

2025 SECUREBLUE MSHO SUPPLEMENTAL BENEFITS

Blue Plus Care Coordinator Training

Jan 8, 2025

WELCOME

- Contact partner.relations@bluecrossmn.com if you have any connection issues
- Webinar is recorded and will be posted to the Care Coordination website
- Questions:
 - Submit questions in the chat
 - Questions will be addressed as time allows
 - All questions and responses will be sent out after the training

WELCOME

Slides are posted on the Blue Plus Care Coordination Training Page

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

- MSHO Supplemental Benefits
- 1-8-2025 MSHO Supplemental Benefits Training

Today's Focus:

SecureBlue MSHO supplemental benefits

As a care coordinator, you can help members learn about, understand and access their SecureBlue benefits **each year**

SUPPLEMENTAL BENEFITS BACKGROUND

- ✓ Extra benefits approved by CMS (in addition to what's covered under the member's Medicare and Medicaid benefits)
- ✓ Benefits are approved on an annual basis, change from year to year
- ✓ Supplemental benefits are for MSHO members only
- ✓ No supplemental benefits require a Service Agreement in Bridgeview
- ✓ Some supplemental benefits require care coordinator referral, authorization or approval
- ✓ Some supplemental benefit providers receive an 'eligible member file' from BCBS and do direct outreach to members
- ✓ Some offered to only those with chronic conditions

RESOURCES

Visit the SecureBlue MSHO Supplemental Benefits webpage for all information related to SecureBlue MSHO supplemental benefits.

CARE COORDINATOR RESOURCES

The SecureBlue MSHO Supplemental Benefit Catalog document includes benefit information in one document. Use this document to find all benefit forms and resources.

- ▶ [2025 SecureBlue MSHO Supplemental Benefits Catalog 12-13-24 \(PDF\)](#)

The SecureBlue MSHO Supplemental Benefits Grid is an at-a-glance resource for Care Coordinators to view all benefits categorized by type of benefit and eligibility.

- ▶ [2025 SecureBlue MSHO-Supplemental-Benefits-Grid 11-25-24 \(PDF\)](#)

The Explanation of Supplemental Benefits resource is a smaller, printable MSHO Supplemental Benefits for Care Coordinators.

- ▶ [2025 Explanation of Supplemental Benefits \(PDF\)](#)

Household Supports Flex Card Benefit for utilities and rent instruction sheet

- ▶ [2025 Household Supports Flex Card Benefit Instruction Sheet_12-12-24 \(PDF\)](#)

\$50 Reward Card for completed CMR instruction sheet

- ▶ [2025 CMR Reward Card Instruction Sheet 12-12-24 \(PDF\)](#)

MEMBER RESOURCES

2025 Explanation of Supplemental Benefits

- Printable resources to review annually with your MSHO members

<https://carecoordination.bluecrossmn.com/wp-content/uploads/2023/12/2024-Explanation-of-Supplemental-Benefits.pdf>

2025 MSHO Benefit Highlights – member approved

<https://carecoordination.bluecrossmn.com/wp-content/uploads/2023/12/M08060.pdf>

- Spanish version available
- Hmong and Somali versions coming soon!

MSHO Enrollment Page (for care coordinators)

<https://carecoordination.bluecrossmn.com/msho/secureblue-msho-enrollment/>

Email: SecureBlue.Referrals@bluecrossmn.com

NEW IN 2025 – PART D BENEFITS



- **\$0 copay for all SecureBlue MSHO members for all Part D medications**
- **\$50 gift card* upon completion of a Comprehensive Medication Review (CMR) with a pharmacist (one per member per year)**

*Based on claims received for a completed CMR. There is no form for members or care coordinators to complete. All MSHO members are eligible to receive a CMR and one gift card (debit card) per year. Cards will be mailed within 1-2 months from the completed CMR. If a member does not receive the debit card within 2 months of their completed CMR, they should contact the Blue Cross MTM team at 1-866-873-5941 or (651) 662-5105 Monday-Friday, 8:30 a.m.-4:30 p.m.

<https://carecoordination.bluecrossmn.com/wp-content/uploads/2024/12/2025-CMR-Reward-Card-Instruction-Sheet-12-12-24.pdf>

COMPREHENSIVE MEDICATION REVIEW (CMR)

- CMR is part of the Medication Therapy Management (MTM) program (see Care Coordination Guidelines or Blue Cross website)

<https://www.bluecrossmn.com/understanding-health-insurance/prescription-drugs/medication-therapy-management-mtm>

Any MSHO member can elect to have their medications reviewed by a pharmacist (community pharmacist or Blue Cross pharmacist)

- The purpose of a medication review is to make sure you have the best information about your medication choices.
- The pharmacist will review the member's medications and medication experience to assess, resolve, and prevent any medication related problems.
- The member will get a summary of their visit, including a list of medications and any recommended changes that were discussed.
- If requested, the pharmacist can follow up with the member's doctor about any changes that were discussed.

COMPREHENSIVE MEDICATION REVIEW (CMR)

For questions or to schedule a CMR appointment:

Call **1-866-873-5941** or **(651) 662-5105** Monday-Friday, 8:30 a.m.-4:30 p.m.

Email: mtm.pharmacy@bluecrossmn.com

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

[Referral form](#)

MEDICATION THERAPY MANAGEMENT (MTM) REFERRAL FORM

Please email this completed form to: MTM.Pharmacy@bluecrossmn.com
Complete the sections that are applicable.

Subject line: SECURE MTM Referral

Care Coordinator Name or Referring Provider:
Care Coordinator Delegate Agency:
Care Coordinator Email: Care Coordinator Phone:
Member Name: Date of Birth:
Member Phone: PCP Phone:
Primary Care Provider (PCP):
Who will be completing the visit with the pharmacist?
If not the member, provide alternate name/phone:

Minimum requirements: Adult members (age 18 and older and not on hospice) who agree to complete a Complete Medication Review during the call (this includes review of all RX, all OTC, diagnosis and background information).

2025 SECUREBLUE MSHO SUPPLEMENTAL BENEFITS

2025 SUPPLEMENTAL BENEFITS

- Transportation services to:
 - SilverSneakers fitness locations
 - AA/NA meetings
 - Juniper health education classes
 - Grocery store (up to 6 round-trip rides per month)⁺
- Additional podiatry services
- Additional dental services
- Electric toothbrush and replacement heads
- \$750.00 for safety items in the home
- Home-delivered meals for 2 weeks following a hospitalization
- Post-discharge Healthy Transitions (up to 3 visits from a Community Health Worker following a hospitalization)
- Animatronic pet (cat, dog and bird option)⁺
- Caregiver Empowerment Program⁺
- Personal Emergency Response System^{*}
- 12 weeks of chronic condition meals, food boxes and nutrition education⁺
- Music Therapy^{**}
- Medication dispenser and reminders^{*}
- Juniper health and wellness classes
- SilverSneakers[®] fitness benefit
- OTC benefit \$150/quarter
- Household Supports \$260/quarter for utilities and rent^{**}
- Friendly Helper
- Caregiver Emergency Care Planning⁺
- Blood Pressure monitoring service⁺
- Eyeglass upgrades

^{*}Restrictions or conditions apply. ⁺Member must have an eligible chronic condition

NEW / CHANGES IN 2025

Benefit	2024	2025
Activity tracker	You get one activity tracker each year.	Activity trackers are not covered.
Dental services	One root canal any molar, one root canal retreat and one additional full mouth x-ray (once every 5 years) are covered as supplemental benefits.	Medically necessary dental services (services recommended by the dentist) are available as part of your standard dental benefit.
Disposable face masks	You get one box of disposable face masks each year.	Disposable face masks are available within the over-the-counter items allowance.
Friendly helper	You get up to sixty hours per year of in-person and virtual Friendly Helper services.	You get up to forty-eight hours per year of in-person and virtual Friendly Helper services.
Incontinence package	You get six washable/reusable pads per year for incontinence.	Washable/reusable pads for incontinence are not covered as a supplemental benefit.

NEW / CHANGES IN 2025

Benefit	2024	2025
Medication dispenser and reminders	You get a medication dispenser with reminders to help you safely manage medications.	You get a medication dispenser with reminders to help you safely manage medications. Members cannot be covered by a Home and Community-Based Services waiver.
Personal Emergency Response System (PERS)	You get an in-home or mobile Personal Emergency Response System to let you call for help in an emergency.	You get an in-home or mobile Personal Emergency Response System to let you call for help in an emergency. Members cannot be covered by a Home and Community-Based Services waiver.

