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Summary of 2018 UCare health care plan benefit changes

Below is a high-level summary of key benefit changes in all UCare products for 2018. For more information on our health plan benefits, please visit the <u>UCare Product Information</u> web page.

UCare for Seniors and EssentiaCare benefit changes for 2018:

UCare for Seniors (UFS) plans will be offered on a regionally segmented basis in 2018. Member premiums will vary among the three new Minnesota regions – North (32 counties), South (41 counties) and Metro (14 counties) – but the change will not affect plan names, benefits or provider payment. There will be some plan changes in the new South region, as two UFS plan options (Essentials Rx and Value Plus) close and one new one (Standard) becomes available. Standard includes medical coverage similar to Essentials Rx, plus a standard Part D benefit. The Prime option, formerly available in only 10 metro counties, will be offered in the complete 14-county Metro region in 2018.

UFS Classic, Essentials Rx and Value Plus plans will introduce a preferred pharmacy network in 2018. Members may continue to use any pharmacy in the Express Scripts network, but they will experience lower cost sharing amounts at preferred pharmacies, which include CVS/Target, Cub, Costco and Express Scripts mail order. *EssentiaCare* and UFS Prime and Standard plans will not have access to the preferred pharmacy network.

Other important UFS and EssentiaCare changes include:

- Increased eyewear allowance (\$150) for UFS Classic
- Elimination of the UFS Classic hearing aid allowance
- Coverage of periodontic maintenance cleanings under the Choice Dental rider
- Coverage of a supplemental annual physical for *EssentiaCare*
- Increased copays for outpatient surgery, urgent and emergency care and some office visits
- Changes to Part D deductibles
 - o Increased deductibles for all plan options
 - Tier 1 drugs excluded from deductible for UFS Classic, UFS Value Plus and EssentiaCare Grand
- Introduction of a single preferred test strip manufacturer (One Touch)

State Public Programs benefit changes for 2018:

Beginning in 2018, the state will lower the age threshold for children in the MinnesotaCare (MnCare) program. MinnesotaCare enrollees aged 19 and 20 will retain the MnCare Child cost sharing exemption and Community First Support and Services benefits. They will be treated as adults for all other services, with limits on coverage for dental care and non-emergency transportation and no coverage for services such as orthodontia and personal care assistance.

UCare's MSHO and *Connect + Medicare* will use the same formulary as *UCare for Seniors* in 2018. However, they will retain the open pharmacy network and will not have access to the UFS preferred pharmacy network.

All State Public Programs will require a face-to-face visit with a physician or mid-level provider prior to home health agency services or initiation of medical equipment. They will also require annual physician review of medical equipment, supplies and appliances.

UCare Choices and Fairview UCare Choices benefit changes for 2018:

All *UCare Choices* and *Fairview UCare Choices* plans will cover preventive services out of network in 2018. Preventive services from non-network providers will be subject to the plan deductible and 50% coinsurance. Some plan options will have increases in deductibles, out-of-pocket limits and coinsurance in 2018, but all plan options will have lower copays for retail clinic visits.

The *UCare Choices* service area will expand to 26 counties with the addition of Cass County in 2018. *Fairview UCare Choices* will continue to be offered in 10 metro counties. HealthEast, which is already part of the *UCare Choices* network, will join the *Fairview UCare Choices* network in 2018.

Happy holidays from UCare!

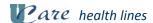
During December and early January, UCare and the Provider Assistance Center (PAC) will be closed the following dates:

- Monday, Dec. 25
- Tuesday, Dec. 26
- Monday, Jan. 1
- Monday, Jan. 15

If you need assistance during these times, please visit https://www.ucare.org/providers or log into the Provider Portal to verify member eligibility, check claim status or send a message to PAC. On all other weekdays, PAC representatives are available to take your call from 8 a.m. to 5 p.m. at 612-676-3300 or 1-888-531-1493.

Member rights and responsibilities

UCare takes member rights and responsibilities seriously. Members and providers can access these rights and responsibilities in the member's Evidence of Coverage or Member Contract, which are available here by plan on the provider website. UCare providers should be aware of our member rights and responsibilities.



Provider Assistance Center reminders: HIPAA verification

When you call UCare's Provider Assistance Center (PAC), you will be asked to provide member identification details for HIPAA verification before you can access the information you are seeking. PAC representatives are required to gather one piece of provider identification information and three pieces of member identification information to comply with HIPAA. Here is a list of the acceptable identification information:

Provider Identification (provide one):
National Provider Identifier (NPI) number
Taxpayer Identification Number (TIN)
6-digit UCare provider number

Member Identification (provide three):
Member ID number
Member name
Member DOB
Member address (on file)

If a PAC representative is unable to verify enough information to comply with HIPAA, member information cannot be provided. When you provide some of the identification information into the interactive voice option before connecting with a PAC representative, we will accept that as a piece of identifying information.

This identification procedure also applies to any communication sent to PAC via email. When sending an email, please include one piece of provider identification information and three pieces of member identification information in the message.

