

2021 BLUE PLUS CARE COORDINATOR FALL TRAINING

Government Markets Partner Relations Team
October/November 2021

AGENDA

- COVID-19 Wind Down
- Audits
 - CMS/MDH
 - Care Coordination
 - Caregivers
- Guidelines Updates
- MSHO Enrollment
- CC Advisory Meetings
- Bridgeview
- MnCHOICES Launch
- Model of Care Training
- 2022 MSHO Supplemental Benefits
- Member Moments
- Care Coordination Website Overview
- BCBS of MN Highlights
- Q&A

COVID 19 WIND DOWN



- The *state's* Peacetime Emergency expired on July 1st, 2021. Some temporary waivers remained in place for 60 days after the peacetime emergency through August 30th.
- Per DHS the *Federal* Public Health Emergency (FEH) goes through December 31st, 2021, temporary waivers can remain in place for no later than 6 months after the expiration date.
- [DHS Waivers and Modifications](#): DHS continues to update the expiration/projected expiration dates for each waiver modification
- Total of 117 waiver modifications

AUDITS

MDH

- Frequency: every 3-5 years
- Audit during week of 9/20-9/24/2021
- Audit span: 8/1/2020 - 6/1/2021

Additional Audit:

- Office of Legislative Auditor (OLA) PCA Process



CMS AUDIT

Background: Special Needs Plans – Model of Care; audits the delivery of our Model of Care (MOC)

- Target: MSHO (dual eligible) Members
- Purpose: Program audit to measure compliance with the terms of our contract with CMS detailed in our Model of Care
- Frequency: Every 3 years



CMS AUDIT

Types of audit conditions:

- Immediate Corrective Action Required (ICAR) - If CMS identifies systemic deficiencies during an audit that are so severe and require immediate correction
- Corrective Action Required (CAR) - Systemic deficiencies during an audit that must be corrected, but the correction can wait until the audit report is issued
- Observations - Conditions of non-compliance that are not systemic, or represent a “one-off issue”



CMS AUDIT

Observations for:

- Provider MOC training – annual documentation of individual provider and training date
- Timely HRA's – initials missed 30/60 or annuals 365

Reasons include:

- Lack of coverage when the primary Care Coordinator was out
- Notified of late enrollment
- Lack of documentation of enrollment discrepancies in case notes
- Discrepancies in Prepaid Health Plan (PPHP) enrollment dates in Bridgeview
- Transition of Care – Follow up tasks related to return to usual or new usual care setting





Process Improvements post CMS audit:

- Changes to guidelines
- Change follow up language from “6 months” to “mid-year or semi-annual”
- Bridgeview enhancement: New Member Enrollment History tab
- Must report all enrollment discrepancies for research and correction to secureblue.enrollment@bluecrossmn.com

NEW PROCESSES

Nursing Home

- Care Coordinator must obtain a copy of the reviewed NH facility care plan or made available upon request
- 6.15 NH/ICF Annual Assessment Care Plan was updated with:
 - **Care Coordinator should retain a copy of the reviewed facility care plan. Blue Plus may request a copy at any time.**

Community Well

- Refusals (only members in the community with no PCA services): CC must document and reach out mid-year or semi-annually and offer HRA timely:
- Only the member or authorized party can refuse
- For annuals, CC's must reach out a minimum of 2 weeks in advance of the 365 days deadline to allow enough time for scheduling.
- If member refuses to meet with the CC timely due to personal obligations and can meet later, Care Coordinators can enter a refusal in Bridgeview and MMIS. CC is still required to complete the assessment on member's requested schedule.
- Unable to contact; must reach out mid-year or semi-annually and offer HRA timely, 3 attempts and a letter (4x)

CARE COORDINATION AUDIT

2020 Audit Results Summary

- 55 delegates for Blue Plus
- 53 of which EW and CW CAPs are reported to DHS - 2 of which are nursing home only (data is provided to DHS but no cap information is included)
- Did not audit **6** high performing delegates with DHS EW and CW audit protocols and **1** nursing home delegate high performer
- Of the remaining 48 Delegates:
 - 16 had no EW/CW CAPs
 - 31 had CAPs for EW/CW DHS audit protocol
 - 1 nursing home only CAP

DHS HIGH PERFORMERS

2021 High Performers

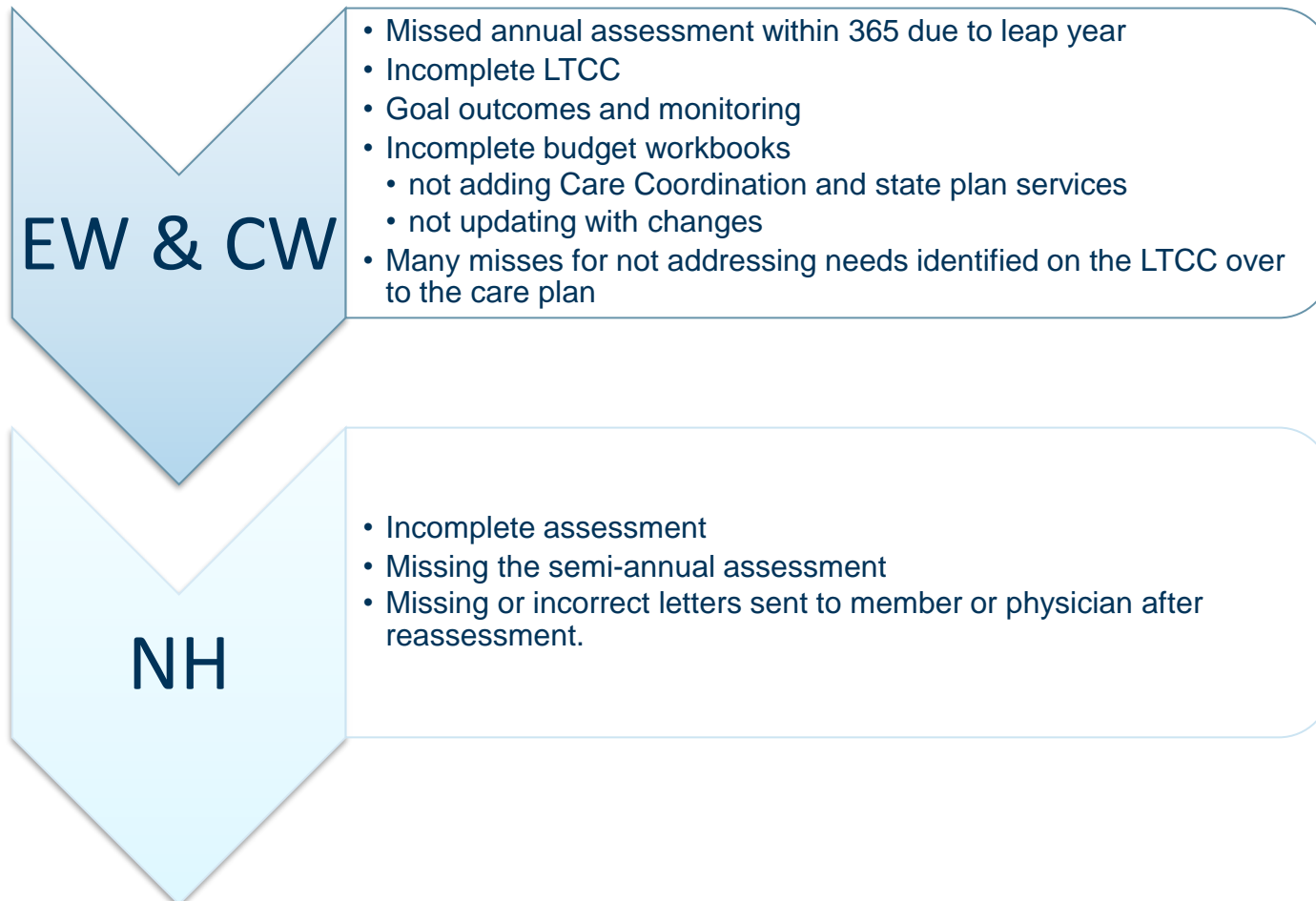
- Crow Wing
- Kittson
- Lake
- Lake Region Health Care
- Marshall
- Wilkin

2022 High Performers

- Bluestone Physicians
- Kandiyohi
- LeSueur
- Lutheran Social Services
- Morrison
- Pennington
- Pine
- Roseau

COMMON AUDIT MISSES

Common Audit Misses:



COMMON AUDIT MISSES

Common Audit Misses:



TOC

- No follow-up after discharge
- Not completing the return to usual care setting tasks—Four pillars
- Not following up with PCP. PCP admitting physician should be documented
- Leaving date fields blank.
- Documenting n/a without explanation.
- Follow-up done late—should be within 24 hours of notification
- Attempted to reach out once but no further follow up after that

Tip: Attempts count—enter date of first attempt on log to confirm that follow up done within 24 hours of notification.

