# Care Coordination News

## May 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 Teams 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 are required to participate in the Quarterly All Care Coordination Meetings 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 | Quarterly All Care Coordination Meeting (Live) | June 11th, 2024, 9 am – 12 pm<br>September 10th, 2024, 9 am – 12 pm<br>December 10th, 2024, 9 am – 12 pm |
| MSC+/MSHO and Connect/Connect + Medicare | CEU Event (optional) | May 14th, 2024, 11:30 am – 1 pm<br>August (Dates to come)<br>November (Dates to come) |
| MSC+/MSHO | Clinical Liaison Office Hours (optional) | July 23rd, 2024, 12:30 pm-1:30 pm<br>Oct 22nd, 2024, 12:30 pm-1:30 pm |
| Connect/Connect + Medicare | Clinical Liaison Office Hours (optional) | July 23rd, 2024, 11:30 am – 12:30 pm<br>Oct 22nd, 2024, 11:30 am – 12:30 pm |
| MSC+/MSHO | Housing Office Hours (optional) | 3rd Wednesday of every month |
| Connect/Connect + Medicare | Housing Office Hours (optional) | 1st Wednesday of every month |

Click here to register for the May CEU event: Housing Stabilization Services & Moving Expenses
Click here to register for May Connect/Connect + Medicare Housing Office Hours
Click here to register for May MSC+/MSHO Housing Office Hours

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

**All products**

- Transportation-Medical Job Aid (Revised 4/10/24)
- Care Coordination Contact List (Revised 4/11/24)

**MSC+/MSHO**

- Care Plan Signature Letter: Hmong, Somali, Spanish
- Change of Care Coordinator Letter: Hmong, Somali, Spanish
- Unable to Reach Member Letter: Hmong, Somali, Spanish
- Waiver Service Approval Form (Revised 4/8/24)

**Coming soon**

- 2024 Supplemental Benefit Training
- Medicare/Medicaid 101 Video Training
- Alternative Decision Makers and Health Care Directives Training
- Elderly Waiver T2029 Equipment and Supplies Guide and Job Aid

## People-Powered Moments!

UCare believes care coordination makes a difference in the lives of members we serve. We want to celebrate the stories you share! Thank you to Crow Wing County for your work with UCare members. This story warms our hearts and demonstrates how care coordination intervention impacts members' quality of life! Crow Wing County MSHO Care Coordinator Lori Thompson recently shared, "Sometimes what we do is so rewarding." Here is Lori's People Powered Moment (paraphrased):

Lori is the care coordinator for a member whose husband passed away recently. She met with the member to complete a new assessment as the member moved back to her hometown to be closer to her husband's burial site. Lori opened the member to EW, helped her find a homemaking agency to provide cleaning services, and completed a referral to a local volunteer agency for companion help.

At the member's mid-year review, the member reported falling and could not summon for help. Lori discussed possible safety items, and the member agreed to the Reemo watch. Lori and the member also discussed a power scooter to help with mobility and community access. Lori was able to approve a safe, 4-wheeled power scooter.

After completing the member's annual reassessment, Lori reports that the member is so happy and doing well! The member has been going to the community center for exercise on her power scooter independently three times a week and has lost 15 lbs. She has seen her primary care provider, was taken off diabetes medications, and no longer has to check her blood sugars. The member is wearing her Reemo watch and has reported no falls. Lori reports that these small changes have impacted the member's life in many ways: quality of life, better health, and access to proper care. She can also go to the cemetery to visit her husband's grave.

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

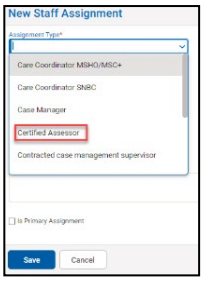
## Reminder: MnCHOICES

As of 4/1/24, all **NEW MEMBER** assessments are to be completed in the Revised MnCHOICES Application (MnR). Starting 7/1/24, all member assessments are to be completed in MnR; however, you are not required to wait until then to fully integrate if your agency decision is to implement quicker. It remains important to continue practicing in the MnCHOICES Training Zone (MTZ) to get familiar with all aspects of the application and continuously increase the work done in the revised application.

## Adding Members to MnCHOICES

The MnCHOICES phased launch grows closer to full integration for member assessments. As work in the revised application grows, it will become apparent that not all members are loaded in MnCHOICES. The only members loaded when the application launched were those with an assessment completed in MnCHOICES 1.0. All other members must be added by the appropriate delegate before work can begin. See below for the steps to add a member to the Revised MnCHOICES Application.


