New Payor ID for UCare Medicare Plans Beginning Jan. 1, 2020

As announced in previous bulletins, UCare will continue implementing its new claims system in 2020. Effective Jan. 1, 2020, the Payor ID for all UCare Medicare, EssentiaCare and renamed UCare Medicare with M Health Fairview & North Memorial Health plans will change to 55413 for electronic claims submitted with dates of service on and after Jan. 1, 2020. This is the same Payor ID currently used for UCare Individual & Family Plans.

All members in the impacted plans will receive a new 9-digit Member ID number and card for 2020. Please make sure that your systems and clearinghouses are prepared for the Jan. 1, 2020, changes.

For additional details regarding these changes please refer to the Oct. 30, 2019 Provider Bulletin.

Medical Benefit Drug Prior Authorization Reviews for 2020

Beginning Jan. 1, 2020, Care Continuum, a subsidiary of Express Scripts, will be performing Medical Benefit Drug Prior Authorization reviews for all of UCare’s lines of business.

- Requests can be initiated at Care Continuum via the following methods:
  - Online (ePA) – via the ExpressPAth Portal at the following link [https://www.express-path.com/](https://www.express-path.com/). Providers can submit requests, check on the status of submitted requests and submit an authorization renewal on the ExpressPAth Portal. The site also provides 24/7 access, potential for real-time approvals and email notifications once a decision is reached.
  - Fax – at 1-877-266-1871
  - Phone – by calling 1-800-818-6747

- The grid of medical drugs requiring prior authorization, their corresponding criteria and prior authorization form are posted on our provider website [ucare.org/providers](http://ucare.org/providers).
Beginning Jan 1, 2020, non-par Medical Drug Benefit requests for State Public Program members, including MSHO and UCare Connect + Medicare, should faxed to UCare, Attn: Clinical Services at 612-884-2300.

Additional details about medical injectable drug prior authorizations and Biosimilar step therapy is available in the 2020 Medical Drug PA Bulletin.

### 2020 Pharmacy Formulary and Benefit Changes

Following is a summary of the 2020 UCare pharmacy formulary changes effective Jan. 1, 2020. Click the links below to view the documents related to 2020 UCare formularies:

- [UCare Individual & Family Plans](#)
- [UCare Individual & Family Plans with M Health Fairview](#)
- [UCare Medicare](#)
- [UCare Medicare with M Health Fairview and North Memorial](#)
- [UCare Medicare – Group](#)
- [EssentiaCare](#)
- [UCare Minnesota Senior Health Options (MSHO) and UCare Connect + Medicare](#)
- [Minnesota Health Care Programs (MHCP): UCare Connect, MinnesotaCare, PMAP, Minnesota Senior Care Plus](#)
  (formulary is updated on the 1st of each month, 2020 formulary will be available January 1)

### 2020 Insulin Benefit for Individual & Family Plan (IFP) Members

Beginning Jan. 1, 2020, UCare IFP members will have a $25 monthly copay cap for each insulin prescription they fill. This copay cap applies only to insulin covered on our formulary. This copay cap applies to both our 2020 IFP copay plans and our 2020 IFP high deductible health plans. UCare’s covered formulary insulin includes short-acting, intermediate-acting and long-acting insulin.

Read about the specific covered insulin products, a summary of the updates for Medicare and Individual & Family Plans, and member communication about these changes in the [2020 Formulary Changes bulletin](#).

If you wish to submit a prior authorization for a 2020 formulary change, you are able to do so beginning Jan. 1, 2020.

### Amy Christensen Chosen to Lead UCare Clinical Services

Amy Christensen, RN, BSN, PHN, has been named Vice President of Clinical Services. Christensen started her career at UCare in 2009 as a Disease Management Complex Care Nurse before advancing to manager roles in quality improvement, performance analytics and clinical services. Christensen brings more than 23 years of nursing experience working in the hospital and health plan industry to her role, including utilization management, disease management and clinical services operations.

In her role of Vice President, Christensen provides strategic oversight for clinical operations, clinical innovation and research, care management, quality assurance and outreach projects.
Christensen earned her associate RN from the College of St. Catherine (Minneapolis) and her BSN and PHN, Magna Cum Laude, from Bethel University (St. Paul). She also has a mini MBA in Healthcare Management from the University of St. Thomas – Opus College of Business (Minneapolis).

**Behavioral Health Triage Line & Care Management**

**Behavioral Health Triage Line**

UCare’s Behavioral Health Triage Line is designed to support member’s behavioral health needs, such as:

- Crisis Intervention
- Behavioral Health Referrals
- Behavioral Health Case Management Consultation
- Behavioral Health Provider In-Network and Specialty Search
- Behavioral Health Service Authorization and Notifications
- Identification and Connection to Community Resources

UCare’s Behavioral Health Triage Line is available to all UCare members, providers and care coordinators Monday through Friday 8 am-5 pm with afterhours support available. You may reach the Behavioral Health Triage Line at 612-676-6533 or toll-free at 1-833-276-1185.

**Behavioral Health Case Management**

The goal for Behavioral Health Case Management is to provide member centric advocacy and access to appropriate care for member’s mental health, substance use and/or social determinant needs. Behavioral Health Case Management is offered to Prepaid Medical Assistance Program (PMAP), MinnesotaCare (MNCare), Minnesota Senior Health Options (MSHO) and Minnesota Senior Care Plus (MSC+) members with the goal of expanding to additional products in 2020.