CAREGIVERS

People Who Help Me

LTC SD 24A E.15 Is there someone who regularly helps you care for your home or yourself, or who regularly helps with errands or other things? (Informal or primary caregivers are family, friends, neighbors and others who provide services and support to persons without reimbursement for the services for support. Informal caregivers provide routine, dependable support and assistance to the individual.) Yes (**Complete Section O**) No

Informal caregiver's name _____



O. Informal Caregiver Assessment

Informal or primary caregivers are family, friends, neighbors, and others who provide services and support to persons without reimbursement for the services or support. Informal caregivers provide routine, dependable support and assistance to the individual.

(Introduce yourself to caregiver.) (NAME OF REFERRAL OR PERSON) told us you were the person most involved in helping with (NAME OF PERSON'S) care, so we have a few questions for you.

Relationship to person you help: _____

CAREGIVER RESOURCES



Ceresti Health Caregiver Empowerment Program

- MSHO members – supplemental benefit

Family caregiver services

- EW benefit (caregiver coaching, counseling, training, education)

Caregiver Corner

- BCBS of MN website with caregiver information/resources

Senior Linkage Line

- 1-800-333-2433
- www.MinnesotaHelp.info

GUIDELINES UPDATES

COMMUNITY GUIDELINE UPDATES

New Requirements

- New guidance on mid-year/semi-annual contact requirements for CW/EW members that are unable to reach
 - CW: 3 contacts and a letter is now required for CW members who are unable to reach at mid-year/semi-annual contact
 - EW: Document contact and send UTR letter for EW mid-year/semi-annuals who are Unable to Reach
- Document attempts in case notes and note on care plan goals section if unable to reach
- Documentation in Bridgeview of attempts to contact required for initial and annuals only (**not** mid-year or semi-annual contacts)
- Refusals: Continue to reach out at minimum, mid-year or semi-annually, either by mail or phone to offer an HRA.

Best Practice

- If no working phone number, CC's should attempt to reach out to other contacts.
- Outreach attempts can occur on same date.

COMMUNITY GUIDELINE UPDATES

New section – Updates to the Support Plan

- CC should discuss, with the member or representative, the change in service and what changes, if any, are made to the member's care plan information including changes in hours/units, change in provider, or addition of a new provider
- Discussion should include updates to support plan instructions and member goals related to the service change and their decision to share pertinent care plan information and support instructions with EW and PCA (if applicable) provider as outlined in section *Provider and Member Signature Requirements*
- If the member agreed to share this updated care plan information with the EW and PCA (if applicable) provider, follow the steps for sending the information and obtaining provider signature as outlined in section *Provider and Member Signature Requirements*
- CC to update budget worksheet and care plan and ask if member wants to receive a copy of the updated care plan or just the budget worksheet
 - Inform the member you will be sending them a letter (8.50 Member Service Change letter) that they need to sign and return acknowledging their agreement to the change

COMMUNITY GUIDELINE UPDATES

New Process – MA State Plan Home Care Authorizations:

- Updated guidance on authorizations for SNV provided by RN T1030 or LPN T1031
- If the home care agency anticipates the member will receive visits from both, the CC must request two authorizations between procedure code T1030 RN and T1031 LPN
- **New:** Rather than having CC monitor for fluctuations in the use of these and submit changes, CC should check the box on the authorization form allowing visits to be moved flexibly by Utilization Management staff as claims are submitted.

If authorizing *both* RN T1030 and LPN T1031, check this box if applicable:



Allow UM to move units between codes flexibly as the provider bills; changes must not exceed combined total of units from original authorization.

COMMUNITY & NH GUIDELINE UPDATES



New section – Documenting Notification of Enrollment & Reporting Enrollment Discrepancies

It's important to document the date of first notification of enrollment in the member case notes. In addition, Delegates must report all enrollment errors and misassignments to secureblue.enrollment@bluecrossmn.com as soon as possible so we can research, resolve, and notify the appropriate Delegate assigned. Discrepancies include:

- Incorrect address or County of Residence (COR) which may have resulted in misassignment of the Delegate
- Incorrect living arrangement which may have resulted in misassignment of the Delegate.
- Incorrect product (i.e., Member is MSHO but is showing up as MSC+ or vice versa).
- Incorrect PCC resulting in mis-assignment to Essentia, Bluestone Physicians, Genevive, or Lake Region Health Care
- Incorrectly termed
- PPHP date doesn't match MMIS
- Transfers that include a product change:
 - ✓ Member listed on new delegate enrollment but new delegate did not receive 6.08 Transfer in Care Coordination Delegate form or documents and did not complete
 - ✓ Transfer initiated but remains on initiating Delegate's enrollment

COMMUNITY & NH GUIDELINE UPDATES

New section – Nursing Home Admission Requirements

Added a grid with required tasks for short and long-term nursing home stays

Grid includes when/if to do the following tasks for <30-day short term stay; >30-day short term stay; or planned >30-day long term stay:

- OBRA Level I sent to NH
- OBRA Level II requested if applicable
- TOC required activities/log
- Send DHS 5181 to Financial Worker
- If on EW, close waiver in MMIS back to first admission date
- Fax DTR form for all State Plan Home Care or EW program/services
- Transfer of case to new CC (if applicable)
- Assessment requirements

New Requirement - Review of Facility Plan of Care

- Care Coordinator should obtain a copy of the care plan reviewed and keep in the member's file. Blue Plus may request a copy at any time for audit purposes.

MSHO ENROLLMENT

SECUREBLUE SALES TEAM



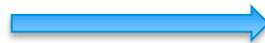
Stacy Rogers

Stacy.Rogers@bluecrossmn.com



Hanna Barr

Hanna.Barr@bluecrossmn.com



SECUREBLUE SALES TEAM

Stacy and Hanna can assist the member with:

- Answering all SecureBlue MSHO enrollment eligibility questions.
- Reviewing medication coverage. If a medication isn't covered, they can assist with formulary exceptions.
- Assist with completing enrollment application
- Connect members losing Medicaid eligibility with a BCBS Medicare Sales rep to find an appropriate Medicare plan.



Reminder SecureBlue MSHO Enrollment training (19 minutes) and FAQ is on our Training page. Eligibility guidelines have not changed for 2022.

MSHO VS. MSC+



Coverage	MSHO	MSC+
Coverage	Medicare Parts A, B, D and Medical Assistance combined into one plan	Medical Assistance only
Insurance ID Card	One ID card	Three ID cards: Medicare, MSC+ and Part D plan for Rx drugs
Customer Service	One phone number	Up to three different phone numbers for 3 different plans
Paperwork	Reduced paperwork from only one plan	Increased paperwork from 3 plans
Explanation of Benefits	One document	Separate EOBs from each plan
Materials	One set of materials	Multiple sets of materials
Medical Coverage	No copay for covered services or preventive office visits	No copay for Medicare preventive services but may have office copays for non-preventive
Part B Drugs	No copays	Copays capped at \$12/month
Part D Drugs	Covered and included as part of the plan	Not included; must enroll into a separate Part D plan
Nursing Home	No 3 day hospital stay requirement for Medicare covered nursing home services	Must have 3 day hospital stay for Medicare covered nursing home services
Durable Medical Equipment	Can use Blue Plus's large DME network	Must use Medicare approved DME provider
Supplemental Benefits (subject to change every year)	Additional benefits such as fitness, PERS, meals, dental, podiatry, grocery store transportation and MORE!	No additional benefits
Out of state coverage	No out of state coverage.	Medicare is primary; out of state coverage for Medicare covered services.

