

2022 Plan Highlights

Minnesota Senior Health Options and UCare Connect + Medicare



UCare offers two combined Medicare and Medical Assistance/Medicaid products.

UCare product	Eligibility	Service area (MN counties)	Network
Minnesota Senior Health Options (MSHO) (HMO D-SNP)	<p>Adults age 65 and older</p> <p>Must live in the service area</p> <p>Eligible for Medical Assistance and must be enrolled in Medicare Parts A and B</p>	<p>Aitkin, Anoka, Becker, Benton, Blue Earth, Carlton, Carver, Cass, Chippewa, Chisago, Clay, Cook, Cottonwood, Crow Wing, Dakota, Dodge, Faribault, Fillmore, Freeborn, Hennepin, Houston, Isanti, Jackson, Kandiyohi, Kittson, Koochiching, Lac qui Parle, Lake, Lake of the Woods, Le Sueur, Lincoln, Lyon, Mahnommen, Marshall, Martin, Mille Lacs, Morrison, Mower, Murray, Nicollet, Nobles, Norman, Olmsted, Otter Tail, Pennington, Pine, Polk, Ramsey, Red Lake, Redwood, Rice, Rock, Roseau, Scott, Sherburne, St. Louis, Stearns, Swift, Todd, Wabasha, Wadena, Washington, Watonwan, Winona, Wright and Yellow Medicine</p>	All UCare network providers
UCare Connect + Medicare (HMO D-SNP)	<p>Individuals age 18-64</p> <p>Must live in the service area</p> <p>Have a certified disability through the Social Security Administration or the State Medical Review Team or through the Developmental Disability Waiver</p> <p>Eligible for Medical Assistance and must be enrolled in Medicare Parts A and B</p>	<p>Aitkin, Anoka, Becker, Benton, Blue Earth, Carlton, Carver, Cass, Chippewa, Chisago, Clay, Cook, Cottonwood, Crow Wing, Dakota, Faribault, Fillmore, Hennepin, Houston, Isanti, Itasca, Jackson, Kandiyohi, Kittson, Koochiching, Lac qui Parle, Lake, Lake of the Woods, Le Sueur, Lincoln, Lyon, Mahnommen, Marshall, Martin, Mille Lacs, Morrison, Mower, Murray, Nicollet, Nobles, Norman, Olmsted, Otter Tail, Pennington, Pine, Polk, Ramsey, Red Lake, Redwood, Rice, Rock, Roseau, Scott, Sherburne, St. Louis, Stearns, Swift, Todd, Wadena, Washington, Watonwan, Wilkin, Winona, Wright and Yellow Medicine</p>	All UCare network providers

UCare’s MSHO and UCare Connect + Medicare offer integrated Medical Assistance and Medicare Parts A, B and D benefits with no premiums and minimal cost sharing for Part D drugs. These plans also offer care coordination and additional benefits like the One Pass™ fitness program.

Resources and contacts for providers

Provider Assistance Center

612-676-3300 or 1-888-531-1493 toll-free, 8 am-5 pm, Monday through Friday.

[UCare.org/providers](https://ucare.org/providers)

Find information and resources related to authorizations, claims and billing, policies and resources, training and education, our network, credentialing and the Provider Manual. Log in to the provider portal to look up member eligibility, claims, EOPs and authorization status.

Sign up for email updates

Join our email list at [UCare.org/providers](https://ucare.org/providers) to receive UCare’s provider newsletters, bulletins and alerts.