A member must meet one or more of the following criteria to be qualified for Behavioral Health Case Management:

- 2 Behavioral Health admissions in the past 12 months of the following:
  - Inpatient mental health, substance use disorder or eating disorder.
  - Residential Treatment for mental health, substance use disorder, IRTS or eating disorder.
- 3 admissions in the past 6 months for crisis residential.
- 2 episodes in the past 12 months for partial hospitalization program.
- 2 visits in the past 6 months of behavioral health related emergency room visits.
- 2 admissions in the past 6 months for detox.

If you would like to refer a member to Behavioral Health Case Management, please complete the Behavioral Health Case Management Referral form. If the member does not meet criteria for Behavioral Health Case Management, there is an option to consult with a Behavioral Health Case Manager to discuss the member’s behavioral health care needs via UCare’s Behavioral Health Triage Phone Line at 612-676-6533 or toll-free at 1-833-276-1185.
**Ineligible Provider List Updated Dec. 2, 2019**

Contracted UCare providers must make sure that they, their company, owners, managers, practitioners, employees and contractors are not on the UCare Ineligible Providers List.* Providers should search the list of UCare Ineligible Providers on a regular basis, and before hiring or entering into contracts with individuals to provide services or items to UCare members. Please reference Chapter 5 of the UCare Provider Manual for additional information.

Questions regarding the UCare Ineligible Providers List should be directed to compliance@ucare.org.

*Please note: This list is in addition to any prior and ongoing communications regarding ineligible individuals that network providers may receive.

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**TruHearing to Administer UCare Hearing Aid Benefit for 2020**

UCare is adding a new hearing aid benefit for many of its Medicare Advantage plan members beginning Jan. 1, 2020. It will be administered through a hearing aid vendor, TruHearing. The benefit will only be available when the TruHearing network is utilized.

If you participate in the UCare Medicare network, but you are not a TruHearing contracted provider, UCare members can still receive other plan-covered services through you, but they won’t have access to hearing aid or hearing aid assessment benefits.

- While UCare is not requiring you to join the TruHearing network, it is necessary in order to provide this benefit.
- TruHearing providers follow TruHearing claims submission and reimbursement processes, which may differ from those of UCare.

We encourage providers to join the TruHearing network so they can offer members these important services. If you would like to join the TruHearing network, please call them directly at 1-855-286-0550.

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**MinnesotaCare Tax is Changing Jan. 1, 2020**

Effective Jan. 1, 2020, the amount of the tax imposed on health care providers under Minn. Stat. § 295.52 (known as the “MinnesotaCare Tax”) is changing from 2% to 1.8% of gross revenues. As a result, the portion of provider reimbursement that represents payment by UCare for providers’ MinnesotaCare Tax expense will be adjusted accordingly, as applicable, effective for dates of service beginning Jan. 1, 2020.

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**New Gender Identity Information Form**

UCare’s Gender Identity Information Form can be used to assist transgender or non-gender binary members in getting their health care claims processed correctly and in a more timely fashion.

The purpose of the form is to communicate to key UCare departments that there may be a mismatch in the gender that a member identifies with versus the sex assigned at birth. This is particularly true of preventive services where an individual may identify as a male but is still biologically a female who is entitled to preventive services such as a pap smear or a male who identifies as a female but needs a prostate examination.
The form is available on the member portal (member.ucare.org) and on the ucare.org website under “Plan Resources.”

- At this time, the form cannot be submitted electronically, but it can be downloaded and printed.
- Members can then fill out the form at their convenience and either mail or fax it back to UCare.
- All of the information about where to mail or fax the form is at the bottom of the form.

Members who prefer to fill out the form in person can come to the reception area of the UCare offices located at 500 Stinson Blvd NE in Minneapolis. The form can be completed there and sent to the appropriate area for processing.

The information on the form is kept strictly confidential and will only be used by those areas that need help in ensuring that the member’s health care claims are processed correctly the first time.

**Documentation Improvement: COPD**

Chronic obstructive pulmonary disease (COPD) is a group of chronic lung diseases that restrict airflow making it difficult to breathe. The most common diseases that are categorized under the COPD umbrella term are emphysema, chronic bronchitis and chronic asthma. With multiple diseases encompassed by the COPD term, it is important to document some additional information to help clearly define the patient’s condition.

The following is a list of items to consider and document when treating COPD.

- **Type** – Define the type of COPD that the patient has. For example: smokers’ cough / simple chronic bronchitis or chronic asthmatic bronchitis.
- **Severity** – Chronic, acute exacerbation, hypoxia, mild, moderate or severe.
- **Circumstance** – Document any medical or social conditions that are influencing the status of the patient’s COPD.
- **Infection** – Notate any current respiratory infections and infective agent if known.
- **Cause** – Include any external agents that are causing or exacerbating the condition. For example: fumes, ventilation system, dust, etc.
- **Substance use / Exposure** – Document any known tobacco use, dependence, history or exposure.
- **Results of pulmonary function tests**
- **Supplemental oxygen dependence**

COPD documentation should be clear, concise and complete to accurately reflect the patient’s health and your medical management. A few extra moments to fully document the condition’s specificity and medical treatment plan will improve clinical communication, support medical necessity and improve patient care.
Happy Holidays from UCare

UCare and the Provider Assistance Center will be closed the following days during the holiday season:

- Tuesday, Dec. 24
- Wednesday, Dec. 25
- Wednesday, Jan. 1

If you need assistance during these times, log into the Provider Portal.