1. Search for member
2. Click "+ Add New Person" in the upper left corner
3. Fill in all required areas and follow the prompts
4. Navigate to member profile and enter information to meet completion requirements
5. Assign a member to a location
6. Assign care coordinator to member
    a. As a reminder, when assigning staff to a member in MnCHOICES, the assignment type must be the role the care coordinator has with that specific member. This means a care coordinator may be a Certified Assessor, but the "Certified Assessor" assignment type may not always be appropriate. Incorrectly using Certified Assessor will create workflow barriers for the county case manager, as there can only be one certified assessor at a time.




## Tobacco: World No Tobacco Day

World No Tobacco Day is coming up on May 31st! All UCare members are eligible for the Quit For Life tobacco cessation program. Nicotine patches, gum or lozenges are also available to eligible members.

**How to refer:**

- Call the tobacco and nicotine quit line toll-free at 1-855-260-9713 (TTY 711), available 24 hours a day, seven days a week
- Visit myquitforlife.com/ucare
- Download the Rally Coach Quit For Life mobile app

## UCare Health Coaching Programs

**What programs are available:**

- Diabetes Health Journey Health Coaching **(All UCare Products)**
- Migraine Management Health Coaching Program **(UCare Connect, Connect + Medicare, MSC+)**
- Healthy Hearts Health Journey Health Coaching Program ( Heart Failure) **(Connect, Connect + Medicare and all other UCare Products except MSHO/MSC+)**

**What is health coaching:**

Health Coaching is a partnership with a trained or certified health coach who offers support, guidance, and encouragement in helping members make changes to their health and lives. The coach meets the members

where they are in their health journey to address what they want to change by looking at needs, values, barriers, strengths, gaps in care and goals to help bring about their personal best. Each program offers guidance, resources, and education.

**Why use health coaching:**

- It is an effective way to create sustainable and lasting change
- It creates health improvement for members
- It helps members get clarity on the journey they want to take by developing specific visions for change and appropriate goals based on readiness to change
- It identifies and breaks down barriers and patterns of behavior that prevent change
- It helps members focus on the present rather than the past, moves them forward and holds them accountable to specified goals

**What does a health coach do:**

- Empower the member to overcome challenges, see their success, and become their best self
- Changes perspectives and creates openness for change
- Identifies values and needs for change
- Honors autonomy and readiness to change
- Facilitates and guides change and growth
- Highlights strengths
- Creates resiliency and confidence

**What members have said about our programs:**

Members who have participated in UCare's Health Coaching programs have reported improvements in the following areas: diabetes and heart failure management, overall health improvement, weight loss, healthier diet, exercise, quality of life, migraine pain and stress management, knowledge of conditions, positive thinking and mindset, motivation, and confidence in managing physical and mental well-being.

**How to refer:**

Send a referral by reaching out to Disease Management with the member's first name, last name, member identification number and program via:

- Health Coaching Disease Management Referral Form
- Phone: 612-676-6539 or 866-863-8303
- Email: Disease_mgmt2@ucare.org

## Food Access Referrals

Eligible Plans: **UCare Connect, Connect+Medicare, MSHO, MSC+,** PMAP, MinnesotaCare, Individual Family Plans, EssentiaCare, UCare Medicare with M Health Fairview & North Memorial, UCare Medicare, and UCare Medicare PPO

UCare partners with Second Harvest Heartland (SHH) to connect members with local food resources. Through this partnership, members can receive over-the-phone help to apply for Supplemental Nutrition Assistance Program (SNAP) benefits and find community food resources (i.e., food shelf, Fare for All, etc).

**How to refer:**

There are two avenues for referrals to Second Harvest Heartland. The first is through Second Harvest's Care Center. Starting 1/1/24, members can be directed to call the Second Harvest Heartland (SHH) Care Center directly.

Members may directly contact SHH via:

- 1-866-844-FOOD (toll-free)
- Email shhcarecenter@2harvest.org (please do not email SHH on behalf of the member, as SHH is not able to open encrypted/secure emails through this inbox)

With the updated program, there is no longer a need to send SNAP referrals to Health Promotions. Please only send SNAP referrals if the member states they have yet to be successful with getting help via the SHH Care Center or if they state they are not in urgent need of food and prefer that UCare sends a referral for the outreach. If a member prefers that UCare submit a referral on their behalf, email the member name, UCare ID, and member phone number to wellness@ucare.org with the member's request. It is also helpful to include in the email whether the member needs help applying for SNAP benefits and/or finding other community food resources. Second Harvest will, in turn, reach out to the member within 2-3 weeks of receiving the referral.

## Healthy Food Allowance

Eligible Plans: **UCare MSHO and Connect + Medicare**
Qualifying Condition:

- **Minnesota Senior Health Options** (MSHO) members with congestive heart failure, ischemic heart failure, diabetes or hypertension
- **UCare Connect + Medicare** members with diabetes, hypertension or lipid disorders

Members receive a welcome letter that includes the UCare Healthy Benefits+ Visa® card used to access benefits. The monthly allowance is a pre-determined dollar amount loaded onto the card for eligible members each month to spend toward groceries.