In-Network Service	UCare's MSHO	UCare Connect + Medicare
Primary care visits	\$0 copay	\$0 copay
Specialist office visits	\$0 copay	\$0 copay
Care coordination	\$0 copay	\$0 copay
Inpatient hospital care	\$0 copay	\$0 copay
Emergency care/urgent care	\$0 copay for emergency room \$0 copay for urgent care center	\$0 copay for emergency room \$0 copay for urgent care center
Medicare Part D prescription drug coverage *Copays vary depending on Low Income Subsidy level	Tier 1 Generic drugs* - \$0/\$1.35/\$3.95 copay for 30 day supply Tier 1 Brand name drugs* - \$0/\$4.00/\$9.85 copay for 30 day supply	Tier 1 Generic drugs* - \$0/\$1.35/\$3.95 copays for 30 day supply Tier 1 Brand name drugs* - \$0/\$4.00/\$9.85 copays for 30 day supply
Individualized Home Supports (IHS) with training	Up to 4 hours/month, maximum of 6 months/year for members enrolled in Elderly Waiver with Instrumental Activities of Daily Living dependencies indicated in care plan (requires authorization)	\$0 copay for home health care services
Preventive care rewards	Lab tests such as blood work (blood glucose, A1c, dilated or retinal exam, annual urine protein test), screening tests (i.e., cancer screening), smoking and tobacco cessation, wellness visits and dental care	Lab tests such as blood work, screening tests (i.e., cancer screening), smoking and tobacco cessation, prenatal/postpartum visits, Child & Teen checkups, annual wellness visits and dental care
Readmission prevention	\$0 copay for post-discharge meals (non-EW) up to 2 meals/day for up to 4 weeks \$0 copay for post-discharge medication reconciliation provided by a pharmacist after discharge from inpatient facility	\$0 copay for post-discharge medication reconciliation provided by a pharmacist after discharge from inpatient facility
Supplemental coverage	\$0 copay for routine foot care, \$30/month Nutritious healthy food allowance, Nutrition Counseling, Personal Emergency Response System (PERS) (non-EW), 13 weeks access to WW weight management and wellness workshop vouchers for local and virtual workshops and online apps, \$750 home and bath safety equipment, Memory kit, activity tracker/smart watch, caregiver training/support and respite care (8 hours/month), Juniper evidence-based health education classes and Personal Protective Equipment kit (1/year) <i>Nutritious food allowance is for members with diabetes, CHF. Memory kit and respite care are for members with dementia; caregiver training/support is for members with dementia, MS, ALS and Parkinson's.</i>	\$0 copay for 1 routine foot care visit/month, 13 weeks access to WW weight management and wellness workshop vouchers for local and virtual workshops and online apps, Personal Protective equipment kit (1/year) and Connect to Wellness kits
Dental coverage	\$0 copay, oral exam (1/year in addition to Medicaid coverage), 1 full mouth x-ray series/5 years, 1 root canal/tooth/lifetime, periodontal maintenance (up to 4 visits/year), scaling/planing (1/2 years in office), 2 crowns/year, 1 electric toothbrush every 3 years and 2 replacement heads/year, tissue conditioning for dentures once/year and more	\$0 copay, oral exam (1/year in addition to Medicaid coverage), 1 panoramic and 1 full mouth x-ray/year, 1 root canal and root canal retreatment/tooth/lifetime, Nitrous oxide twice/year for preventive or comprehensive visits, periodontal maintenance (up to 4 visits/year), scaling/planing (1/2 years in office), 1 crown/year, 1 electric toothbrush every 3 years and 2 replacement heads/year and more
Vision coverage	\$0 copay for routine or diagnostic eye exams \$0 copay eyeglasses with anti-glare lens coating and/or photochromatic lens tinting, Progressive lenses available exclusively through Eye-Kraft – each limited to once every 2 years	\$0 copay for routine or diagnostic eye exams \$0 copay eyeglasses with anti-glare lens coating and/or photochromatic lens tinting, Progressive lenses available exclusively through Eye-Kraft – each limited to once every 2 years
Hearing services	\$0 copay screenings \$0 copay hearing aids	\$0 copay screenings \$0 copay hearing aids
Transportation services	\$0 copay to provider location, 3 round trip rides/week to participating health club, Juniper health education classes, WW weight management workshops, up to 1 round trip ride/day to Alcoholics Anonymous and/or Narcotics Anonymous for members with substance use disorder in addition to 3 rides/week to health club, education classes and WW (requires authorization), \$0 copay for ambulance or emergency transportation	\$0 copay to provider location or other health services, 3 round trip rides/week to participating health club, \$0 copay for ambulance or emergency transportation