◇ Medica | **CARE COORDINATOR NEWSLETTER**

All Products

Community Events – How can we assist?

As our communities start opening up to gatherings, fairs, community events, etc., let us know if there is an opportunity for our involvement. Whether it's sponsoring and being present with a table, or sending you trinkets to distribute at an event. We would like to help make your event successful!

Contact us at **SPPCommEng@medica.com** for further information.

Member Stakeholder Meetings 2022

Our tentative plans for engagement are:

- *May:* call interested members to collect feedback/comments via a short questionnaire
- *October:* In-person meeting at the new Frogtown Office (depending on COVID situation)

We wanted to make you aware of our plans so you could start thinking about what members you think would like to participate in the May questionnaire. We'll be sending another communication out in April.

Please feel free to send questions or names of interested members to: **MedicaAdvisoryCommittee@medica.com**.

Member Success Stories

We are soliciting any member success stories you may have. We want to share the successes you have had with our members and the good work that you do! Below are some examples of key areas where you have helped.

- An example where you helped a member in a rural area find housing. What were the challenges you experienced and how did you work through them?
- Have you helped a member access remote or telehealth that had never used it before? How did you help? What issues did you need to work through?
- A time you successfully used housing stabilization services to support a member, especially in a non-metro area and/or with a member from an underserved population.
- A member who was not accessing needed care due to the COVID pandemic – how did you help encourage them to get care and what did you do to support their needs?

Success stories can be submitted to **MedicaCCSupport@medica.com**.

Minnesota Department of Human Services (DHS) launches report on building racial equity into Minnesota's Medicaid program

DHS has issued a report on actionable steps to improve racial equity in Minnesota's Medicaid program. Medicaid Medical Director Dr. Nathan Chomilo is lead author on the report: **Building Racial Equity into the Walls of Minnesota Medicaid: A focus on U.S.-born Black Minnesotans**.

The U.S.-born Black community faces some of the starkest disparities in health outcomes in the state. For example, compared to Black Minnesotans born outside the country, U.S.-born Black Minnesotans have three times the rate of asthma, heart failure, hospitalized heart conditions and depression. Minnesota's Medicaid program plays a key role in addressing health disparities among Black Minnesotans. Approximately 41.5% of Black Minnesotans, and 64% of Black Minnesotan children, rely on Medicaid for health care coverage.

The report was co-created with members of the Black community, leaders of organizations that are a part of the community and those working to advance racial equity in health care for Black Minnesotans. It also used the expertise of DHS staff who work with the Medicaid program.

DHS hopes to share the report widely and establish community work groups to determine how best to further the report's calls to action. Importantly, none of the calls to action seek to create racially exclusive Medicaid-funded services. Instead, they recognize the need to ensure that policies and programs are administered with awareness and action toward racial equity. The calls to action include:

- Simplify and support enrollment and renewal

- Increase investment in culturally relevant care for U.S.-born Black Minnesotans on Medicaid
- Fund community conversations with U.S.-born Black Minnesotans on Medicaid

Review the **Building Racial Equity into the Walls of Minnesota Medicaid: A focus on U.S.-born Black Minnesotans** report to learn more. Future reports will focus on other populations experiencing health care disparities, including Native Americans and Minnesotans who are Latinx/Hispanic, Asian American and Pacific Islander, people with disabilities, the unhoused and more.

New Resource: Primary Care Physician (PCP) Attribution Report for Unable to Reach (UTR) / Refusal Members

Medica has developed a new report to help Care Coordinators identify a PCP for Minnesota Senior Health Options (MSHO) and Integrated Special Needs Basic Care (ISNBC) members who they have been unable to reach (UTR) or who have refused to participate in the Health Risk Assessment (HRA) and care plan process.

- **Why?:** Centers for Medicare and Medicaid (CMS) requires that all Special Needs Plan (SNP) members have an Individualized Care Plan and an Interdisciplinary Care Team, even if the member is unable to be reached or has refused to engage with the Care Coordinator (CC). This means communicating with the member's PCP, when known. To support compliance with this requirement, Medica developed a UTR/Refusal Care Plan template. The UTR/Refuser Care Plan captures the information needed for UTR/Refuser members, including documentation of efforts made by the CC to locate the member's PCP.
- **PCP Attribution Report:** Medica recognizes that it is sometimes difficult to identify a member's PCP when communication with the member is limited or absent. To assist with this task, we developed a PCP Attribution Report that identifies, based on claims, PCPs who have seen members classified as UTR or Refusal on a delegate's HRA report. If the report does not identify a PCP for the member that means Medica does not have a claim for the member for a PCP visit. The PCP Attribution Report is just another tool available to CCs to help identify a member's PCP – CCs should continue to use other resources as well. In addition, if a CC subsequently completes a HRA with a member, use the PCP identified by the member, if different.
- **Timing & Location of the PCP Attribution Report:** Going forward, Medica will generate the report quarterly and drop it in delegates' ShareFile folder titled Misc Reports. Delegates are responsible for retrieving the report and sending the information to CCs.