HOW DOES A MEMBER ENROLL?

- Email the *Care Coordinator SecureBlue Referral Form* to secureblue.referrals@bluecrossmn.com.

Care Coordinator Name: [REDACTED]
Delegate Agency: [REDACTED]
CC Email: [REDACTED]
CC Phone: [REDACTED]

Member Name: [REDACTED]
AGP ID: [REDACTED]
Medical Assistance ID number (PMI): [REDACTED]
Date of Birth: [REDACTED]

Primary Care Clinic: [REDACTED]

Member's Mailing Address: [REDACTED]
Member Phone: [REDACTED]

Representative Name: [REDACTED]
Representative Address: [REDACTED]
Representative Phone: [REDACTED]

Additional Comments: [REDACTED]



CARE COORDINATION ADVISORY COMMITTEE

MEETINGS

Background: Committee created early in 2021. First meeting in February.

Attendees: Care Coordinators from each delegate meet regionally with Partner Relations Consultant.

Frequency: Virtual meeting / 3 times a year for 2 hours.

Length of commitment: Care Coordinators agree to commit to one year but can participate up to three consecutive years.

Additional benefit: Collaboration with each other for sharing ideas and best practice.



PROCESS

 *Goal: to improve processes to enhance your Care Coordination experience.* 

Participants of this committee will share ideas & provide input on Blue Plus designated topics.



Your representative collects feedback from your team to contribute to the topics being discussed.



We document and track your suggestions and feedback. We report back to the committee items that we were able to implement.

MEETING HIGHLIGHTS

FEBRUARY

Transitions of Care: reviewed current TOC requirements for process improvement opportunities including documentation.

MSHO Supplemental Benefits: discussed MSHO Supplemental Benefits processes & resources, barriers. Shared ideas for improved communication & training, brainstormed ideas for new benefits in 2022.

JUNE

Onboarding of new Care Coordinators: reviewed the New Care Coordinator Check List and discussed feedback on how we can better support new care coordinators.

Care Coordination Support and Satisfaction: received feedback from committee on what BCBS is doing well for our members; areas can we improve upon; and any regional Racial Health Equity gaps.

MnCHOICES: shared Care Coordinator hopes/fears/questions about upcoming launch and what support may be needed

MOVING THE NEEDLE



- Increased communication about MSHO Supplemental Benefits by adding benefit alerts in red on our website.
- Added monthly Communique highlighting MSHO Supplemental Benefits and process improvement with our vendors.

SECUREBLUE MSHO SUPPLEMENTAL BENEFITS

Care Coordinators must confirm MSHO enrollment. Members enrolled in MSC+ do not qualify.

Benefit Alerts

- ▶ **9/1/21: Upcoming Juniper classes**
 - ▶ Juniper Virtual Classes Sept & Oct 2021 (PDF)
 - ▶ Juniper Telephone Classes Oct & Nov 2021 (PDF)
- ▶ **8/24/21: Electric toothbrush orders on back order until further notice** Phillips has backordered the toothbrushes due to components shortages (microchips). Estimated delivery date is mid-October. Please hold off on ordering if at all possible. Apologies for the inconvenience

MOVING THE NEEDLE

- Developed “CHM referral form” as an additional referral option to authorize specific benefits available through Corner Medical.

**BLUE PLUS MSHO SUPPLEMENTAL BENEFITS
REFERRAL FORM FOR CORNER HOME MEDICAL**
NPI: 1750338851
*Please complete the form & email customerservice@cornerhm.com
OR Fax to 763-536-3590 or 952-388-0444*

Date:

Member Information:
Name: DOB:
Mailing street address: Apt#:
City: State: Zip:
Phone number: (Corner Home Medical will contact member when order is filled)
 Check here if interpreter is required and language:

Items requested:
 Activity Tracker (E1399 U5) Size: Sm/Med Lg/XL
 Face Masks - Box of 50 Disposable (E1399 UD)
 Electric Toothbrush (E1399 U1)
 Toothbrush replacements heads (E1399 U2)

May choose one (1) from options below:
 Incontinence Pads – Qty: 3 (E1399 UA) Incontinence Pads – Qty: 6 (E1399 UB)

May choose one (1) from options below:
 Rollator Walker Bag – Large (E1399 U6) Rollator Walker Bag – Small (E1399 U7)
 Wheelchair Arm Tote (E1399 U9) Wheelchair Backpack (E1399 UB)

Referring Care Coordinator
Name: County/Agency:
Email: Phone:

Thank you. Any questions? Contact Corner Home Medical at 866-535-5335

MOVING THE NEEDLE



- Added suggested Acronym List to Care Coordination website



- Suggestions for 2022 supplemental benefits were implemented



- New BlueRide resource explaining policy on Short Notice Rides and rides to Pharmacy
- Added blank letterheads to website

More to come!

- Updates to New Care Coordinator checklist
- Improvements to Transition of Care process and documentation.

POSITIVE FEEDBACK

“Really appreciate MSHO Enrollment Specialist position.”

“The MSHO page and resources are excellent!”

“Your guidelines are very thorough!”

“Thank you for Bridgeview and for bringing it back!”

“We like that you have recorded trainings on the website.”

“Love the Care Coordination website and Bridgeview Manual.”

“Very quick and timely response from Partner Relations staff.”

BRIDGEVIEW

BRIDGEVIEW TRAINING

The Bridgeview Training with 2021 Enhancements was recorded and is available on the Care Coordination Website:

<https://carecoordination.bluecrossmn.com/training/>



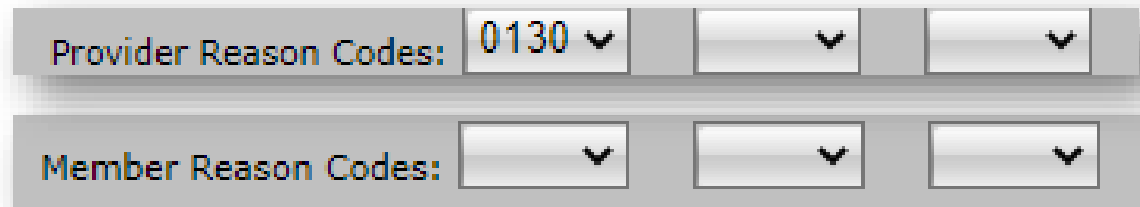
**This is a required training for all Delegates accessing Bridgeview.*

Bridgeview Resources:

- Bridgeview CC User Guide for information on entering assessments and service agreements
- [Provider Reason Codes](#) for service agreements
- Bridgeview website: <https://bridgeview.bluecrossmn.com/>
- CC website: <https://carecoordination.bluecrossmn.com/bridgeview/>

BRIDGEVIEW REMINDERS

- Report enrollment discrepancies in BV to SecureBlue.Enrollment@bluecrossmn.com
- Must enter HRA into BV by 10th of the following month
- Must enter date of death (DOD) by the 23rd of each month
- Members open to EW: LTCC case mix span must align with DHS EW span
- Bridgeview Provider Reason Codes - generates notification to Providers and letters to members:



Provider Reason Codes: 0130 ▼

Member Reason Codes: ▼

Tools in Bridgeview:

- List of Members needing CC assignment
- Assessments needing completion

Reminder- BV does not send auth letters to Providers. Refer Provider to Availity, SA is visible the day after entry.

MNCHOICES LAUNCH

MNCHOICES LAUNCH



Launch Date: November 15th, 2021



Access for Certified Assessors:

- Initial onboarding list was successfully submitted on 9/15
- Individuals that did not have their Handling MN information Securely completed will not be loaded.

