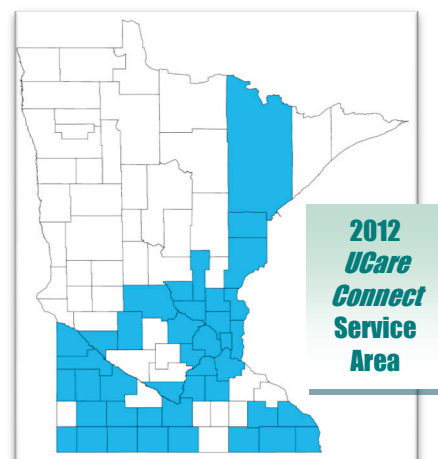


UCare Connect will grow significantly in 2012

New state legislation requires people with disabilities who receive Medical Assistance to be assigned to a Special Needs BasicCare (SNBC) health plan unless the individual chooses to opt-out of managed care. In January 2012, the Minnesota Department of Human Services (DHS) began enrolling Medical Assistance recipients with disabilities into SNBC. DHS plans to transition individuals from fee-for-service Medical Assistance to SNBC through a series of enrollment phases throughout 2012. Visit www.dhs.state.mn.us/SNBC for more information on SNBC.



Since 2008, UCare has offered *UCare Connect*, a SNBC plan. UCare is well positioned to expand membership in our SNBC plan, *UCare Connect*. We bring years of experience, innovative thinking, and an infrastructure designed to cover care for people with complex needs. *UCare Connect* is available in 41 counties in Minnesota and serves low-income adults with physical, developmental disabilities and/or mental illness. Approximately 2,500 people are currently enrolled. UCare anticipates significant and rapid enrollment growth in *UCare Connect* this year as a result of the new legislation.

Below is the DHS plan for rolling out the SNBC expansion in 2012. Medical Assistance recipients may opt-out of managed care and remain in fee-for-service by returning an opt-out form to DHS. This form will be sent by DHS to individuals 60 days prior to when they will be enrolled in SNBC.

Jan. 1, 2012

About 8,700 adults with disabilities who do not receive home and community based services (HCBS) will be asked to enroll in a SNBC plan in counties where Medica, PrimeWest Health, and South Country Health Alliance (SCHA) are the only SNBC health plan options (and where *UCare Connect* is not available).

Feb. 1, 2012

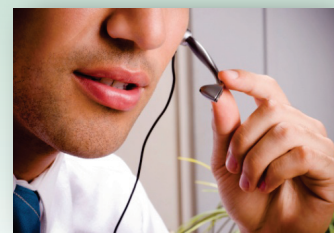
About 6,300 adults with disabilities who do not receive HCBS will be asked to enroll in a SNBC plan in counties where *UCare Connect* is the only SNBC health plan option. These counties are Blue Earth, Chippewa, Cottonwood, Faribault, Fillmore, Houston, Jackson, Kandiyohi, Lac Qui Parle, Le Sueur, Lincoln, Lyon, Martin, Mower, Murray, Nicollet, Nobles, Olmsted, Redwood, Rock, Watonwan, Winona, and Yellow Medicine.

Cont'd on page 2

Make PAC Your First Call for Help

UCare's Provider Assistance Team (PAC) is ready and available to answer all of your questions, ranging from member benefits to claims inquiries.

Please call us with your queries and/or concerns. We'll help you as quickly, efficiently, and accurately as we can.



Reach us at

612-676-3300

or **1-888-531-1493** (toll free)

Monday through Friday, 7 a.m. to 5 p.m.



March 1, 2012

About 20,600 adults with disabilities who receive HCBS will be asked to enroll in a SNBC plan in counties where SNBC is available (78 counties).

May 1, 2012

About 13,900 adults with disabilities who do not receive HCBS will be asked to enroll in SNBC in Hennepin County.

June 1, 2012

About 13,200 adults with disabilities who do not receive HCBS will be asked to enroll in SNBC in Ramsey and St. Louis counties.

