



2024 UCare's Minnesota Senior Health Options (MSHO) (HMO D-SNP)

A Medicare Advantage Special Needs Plan that combines your Medicare and Medicaid (Medical Assistance) benefits



Is UCare's MSHO right for you?

Enroll if you:

- ✓ Are at least age 65
- ✓ Have Medicaid and Medicare Parts A and B
- ✓ Live in UCare's MSHO service area

Counties in UCare's MSHO service area

Aitkin	Fillmore	Martin	Rock
Anoka	Freeborn	Mille Lacs	Roseau
Becker	Hennepin	Morrison	Scott
Benton	Houston	Mower	Sherburne
Blue Earth	Isanti	Murray	St. Louis
Carlton	Jackson	Nicollet	Stearns
Carver	Kandiyohi	Nobles	Swift
Cass	Kittson	Norman	Todd
Chippewa	Koochiching	Olmsted	Wabasha
Chisago	Lac Qui Parle	Otter Tail	Wadena
Clay	Lake	Pennington	Washington
Cook	Lake of the Woods	Pine	Watonwan
Cottonwood	Le Sueur	Polk	Winona
Crow Wing	Lincoln	Ramsey	Wright
Dakota	Lyon	Red Lake	Yellow Medicine
Dodge	Mahnomen	Redwood	
Faribault	Marshall	Rice	

Join at no cost to you.*

*Part D copays and Part B premiums will apply.

**You may be eligible to enroll now
with a Special Election period.
Call us to learn more.**

If you have Minnesota Senior Care Plus (MSC+), consider UCare's MSHO

Adults age 65 and older who have both Medicare and Medicaid can choose the one-plan convenience of UCare's MSHO. UCare's MSHO offers more benefits and services than MSC+.



Get more with UCare's MSHO

UCare's MSHO combines your Medicare and Medicaid services. It also offers you additional UCare benefits like:

- **Expanded dental coverage**, including two crowns per year, one crown repair per year and help scheduling appointments
- **Quarterly over-the-counter (OTC) allowance** to buy eligible items including surgical masks, vitamins, allergy medications, first aid supplies, toothpaste and more, online or over the phone at CVS.
- **One Pass fitness program** with access to participating fitness locations nationwide, online classes, at home fitness kits, brain training, no-cost social events, activities and more
- **Therapeutic massage** visits covered six times per year for members with chronic pain
- **\$50 monthly utility allowance** to help pay your utility bills*
- **Keep Your Coverage team** of specialists that guide you through the Medicaid renewal process so you can avoid gaps in care and services

*For qualifying members. Call for more information.



Call us today and talk with a licensed UCare agent.

1-800-707-1711

TTY 1-800-688-2534

8 am – 5 pm, Monday – Friday



It's easy to find a doctor and your prescription drugs

Go to search.ucare.org to look for:



People

Doctors, specialists, dentists, chiropractors and any type of care you need



Places

Hospitals, clinics, home health care, hospice, urgent care and more



Drugs

Download the complete Formulary or search the list of covered drugs



Pharmacies

Community, hospital, clinical and online pharmacies

If you prefer, request a paper copy of the Provider and Pharmacy Directory at 1-800-707-1711; TTY 1-800-688-2534.

What's next

If you enroll by mail, online, in person or by phone, here's what happens next:

1. We check to make sure your enrollment form is complete and will let you know if anything is missing.
2. We'll send your completed form to the Minnesota Department of Human Services (DHS). They will send it to the Centers for Medicare & Medicaid Services (CMS).
3. If DHS and CMS determine you're eligible for UCare's MSHO, DHS will send you a letter confirming your enrollment.
4. You'll get a UCare member identification (ID) card. It's the only card you'll need for your medical, dental and pharmacy needs. You'll also get a member guide to help you make the most of your coverage.



[Scan the QR code to enroll online now](#)

Have questions? We can help.