Reminders:

- ✓ MnCHOICES mentor attend post launch calls
- ✓ Visit CC website MnCHOICES Page for MnCHOICES News, communication, resources and mentor list
- ✓ All MCO CC's must become certified assessors (including NH only)
- ✓ Report all changes to MnCHOICES Mentors to PR Consultant

MODEL OF CARE

MODEL OF CARE 2021



The Model of Care is:

- The way we operationalize our SecureBlue MSHO product
 - Describes the population, care coordination, staff, systems & procedures, and quality measures & improvement activities
- Required of all Special Needs Plans (SNPs)
- Submitted to CMS at least every 3 years (current 2021-2023)

The goal of the Model of Care is to reduce fragmentation of care delivery for our members and to coordinate access of all services across all settings of care.

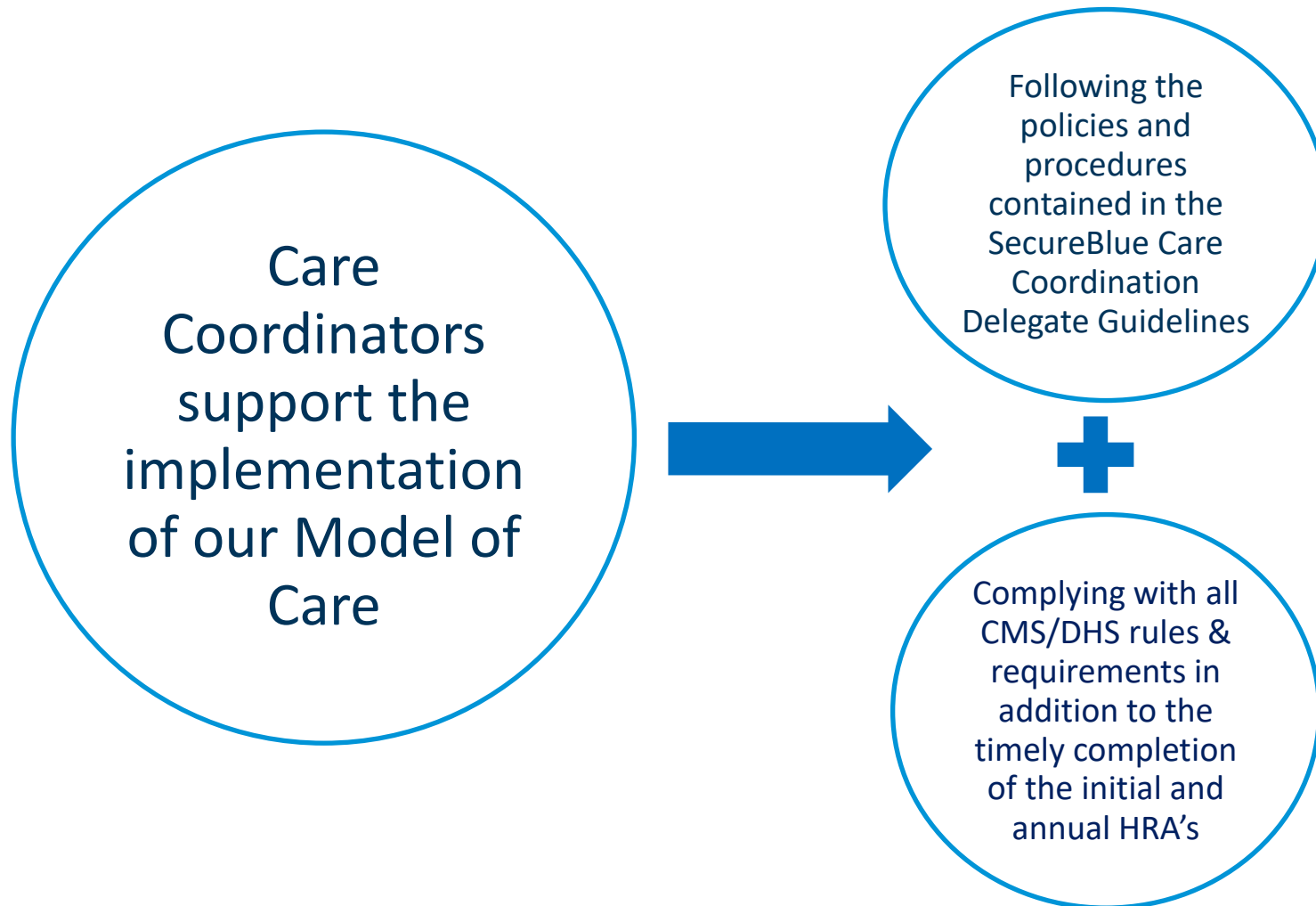
MODEL OF CARE 2021

The SNP-MOC describes in detail:

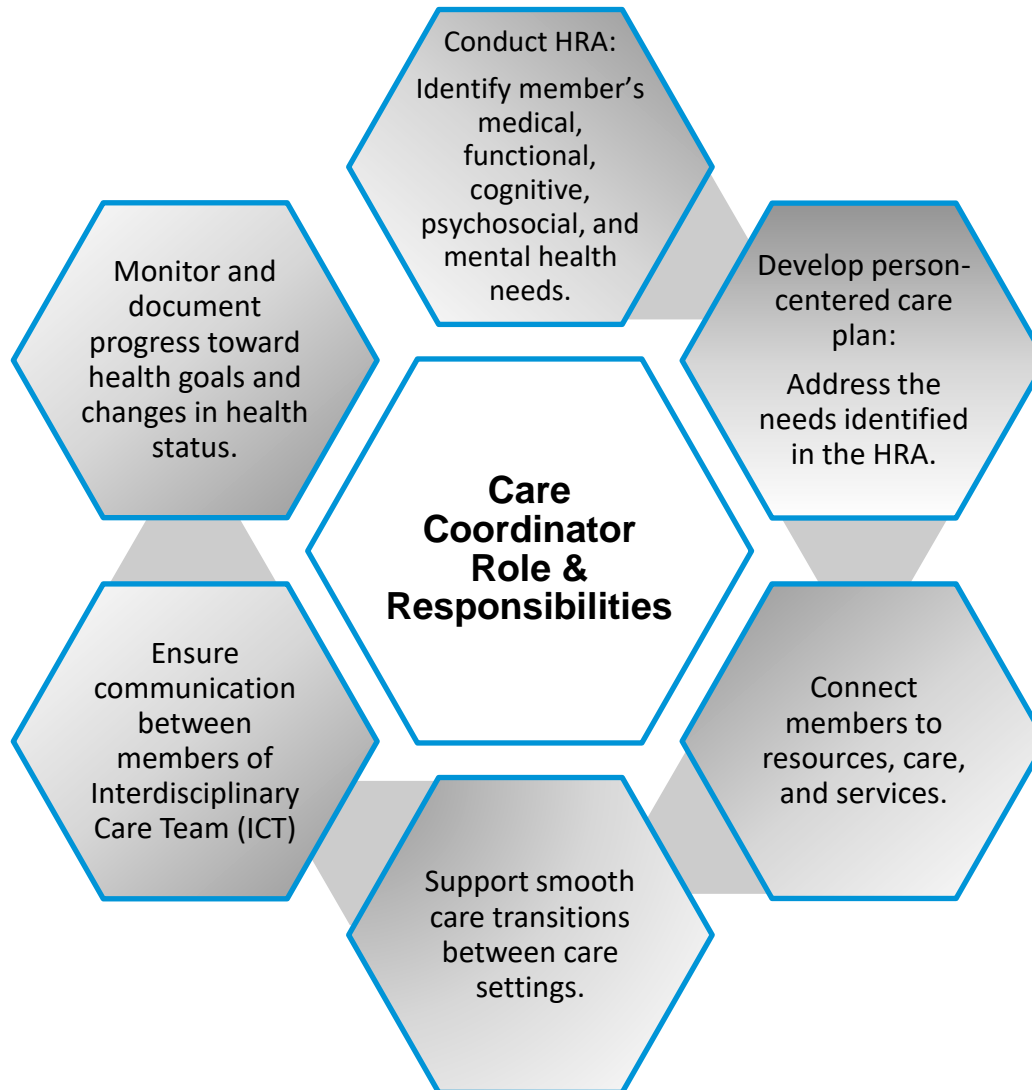
- SecureBlue MSHO population characteristics & eligibility
- Benefits and services we provide to these members
- Staff roles and responsibilities across health plan functions
- Delivery of care coordination
 - Health Risk Assessment, Care Planning, Interdisciplinary Care Team, Transitions of Care
- Provider network
- Measurable quality and performance improvement goals (including member satisfaction)
- How care is coordinated and delivered



MODEL OF CARE 2021



MODEL OF CARE 2021



MODEL OF CARE 2021

CMS requires all staff working with our MSHO members complete SNP-MOC training upon hire and annually thereafter:

- Newly hired CC's review the most recent fall training slides.
- CC's who did not attend fall training should review the slides.
- Each Delegate should maintain all records of attendance. Do not send to BluePlus.