The monthly Healthy Food Allowance can be used toward the purchase of approved healthy foods and produce, including fruits, vegetables, healthy grains, dairy products, beans and more. These items can be purchased at participating retailers, including Cub, HyVee and WalMart. Eligible members scan their Healthy Benefits+ Visa card or app at checkout. The allowance is effective the first day of each month and does not roll over into the next month. Unused funds expire at the end of each month or when the plan terminates. The allowance may only be used if a member's Medical Assistance is active.

To learn more about the Healthy Food Allowance, visit healthybenefitsplus.com/ucare or call 1-833-862-8276 (TTY 711). Members can also find more information using the UCare online member account.

## Grocery Discounts

Eligible Plans: **MSC+, MSHO, Connect + Medicare, Connect**, MNCare, PMAP, IFG and IFP w/FVNM, EssentiaCare, UCare Medicare w/FVNM, and UCare Medicare (excluding UCare Advocate Choice Plans and Medicare supplement)
Qualifying Condition: None

At participating grocery stores, UCare members can save on healthy foods like milk, whole-grain bread, lean meat, eggs, yogurt, fruits, vegetables, and more. Weekly discounts are pre-loaded to the UCare Healthy Benefits+ Visa® card. Members scan the Visa card or app at checkout to access available discounts. This is not a cash benefit.

To learn more, visit healthybenefitsplus.com/ucare or call 1-833-862-8276 (TTY 711).

## CONNECT AND CONNECT + MEDICARE NEWS

### Connect Pharmacy Benefits

When a member is enrolled in Connect AND has a non-integrated Medicare plan, members must choose a Medicare Part D plan to cover prescription drugs. Medicare is the primary payer for all prescriptions and must be billed first. Care coordinators can verify a member's Medicare eligibility by checking MNITS.

Reach out to SNBCclinicalliaison@ucare.org with questions or concerns.

### Connect and Connect + Medicare Monthly Activity Log

As UCare enters the second quarter of 2024, delegates should have fully transitioned to the 2024 Connect and Connect + Medicare Monthly Activity Log. For this reason, the 2023 Monthly Activity Log has been removed from the Care Coordination web pages. If concerns arise regarding assessment tracking for 2023, please email connectintake@ucare.org.

### News U Can Use

#### Primary Care Clinic (PCC) Change Request

A PCC Change Request Form is not only required for MSC+/MSHO members but is also essential for Connect/Connect + Medicare members. While care coordination assignments are not directly a result of PCC, it is vital information to have on file to ensure an accurate member record and a smooth transition as they age into MSC+/MSHO. The PCC Change Request Form has been added to the Connect/Connect + Medicare website in the forms drawer.

## MSC+ AND MSHO NEWS

### Monthly MSHO Supplemental Benefit Highlight

#### Caregiver Support for Caregivers of an MSHO Member

UCare's Minnesota Senior Health Options (MSHO) (HMO D-SNP) plan includes up to 12 visits per year of caregiver support for caregivers of MSHO members provided by M Health Fairview's Caregiver Assurance™ Program. When accessing the Caregiver Assurance™ Program, the member's caregiver will be paired with one of M Health Fairview Caregiver Assurance Program's advisors — a professional trained in aging and caregiving, giving them access to:

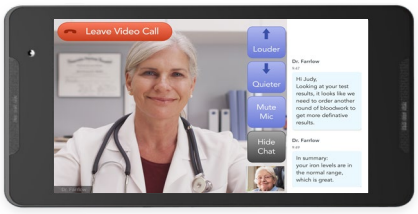
- Emotional support
- Assistance with problem solving
- Guidance for self-care and stress management
- Connections to financial and community resources tailored to each situation and need

If the member or the caregiver does need to contact the program directly, the Caregiver Advisors can be reached at (612) 672-7996 | caregivercoach@fairview.org.

Additional information about the program can be found at caregiverassurance.com/ucare, and a Fairview Caregiver Assurance Recording Training can be found on the UCare Care Coordination Trainings page.

## GrandPad

Grandpad is an electronic tablet offered to MSHO members with a depression diagnosis on file with UCare. It's specially designed to help members stay connected and feel less isolated.




**How to Make a Voice Call to a UCare Member's GrandPad**

**1.** Call GrandPad 833-697-0707. We work 24 hours a day!
**2.** Identify self as a UCare Care Coordinator
**3.** Provide this code: 53128
**4.** Name of the member to be called
**5.** GrandPad will connect the call

This process takes less than 45 seconds!

**Care Coordinators and GrandPad Engagement**

GrandPad offers the following portal that care coordinators may find helpful:

**Provider Console** allows visibility to the UCare members, who are referred to as having a GrandPad device. Video calls can be made to members and include up to 3 other people, including family or providers. Additionally, calendar events can be scheduled, and emails can be sent to the GrandPad.