1-800-707-1711; TTY 1-800-688-2534

8 am – 5 pm, Monday – Friday

snpsales@ucare.org | ucare.org/msho

UCare's Minnesota Senior Health Options (MSHO) (HMO D-SNP) is a health plan that contracts with both Medicare and the Minnesota Medical Assistance (Medicaid) program to provide benefits of both programs to enrollees. Enrollment in UCare's MSHO depends on contract renewal.

UCare's MSHO offers more benefits

UCare's Minnesota Senior Health Options (MSHO) (HMO D-SNP) and Minnesota Senior Care Plus (MSC+)

Additional benefits to improve your health		UCare's MSHO	MSC+
Key perks	No premiums*, deductibles or Medicaid (Medical Assistance) cost-sharing	✓	✓
	One member identification (ID) card for Medicaid, Medicare and prescription drugs	✓	—
	Part D prescription drug coverage	✓	—
	Earn rewards for completing certain preventive screenings, tests or exam	✓	✓
New in 2024	Monthly utility allowance to pay for your household utility bills. For members with hypertension, diabetes, congestive heart failure or ischemic heart disease.	✓	—
	Six therapeutic massage visits per year, for qualifying members with chronic pain	✓	—
	12 routine chiropractic visits per year, including exams and extremity adjustments for members with musculoskeletal disorders or chronic pain	✓	—
	Acupuncture for low back pain — Up to 12 additional visits per year	✓	—
	Quarterly over-the-counter (OTC) allowance through CVS to purchase eligible OTC items including surgical masks, vitamins, allergy medications, first aid supplies, toothpaste and more!	✓	—
Additional coverage	Additional dental coverage — two crowns per year, one crown repair per year	✓	—
	Adult Dental Kit — electric toothbrush and charger, replacement brush heads, toothpaste and dental floss. One kit every three years.	✓	—
	Adult Dental Refill Kit — replacement brush heads, toothpaste and dental floss. One kit per year on the years you don't get the Adult Dental Kit.	✓	—
	Eyewear upgrades — non-glare coating, photocromatic tinting and progressive lenses.	✓	—
	Up to a \$15 discount on most community education classes in Minnesota (limits apply)	✓	✓
	Routine foot care once monthly, no qualifying condition required	✓	—
	Stress and Anxiety Kits — one kit per year to help members with anxiety or trouble managing stress. Eligible members can choose from the Sleep Aid Kit, Stress Relief Kit or Smart Home Device Kit.	✓	—
	Up to 7 rides per week to Alcoholics Anonymous or Narcotics Anonymous	✓	—

*You must continue to pay your Medicare Part B premium unless it is paid by the state.

Additional benefits to improve your health		UCare's MSHO	MSC+
Fitness / health support	One Pass fitness program with access to participating fitness locations nationwide, online classes, at home fitness kits, brain training, no-cost social events, activities and more	✓	—
	Flexible transportation — three rides per week to covered fitness clubs or health education and one ride per week to nutritional food allowance sites for qualifying members	✓	—
	Activity tracker plus Personal Emergency Response System (PERS) device with 24/7 call-for-help, step and heart rate tracking and built-in GPS	✓	—
	Blood pressure monitor for members who use the activity tracker plus PERS device and have a hypertension diagnosis	✓	—
	Free unlimited Juniper health education classes focused on falls, chronic pain, arthritis, active living, diabetes and Tai Ji Quan	✓	—
	Grocery discounts — save up to \$50 a week on pre-qualified healthy foods	✓	✓
	Healthy food allowance of \$60 per month for members with diabetes, congestive heart failure, hypertension or ischemic heart failure	✓	—
Safety assistance	Personal Emergency Response System (PERS) for members without Elderly Waiver	✓	—
	Bath and home safety — up to \$750 per year for safety equipment to keep you safe in the bathroom, the bedroom or on the stairs	✓	—
	Strong and Stable Kit to help members stay strong and prevent falls	✓	✓
Home support	Grandpad — an electronic tablet for members with a depression diagnosis to help stay connected and reduce the impacts of social isolation	✓	—
	Caregiver training and support — up to 12 visits per year	✓	—
	Memory Support Kit to help members living with memory loss	✓	—
Post-discharge help	Post-discharge medication reconciliation with a pharmacist	✓	—
	Post-discharge meals — two meals a day for up to four weeks	✓	—
	Post-discharge Healthy Transitions — four re-admission prevention sessions with a Community Health Worker	✓	—