2022 MSHO SUPPLEMENTAL BENEFITS

CMS STAR RATING



WHAT'S RETURNING FOR 2022



- Fitness: SilverSneakers®
- Transportation services
 - Fitness Transportation
 - AA/NA/Health Ed transportation
 - Grocery store transportation
- Additional podiatry services
- Dental services
- \$750.00 Safety Items
- Juniper health and wellness classes
- Incontinence package
- Wheelchair/walker safety totes
- Disposable face masks
- Home-delivered meals & nutrition education program
 - 12-week chronic condition program
 - 4-week post discharge program
- Ceresti Health Caregiver Empowerment Program
- Post-Discharge Medication reconciliation
- Electric Toothbrush and Replacement heads
- Personal Emergency Response system
- Fitness tracker
- Music Therapy for Nursing Home members
- Dose Flip Medication Dispenser
- Member Caregiver Binder

WHAT'S CHANGING FOR 2022



Music Therapy: Offered to *nursing home members only* and maximum has been increased from **12 to 26 visits per year.**



Fitness Tracker: Updated to Fitbit Inspire 2

A slim, easier to read, easy-to-use fitness tracker packs 24/7 heart rate, Active Zone Minutes, activity and sleep tracking, 10 days of battery and more.

WHAT'S NEW FOR 2022



Over-the Counter (OTC) benefit: An allowance of \$50 per quarter to purchase select OTC items from a CVS catalog via online or through mail order or walk into a CVS location.



An Animatronic cat or dog to help lower anxiety and decrease social isolation for members with cognitive impairment diagnosis, ADRD (Alzheimer's Disease and Related Dementias)

WHAT'S NEW FOR 2022

Post-Discharge Community Companion Services: For 30 days following discharge from a hospital or short term SNF stay, a Certified Community Health Worker (CHW) supports individuals with transitioning home. During this time, they will conduct a home safety assessment, discuss nutrition, community resources and upcoming medical appointments.



❖ **More benefit details and authorization processes coming soon.**

NEW MSHO MEDICAL BENEFITS FOR 2022

This is not a supplemental benefit, but a 2022 added medical benefit for members on MSHO.



90 Day Supply

3-month (90 day) Prescription Medication supply

- Most prescription drugs at most retail pharmacy locations or mail order pharmacies.
- Does not include antibiotics or narcotics

Mail order added

- Generally, the drugs provided are ones the member takes on a regular basis, for a chronic or long-term medical condition.
- Does not include antibiotics or narcotics



All Pharmacies, for both 90-day supply and mail order, need to be within Blue Cross Network.

MEMBER MOMENTS

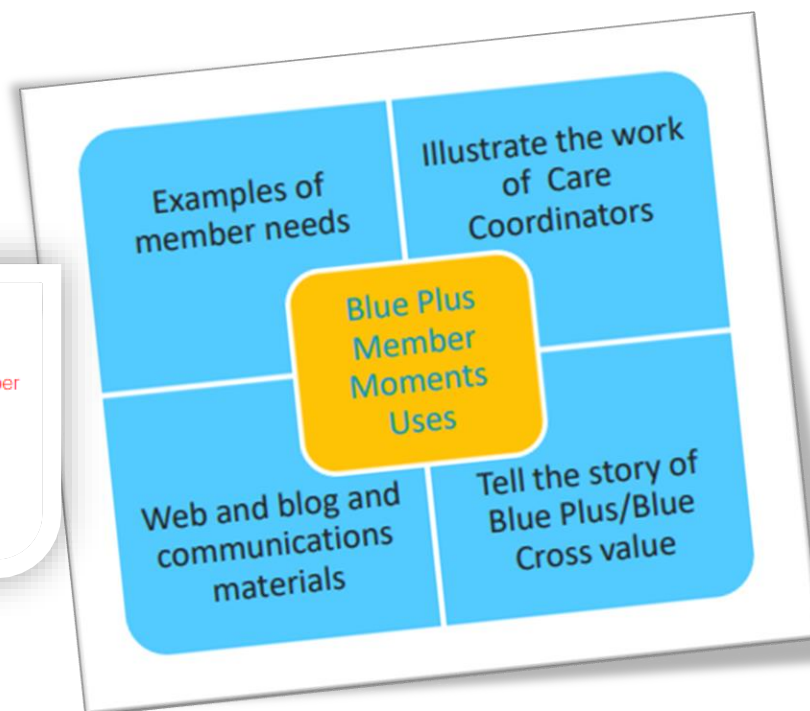
- New online tool to share special moments, success stories, positive member experiences!
- Help us share your hard work on behalf of our senior members!
- No PHI

Member Moments

This online site can be used to share special moments. Please share your success stories and positive member experiences with us. Do not include protected health information.

To submit a member moment, click on link: [Member Moments](#)

- ▶ [Member Moments PPT \(PDF\)](#)
- ▶ [Blue Cross Photo Release \(DOCX\)](#)

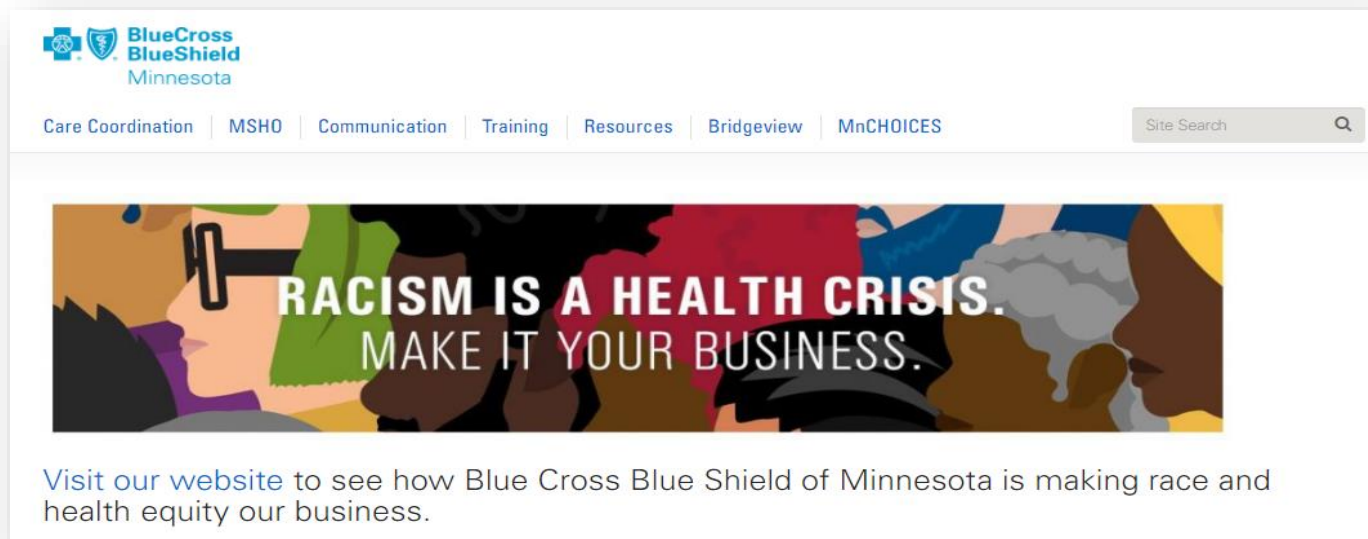


CARE COORDINATION WEBSITE

CARE COORDINATION WEBSITE

Home page:

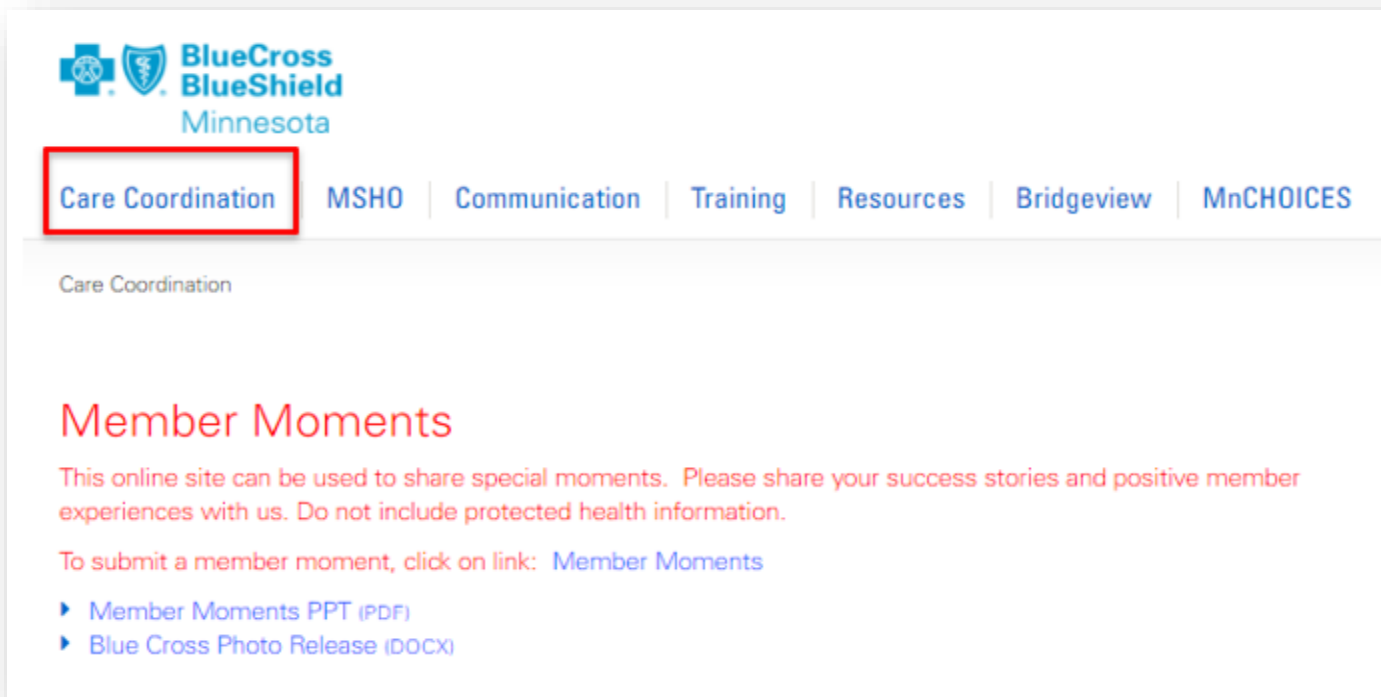
- Upcoming trainings
- News & Highlights



CARE COORDINATION WEBSITE

Care Coordination tab:

- Guidelines
- Checklists
- Forms
- Letters



The screenshot shows the BlueCross BlueShield Minnesota website. The logo is at the top left. Below it is a navigation menu with several items: "Care Coordination" (highlighted with a red box), "MSHO", "Communication", "Training", "Resources", "Bridgeview", and "MnCHOICES". Below the navigation menu, the page content is titled "Care Coordination". There is a section titled "Member Moments" in red text. Below this title, there is a paragraph in red text: "This online site can be used to share special moments. Please share your success stories and positive member experiences with us. Do not include protected health information." Below this paragraph, there is a link in blue text: "To submit a member moment, click on link: [Member Moments](#)". At the bottom, there are two bullet points in blue text: "▶ [Member Moments PPT \(PDF\)](#)" and "▶ [Blue Cross Photo Release \(DOCX\)](#)".

CARE COORDINATION WEBSITE

MSHO tab:

- SecureBlue MSHO Supplemental Benefits page
- SecureBlue MSHO Enrollment page



BlueCross
BlueShield
Minnesota

Care Coordination **MSHO** Communication Training Res

MSHO

MSHO

The following pages are specific to our SecureBlue MSHO product:

- [SecureBlue MSHO Supplemental Benefits](#)
- [SecureBlue MSHO Enrollment](#)

SECUREBLUE MSHO SUPPLEMENTAL BENEFITS

Care Coordinators must confirm MSHO enrollment. Members enrolled in MSC+ do not qualify.

Benefit Alerts

- ▶ **9/1/21: Upcoming Juniper classes**
 - ▶ Juniper Virtual Classes Sept & Oct 2021 (PDF)
 - ▶ Juniper Telephone Classes Oct & Nov 2021 (PDF)
- ▶ **8/24/21: Electric toothbrush orders on back order until further notice** Phillips has backordered the toothbrushes due to components shortages (microchips). Estimated delivery date is mid-October. Please hold off on ordering if at all possible. Apologies for the inconvenience

Care Coordinator Resources

- ▶ 2021-MSHO-Supplemental-Benefits-Grid_03162021 (PDF) (Grid provides details on how to authorize each supplemental benefit including provider information, benefit limits, and rates)
- ▶ 6.26 Explanation of Supplemental Benefits _2021 (PDF)
- ▶ CC Supplemental Benefit QA Cheat Sheet 2021 (PDF)

SECUREBLUE MSHO ENROLLMENT RESOURCES

For members interested in enrolling into SecureBlue MSHO:

Please email the Care Coordinator SecureBlue Referral Form (DOC) to the Stacy.Rogers@bluecrossmn.com.

Care Coordinators may print and give these DHS/CMS approved re

- ▶ [MSHO and MSC+ Comparison Flier \(PDF\)](#)
- ▶ [2021 SecureBlue Brochure \(PDF\)](#)
- ▶ [2021 SecureBlue Benefit Highlights Brochure \(PDF\)](#)
- ▶ [2021 SecureBlue Benefit Highlights_NHOnly 1-1-2021 \(PDF\)](#)
- ▶ [2021 SecureBlue Summary of Benefits \(PDF\)](#)
- ▶ [Managed Care Guide to Health Plan Enrollment for Seniors: DHS-6892](#)
- ▶ [SecureBlue Pre-enrollment Checklist \(PDF\)](#)

CARE COORDINATION WEBSITE



Communication tab:

- Newsletters
- Communiqués

A screenshot of the BlueCross BlueShield Minnesota website's Communication tab. The page features the company logo at the top left, a navigation menu with "Communication" highlighted in a red box, and a main content area with the heading "COMMUNICATION". Below the heading, there is a sub-heading "MnCHOICES" and a list of links for newsletters and 2021 communiqués.

BlueCross BlueShield Minnesota

Care Coordination | MSHO | **Communication** | Training | Resources | Bridgeview | MnCHOICES

Communication

COMMUNICATION

Get updates on happenings within Blue Plus including updates to contract requirements, pharmacy initiatives, health

MnCHOICES

For MnCHOICES specific communications, see the [MnCHOICES](#) page.