- **Questions?** Email the Regulatory Quality mailbox at **MedicaSPPRegQuality@Medica.com**.

New Centers for Medicare and Medicaid (CMS) Requirement: Medication Safe Disposal Handout for Members

A new CMS regulation requires Medicare Advantage Plans to provide members with written and verbal information about the safe disposal of prescription drugs that are controlled substances when conducting an **in-home** Health Risk Assessment (HRA) with a member. Medica recently sent an email to delegates about this requirement and posted the Medica Safe Disposal of Medications Handout and Instructions on the Medica Care Coordination website under Tools and Forms for MSHO and SNBC members.

Some reminders:

- When to Provide the Handout: Care Coordinators (CCs) must include the Medica Safe Disposal of Medications Handout along with the Medica Care Coordinator Leave Behind Document whenever doing a **face-to-face** HRA visit with an **MSHO or I-SNBC** member **unless** the member resides in an institutional setting where the institution has primary responsibility for disposal of residents' unused medications. The handout does not need to be provided to members who complete a HRA over the phone. It also is not required for MSC+ or SNBC members, but could be a helpful resource for all members.
- **Local Takeback Sites:** Before giving the handout to a member, CCs should fill in the first page with two takeback sites in the member's community. You can identify takeback sites by going to the **DEA's takeback website** and searching by zip code or city and state.
- **Member Education:** During the face-to-face visit with the member, provide a verbal summary of the information in the handout and leave the handout with the member along with the Leave Behind Document.
- **Documentation:** Document in case notes that you provided verbal and written information to the member about the safe disposal of prescription medications and left the Safe Disposal of Medications Handout and the Leave Behind Document with the member.
- **Where to find the Handout:** On the Medica Care Coordination website, go to the **Tools and Forms** page. In the "Organized by Product" section, the Medication Safe Disposal Handout and Instructions are posted under both the MSHO and the SNBC dropdown menus.
- **Questions?** Email the Regulatory Quality mailbox at **MedicaSPPRegQuality@Medica.com**.

Reporting

Daily Admission Report (DAR)

As you saw in an email sent on 2/9, the Daily Admission Report now includes some additional indicators related to Social Drivers of Health (SDoH). The indicators will be towards the far right of the reports and are the following:

- **NEW History_of_homelessness** - indicates if Medica has received a member claim which has an ICD-10 code of homelessness or housing instability within the past 12 months.
- **NEW History_of_social_isolation** - indicates if Medica has received a member claim which has an ICD-10 code of social isolation within the past 12 months.
- **NEW History_of_food** - indicates if Medica has received a member claim which has an ICD-10 code of food insecurity within the past 12 months.

Any response you see in these areas are based on information provided in the form of "Z codes" received by Medica on claims from providers. Use of Z codes by providers began with the transition to ICD-10 coding, and use of these codes continues to increase. Medica has reviewed the codes that we typically receive from providers, and have determined that these 3 categories represent the largest volume of codes we received. For members with these indicators, we are asking that you include them in your conversations with members during their Transition of Care (TOC) work and in regular touch bases with members, making necessary referrals to covered benefits and/or information services to address the member's needs. Future plans include incorporating these indicators in the Impact/Enhanced Care Coordination (ECC) report.

Resources to assist members who have SDoH needs include MnHelp.info (search under Waiver Services on left menu to find providers who are enrolled to provide waiver services), FindHelp.org, and local resource listings available through internet searches, county webpages, etc.

Special Needs Basic Care (SNBC) New Medicare

As mentioned in an email dated 2/1, Medica provides you with a report in the Sharefile Misc. folder which gives you information related to SNBC who will be eligible for Medicare A and or B in the upcoming months. The title of this report is *Your name_NewMedicare* and **you will only receive the report if you have a member on the report who is soon going to be gaining Medicare coverage**. The information on the report is provided to Medica by DHS, and contains the effective date of members Medicare A and B eligibility.

