

UCare healthlines

A newsletter for our providers

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If you have comments and/or suggestions for future content, please e-mail us at healthlines@ucare.org.

For more information and updates, please visit www.ucare.org.

Note: Links contained within PDF are active.

Electronic claims submission now required

Effective July 1, 2010, UCare will no longer accept the submission of professional and institutional paper claims, according to the Minnesota State Statute 62J.536.

Health care providers, as defined in the statute, must follow the requirements set forth in the Minnesota Uniform Companion Guide and the Administrative Uniformity Committee (AUC) Best Practices to avoid return of paper submitted paper claims and delay processing delays. Failure to comply with these requirements will result in returned claims and processing delays.

UCare has relationships with several clearinghouses to accommodate the electronic claims transactions. A list of clearinghouses, including their contact information, is in UCare's Provider Manual, **Chapter 6: Claims Submission Information**. Download a copy of the provider manual at www.ucare.org/providers/pages/ProviderManual.aspx.

For additional resources, please visit the Minnesota Department of Health (MDH) and AUC web sites, as the MDH consulted with the AUC to develop the Minnesota Uniform Companion Guides. These guides standardize electronic transactions and processes for checking eligibility, submitting claims, and receiving remittance advices in an electronic format for providers. The guides also help providers and payers plan, program, and accommodate these electronic transactions.

Information about this mandate can be found in MDH's web site by logging on to www.health.state.mn.us/asa/rules.html. The AUC web site can be found by logging on to www.health.state.mn.us/auc/. This web site contains useful and in-depth information regarding each transaction, associated companion guides, and best practices.

We're in the Minnesota Credentialing Collaborative (MCC)

UCare is now part of the Minnesota Credentialing Collaborative (MCC). The MCC has developed a centralized, web-based clearinghouse for information used in the credentialing process. The online, easy-to-use resource offers a way to enter, save, and send credentialing and re-credentialing applications that are accepted by participating Minnesota health plans and hospitals.

To use the online service, providers must have access to the MCC's software application, called ApplySmart. If you do not *know* if you have access to ApplySmart, check with your clinic credentialing staff. Or, if you do not *have* access to ApplySmart yet, go to the MCC's home page at www.mncred.org/home.html and select "Join" to register. Individual practitioners, clinics, hospitals, and health plans are welcome to do this.

Please note that a small fee may be associated with registration. Visit the MCC's frequently asked question (FAQ) web page at www.mncred.org/frequently-asked-questions.html to find out more information or contact them if you have any questions by selecting the "Contact Us" link. (Note: The ApplySmart application was created by CredentialSmart. If you notice that the web browser says CredentialSmart instead of ApplySmart, you are still in the correct web page.)

News and Notes

UCare becomes text4baby outreach partner

UCare is now an outreach partner for text4baby, a free mobile information service designed to promote maternal and child health. We encourage health care providers to promote text4baby to all pregnant and new mom-members of UCare's Medical Assistance and MinnesotaCare programs.



text4baby provides pregnant women and new moms with information to help them care for their health and give their babies the best possible start in life.

There is no cost to the user, even if she does not have a text message plan with her mobile service provider. If user does have a text plan, text4baby will not deduct from the total number of texts she pays for with her regular plan. Women can simply sign up for text4baby by texting "BABY" or "BEBE" in Spanish to 511411.

Enrolled women receive free text messages each week, timed to their due date or baby's date of birth. These messages focus on a variety of topics critical to maternal and child health, including birth defects prevention, immunization, nutrition, seasonal flu, mental health, oral health, and safe sleep. text4baby messages also connect women to national prenatal, infant care services and other resources. Unfortunately, this is not an interactive program, so questions and concerns sent to text4baby will not be answered. Members are to discuss any questions or concerns with their health care provider.

For more information about this program, please visit www.text4baby.org.

UCare Facility Change/Update form

Effective Aug. 2, 2010, UCare will no longer accept the UCare Facility Change/Update Form sent on paper whether by fax, mail, or e-mail.

The UCare Facility Change/Update form has been formatted into electronic formats and can be found at www.ucare.org/providers/pages/forms.aspx. There are now three separate online facility change forms, depending on your request.