Blue Plus Care Coordination Quarterly Newsletters

- ▶ [Q1 Newsletter 2021 \(PDF\)](#)
- ▶ [Q2 Newsletter \(PDF\)](#)

2021 Communiqués

- ▶ [8-27-21 Communique for Blue Plus Revised MnCHOICES Onboarding Spreadsheet \(DOCX\)](#)
- ▶ [8-19-2021-Communique-MSHO-Supplemental-Benefits-Updates \(DOCX\)](#)
- ▶ [08-10-2021 Communique- Member Moments \(DOCX\)](#)

CARE COORDINATION WEBSITE



Training tab:

- Model of Care
- Blue Plus hosted webinars
- And more!



Care Coordination | MSHO | Communication | **Training** | Resources | Bridgeview | MnCHOICES

Training

TRAINING

Welcome to the Blue Plus Academy!

Care Coordinators can find a variety of trainings on this page including trainings from our vendors and from the Partner Relations Team.

FireSide Chat with Rosemond Owens: 8/11/2021

▶ Recorded Webinar

Partnership with Blue Plus Case Management: 6/29/2021

▶ Recorded webinar

▶ Partnership with Blue Plus Case Management Training- JUNE 29th 2021 (PDF)

▶ Q&A- Partnership with BP CM Webinar (DOCX)

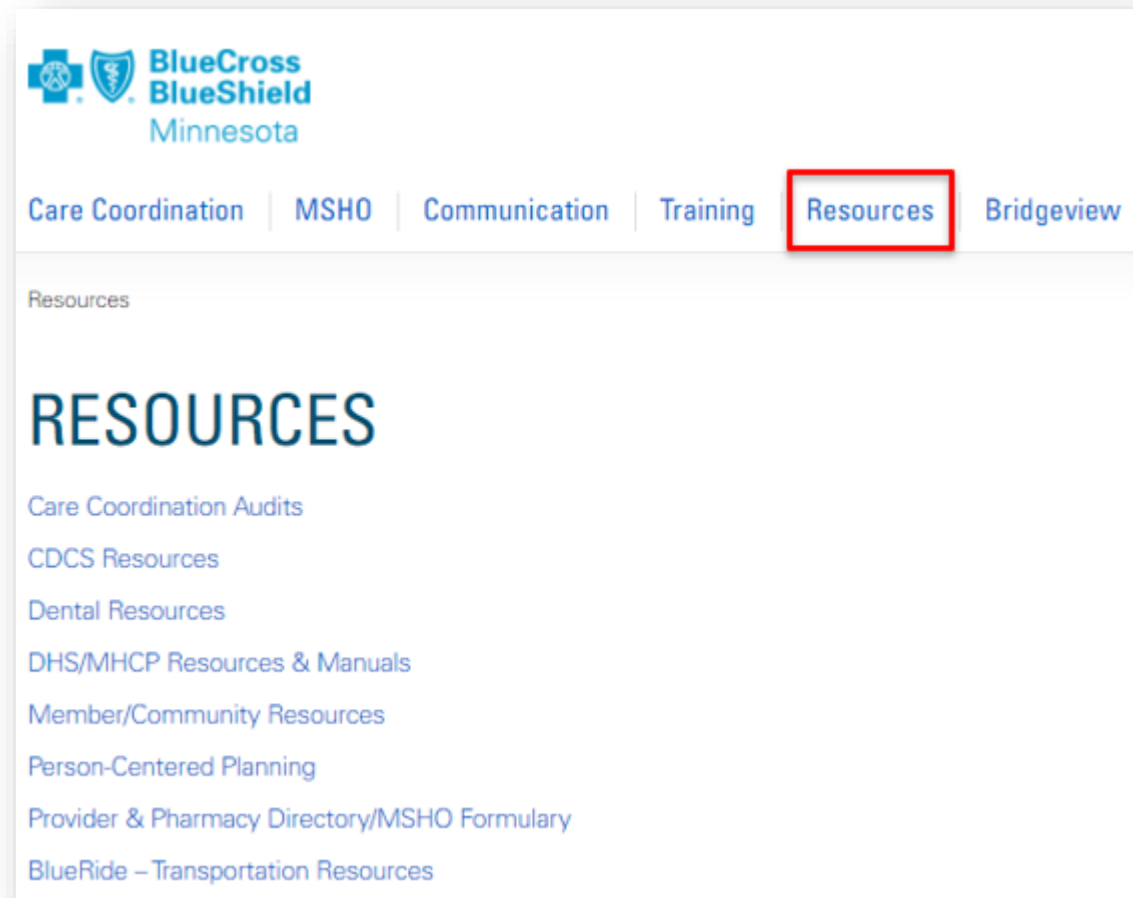
SecureBlue MSHO Enrollment Training: 2/2/2021

▶ Recording (19 minutes)

▶ SB MSHO Enrollment Webinar FAQ (PDF)

CARE COORDINATION WEBSITE

Resources page:



The screenshot shows the BlueCross BlueShield Minnesota website. At the top left is the logo. A navigation bar contains links for Care Coordination, MSHO, Communication, Training, Resources (highlighted with a red box), and Bridgeview. Below the navigation bar, the word "Resources" is displayed in a smaller font. The main heading "RESOURCES" is in large, bold, blue letters. Below this heading is a list of resource categories: Care Coordination Audits, CDCS Resources, Dental Resources, DHS/MHCP Resources & Manuals, Member/Community Resources, Person-Centered Planning, Provider & Pharmacy Directory/MSHO Formulary, and BlueRide – Transportation Resources.

CARE COORDINATION WEBSITE

Bridgeview tab:



 BlueCross
BlueShield
Minnesota

Care Coordination | MSHO | Communication | Training | Resources | **Bridgeview** | MnCHOICES

Complete the Bridgeview Web Tool User Login ID Request form to request access to Bridgeview:
[Bridgeview Care Coordinator Web Tool Access Request Form \(PDF\)](#)

Bridgeview Manual for Care Coordination staff:

- ▶ [Bridgeview-Care-Coordination-User-Guide 5-19-2021 \(PDF\)](#)

Member360 Manual

- ▶ [Member360 Manual 6.19.2020 \(PDF\)](#)

Elderly Waiver Services Specialized Supplies and Equipment (T2029) Eligibility Coverage Guide:

- ▶ [T2029 Guide for Care Coordinators 07.30.2021 \(PDF\)](#)
- ▶ [DME Payor Determination Checklist 1-15-2021 \(DOCX\)](#)

CARE COORDINATION WEBSITE



MnCHOICES tab:

- News
- Communications
- Mentor info/list
- Training links

MNCHOICES

MnCHOICES News

- ▶ **Launch update 8/10/2021:** We received clarification regarding the MnCHOICES Revision Launch scheduled for November 2021.
- ▶ Delegates must review the MnCHOICES Revision information. Windows Presentation Foundation

BlueCross BlueShield Minnesota

Care Coordination | MSHO | Communication | Training | Resources | Bridgeview | **MnCHOICES**

MnCHOICES Communications

MnCHOICES Launch (November 2021)

- ▶ 8-27-21 Communique for Blue Plus Revised MnCHOICES Onboarding Spreadsheet (DOCX)
- ▶ 8-09-2021 Communique MnCHOICES Launch -Care Coordination Training Updates (DOCX)
- ▶ 1.15.2021 Communication MnCHOICES Launch Preparation (PDF)
- ▶ Blue-Plus-MnCHOICES-Certified-Assessor-Tool (XLSX)
- ▶ MCO_MnCHOICES_Memo_12.18.20 (PDF)

BCBS OF MN HIGHLIGHTS

RACIAL AND HEALTH EQUITY



<https://www.bluecrossmn.com/about-us/corporate-social-responsibility/health-equity>

Visit our website to learn about how BCBS of MN is making race and health equity a huge priority within our organization and our communities.

