

# 2009 ADDENDUM TO THE CERTIFICATE OF COVERAGE FOR MINNESOTACARE

This Addendum describes **changes** to your 2008 **UCare Certificate of Coverage**. Use this Addendum along with your UCare Certificate of Coverage. Keep this Addendum with your UCare Certificate of Coverage.

If you do not know which Minnesota Health Care Program you are receiving, ask your county worker or call UCare Minnesota (UCare).

If you have questions about your health care benefits, call Member Services at 612-676-3200. You may also call toll-free at 1-800-203-7225. For TTY/TDD, call 1-800-688-2534.

## Changes for ALL MINNESOTACARE Members

*Effective January 1, 2009*

**Important information on getting the care you need (Section 2):** The following sentence is added: UCare will provide language assistance to help you access services.

**Mental Health Services:** Screening for the presence of co-occurring mental illness and substance use disorder will be included as part of the diagnostic assessment.

**Oral appeal with UCare:** Oral appeals must be followed by a written and signed appeal, unless you are requesting an expedited resolution. UCare must help you complete a written and signed appeal.

**Oral or written grievance with UCare:** If you do not agree with UCare's decision about an oral or written grievance, you can file a complaint with the Minnesota Department of Health. See your Certificate of Coverage (COC) for information about filing a complaint with the Minnesota Department of Health (telephone 651-201-5100 or 1-800-657-3916). Also see your COC for information about contacting the Ombudsman for Managed Health Care Programs (telephone 651-431-2660 or 1-800-657-3729) for help.

**Restricted Recipient Program:** Members in the Restricted Recipient Program who fail to follow program rules will be required to continue in the program for an additional 36 months.

**Counties in the Plan service area:** Koochiching County is added to the list of counties in the service area.

**Plan contact information:** Contact information regarding chemical dependency and mental health services has changed for members who chose an Altru Primary Care Clinic. Therefore, the Chemical Dependency Services item and the Mental Health Services item are replaced by the following:

### **Chemical Dependency Services**

Call:

- Behavioral Healthcare Providers (BHP) at 763-525-9919 or 1-800-361-0491 (toll free), Monday through Friday, 8 a.m. to 5 p.m. TTY at 1-800-627-3529. After hours calls are answered by Fairview University Mental Health Intake. If you chose an Altru Primary Care Clinic, call BHP.
- MMSI, if you chose a MMSI Primary Care Clinic, at 1-800-645-6296 (toll free). TTY at 711 for the Minnesota Relay Service.

### **Mental Health Services**

Call:

- Behavioral Healthcare Providers (BHP) at 763-525-9919 or 1-800-361-0491 (toll free), Monday through Friday, 8 a.m. to 5 p.m. TTY at 1-800-627-3529. After hours calls are answered by Fairview University Mental Health Intake. If you chose an Altru Primary Care Clinic, call BHP.
- MMSI, if you chose a MMSI Primary Care Clinic, at 1-800-645-6296 (toll free). TTY at 711 for the Minnesota Relay Service.

*Effective January 1, 2009 - continued*

**Service authorizations:** The list of service authorizations in the UCare Certificate of Coverage is replaced by the following (changes noted by **bold underlined text**):

- These are services that require your provider get a service authorization from us. All services subject to member's eligibility. Call Member Services for service authorization information.
  - Acute inpatient rehabilitation.
  - Alpha 1 Anti-trypsin medications.
  - Bariatric surgery (gastric bypass).
  - Benefit exceptions: A request to authorize a service that is specifically excluded from coverage.
  - Chemical dependency services.
  - Certain non-emergency mental health services, excluding court-ordered services.
  - Chiropractic services.
  - Certain dental services: Specified dental services arranged by the dental provider.
  - Durable medical equipment: (a) equipment that costs more than \$1,000 to purchase (excluding oxygen, Baclofen pumps, bone growth stimulators, cutaneous nerve stimulators, insulin pumps, prosthetics, and orthotics), (b) more than four months of equipment rental (excluding oxygen, continuous positive airway pressure machines, and nebulizers), (c) purchase of a wheelchair or other power mobility device.
  - Personal care assistant services.
  - Certain prescription drugs. Call Member Services for a list of drugs that may require a service authorization.
  - Reconstructive surgery.
  - Optometry: Accommodative exercises, orthoptic exercises, vision therapy (this does not apply to routine eye exams).
  - Home care: Private duty nursing services beyond **30 dates of service** per calendar year – these services covered in the Expanded Benefit set only.
  - Therapy services (provided anywhere other than in your home): Physical, occupational, or speech therapy that exceeds **50 dates of service** per therapy type in a calendar year.
  
- Below are the services for which your provider is required to provide notification to UCare's Clinical Services Department. All services are subject to your eligibility. Call Member Services for notification information.
  - Hospice.
  - Inpatient medical and/or surgical admission.
  - Inpatient behavioral health admission (call either Behavioral Healthcare Providers or MMSI at the numbers listed in Section 2).
  - Transplant services.
  
- Below are the services for which you or your network provider is required to get a service authorization from UCare's Clinical Services Department. All services are subject to your eligibility. Call Member Services for service authorization information.
  - Any service you receive from a provider who is not in the network (unless it is an open access service, emergency and post-stabilization services, out-of-area renal dialysis, or out-of-area urgently needed care).

**CuraScript specialty pharmacy:** CuraScript, Inc. (CuraScript) will be the exclusive provider of specialty medications for members. Specialty medications are costly injectable or oral drugs that often require special handling or have side effects that require monitoring by a trained pharmacist or nurse. If you are currently using a specialty medication, CuraScript will contact you and your physician to transfer the prescription to CuraScript. Your medication and any needed supplies will be shipped to your home, work, or doctor's office. CuraScript will also provide clinical support to you and your caregivers. A CuraScript pharmacist is available any time of day if you have an urgent need related to your medication.

*Effective July 1, 2009*

**Mental Health Targeted Case Management for persons with serious and persistent mental illness (SPMI) or severe emotional disturbance (SED):** Starting July 1, 2009, you will access these services through UCare. Before July 1, 2009, these services may be available through your county. Call your county for information.

*Effective Upon Federal Approval*

**Mental Health Services – Dialectical Behavioral Therapy (DBT):** This service is for adults age 18 or older who have been diagnosed with borderline personality disorder. It will be covered upon federal approval.

## Changes for MINNESOTACARE Members in the Expanded Benefit Set ONLY

*Effective January 1, 2009*

**Treatment services at children's residential mental health treatment facilities (Rule 5):** Starting January 1, 2009, you will access these treatment services through UCare. Before January 1, 2009, you accessed these treatment services through your county. Treatment services do not include coverage for room and board. Room and board may be covered by your county. Call your county for information.

## Changes for MINNESOTACARE Members in the Basic Plus Benefit Set ONLY

*Effective on or after July 1, 2009, or Upon Federal Approval*

**Inpatient hospital coverage:** You will no longer have the \$10,000 limit on inpatient hospital services if:

- You are a parent with MinnesotaCare Basic Plus benefits, **and**
- Your household income is above 175 percent but at or below 215 percent of poverty.

This change will begin upon federal approval.