The **Facility Change Form-Demographic Change/Update** form is used for address changes for the facility, Tax ID number changes, clinic name changes, and changes to phone/fax numbers. These changes should be sent to UCare by completing the "Facility Change Form-Demographic Change/Update" form.

The **Facility/Clinic Closing** form is used to notify UCare when a facility/clinic is closing. The notification should be sent to UCare by completing the "Facility/Clinic Closing" form.

The **Facility Location Add** form is used to notify UCare when a new clinic location needs to be added in UCare's system, whether it is a new clinic that just opened or if it is a new provider that needs added for claims processing purposes. The notification of the clinic add should be sent to UCare by completing the "Facility Location Add" form.

Skilled Nursing Facility (SNF) Fact Sheet now available

UCare's Clinical Services Department has received numerous inquiries about how we authorize the levels for rehabilitation stays and the requirements for authorizing the stays.

In May 2010, the "Therapy SNF Level Examples" fact sheet was created to help clarify the primary process for authorizing rehabilitation stays for UCare contracted SNFs (Levels 3 to 5).

You can find this document in our Provider Resources page:

www.ucare.org/providers/Pages/Resources.aspx.

Scroll to the "Skilled Nursing Facility Fact Sheet" section and then click on "Therapy Skilled Nursing Facility Level Examples" to download a copy of it.

UCare partnership pilots Senior Companions service for UCare for Seniors members

Companionship program helps seniors in four Minnesota regions maintain wellness and independent.

UCare for Seniors members age 55 and older and seniors in the community will have a new opportunity to connect with a senior outreach program offered by **Lutheran**

Social Service of Minnesota (LSS), based in St. Paul, Minnesota.

UCare is partnering with LSS to offer the Senior Companions program to *UCare for Seniors* members who live in the Twin Cities metro area, Brainerd lakes area, Duluth, and Stillwater. *UCare for Seniors* members will be matched with a volunteer, aged 55 and older, who provides basic companionship activities. The volunteer makes home visits about once a week for 3-4 hours. Members also are invited to participate as volunteers.

LSS's Senior Companions recruits and engages volunteers to serve lonely and/or isolated adults who need support when other family members cannot be there; caregivers in need of respite; mentally or physically impaired individuals; or people recovering from an illness.

Participants are needed

The Senior Companions program is currently looking for people who would like to be matched with a volunteer. If you or someone you know is interested in being a participant, please call LSS at **651-310-9440** or **1-888-205-3770** toll free. TTY machine users call 711.



Volunteers can assist with light household tasks and provide transportation for medical appointments,

grocery shopping, and other errands. They also can provide respite support to caregivers; however, volunteers cannot provide medical or home health care services or help with heavy chores or cleaning.

In late 2009, UCare made a community benefit program grant in late 2009 to the Senior Companion Program. "As a nonprofit organization, UCare actively supports our community shareholders through our community benefit program grants," said Nancy Feldman, President and CEO, UCare. "Our contributions to Lutheran Social Service's Senior Companion program will help this low-cost, high-impact program reach and serve more senior Minnesotans, while encouraging others to experience the joy of volunteering."

Quality Corner

New PIP for blood pressure control in members with diabetes

A new Performance Improvement Project (PIP) at UCare targets adult members of Minnesota Health Care Programs (MHCP) with diabetes to improve the management of blood pressure.

Current research emphasizes the importance of blood pressure management in patients with diabetes. Recent studies have shown that many patients receiving treatment of hypertension do not know their most recent blood pressure reading or their blood pressure goal.

To respond these challenges, this project focuses on two predominant themes:

1. Increasing patient self-management and medication adherence.
2. Increasing management of hypertension to goal.

This new PIP is a collaborative project between five Minnesota health care plans. Stratis Health, the Medicare Quality Improvement Organization of Minnesota, assists with project facilitation and data aggregation.

Project interventions are targeted toward patients, care coordinators, practitioners, and clinics. Project success will be measured by an increase in the rate of members with diabetes who have blood pressure in control as measured by the Healthcare Effectiveness Data and Information Set (HEDIS) CDC 130/80 blood pressure measure in adults ages 18 to 75 years. The project implementation period is anticipated to be 2010-2013 or until the measurement goal is met.