<https://carecoordination.bluecrossmn.com/wp-content/uploads/2024/11/2025-MSHO-Medication-Dispenser-PERS-member-review-process-11-19-24.pdf>

NEW / CHANGES IN 2025

Benefit	2024	2025
Post-discharge services	<p>Home delivered meals You get up to two home-delivered meals per day, for a period not to exceed four weeks following an inpatient hospital or nursing home stay.</p> <p>Healthy transitions visits You get up to four visits from a certified community health worker during the first 30 days after a hospital or short term skilled nursing facility stay.</p>	<p>Home delivered meals You get up to two home-delivered meals per day, for a period not to exceed two weeks following an inpatient hospital or nursing home stay.</p> <p>Healthy transitions visits You get up to three visits from a certified community health worker during the first 30 days after a hospital or short term skilled nursing facility stay.</p>
Safety item	You get one plan selected wheelchair or walker safety item per year to safely transport necessary items.	Wheelchair or walker safety item is not covered as a supplemental benefit.

NEW / CHANGES IN 2025

Benefit	2024	2025
<p>Special supplemental benefits for the chronically ill (chronic condition meals, food and nutrition education)</p>	<p>Eligibility for chronic condition meals, food and nutrition education includes members who live in a community setting and have one of the following diagnoses:</p> <ul style="list-style-type: none"> Cancer COPD Chronic Heart Failure Coronary Artery Disease Diabetes End-Stage Renal Disease HIV/AIDS Peripheral Vascular Disease Rheumatoid Arthritis Stroke 	<p>Eligibility for chronic condition meals, food and nutrition education includes members who live in a community setting and have one of the following diagnoses:</p> <ul style="list-style-type: none"> COPD Diabetes Hypertension

NEW / CHANGES IN 2025

Benefit	2024	2025
<p>Special supplemental benefits for the chronically ill (household supports for rent and utilities)</p>	<p>You have an allowance of \$120 per month for rent and approved utilities. Unused benefits do not roll over to next month.</p> <p>Household Supports debit card is provided by CVS Over-the-Counter Health Solutions.</p> <p>Eligibility for Household Supports includes members who live in a community setting and have one of the following diagnoses:</p> <ul style="list-style-type: none"> Cancer COPD Chronic Heart Failure Coronary Artery Disease Diabetes Eng-Stage Renal Disease HIV/AIDS Peripheral Vascular Disease Rheumatoid Arthritis Stroke 	<p>You have an allowance of \$260 per quarter for rent and approved utilities. Unused benefits do not roll over to next quarter.</p> <p>Household Supports debit card is now myFlexCard. Eligible members will receive a myFlexCard debit card in the mail.</p> <p>Eligibility for Household Supports includes members who live in a community setting and have one of the following diagnoses:</p> <ul style="list-style-type: none"> COPD Diabetes Hypertension

2025 SUPPLEMENTAL BENEFITS

- **Podiatry** up to 12 visits per calendar year additional podiatry services not already covered by Medicare or Medicaid
- **Eyeglass Upgrades** on 2 lenses per year (each benefit)
 - anti-glare lens coating
 - photochromatic (transition) lens tinting
 - progressive (no-line) lenses
- **Dental services** in addition to what Medicaid covers:
 - 1 additional preventive exam
 - 2 dental crowns
 - 1 electric toothbrush and 3 replacement heads per year. Care Coordinator referral to Corner Home Medical required.

2025 SUPPLEMENTAL BENEFITS

- **Fitness program (SilverSneakers®)**

Full fitness facility membership and class access to a broad network of participating fitness clubs and exercise centers. Members can also access online education on SilverSneakers.com, participate in SilverSneakers Live virtual classes, get workout videos on SilverSneakers On-Demand, or download the SilverSneakers GO fitness app for more workout ideas.

Members may take BlueRide to fitness locations.

- **\$750.00 In-home Safety Items** (grab bars, handrails, etc)

Available to MSHO members in the community only. Must use an in-network provider. Care Coordinator referral required.

2025 SUPPLEMENTAL BENEFITS

- **Transportation services (BlueRide)**

In addition to the medical/dental rides, members can use BlueRide for trips to:

- SilverSneakers participating fitness locations (one ride per day)
- Narcotics Anonymous/Alcoholics Anonymous (one ride per day)
- Juniper Health and Wellness class locations (one ride per day)

- **Grocery Store Transportation (BlueRide)**

Six round trips per month to the grocery store. Maximum 45 miles one-way. Shopping time is 1 hour.

Limited to members who have an identified chronic condition and live in the community (not in a facility).

2025 SUPPLEMENTAL BENEFITS

- **Health and Wellness classes (Juniper)**

Access to free, evidence-based classes on falls prevention, chronic disease and pain management. Classes are designed for older adults and led by certified instructors/coaches provide education, skills, and strategies to prevent falls and promote self-management of chronic conditions including diabetes and chronic pain. Some classes available online or telephonically.

Includes transportation via BlueRide - max one round trip ride per day. Care Coordinator can complete a referral or member can contact Juniper directly.

2025 SUPPLEMENTAL BENEFITS

- **OTC benefit (CVS OTC Health Solutions)**

\$150 per quarter to purchase select over-the-counter health and wellbeing items from a CVS catalog. Member can order by phone or online and have eligible items delivered to their home or shop for eligible items in CVS stores. Unused benefits do not roll over to next quarter.

Reminder: many OTC items are covered under the member's Medicaid benefit. The member can ask the pharmacist for a prescription.

Community members will be getting 2025 catalogs in January. Catalogs can be found online or ordered from CVS.

2025 SUPPLEMENTAL BENEFITS

Household Supports (myFlexCard)

Members will receive a pre-loaded, reusable Mastercard debit card with an allowance of **\$260/quarter** to pay for utilities and rent.

- Benefits do not rollover to the next quarter
- Limited to members who have COPD, diabetes or hypertension and live in the community (not in a nursing facility) **(based on claims to Blue Plus)**
- Discard previous CVS household supports card. Members received a letter in December explaining this change.
- Visit myFlexCardMN.com, call 1-844-451-1164, TTY 711, or use the myTotal Benefits app

Members can activate their card, check balances, see transactions, order replacement cards. Members can call myFlexCard with any questions. **Cards will be mailed in January 2025.**

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El Paso, TX 79998 – 2819

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Mail Processing
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El Paso, TX 79998 – 2819



<< Member Name >>
<< Address >>
<< City, State, Zip >>

IMPORTANT BENEFIT INFORMATION

Your myFlexCard has arrived!

As part of your Blue Cross and Blue Shield of Minnesota and Blue Plus plan, you're eligible for a quarterly¹ Household Support allowance to apply towards utilities and rent.

For more information, see the back side of this letter. You can also visit myFlexCardMN.com or call 1-844-451-1164, TTY 711.

Activate your card on or after
your coverage begins.

TO ACTIVATE CARD:

Log in to
myFlexCardMN.com

or call the card activation line at
1-844-210-2175, TTY 711

Utilities and Rent Allowance

You qualify for Household Support for up to \$1,040/year to spend on utilities and rent. At the beginning of each quarter, \$260 will be loaded onto your reloadable myFlexCard. Funds expire at the end of the quarter¹ and do not carry over to the next quarter.

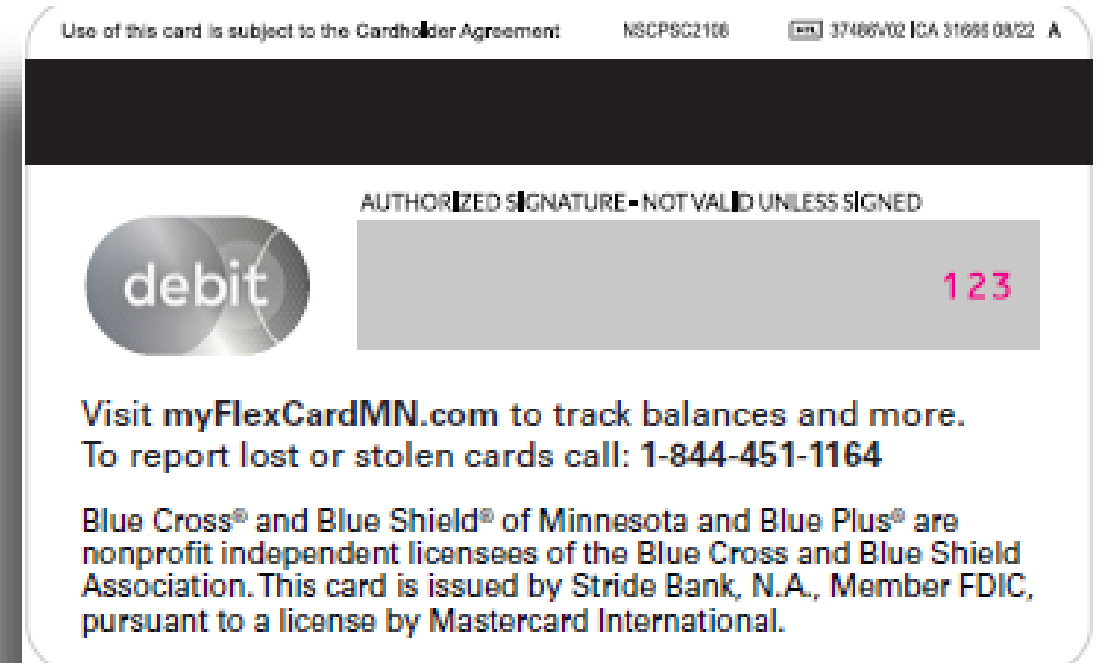
To make Utility and Rent payments using your myFlexCard, all you need to do is:

- Activate your card before first time use.
- Call your utilities and/or rent provider and use your myFlexCard as your form of payment. Or, enter your myFlexCard number on your paper bill or online.
- If you don't have enough funds on your myFlexCard to cover the cost of a payment, contact your utility provider or landlord to submit an additional payment option to cover the difference owed. And if you have problems paying with your card, let us know by calling us at **1-844-451-1164, TTY 711.**

Utilities are the basic services for your home or apartment, like water, electric and gas, including sanitation, cable, telephone, and internet.