- To be added to these portals or ask if a device has been delivered, contact ucarereferrals@grandPad.net or call 800-704-9412. The GrandPad team is happy to help.

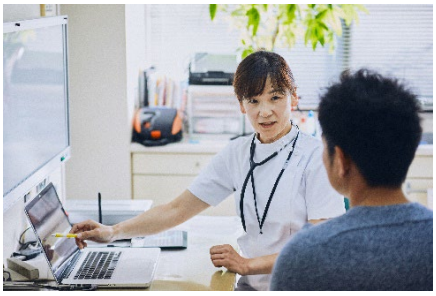
## Lutheran Social Services (LSS) Healthy Transitions

LSS Healthy Transition Services is a supplemental benefit offered to MSHO members recently discharged from an inpatient hospital stay. LSS provides members with up to four visits, two in-person and two telephonic, in 30 days once a member is enrolled in the program.

Enrollment can be completed through two avenues. The first enrollment method is for the care coordinator to submit the Healthy Transitions referral form. The second is through LSS, who completes outreach to members on the daily admissions report (DAR) and directly enrolls the member. A letter of agreement is completed explaining LSS's service and a statement that the member agrees to participate in the LSS Healthy Transitions Service program.

Once enrolled, LSS Healthy Transition Services includes an assessment of the following areas:

- Social history
- Nutrition
- Follow-up appointments
- Transportation
- Falls risks
- Health concerns
- Goal setting
- Resource provision



LSS reviews things going well and areas where more support is needed. LSS Community Health Workers (CHW) share detailed case notes with care coordinators via email after each visit, detailing the areas discussed and any follow-up items.

LSS also completes the CDC's STEADI checklist to assess for fall risks. The results are shared with both the member and the care coordinator.

A personal health record (PHR) is completed with enrolled members. This includes information such as emergency contact, Power of Attorney, care coordinator contact information, preferred hospital, primary care provider information, etc. The PHR also contains information about upcoming appointments, questions and concerns the member has indicated, a review of medications, and the development of goals throughout the service. The PHR is given to the member upon completion of service.

## QUALITY REVIEW CORNER

UCare's Quality Review Team would like to thank all delegates participating in the 2023 Quality Reviews. Below are some 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!

**MSC+/MSHO**

- ★ **Wabasha County:** Care coordinators did an excellent job of case-noting care coordination activities, including Transition of Care follow-up, calls and outreach to members to provide care coordinator contact information and to discuss when the following outreach would occur.
- ★ **North Memorial:** Care coordinators documented thorough assessment summaries in case notes, including the location of the assessment, who attended, members' needs, current services or new services requiring a referral, and how often follow-up will occur. The member's case notes clearly documented a detailed description of what documents were reviewed and completed with the member and what was provided to the member following the visit.
- ★ **Nicollet County:** Care coordinators did an excellent job reviewing and assisting members to utilize the available benefits. A few examples include coordinating the utilization of the MSHO supplemental benefits and assisting members with EW spenddown issues, transportation, pharmacy needs, and Medicare questions.
- ★ **Genevive**: Care coordinators did significant investigative outreach to find contact information for members by contacting UCare, Financial Workers, and Primary Care Clinics.

## DHS NEWS AND UPDATES

### Local County or Tribal Agency Nonemergency Medical Transportation (NEMT) Services Claim, Service, and Rate Information:

- Updated the section header "**Transportation Personal Mileage Codes, Modifiers and Payment Rates**" to "Local County or Tribal Agency–Administered Transportation Personal Mileage Codes, Modifiers and Payment Rates." Additionally, this section updated the mileage reimbursement with the new fuel adjuster on April 1, 2024.
- Clarified language for rural-urban commuting area base and mileage adjustments
- Added a Legal References section

## Mobility Devices

The MHCP Provider Manual has been updated in the Equipment and Supplies – Mobility Devices – Under **Covered Services, Wheelchair Options and Accessories** heading. HCPCS code E2300 Seat elevation feature has been replaced with the E2298 Power seat elevation system due to code updates published by CMS about power seating systems. HCPCS code E2300 has been discontinued and replaced by code E2298. Coverage criteria are the same.

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## REMINDERS

### Forms Frequently Change

Forms are updated regularly. Please remember to download forms directly from UCare's website. This will ensure that the most up-to-date versions are being used.

### Updating Primary Care Clinic

All Care Coordinators should confirm members' primary care clinics and complete the Primary Care Clinic Change Request form 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 essential 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 offer the best support, 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 via UCare's Secure Email Message Center. UCare is not able to open secure third-party emails. Care Coordinators can create a secure email account using this link.

### 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.