July 1, 2012

About 13,000 adults with disabilities who do not receive HCBS will be asked to enroll in SNBC in Anoka, Benton, Carlton, Carver, Chisago, Dakota, Isanti, Mille Lacs, Morrison, Pine, Rice, Scott, Sherburne, Stearns, Todd, Washington, Wadena, and Wright counties.

Note: In early 2012, UCare anticipates DHS will release RFPs to serve the adults with disabilities in nine counties that currently do not have a SNBC plan available, and children with disabilities statewide. UCare's participation in serving these populations has not been determined.

Important Reminders

UCare Connect does not include Medicare Coverage

As of Jan. 1, 2012, *UCare Connect* no longer includes Medicare benefits. People with disabilities who are eligible for Medical Assistance and Medicare may continue to enroll in *UCare Connect* but their Medicare (Parts A, B and D) benefits will be paid through other entities. The member's Medicare carrier will be the primary payer for many services.

Checking a Member's Eligibility Status

Here's a friendly reminder to check the status of a member's eligibility *every month*, as his or her eligibility status and/or health plan may vary from month to month.

There are several ways to check eligibility and other information. You can:

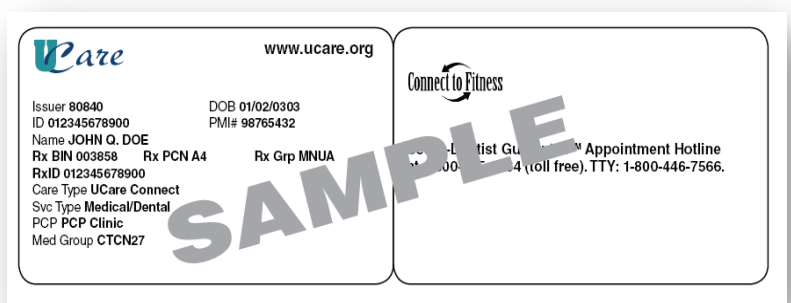
- Log into the UCare Provider Portal to learn the status of a recipient's eligibility, UCare ID number, name of primary care clinic, and much more. Log in/register at:
www.ucare.org/providers/pages/ProviderPortal.aspx
- Use our Interactive Voice Response (IVR) system by calling the PAC. This convenient, self-service is available 24 hours a day, seven days a week.
 - For quick service of eligibility inquiries, be ready with the recipient's date of birth and personal member identification (PMI) or UCare member ID number.
- Log into MN-ITS to verify if a recipient is eligible and the name of their health plan.

If members have any questions, please direct them to UCare's Customer Services at 612-676-3395 or 1-877-903-0061 (toll free).

UCare Member ID Cards

UCare is working to ensure that all new *UCare Connect* members receive a member ID card as soon as possible. The majority of new members should receive their ID card in the mail by the first day of the month.

Here is a sample of the *UCare Connect* member card for 2012.



Making Primary Care Provider Changes

UCare is rooted in primary care. In fact, we encourage all of our members to establish a primary care provider (PCP) upon enrollment. Each member has a PCP printed on their ID card. Several new *UCare Connect* members may not select a primary care provider during the enrollment process. For those members, UCare will assign a PCP. Assignments are made within 30 miles of the member's home zip code. We recognize that these assignments are not always accurate.

If you notice that a member's ID card has the incorrect PCP printed on it, you can assist us in correcting the information by doing one of the following:

- Direct the member to call UCare Customer Service to update their assigned PCP. UCare has dedicated Customer Service representatives available to assist members in making these changes.
- Complete the [PCC Change Request Form](#) and fax it back to the number on the form.

PCA, PDN, and Waiver Services are not included in *UCare Connect* (SNBC)

SNBC plans like *UCare Connect* do not include Personal Care Assistant, Private Duty Nursing, or Home and Community-based Services (HCBS or waiver services). Members who are eligible for these services receive them through their county.

Transition of Care News

Medical Services

UCare Clinical Services staffing has been increased to process transition of care authorizations. Staffing levels for both our intake and utilization review departments were increased to manage the anticipated volume in overall prior authorization requests and transition authorization related to the increase in member enrollment.