Eligibility for this benefit cannot be guaranteed based solely on your condition. All applicable eligibility requirements must be met before the benefit is provided. Members must have one or more of the following chronic conditions: COPD, diabetes or hypertension.

Don't throw away this card. It's reloadable and reusable.



HOUSEHOLD SUPPORTS

To make Utility and Rent payments using your myFlexCard:

1. Activate your card before first time use (online, by phone or on the app)
2. Call your utilities and/or rent provider and use your myFlexCard as your form of payment. Or, enter your myFlexCard number on your paper bill or online.
 - Approved expenses include: rent, electric, gas, water, sanitary, cable, satellite, streaming services, phone and internet
 - Utility company and landlord must take Mastercard and have an approved Merchant Category Code (MCC) – work with myFlexCard if company doesn't have an approved MCC
3. If you don't have enough funds on your myFlexCard to cover the cost of a payment, contact your utility provider or landlord to submit an additional payment option to cover the difference owed.

HOUSEHOLD SUPPORTS

How do I use myFlexCard? The myFlexCard acts like any other debit or credit card. To pay your bill, provide the myFlexcard number and any other requested information to the landlord or utility provider who accepts Mastercard.

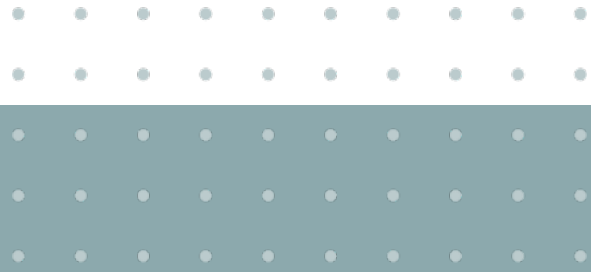
Do I have to spread the allowance out over the whole quarter, or can I use the full amount for that quarter to cover one month's bills? You can spend your benefit on rent or utilities however you wish during the quarter. You may use your full amount in one month or spread it out over the quarter.

Can I add my own dollars to my myFlexCard? No. The myFlexCard is considered a restricted-use reloadable card. You cannot add your own dollars.

What do I do if my landlord or utility company doesn't accept myFlexCard as payment? If your card is declined or your landlord or utility provider says they cannot take the card, please call the myFlexCard Member Service line at 1-844-451-1164, TTY 711 and select option 4 for assistance.

What do I do if my card is declined? If your card is declined, please call the myFlexCard Member Service line at 1-844-451-1164, TTY 711 and select option 4 for assistance.

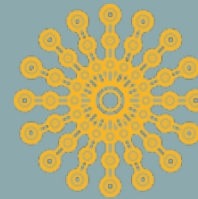
https://carecoordination.bluecrossmn.com/wp-content/uploads/2024/12/2025-Household-Supports-Flex-Card-Benefit-Instruction-Sheet_12-12-24.pdf



MUSIC THERAPY SECUREBLUE



MSHO Supplemental Benefit



Alliance Music Therapy

Your ally through music

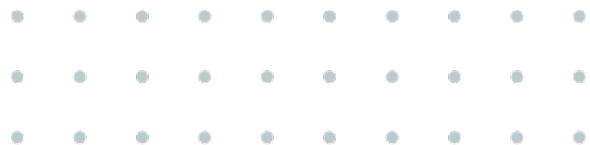


01. **MUSIC THERAPY REFERRALS**
Who meets the candidate criteria?

02. **COMMUNICATION**
Communication, contacts, and referrals

03. **DATA + TESTIMONIALS**
We appreciate you!

AGENDA



Music Therapy Referral Criteria

- Individual/s...
 - diagnosed with **Alzheimer's Disease or Dementia**
 - at a high risk for **isolation**
 - who demonstrate signs of **depression or low mood**
 - who may require additional **mental health support**
- Living Arrangement
 - Skilled Nursing
 - Customized Living
 - Adult Foster Care



COMMUNICATION

Care Coordinator

Submit Referral Form

Please use our new form to submit all referrals

Referral Link

<https://www.alliancemusictherapy.com/bcbsreferralform>

Password

musictherapy25

Contact Facility

Confirm

Notify

COMMUNICATION

Care Coordinator

Submit Referral Form

Please use our new form to submit all referrals

Referral Link

<https://www.alliancemusictherapy.com/bcbsreferralform>

Password

musictherapy25

Contact Facility

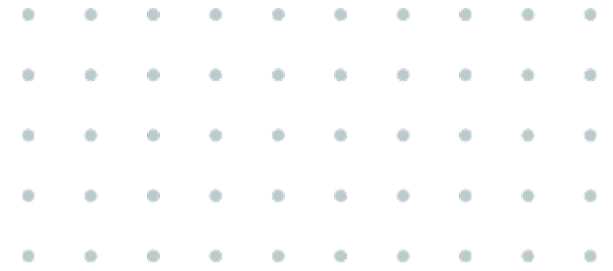
Confirm

- Activities Coordinator, Life Enrichment Director
- Confirm correct email and number for direct contact

Notify

- What to expect
- Virtual sessions (HIPAA Zoom)
- iPad assistance, if needed

DATA

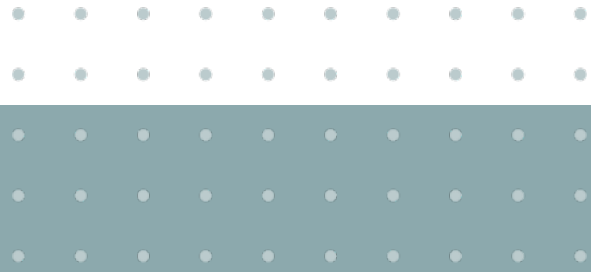


	2021	2022	2023	2024
Benefit Offering (no. sessions per member)	12 sessions / year	26 sessions / year	26 sessions / year	26 sessions / year
No. Members Referred	78	141	213	265
Total Sessions	508	1,525	2,681	3,396 (+)
Locations	Telehealth	Telehealth Some In-person (Twin Cities only)	Telehealth Some In-person (Twin Cities only)	Telehealth Some In-person (Twin Cities only)

TESTIMONIALS



- Every time I asked him how his day is going when I greet him, he says "well it just got a whole lot better!" and smiles really brightly, and at the end of sessions he says to "come back whenever you can!" **I'm so glad he likes music so much and I always look forward to his sessions!**
- The member decided that she wanted to create a new tradition with her family that year of singing Christmas songs together. **I was glad that the music therapy session inspired the member to create new traditions and memories with her family.**
- With similar, but not as familiar music **she was able to remain alert and finish eating her breakfast without falling asleep** and without the hazard of singing!
- It's been super fun to use what he's interested in to talk about and reflect on life, and the lyrics he creates are super encouraging to others and himself. **These songs are something he's proud to share with residents and family too! Wins all around.**



THANK YOU!