Three easy ways to enroll in UCare's MSHO



Mail

Fill in the UCare's MSHO enrollment form provided in this booklet. Then mail it in the postage-paid envelope.



Online

Visit ucare.org/msho. Click the "Enroll now" link. Complete and submit the online enrollment form.



Call

You'll talk with a licensed UCare agent who can answer your questions and even help you enroll over the phone.

1-800-707-1711

TTY 1-800-688-2534

8 am – 5 pm, Monday – Friday

Attention. If you need free help interpreting this document, call the above number.

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ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه.

သတိ။ ဤတွဲရက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមហៅទូរសព្ទតាមលេខខាងលើ ។

請注意，如果您需要免費協助傳譯這份文件，請撥打上面的電話號碼。

Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, veuillez appeler au numéro ci-dessus.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ဟ်သ့ဟ်သးဘၣ်တက့ၢ်. ဝဲန့ၢ်လိၣ်ဘၣ်တၢ်မၤစၢၤကလိလၢတၢ်ကကျိးထံဝဲဒၣ်လံာ် တီလံာ်မိတခါအံၤန့ၣ်,ကိးဘၣ်လီၤဝဲစိနီၢ်ဂံၢ်လၢထးအံၤန့ၣ်တက့ၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 위의 전화번호로 연락하십시오.

ໂປຣດຊາບ. ຖ້າທ່ານ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ພຣີ, ຈົ່ງໂທໄປທີ່ໝາຍເລກຂ້າງເທິງນີ້.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, lakkoobsa gubbatti kenname bilbili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda (afcelinta) qoraalkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.

Civil Rights Notice

Discrimination is against the law. UCare does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. You can file a complaint and ask for help filing a complaint in person or by mail, phone, fax, or email at:

UCare

Attn: Appeals and Grievances

PO Box 52

Minneapolis, MN 55440-0052

Toll Free: 1-800-203-7225

TTY: 1-800-688-2534

Fax: 612-884-2021

Email: cag@ucare.org

Auxiliary Aids and Services: UCare provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs. **Contact** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

Language Assistance Services: UCare provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. You may also contact any of the following agencies directly to file a discrimination complaint.

U.S. Department of Health and Human Services Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion (in some cases)

Contact the OCR directly to file a complaint:

Office for Civil Rights

U.S. Department of Health and Human Services

Midwest Region

233 N. Michigan Avenue, Suite 240

Chicago, IL 60601

Customer Response Center: Toll-free: 800-368-1019

TDD Toll-free: 800-537-7697

Email: ocrmail@hhs.gov

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MOHR if you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights
540 Fairview Avenue North, Suite 201
St. Paul, MN 55104
651-539-1100 (voice)
800-657-3704 (toll-free)
711 or 800-627-3529 (MN Relay)
651-296-9042 (fax)
Info.MDHR@state.mn.us (email)

Minnesota Department of Human Services (DHS)

You have the right to file a complaint with OHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- religion (in some cases)
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. We will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator
Minnesota Department of Human Services
Equal Opportunity and Access Division
P.O. Box 64997
St. Paul, MN 55164-0997
651-431-3040 (voice) or use your preferred relay service



500 Stinson Blvd
Minneapolis, MN 55413
612-676-3554 | 1-800-707-1711 | TTY 1-800-688-2534
ucare.org