UCare honors authorizations or service agreements approved through the member's previous health plan, including fee-for-service Medical Assistance/DHS, for services that are covered under the member's UCare benefits. For continuity of care, UCare will authorize services with the current provider for up to 120 days or until the end of the previous health plans authorization, whichever come first. Services that do not require authorization from UCare will not need continued authorization unless the provider of service is not contracted with UCare. UCare will be flexible with retrospective reviews for non-contracted providers during the first 30-day phase in period.

Dental Services

UCare's dental transition policy for orthodontia follows DHS contractual requirements. UCare's See-A-Dentist GuaranteeSM and Mobile Dental Clinic (MDC) offer support for members needing to transition between providers. Information about UCare's dental benefits can be found by logging into our dental microsite at www.ucare.org/dentalcareforu or by calling DentaQuest at **1-800-896-2372** (toll free).

Behavioral Health Services

For Behavioral Health transitions of care, UCare will follow the same process and guidelines as stated under the Medical Services section above.

UCare partners with two delegates to manage and deliver certain aspects of behavioral health services. For the majority of our members, UCare works with Behavioral Healthcare Providers (BHP) to provide quality mental health and chemical dependency care to the majority of our members. Call BHP Intake staff at 763-525-1746 or 1-800-361-0491 for member assistance.

UCare partners with Mayo Management Services, Inc. (MMSI) to provide behavioral health services for members who chose a primary care clinic in the MMSI network, which is primarily in southern Minnesota. The MMSI network consists of certain clinics in the following counties: Brown, Blue Earth, Dodge, Faribault, Fillmore, Freeborn, Goodhue, Houston, Le Seuer, Mower, Nicollet, Olmsted, Rice, Steele, Waseca, and Winona. To access mental health services for members using MMSI network providers, please call UCare's PAC.

Pharmacy Services

UCare's pharmacy transition process allows for continuation of therapy approved by the previous health plan for up to 90 days. New UCare members will automatically be allowed one 30-day transition fill of a non-formulary drug or drug with utilization management edits. Following the one-time transition fill, members and physicians will receive a letter advising how to request a formulary exception, prior authorization, or transition extension if switching to a formulary drug that is not appropriate for the member.

For formulary information, please log on to www.ucare.org/providers/Pages/Formularies.aspx.

Important Pharmacy Change for 2012

As you may know, Express Scripts, Inc. (ESI), UCare's Pharmacy Benefits Manager, does not have a signed contract with Walgreens pharmacies for 2012. Therefore, starting Jan. 1, 2012, Walgreens pharmacies are not in UCare's pharmacy network.

UCare has communicated frequently with members and other network pharmacies about this change. We believe our communication efforts and other initiatives will result in minimal member disruption despite this change to the UCare pharmacy network.

If you have questions about this pharmacy network change or need assistance locating alternate pharmacies for members, please don't hesitate to contact our PAC. Thank you for helping our members through this change.

2012 Authorization Grids

Each year, UCare reviews the medical and behavioral health prior authorization/notification grids and makes necessary changes for the upcoming year. The 2012 prior authorization/notification grids for medical *and* behavioral health services are final and now available online at www.ucare.org/providers/pages/authgrids.aspx.

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Reach us at **612-676-3300** or **1-888-531-1493** (toll free), Monday through Friday, 7 a.m. to 5 p.m.

Provider Portal

The UCare Provider Portal offers several features that help streamline business operations and provide quick access to valuable information. For example, you can use the Provider Portal to:

- Verify member eligibility.
- Check status of a claim and/or authorization.
- Retrieve your Explanation of Payments (EOPs).
- Download member roster data (applicable to primary care clinics only).

To log in or for more information, visit our web site at www.ucare.org/providers/pages/providerportal.aspx.

E-mail Listserv

Sign up to receive provider news and updates, including *health lines*, via e-mail. To subscribe, log on to www.ucare.org. Then select "Providers" and "E-mail Listserv."

This special edition of *health lines* **BULLETIN** is issued by UCare's Provider Relations and Contracting Dept. You can access useful information and resources by logging into our Provider web site at www.ucare.org/providers.

For more information about UCare and its products, please visit us at www.ucare.org.