Lydia Holmes, MT-BC

Phone: (651) 600-0843

Email: lydia@alliancemusictherapy.com



Ceresti Caregiver Support Program

Improving care and outcomes for SecureBlue members with Alzheimer's Disease or related dementias, stroke, or Parkinson's Disease



For more information contact:

Katelyn Maiden
Account Manager

Katelyn.maiden@ceresti.com
+1 (760) 828-2718

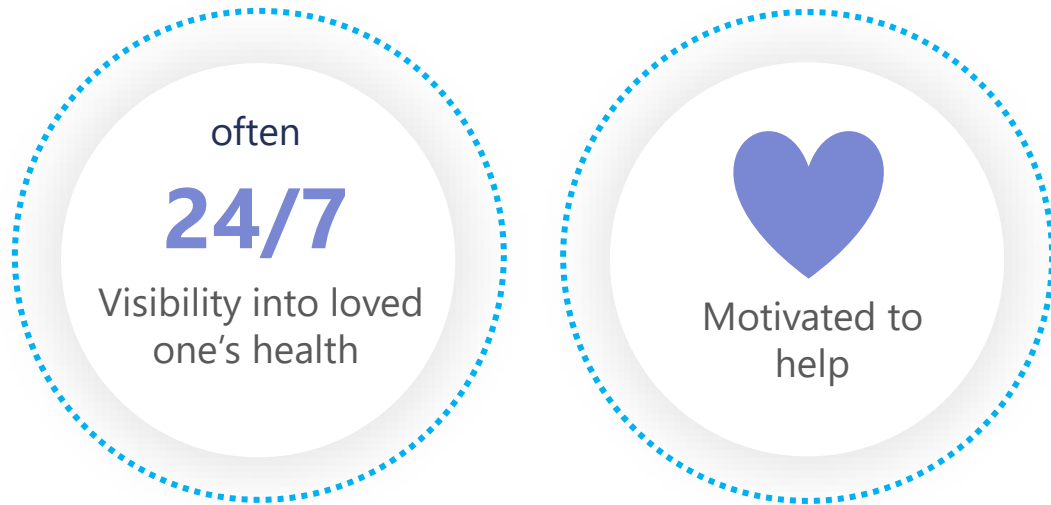
**SecureBlue MSHO
Care Coordinator
Training**



Caregiver-enablement.













Innovative approach to reduce avoidable hospitalizations

Existing unpaid family caregivers are a valuable resource



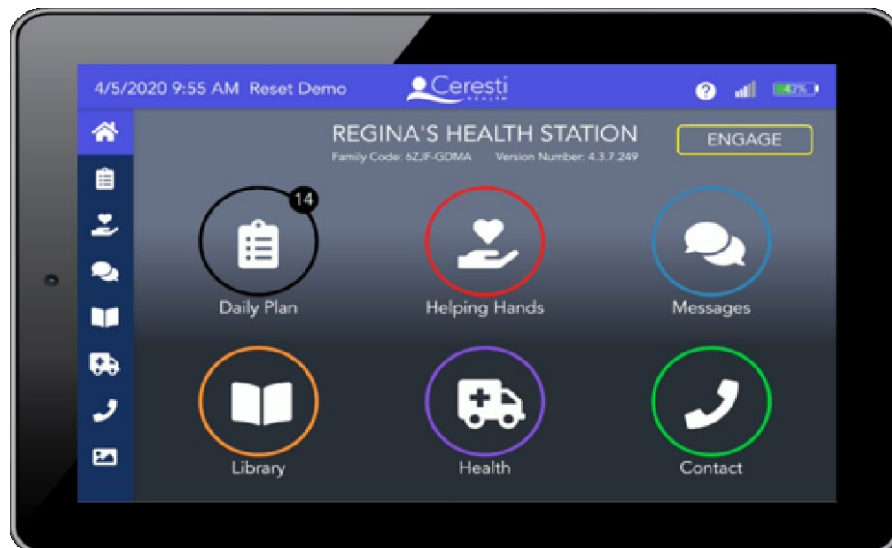
Family caregivers are spouses, adult children, other family members or friends

... able to detect changes condition to avoid member hospitalizations

-  Change in mental status
-  Fever
-  Frequency of urination
-  High (low) blood pressure
-  Loss of appetite
-  Almost fall
-  Weight gain (or loss)
-  Productive cough
-  Lethargy
-  Pain
-  Blood sugar
-  Shortness of breath

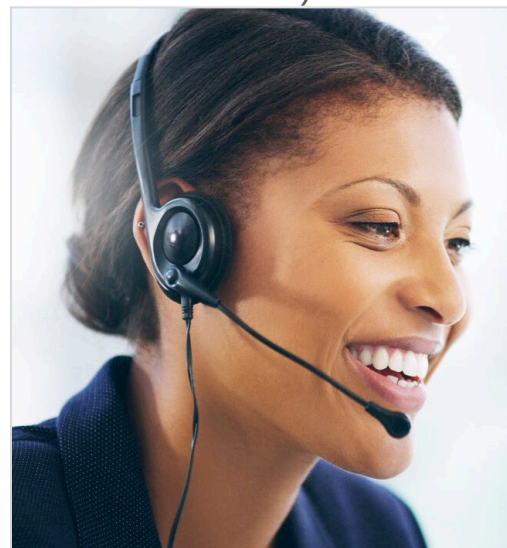
Overview of Ceresti's Benefit

Caregiver Tablet (provided by Ceresti)



cell-enabled, no Wi-Fi required

Care Navigator (Proactive, dedicated coach)



+



- ↑ Knowledge
- ↑ Skills
- ↑ Confidence



Health education & support



Assessments, remote monitoring, alerts



On-demand resources



Peer and family engagement

- Through education and coaching, Ceresti strengthens the **knowledge, skills, confidence and motivation of family caregivers** caring for a SecureBlue member with a target condition
- The Ceresti program is **entirely virtual**; Caregivers can access support from their homes
- Improve caregiver wellness and feelings of support
- Reduce avoidable hospitalizations for members with cognitive impairment

[Program overview video](#)

Eligibility for Ceresti's Services

- Member must be actively enrolled in the SecureBlue health plan and have a caregiver willing to participate in Ceresti's benefit program
- SecureBlue member must have a **target condition**:
 - Alzheimer's Disease or related dementias
 - Stroke
 - Parkinson's Disease
- Caregivers must be able to read, write and speak a **supported language**:
 - English
 - Spanish
- Caregivers are eligible for up to **6-month's** of Ceresti's benefit **per plan year**

Talking points for Care Coordinators to Caregivers

Improve your relationship with your loved one.

Gain access to a huge library of engaging videos to stimulate and bond with your loved one



Learn to manage your loved one's chronic conditions.

Learn how to help your loved one address their medications, weight, nutrition, exercise and other health concerns



Increase your family connectedness.

Invite friends and family to share in this adventure and learn alongside you



Detect problems early and keep your loved one out of the hospital.

Daily Assessments and education will help teach you how to identify signs and symptoms to help avoid preventable hospitalizations



Get support from a dedicated coach.

Build a relationship with your Ceresti Coach, someone to help you along your journey



Become a more confident caregiver.

Gain the knowledge, skills, and confidence you need to care for your loved one



Caregiver voices ...

Testimonials from Ceresti Caregivers

I think this is a god send
....

... it is rubbing off on me. I seem to understand more.

... I don't feel like I am alone, dealing with this disease

I feel so much more supported by this program
....

I dread the day the plug is pulled on my Ceresti program - you're pretty much my whole support system.

... it makes it so much easier to do the right things. Everything makes so much sense ...

I have learned so much ... I am ready to be a better caregiver for my husband.

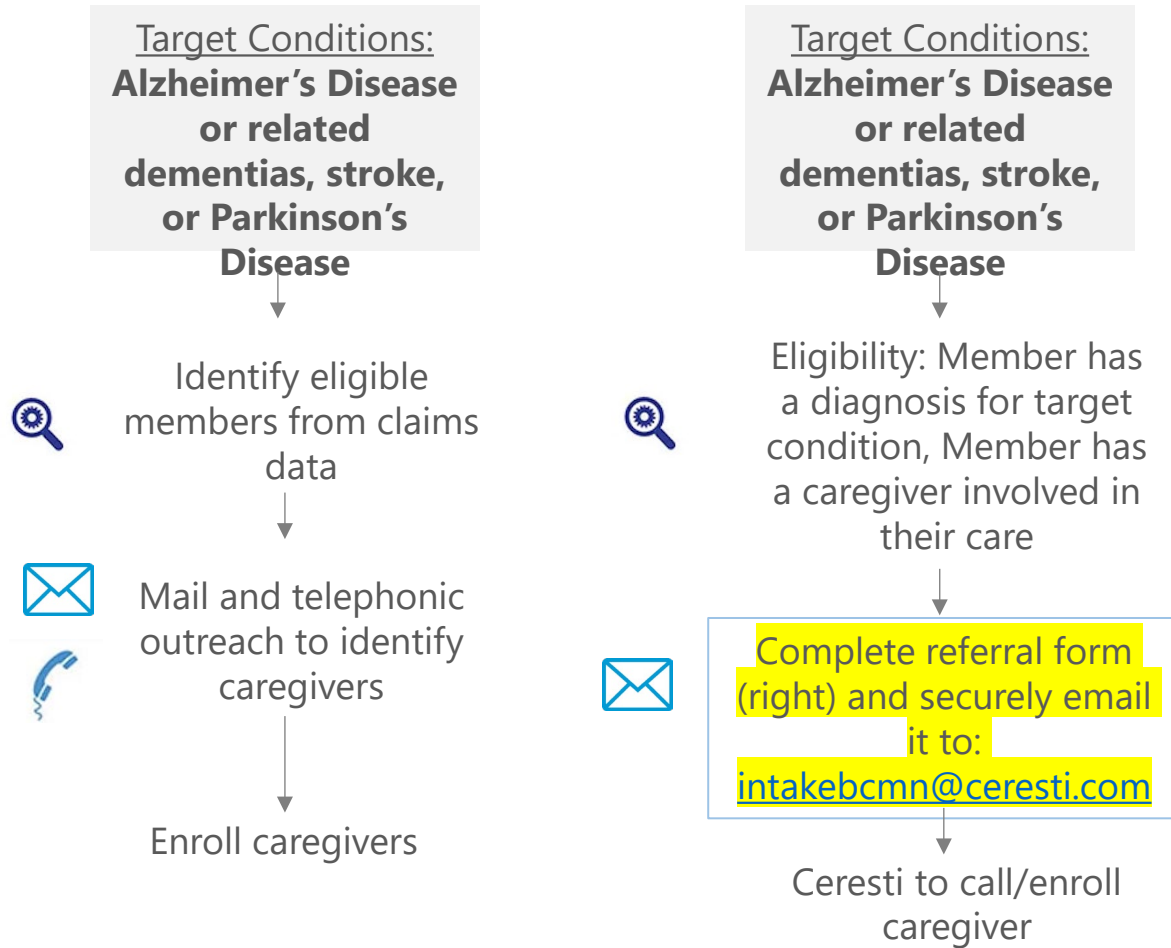
... knowing that you're there and I can contact you at any time ... that really gives me comfort.