When using the portal, you must log in with a unique username and password. We accept that as verification of your identification. If you are sending a portal message requesting assistance with a member's plan, you must include three pieces of member identification information in the message.

UCare's MSHO and *UCare Connect + Medicare* Model of Care (MOC) training for providers

UCare's Minnesota Senior Health Options (MSHO) and *UCare Connect + Medicare* members face a host of unique challenges and barriers to getting the care they need. These products are designed with a unique set of benefits and services to help members meet these needs and assist them in staying healthy and independent.

Both plans are Dual Eligible Special Needs Plans, meaning that the member's Medicare and Medicaid benefits and services are integrated into one benefit package.

The Centers for Medicare and Medicaid Services (CMS) requires training be provided to participating providers on the Model of Care. The training promotes understanding of the management and procedures necessary to provide services and coordination of care to members.

All providers are required by CMS to complete one training option annually. Two options are available:

- Review the MSHO and UCare Connect + Medicare Model of Care training posted on UCare's website.
- Request an in-person presentation.

Following the training, share or review the information with all appropriate staff and partners at your clinic. Providers must document and maintain training completion records and provide such records to UCare upon request to confirm that the training has been completed.

Providers may also contact us at <u>clinicalliaison@ucare.org</u> for more information about our MSHO and *UCare Connect + Medicare* Model of Care training.

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Provider Manual updated

Updates were recently made to UCare's Provider Manual. The following sections have changed:

- Claims & Payment
- Authorization & Notification Standards
- Clinical Practice Guidelines Medical & Behavioral Health
- Health Promotions
- Home Care Services
- Hospital Services
- Obstetrics & Gynecology

The latest version of the <u>Provider Manual</u> is available on our <u>website</u> by clicking "Provider Manual" under the Quick Links.

Health Outcomes Survey highlight: Falls prevention & monitoring physical activity

In the next few months, many UCare members age 65 and older will receive the Health Outcomes Survey (HOS). The survey measures how often providers discussed certain preventive health subjects with patients. Some important topics from the HOS include:

Falls Prevention

- Patients engaging with their provider about falling or problems with balance or walking.
- Patients receiving suggestions such as regular exercise or physical therapy for preventing falls.
- Providers and patients discussing treatments for issues with balancing or walking with the use of a cane or walker.

Monitoring Physical Activity

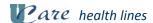
- Patients engaging with their provider about physical activity and exercise.
- Providers encouraging patients to increase or maintain their level of exercise or physical
 activity—keeping in mind the various activities that may be considered such as walking,
 cleaning, farming or gardening, and something as simple as taking the stairs daily.

The injuries caused by falls can be physically and emotionally devastating to patients. Sharing simple prevention tips during routine visits and monitoring patients' physical activity can help patients prevent falls and improve their overall physical health. Check out UCare's <u>Falls Prevention web page</u> for more tips to share with patients about preventing falls.

When discussing exercise with members, you can remind them about UCare's fitness benefits and, for MSHO members, the Strong & Stable kit. Information on both is available at www.ucare.org/HealthWellness/FitnessPrograms/Pages/default.aspx.

Documentation improvement: Focus on yearly evaluation

Medical documentation plays a significant role in patient care. Not only must it accurately address the immediate problems or conditions that the patient is being seen for, but it also needs to cover all coexisting conditions affecting the patient's care and overall all health status.



Any conditions considered in assessing and treating the immediate problem/condition need to be documented and reported. A patient presenting with an acute injury/illness who is currently being treated for multiple chronic conditions will need treatment options assessed differently than a patient being treated for the same acute injury/illness with no additional health factors. The chronic conditions affecting the patient's medical management need to be documented. A simple monitoring statement is sufficient with more detail required if there is more significant impact with the presenting injury/illness.

In addition to co-existing conditions, health status factors should be evaluated and documented. Health factors such as an amputation, dialysis, insulin dependence, alcohol dependence in remission or artificial opening such as a colostomy need annual evaluation at a minimum. Documentation and reporting of these factors is needed since they play a significant role in the patient's overall health profile.

The start of a new year is the perfect time to evaluate your patients' chronic conditions and health statuses. Accurate and complete documentation of your patients' health will support their health management needs.

Sign up to have UCare provider news delivered to your email

If you haven't done so already, please consider signing up to receive emails from UCare Provider Services. Encourage staff in your organization to do so as well! Once you sign up, you will receive the monthly *health lines* newsletter and other essential, timely updates from UCare via email.

Signing up is easy! Just fill out this simple form.

You will be asked to subscribe to an email list. If you want all provider communications from UCare, please select the "All UCare Providers Updates" list. On occasion, UCare will do targeted communications to specific provider specialties or topics. If you would like to receive specific topic/specialty communications, subscribe to the applicable email lists included on the sign up form. Please note that all subscribers will receive the provider newsletter and communications intended for the broader provider network.

Thank you for your help in improving our communications to the provider community!

UCare Provider Website www.ucare.org/providers

UCare

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Provider Assistance Center

612-676-3300

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Contact the newsletter staff: providernews@ucare.org

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