We are asking that Care Coordinators as another "tool" in your toolkit in your work with members. One example of how this information could be used is to help the member understand that they will be receiving a new Medica ID card, as members Medica ID numbers changes when someone goes from Medicaid

only to having Medicaid and Medicare coverage. Members on this list can also expect a call from our sales staff to inform them of our Integrated SNBC program which would then be an available option to them once they have Medicare A and B.

We are not asking for anything back from you related to this report, but we are offering it to you as another resource in your work with members.

Special Needs Basic Care (SNBC) & Minnesota Senior Health Options (MSHO)/ Minnesota Senior Care (MSC+) New Enrollee Reports

As mentioned in the email message sent on 2/4, Medica receives monthly information from the Department of Human Services (DHS) related to **new** members. Not all new members appear on these reports, therefor not all delegates will receive a report each month. DHS gathers this information from their system to include information from the members previous Managed Care Organization (MCO) or from the Fee-For-Service System.

Medica will share these reports with Care Coordinators on a monthly basis, in the Misc Reports folder in Sharefile. The title of these reports will be *name_NEW SNBC x.22* and *name_NewSenior x.22* . These reports provide valuable data about new members, such as Mental Health-Targeted Case Management services, past assessment data, waiver beginning and end dates, diagnoses, prior authorizations, recent nursing facility stays and member eligibility data. Important to these reports is that a Care Coordinator should use this information to identify out of network providers as well as equipment authorizations in place in order to provide necessary assistance to the member to assist them in transitioning to Medica.

We are asking that care coordinators review this information and apply any pertinent information in their work with new members. For example, if a member has a prior authorization for a medication indicated on the report, this may be an indication that they will require assistance in understanding the process to request a prior authorization for this medication through Medica on a short or long term basis. In addition, in reviewing these reports you may identify something that would cause you to prioritize outreach to this member as you are scheduling member contacts.

We are not asking for anything back from Care Coordinators related to these reports. Please send any comments you have related to receiving these reports, and we will use this feedback as move forward in sharing the information. Planned in the near future is a reference document which further explains each report tab and the information contained in it.

Safe Disposal of Medications

Medica developed the handout (previously emailed) to comply with a new CMS regulation that requires Medicare Advantage plans to provide members with written and verbal information about the safe disposal of prescription drugs when conducting an **in-home** Health Risk Assessment.

What you need to know:

- (1) The Medica Medication Safe Disposal Handout and (2) detailed instructions regarding when and how it needs to be provided to members. Both of these documents have been posted to the Medica Care Coordinator website under the Tools and Forms section.
- Going forward, you must provide the Medica Medication Safe Disposal Handout along with the Medica Care Coordinator Leave-Behind Document whenever doing a face-to-face HRA visit with an MSHO or I-SNBC member.
    - **Note:** You are not required to provide the handout to members who complete an HRA over the phone or to MSC+ or SNBC members, but it may be a helpful resource. If you choose to send it by mail, make sure it is included with the Leave Behind Document and not sent on its own.
- Please see the attached instructions for information on how to complete the first page of the handout with two local takeback sites in the member's community. You can identify takeback sites by going to the DEA's **Take-back site**.
- During the face-to-face visit with the member, provide a verbal summary of the information in the handout and leave the handout with the member along with the Leave-Behind Document.
- Document in case notes that you provided verbal and written information to the member about the safe disposal of prescription medications and left the Safe Disposal of Medications Handout and Leave-Behind Document with the member.

Thank you to those of you who have inquired about this requirement! We will also be providing an overview during the upcoming March Care Coordinator meeting. In the meantime, please send any questions to the Regulatory Quality mailbox at **MedicaSPPRegQuality@Medica.com**.

Trauma Informed Care two-part WebEx

Per the email sent on 2/10, Medica will be having a *Trauma Informed Care* training for Care Coordinators in April. The content of the sessions will be different, and we are encouraging participation in both of these two sessions. The first will be Thursday April 14th from noon to 1:30pm. The second will be held on April 21st from noon to 1:30pm. Please place a hold on your calendars until the WebEx information is sent out. These trainings will be recorded as well.

Upcoming Meetings

Care Coordinator Quarterly Meeting via WebEx Events for ALL products
Tuesday March 15, 2022 from 9 a.m. to 11 a.m.

We're here to help

Call or email, whichever works best for you.

📞　　　Call us at 1-888-906-0971 (TTY:711)

✉️　　　Email us at **MedicaCCSupport@medica.com**.

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