... so very convenient to not have to leave the house
...

What I learned from this program I will remember forever.

Enrollment Options

Ceresti Initiated Outreach Care Coordinator Referral



Ceresti Empowerment Program Intake Form

Instructions: Please fill out this form for caregivers who are interested in participating in the Ceresti program. Send the completed forms via secure email to intakebcmn@ceresti.com.

BCBS Delegate Organization:

Care Coordinator Name: Care Coordinator Email:

Member Name: Member Date of Birth:

Member Residence (check one): Home Assisted Living Memory Care Skilled Nursing Other:

MA ID:

Is Member their own decision maker? (check one): No Yes If yes, Ceresti has permission to contact Proxy?:

Caregiver Name: Relationship to Member:

Caregiver Phone Number: Caregiver Address:

Is Caregiver Proxy? (check one): Yes No (If not, Provide Proxy Information Below)

Proxy Name: Proxy Phone Number:

Member Cognition (check one): Normal Mild Impairment Moderate Impairment Severe Impairment

Dementia Diagnosis (if known):

Member Current Chronic Conditions (Mark any that apply):

<input type="checkbox"/> Chronic Kidney Disease	<input type="checkbox"/> Depression	<input type="checkbox"/> Parkinson's
<input type="checkbox"/> Congestive Heart Failure	<input type="checkbox"/> Diabetes	<input type="checkbox"/> Severe Mental Illness (Bipolar, Schizophrenia)
<input type="checkbox"/> COPD	<input type="checkbox"/> Hypertension	<input type="checkbox"/> Stroke/Transient Ischemic Attack (Cerebral Vascular Disease)

Any Other Chronic Conditions not listed:

Member Relevant History in the Last 12 months for Falls, Substance Abuse, UTIs, ED Visits, Hospitalizations, or Skilled Nursing Stays (Note frequency, type, or length of stay, etc):

Other Notes (i.e. Social Determinants of Health, hospice care, living situation, current resources referred, or care gaps):

Communication

Ceresti → MSHO Care Coordinators

Confirmation that a members Caregiver enrolled

- Secure email notification with the Member name, Member ID, caregiver name and date of enrollment

Confirmation that a Members Caregiver Graduated or discontinued

- Secure email notification with Member name, Member ID, caregiver name, date of status change and reason

Alerts from Ceresti Coach

- Secure email notification or phone call if an urgent matter (regarding a SecureBlue member) is found via remote monitoring. Ex: hospitalization, emergency room visit, SDOH gap etc.



**Helping patients
take medications
as prescribed**

Email :

office@dosehealth.com

Phone : 844-300-6212

Web : dosehealth.com



Dose Flip

Dose Flip - Medication Dispenser

Help individuals take the correct medications at the right time, and keeping people in their homes being independent longer.



Cost: \$60/member/month for up to 2 devices

WHAT'S INCLUDED?

Dose Flip Rental

If a device breaks, we replace it at no cost.

Adaptive Equipment

Free adaptive equipment to make taking meds easier.

Dose Dashboard and Notifications/Monthly Adherence reports are available

View pillbox activity and events and set up live notifications about adherence via text, call or email

Dose Remind

Customized call or text reminders for injection, inhaler, insulin, tasks, etc

24/7 Support

Call us anytime!

DOSE FLIP



Clear Alarm

Never miss a dose with a crystal clear and friendly alarm



Secure

Lockable with additional lid sensor



Easy to Set Up

Simple setup process using on screen guides and touch screen



Easy to Fill

Onscreen guide will walk the user through filling



Easy to Dispense

Take pills by simply flipping pillbox over into hand or a cup.

ADAPTIVE EQUIPMENT



Extra Tray(s)

Allows for pre-filling medication in advance.

7 Slot Tray available if more space is needed



Refilling Disk

Aids the med filling process - more easily see what medications are being filled for each compartment.

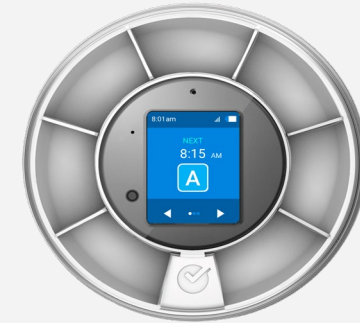


Adaptive Flipper

For individuals who have limited mobility of their hands or arms.

Stand

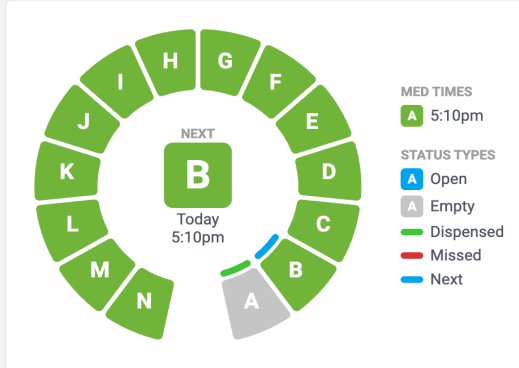
For clients that are hard of hearing, it positions the Dose Flip so the screen is easier to see.



[Status](#)
[History](#)
[Statistics](#)
[Notifications](#)
[Settings](#)

Slot Statuses

Red/green arcs show missed/taken med times, and the blue arc marks the next med time. Gray slots are empty.



Dose Flip Status

Battery Level	94%
Last Connected	19.5 hours ago (Yesterday, 7:10pm)
Is Flipped Over?	No
Firmware Version	4526



Notifications

Receive texts, calls or emails if medications are missed, taken, and when a refill is needed



Multiple Viewers

Unlimited people can get notifications, and view dashboard



History

See device history in real time



Monitoring

Get notified if the lid is taken off and put back on

[Status](#)
[History](#)
[Statistics](#)
[Notifications](#)
[Settings](#)

Event History

FEBRUARY 2024 TODAY

S	M	T	W	T	F	S	Event	Time
				1	2	3		
4	5	6	7	8	9	10	Upcoming 5:10pm	---
11	12	13	14	15	16	17		
18	19	20	21	22	23	24		
25	26	27	28	29				

3 Dispensed ● Today
3 Missed ● Selected Day
5 Empty 2 Handling Event
3 Skipped ● Refilling Event

Showing 4 types of handling events.

Calendar Settings

Basic Options:

Display Mode: **BY MONTH** BY WEEKS

Show early/late dispenses separately:

Handling events to display:

Lid On/Off:

Power plugged/unplugged:

Low Battery:

Flipped upright/down:

Tray Stuck:

Tray Pushed:

Slot Manually Changed:

i Tray push events are only visible from 3/26/2021 onwards.

REQUESTING SERVICE



New Secure Online Referral

Dosehealth.com and click on the orange referrals/orders button in the top right corner

link: [Form-https://www.dosehealth.com/referrals](https://www.dosehealth.com/referrals)

You can also submit a referral anytime by sending in the Dose Health Referral form via email or fax

Fax: [\(844\)525-0515](tel:(844)525-0515)

Email: referrals@dosehealth.com

We will send you a confirmation email when the referral is processed and once the device goes out in the mail with a tracking number.

On Call Support Services

We provide 24/7 support with our on call services. Individuals can call us any day or time with questions or issues and we will respond right away to help out.

If a Dose Flip needs to be replaced, we will send out a new device along with packaging and a prepaid label to return the broken device. If or when services are ending we will also send a prepaid label and packaging for members to send the device back.

Our phone number is listed on the back of every device [\(844\)300-6212](tel:(844)300-6212)

Testimonials

Everything is great! My mom finds it easy to use.

I love the product so much! Its simple, its easy...it works great. I went on facebook and did a survey for you guys. You have no idea how it makes me happy, thank you so much!"