RACIAL AND HEALTH EQUITY



As an organization:

- We are deepening our commitment to hearing from communities of color through a partnership with Marnita's Table.
- For our Medicaid members, we are working to reduce barriers to care by increasing access to immunizations and well care visits, improving maternal health, eliminating barriers to transportation, and increasing access to mental health care and dental services.
- We became the first Minnesota health plan to create a gender services consultant position, committed to supporting inclusive and equitable care and service to transgender and non-binary members.
- In the last three years alone, the Center for Prevention has provided more than \$27 million in funding across the state, and the Blue Cross and Blue Shield of Minnesota Foundation has granted nearly \$14 million to support Minnesota communities.
- Provided \$5M in funding to the U of M to create the Center for Antiracism Research for Health Equity
- Early in the pandemic, we saw the disproportionate impacts of COVID-19 on marginalized communities. In response the Blue Cross Foundation contributed more than \$1 million to support those most impacted by the virus and to fund an anti-racism campaign to confront violence and discrimination toward Asian Americans.

LEARNING & RESOURCES

- Videos
- Book recommendations
- Articles



WHITE PRIVILEGE

White privilege refers to the unquestioned and unearned set of advantages, entitlements, benefits and choices that people have simply because they are white. Click below to watch the video, read more and reflect.

LEARN MORE



STRUCTURAL RACISM

Structural Racism is a system that gives white people advantages over Black, Indigenous, and People of Color – like better access to education, wealth and health care. Click below to watch the video, read more and reflect.

LEARN MORE



MICROAGGRESSIONS

Microaggressions are things we say or do – even if we don't mean to – that send negative and hurtful messages to people because of race, gender, class or other factors. Click below to watch the video, read more and reflect.

LEARN MORE



BLACK LIVES MATTER

Black Lives Matter is a movement to bring justice, healing, and freedom to Black people across the globe by addressing systemic racism and violence against Black people. Click below to watch the video, read more and reflect.

LEARN MORE



RACE AND RACISM

Race is a powerful idea. It has been created over time to support beliefs that view some groups of people as superior and some as inferior. Click below to watch the video, read more and reflect.

LEARN MORE



IMPLICIT BIAS

We use the term "implicit bias" to describe when we have attitudes toward people, or associate stereotypes with them, without our conscious knowledge. Click below to watch the video, read more and reflect.

LEARN MORE

<https://www.bluecrossmn.com/about-us/corporate-social-responsibility/health-equity/antiracist-video-resources>

BCBS BLOG



Visit our blog to learn more about:

- BCBS response to COVID-19 pandemic
- BCBS Social Impact: 2020 Report to the Community
- Insights from BCBS of MN new VP of Racial and Health Equity
- “The State We’re In” podcast episodes which explores themes related to health, health equity and community.



<https://blog.bluecrossmn.com/>

BCBS FOUNDATION



- Mission: We make a healthy difference in communities by advancing health equity and improving the conditions where people live, learn, work and play.
- Established in 1986, communities across MN inform the mission and grantmaking.
- In 2021, the foundation has awarded more than \$3.2M to 27 nonprofits such as:

The following organizations were selected to receive Healthy Start grants:

- Alliance of Early Childhood Professionals, Minneapolis
- Close Gaps by 5, Minneapolis
- Fond du Lac Tribal College, Cloquet
- Northfield Healthy Community Initiative, Northfield
- Somali Community Resettlement Services, Faribault
- Way to Grow, Minneapolis
- West Central Initiative, Fergus Falls
- Wildflower Foundation, Minneapolis
- YWCA, Minneapolis

The following organizations were selected to receive Healthy Connections grants:

- Casa de Esperanza, St. Paul
- Centro de Trabajadores Unidos en Lucha (CTUL), Minneapolis
- Centro Tyrone Guzman, Minneapolis
- Coalition of Asian American Leaders (CAAL), St. Paul
- Hispanic Outreach Program of Goodhue County, Red Wing
- Hope Community, Minneapolis
- Jewish Community Action, St. Paul
- Liberty Community Church, Minneapolis
- Men As Peacemakers, Duluth
- Navigate, Minneapolis
- OutFront Minnesota, Minneapolis
- Project FINE, Winona
- Reviving the Islamic Sisterhood for Empowerment (RISE), Minneapolis
- SEWA-AIFW, Minneapolis
- Southern Minnesota Regional Legal Services, St. Paul
- St. Paul Youth Services, St. Paul
- United Way of the Brown County Area, New Ulm
- West Bank Community Development Corp. Inc., Minneapolis



<https://www.bluecrossmnfoundation.org/>

BCBS CENTER FOR PREVENTION



- Who We Are: We tackle the leading cases of preventable disease – commercial tobacco use, physical inactivity and unhealthy eating – to increase health equity, transform communities, and create a healthier state.
- Some current initiatives include:
 - Freedom to Breathe: successfully advocated to pass the Freedom to Breathe amendment to the MN Clean Air Act in 2007.
 - Nice Ride Minnesota: the first bike-sharing program in the state.
 - Farm To School: connecting kids and farmers to encourage health eating among MN students.
 - Check out the website for more!



<https://www.centerforpreventionmn.com/>

FALL TRAINING ATTENDANCE SHEETS

- Please return your signed attendance sheets via email to me after of this training. This can be electronic signatures.
- For staff not in attendance today, they are required to review the slides and complete & return an attendance sheet. Date of review must be included.

Thank you for your time today and for all you do for our members!



QUESTIONS?

THANK YOU.

Government Markets Partner Relations
Partner.Relations@bluecrossmn.com

APPENDIX

PRESCRIPTION DRUG FORM



- Updated *Request for Reimbursement* form will be released 01/2022
- More user-friendly form
- May submit bill/invoice in place of receipt

Prime Therapeutics
Medicare Part D Drug Claim Form
Please complete each section of this form.

Questions about completing this form?
Call 1-888-877-6424 TTY: 711
24 hours a day, 7 days a week

Mail your completed claim form(s) and original, detailed pharmacy receipts to:
SecureBlueSM (HMO SNP)
P.O. Box 20970
Lehigh Valley, PA 18002-0970

MEMBER INFORMATION

First name	_____
Last name	_____
Date of birth	___ / ___ / ___
Identification #	_____
Phone #	_____
Street Address	_____
City	_____
State	_____ Zip _____

◀ Your identification (ID) number is listed on your member ID card.

PHARMACY/CLINIC/HOSPITAL INFORMATION

Name	_____
Phone #	_____
Federal Tax ID	_____
Street Address	_____
City	_____
State	_____ Zip _____

◀ The Federal Taxpayer Identification Number is a nine-digit number assigned to your pharmacy, clinic, or hospital that provided your drug.

OTHER HEALTH INSURANCE INFORMATION

If you have other pharmacy benefit insurance (i.e., auto) that covers this drug, please send copies of:

1. Both sides of your other health insurance card.
2. The Explanation of Benefits (EOB) page that shows the amount paid, or the reason why coverage was denied.

SELF ADMINISTRATION OF MEDS/VACCINES



Request for Reimbursement

- To locate the form for a member to request a reimbursement, follow the instructions below:
- Requests for reimbursement must be in writing, and they cannot be reviewed on an expedited basis.
- Find the Medicare Part D Prescription Drug Claim Form on myPrime.com:
 - 1. Access myprime.com.
 - 2. From the menu at the top of the page, click **Forms**.
 - 3. Click **Continue without sign in**
 - 4. For **What is your health plan or employer?** Select BCBS Minnesota
 - 5. For **Are you a Medicare Part D member, shopping for a Medicare plan with prescription drug coverage, or a Retirement Benefit Enrollee?** Select Yes
 - 6. For **Select a Plan Year** (if this shows up- as it will towards end of year), select plan year you are looking for.
 - 7. For **What is your health plan type?** Select SecureBlueSM (HMO SNP)
 - 8. Click **Continue**
 - 9. Click **Medicare Prescription Drug Claim Form** (complete form and submit for reimbursement)

WHAT DOES MEDICARE COVER?



What are the parts of Medicare?

The different parts of Medicare help cover specific services:

- **Medicare Part A (Hospital Insurance)**

Part A covers inpatient hospital stays, care in a skilled nursing facility, hospice care, and some home health care.

- **Medicare Part B (Medical Insurance)**

Part B covers certain doctors' services, outpatient care, medical supplies, and preventive services.

- **Medicare Part D (prescription drug coverage)**

Helps cover the cost of prescription drugs (including many recommended shots or vaccines).