will no longer be covered. The HSS benefit is no longer available to anyone through Medical Assistance. UCare is notifying all members via mail and will issue a 10-day Denial/Termination/Reduction (DTR) notice to members who are currently using HSS. DHS intends to redesign and relaunch the benefit, but it is unknown when this can be expected. UCare advises care coordinators to no longer make referrals for HSS.

### September 2025 MnCHOICES Release Summary

#### Resolved Current Functionality items: Fixed in the release

- **Support plan heading-Description:** The My work life section did not print when a support plan status was in progress. [DHS ID 193982]
  - ❖ **Changes made:** The My work life section will print regardless of which status the Support Plan is in.

#### Other changes - not listed in the Current Functionality & Future Enhancements document:

- **Description:** When revising a support plan, the "Revision Reason" did not populate on the revised support plan and only appeared when running a query. An enhancement request was received for the revision reason information to populate in the overview section of the revised support plan to more easily identify the reason that the user revised the support plan.
  - ❖ **Changes made:** For revised support plans, the "Revision Reason" field will display in the Support Plan Overview section. The text entered in the "Revision Reason" text will also appear in the Forms screen when filtering forms by "Support Plan."

#### Help Center updates:

- **Current Functionality and Future Enhancements v.09.2025 document:** Will be loaded into the MnCHOICES Help Center during the week following the release on September 18, 2025.
- **MnCHOICES User Manual v.6** (Loaded date 9/17/2025)
  - ❖ **In the Person Dashboard section specifically in the 6.3.4 Person's My task tile:**  
The following sentence was added "The person's My Task tile only shows tasks assigned to a user who is logged in."
- **Practice Guide: Support Plan-Notice of Action v.2** (Loaded date 9/11/2025)
  - ❖ The Language Block in the Help Center must be attached to the Support Plan-Notice of Action.
- **Smart Guide: Production-Adding staff and managing access v.7** (Loaded date 9/15/2025)
  - ❖ Changed heading to read "Send access request to SSAM."
  - ❖ Staff responsibilities-Staff delegations heading: Added a reference to Smart guide: Roles and permissions.

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