They are working great! My family find it very easy to fill my meds and we all have a feeling of relief knowing I am not missing or taking the wrong meds.

The Dose Flip has been a huge blessing, he gets his meds on time and doesn't have to be nagged about it.

We had an issue the first night but after that Ashley has had no problems with turning the device all the way over to dispense the medication. I filled her box yesterday and she was happy with it. This has kept Ashley independent and confident in handling her medication. I am getting the notifications which is a huge help as a provider. Thank you again for the excellent costumer service with this whole process.

LSS Services: Emergency Care Planning, Friendly Helper, Healthy Transitions, and Meals

A Lutheran Social Service of Minnesota
program in partnership with BCBS

January 2025

Friendly Helper Service

Companionship and Friendly Visiting

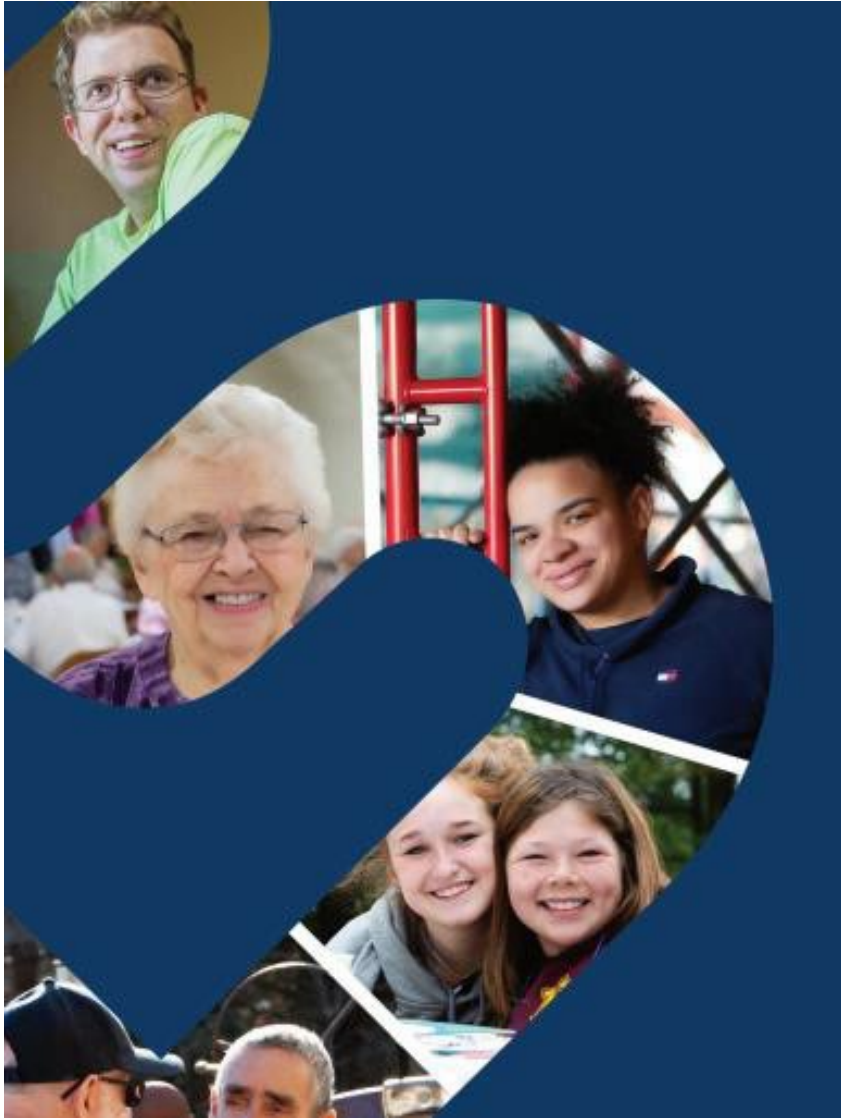
- Supplemental benefit available to qualified Minnesota Senior Health Options (MSHO) members

In-home and Telephonic Support for 48 Hours Each Year

- Targeting older adults who identify as lonely or isolated to provide support, socialization, and community integration

Service Provided by a Paid LSS Staff Member

- Care Companion – LSS employee (this is not a volunteer service)



Services Provided

Friendly visits(in home and telephonic)

Light household chores

Transportation

Resource provision

Communication with Care Coordinator as necessary

In Home Visits



96% of visits took place in home



Companionship:

- Visiting/reminiscing
- Play cards/games
- Help go through mail
- Build a relationship



Transportation

Transportation in community:
grocery shopping, errands,
appointments, going out for a cup of
coffee, thrift store shopping, senior
center, community events, etc.



Light household chores

Telephone Visits



While most visits will take place in home, phone and virtual visits are another great option for companionship!



Conversation

Ask how they are
What their plans are for week
Visiting/reminiscing
Phone conversation topic guide



Plan

Make a plan for the next visit – what you will be accomplishing



Warm, friendly, and patient companionship

Emergency Care Planning Service

Emergency Care Planning

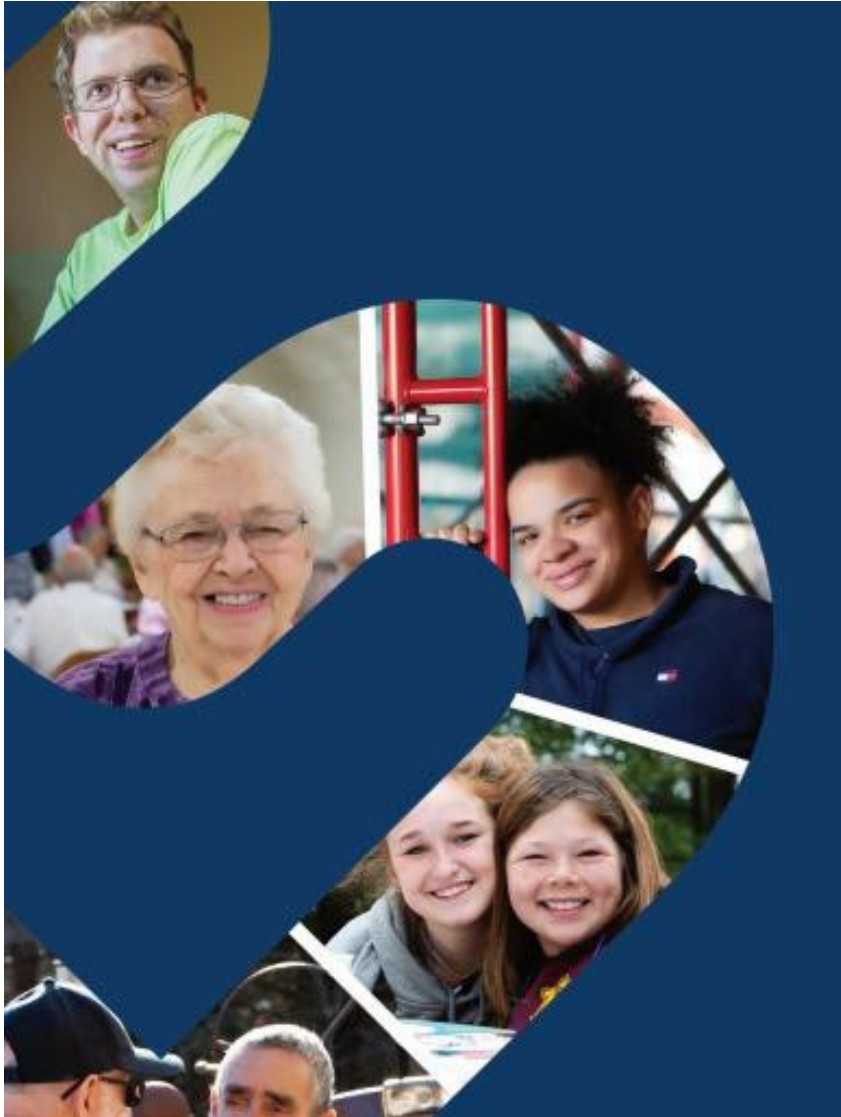
- Supplemental benefit available to qualified Minnesota Senior Health Options (MSHO) members

A Co-Designed Plan that is Unique to Each Member

- Creation of a family centered plan which can keep care receivers in the least restrictive, least disruptive environment possible until caregiver can resume care or alternative arrangements can be made

Service Provided by LSS Caregiver Staff

- LSS Caregiver staff are trained in creating these plans. This is an existing service, so all staff have experience in this realm.