Provider training modules related to this project are available at the Stratis Health web site:

www.stratishealth.org/providers/healthplanpips.html. Scroll to the "Blood Pressure Control for Members with Diabetes PIP" section and look for the "Provider Training Series." The topics range from promoting accurate measurement and self-management of blood pressure to promoting blood pressure management in special needs populations.

You may contact Holly Heisler, UCare Performance Improvement Manager, with questions or comments at **612-676-3589** or hheisler@ucare.org.

Update on Preventive Care PIP

The New Member Utilization of Preventive Care PIP was implemented beginning in early 2009.

Literature has shown that preventive care, particularly in adults, is widely underutilized. This project targets new members and encourages them to seek a preventive care visit within the first six months of enrollment into their health plan and maintain a relationship with their primary care provider. It focuses on adult ages 21 and older enrolled in UCare's Minnesota Health Care Options (MSHO), Minnesota Senior Care Plus, Prepaid Medical Assistance Program, and Special Needs Basic Care plans. Project interventions are targeted towards patients, care coordinators, and primary care providers.

Project success is measured based on claims data for specific prevention visit codes:

- **CPT codes: 99385, 99386, and 99387.**
- **HCPCS code: G0422.**

The measurement goal is to increase the rate of preventive visits by five percentage points over the baseline rate for three six-month measurement periods in each project population. Measurement data will be available in 2010. This project will be actively implemented until late 2011 or until the measurement goal is met.

You may contact Holly Heisler, UCare Performance Improvement Manager, with questions or comments at **612-676-3589** or hheisler@ucare.org.

Medicare Colorectal Cancer Screening Quality Improvement Project begun

This year, UCare initiated a Medicare Colorectal Cancer Screening Quality Improvement Project. It has several interventions targeted at our Medicare members to increase awareness of the need for screening and to encourage members to get up to date on their screenings.

These interventions include a customer service hold-time message, article in our Medicare member newsletter, member postcard cobranded with the American Cancer Society, and reminder letter. UCare is using the "Colorectal Cancer Screening" HEDIS measure as our outcome measure.

Assistance by UCare providers will help us reach the goal of increasing the colorectal cancer screening rate for

members. *Please use every visit with members as an opportunity to evaluate their colorectal screening history.* If it is time for members to be screened, please discuss appropriate options with them.

With provider support, UCare is confident that the rates of colorectal cancer screening can be improved, thereby preventing colorectal cancer or, even better, detecting it at an early stage.

Clinical Practice Guidelines

UCare adopts and uses clinical practice guidelines to enhance member and professional decision-making, improve health care outcomes, and meet federal and state contractual requirements.

Guidelines are designed to assist clinicians by providing a framework for the evaluation and treatment of members. Guidelines are not intended to replace a clinician's judgment or to establish a protocol for all members with a particular condition.

The following are current UCare Clinical Practice Guidelines:

- Preventive Services for Adults.
- Preventive Services for Children and Adolescents.
- Prenatal Care, Routine.
- Diabetes, Type 2 Diagnosis and Management.
- Asthma, Diagnosis and Outpatient Management.
- Pressure Ulcer, Prevention and Treatment.

In February 2010, UCare adopted the Institute for Clinical Systems Improvement (ICSI) guide, "Obesity, Prevention and Management." UCare is excited to add this guideline for provider utilization to enhance the focus on obesity and to align with other internal and statewide initiatives on obesity. The ICSI obesity guideline targets mature adolescents and adults.

In February 2010, UCare updated the Pressure Ulcer and Asthma Guidelines. Their title changed from "Prevention and Management of Pressure Ulcers" to "Pressure Ulcer, Prevention and Treatment." Please visit the Provider Manual, **Chapter 24: Clinical Practice Guideline**, for details about all UCare guidelines and update.

Friendly Reminders

- As a valued provider within the UCare network, you have a dedicated **Network Services Coordinator** who can help you in many ways. A Coordinator is assigned to each health system and/or geographical area.

If you do not know who your Coordinator is, visit our “Network Services Coordinator” page at www.ucare.org/providers/Pages/NetworkServicesCoordinator.aspx.

- Don’t forget to subscribe to our **E-mail List Server** to receive provider news and updates, including *health lines*, via e-mail. To subscribe, [visit us online](#).

If you have comments and/or suggestions for future content, please e-mail us at healthlines@ucare.org.

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