Services Provided

Initial Assessment

Research and Creation of Plan

Continued Conversations

90 Day Follow Up

Communication with Care Coordinator as necessary

Service Process



Schedule Meeting

With all members of the Care team



Care Coordinator

LSS Administration will update the Care Coordinator



Communication

LSS Caregiver staff will send updates to Care Coordinators on an as needed basis



Members Care Plan

Care Coordinator will enter notes into the members care plan as needed

LSS Healthy Transitions Service

Readmission Prevention Benefit

- Supplemental benefit available to qualified Minnesota Senior Health Options (MSHO) members

In-home support following a hospital stay

- Targeting older adults living independently with frequent hospital admissions

Service provided by a trained staff

- Certified Community Health Worker (CHW)

LSS Post Discharge Meals Service

Post Discharge Benefit

- Supplemental benefit available to qualified Minnesota Senior Health Options (MSHO) members
- Healthy Transitions Staff coordinates orders

28 Frozen Shipped Meals

- 14 Meals sent biweekly
- Available for all members that are eligible for post discharge service
- Low sodium and vegetarian options available

LSS Meals – Stand Alone Benefit

- Post discharge Meals are available alongside the Healthy Transitions benefit or independently



Care Coordinator discusses Emergency Care Planning, Friendly Helper, Healthy Transitions, and/or Meals benefit(s) with member.



THEN



Care Coordinator sends referral to LSS.

- The Care Coordinator will complete the referral form
- Referral is sent to LSS email – LSSHealthyTransitions@lssmn.org or Fax 651.310.9449
- LSS Admin will contact Care Coordinator to confirm receipt of referral
- LSS Admin will call the member to schedule visit #1

Referral Process

Contact Information:

LSS Healthy Transitions Service

1605 Eustis Street, Suite 406

Saint Paul, MN 55108

Phone: 800-200-0986

Email:

LSSHealthyTransitions@lssmn.org



Nourished^{Rx}

Food is health, food is care.
Food is healthcare.



BCBS MN 2025 MSHO Benefit Overview NourishedRx Chronic Condition Nutrition Program

January 2025



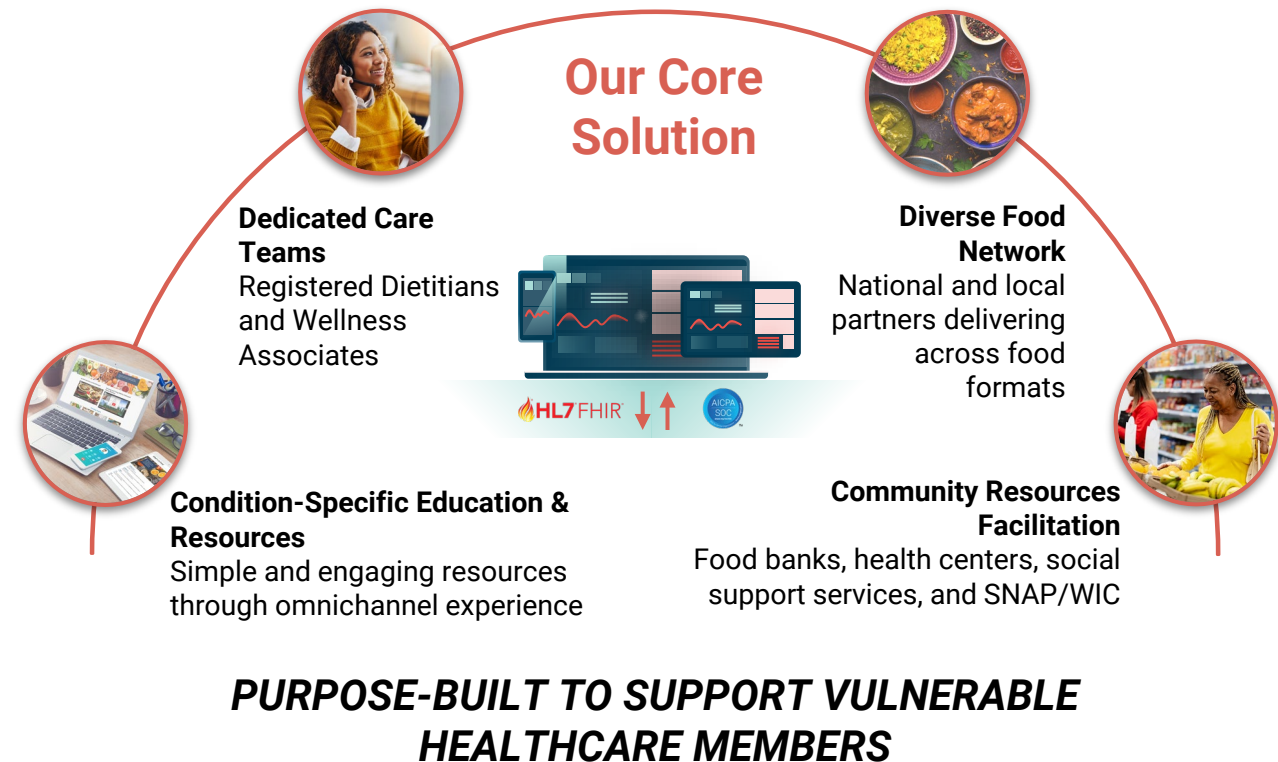
Confidential and Proprietary - Do Not Distribute

Our Vision & Mission

A world where poor diet is no longer the top risk factor for death, disease, and disparities.

Drive health and health equity - one meal, one individual, and one community at a time.

Using food as the doorway for lasting behavior change



Blue Plus MSHO Chronic Condition Nutrition Program Overview

Self-Service Resources

Nutrition Education & Wellness Resources



Condition-specific nutrition education, healthy recipes, meal prep guides, and shopping guides

Accompaniment

Registered Dietitians

Nutrition education sessions (up to 4)

Wellness Associates

Ongoing support



Personalized Food*

*Food progression is tailored to each member

Prepared meals + Pantry Kit
4 weeks

Make eating well easy

Meal Kits + Pantry Kit
2 weeks

*Increase confidence
In the kitchen*

Groceries + Pantry Kit
6 weeks

Foster independence

**Up to 168 meals + meal equivalents
(from groceries) in total**

Realize



Adopt



Manage



Maintain

Week 1

Timeline

Week 12



Benefit eligibility criteria

Inclusion Criteria	<ul style="list-style-type: none">• Residing in MN - all counties.• One (or more) of the following health conditions:<ul style="list-style-type: none">• Hypertension• Diabetes (type 1 or type 2)• COPD (chronic obstructive pulmonary disease)
Exclusion Criteria	<ul style="list-style-type: none">• Members living in a nursing facility• Members receiving meals from another payer source (Elderly Waiver meals)
Requirement for continued engagement in the benefit	<ul style="list-style-type: none">• Member must complete a minimum of 2 Nutrition Education sessions for the 12-week benefit.• NourishedRx will notify Care Coordinators via email for every missed Nutrition Education session.• After 2 missed Nutrition Education sessions, members may continue to receive the benefit at the discretion of the Care Coordinator or Blue Cross.

67

What Blue Plus members said about this benefit in 2024...

“

I like my insurance and I wouldn't change it for any other kind. I like what they are doing with this program. I like the nutritional quality of the food and the way they are prepared.

*You made things make sense. **This program has really helped me.** You told me to be realistic with things and **it has helped a lot.** I used to overlook the simple things.*

*Convey to all the powers that be there, that **I am very happy and most appreciative.***

*I just want to tell you **how great this program is.** The **prepared meals have been incredible** and now the meal kits are awesome also. I am working against high blood pressure and high blood sugar and **I am losing weight** and this is just an answered prayer to get help with food, thank you!*

*I'm texting you today to let you know that **the package I just received was fantastic. I thank you for choosing me for this program.** I enjoyed getting these packages. **I feel healthy when I get them** but thank you and you guys for choosing me. Have a wonderful weekend.*

*I am **so impressed** with this set up and how this program is run.*

*I told my care coordinator to **recommend this program** to others who qualify.*

The program was awesome!** I had so much fun with the last delivery. **I learned a lot!!

”



Benefit impact in 2024

56%

of members with 1+ physical unhealthy day at baseline **reported improvement in physical healthy days** at end of program.

52%

of members with 1+ mental unhealthy day at baseline **reported improvement in mental healthy days** at end of program.

54%

of members at risk of **depression** at baseline **were not at risk** at the end of the program.

46%

of members reported **weight loss** during the program.

20%

of members at risk of **food insecurity** at baseline **were not at risk** at end of program.

30%

of members at risk of **nutrition insecurity** at baseline **were not at risk** at end of program.

94%

of members agreed their experience with the program **improved their knowledge and confidence in eating healthy food.**

94%

of members agreed their experience with the program will **positively affect their food choices going forward.**


How to submit a referral

Direct referrals can be made by completing and sending the MSHO Referral Form (right) securely to the following email:

food@nourishedrx.com

If you have any questions regarding the program prior to making a referral, please call NourishedRx at:
833-440-1230

NourishedRx Referral Form:

 SecureBlue MSHO Healthy Food and Coaching Benefit Referral Please complete the form and send via secure email to food@nourishedrx.com	
Today's Date	Click or tap here to enter text.
CARE COORDINATOR INFORMATION:	
Your Organization	Click or tap here to enter text.
Your Name	Click or tap here to enter text.
Your Phone #	Click or tap here to enter text.
Your Email	Click or tap here to enter text.
MEMBER INFORMATION:	
Member Qualifying Diagnosis: Members <u>must</u> have a diagnosis for at least one of these conditions to be eligible for this benefit.	Check all that apply: <input type="checkbox"/> Hypertension <input type="checkbox"/> Diabetes (type 1 or type 2) <input type="checkbox"/> COPD (chronic obstructive pulmonary disease)
Member ID (Start with "B", then PMI) (E.g., "BXXXXXXXX")	Click or tap here to enter text.
Member Name	Click or tap here to enter text.
Member DOB	Click or tap here to enter text.
Member Street Address	Click or tap here to enter text.
Member City, State, Zip	Click or tap here to enter text.
Member Contact Information: At least one accurate form of contact must be provided to refer a member for this benefit.	Provide all that are available, at least one is required: <input type="checkbox"/> Member mobile phone #: Click or tap here to enter text.
	<input type="checkbox"/> Member home phone #: Click or tap here to enter text.
	<input type="checkbox"/> Member email: Click or tap here to enter text.
Member Preferred Language	Click or tap here to enter text.
ADDITIONAL INFORMATION:	
Click or tap here to enter text.	

Notifications to support care coordination

Ongoing insights from NourishedRx to Care Coordinators

Non-Time Sensitive, Non-Emergency



General clinical needs,
plan benefits



General transportation
issues



Issues connecting with
member

Time Sensitive, Non-Emergency



Transportation
needs for medical
appointments



Fever of 100.4 or
higher,
overwhelming
tiredness, headache
that won't go away



Demonstrating risk of
depression

Emergency



Extreme swelling of
hands or face



Trouble breathing,
severe nausea and
vomiting



Other emergency
incidents (vaginal
bleeding, baby's
movement stopping or
slowing)



Nourished^{Rx}

Amy Bloomquist

More information:

amy@nourishedrx.com

www.nourishedrx.com

**Thank
you!**

MSHO-Blue Cross Blue Shield
2025 Supplemental Benefits

January 8, 2025

What Benefits Do We Support in 2025?

Personal
Emergency
Response
Devices







Companion
Pets

Blood Pressure Cuff





Personal Emergency Response System Device Chart

	In-Home	Mobile GPS	Mobile GPS +	Mobile GPS X	Mobile Watch	Mobile W
						
Weight	0.4 oz (wrist), 0.3 oz (neck)	1.7 oz	1.5 oz	1.3 oz	2.1 oz	1.2 oz
Range	Button press works within 2000 feet of the base station	Works anywhere in the USA with sufficient cell coverage	Works anywhere in the USA with sufficient cell coverage	Works anywhere in the USA with sufficient cell coverage	Works anywhere in the USA with sufficient cell coverage	Works anywhere in the USA with sufficient cell coverage
Battery Life	Wearable battery life of 2 years, backup base station battery of 24 hours	Wearable battery needs recharge monthly for 3 hours	Wearable battery needs recharge every 5 days for 2 hours	Wearable battery needs recharge every 4 days for 3 hours	Wearable battery needs recharge every 2 days for 2 hours	Battery needs recharge every week for 1 hour
Waterproof	Fully waterproof wearable	IP 67 Waterproof rating	IP 67 Waterproof rating	IP 67 Waterproof rating	IP 67 Waterproof rating	IP67 Waterproof rating
Data Monitoring	Activity, sleep, non-wear monitoring	No data monitoring	Real-time GPS tracking optional	Real-time GPS tracking optional	Real-time GPS tracking optional	Real-time GPS tracking optional
Wearable Options	Available as necklace or wristband, Wall mounted.	Available as necklace or belt clip, wrist conversion optional	Available as necklace or belt clip	Available as necklace or belt clip	Available as wristband only (various band options)	Available as wristband only (various band options)
Cellular Carrier	Landline, AT&T or US Cellular	Verizon or AT&T	AT&T	Verizon or AT&T	T-Mobile or AT&T	AT&T
Fall Detection	Fall detection	No Fall detection	Fall detection	Fall detection	Fall detection	Fall detection
Extra Features	Direct Connect, Voice Activated	GPS activated when button pressed	GPS tracking any time	GPS tracking any time	Direct Connect Vital Monitoring	Vital Monitoring

Blink Smartphone App



BLINK is a new free mobile application developed by QMedic that allows a member to use their voice or call for help. The member chooses the trigger word and the phone number to call.

Companion Pet



An optional Companion Pet for members at risk of social isolation.

Notes

- No Phone or Wi-Fi needed for any devices
- No installation required

MOBILE WRIST OPTIONS



DESCRIPTION

- 1.2 oz & 7-Day Battery
- AT&T & T-Mobile
- Loud two-way communication

FEATURES

- Real time GPS tracking
- Waterproof IP 67
- First motion reporting, step counting and Fall Detection with user cancel



DESCRIPTION

- 2.1 oz & 2-Day Battery
- AT&T
- Loud two-way communication

FEATURES

- Direct connect
- Real time GPS tracking and text to Locate
- Waterproof IP 67
- Fall Detection
- Ping to find a lost unit

We offer person-centered options for unique member needs.



MOBILE NECKLACE OPTIONS

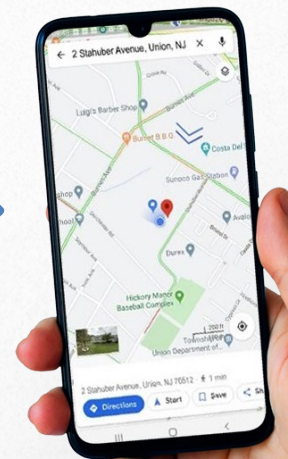
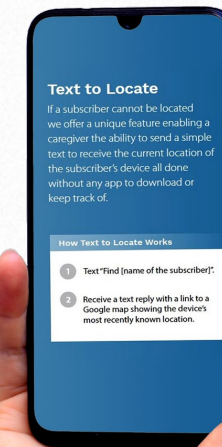
DESCRIPTION

- 1.3-1.7 oz
- Verizon or AT&T
- Devices have a battery life of 4-30 days



DEVICE FEATURES

- Wearable necklace pendant or belt clip
- Some devices can be pinged to find a lost unit
- Waterproof – IP 67
- Optional Fall Detection
- Optional real-time GPS tracking



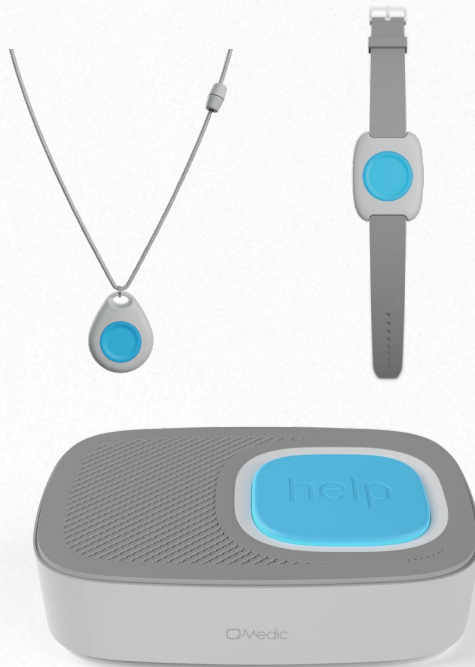
IN-HOME OPTIONS

DESCRIPTION

- Landline or AT&T
- 500-2,000 ft range
- Wearable necklace or wrist help button
- Extremely light weight
- Fully waterproof

FEATURES FOR MEMBERS

- Optional Fall Detection
- Optional voice response activation with additional speakers



BLOOD PRESSURE CUFF



Eligibility

- Hypertension
- Chronic heart failure
- ESRD or stroke
- Does not live in a NF

DESCRIPTION

- Lightweight & portable
- Easy to use one button operation
- Adjustable cuff
- M, L, XL, cuff available

FEATURES

- Text notifications for readings outside of range
- Easy to replace long lasting batteries
- Runs on cellular
- No Apps/No Pairing/No Syncing required
- After 1-2 months of non use, member may be disenrolled from the monthly monitoring program



COMPANION PETS

One Pet Per Year



REAL-FEEL HEARTBEAT and coat-pet the soft, lifelike fur coat and feel the pet's calming heartbeat.



RESPONSIVE HEAD and tail movements-with built-in sensors, pet responds to your motion, voice, and touch.



BARKBACK TECHNOLOGY when you talk to your loveable companion, your pet responds back.

VALUE ADDED FREE SERVICES



Free Medication or Just Reminding Phone Calls or Texts



Hands Free Voice Activated App



Free Lock box

PERS Changes in 2025

MSHO PERS Members

- \$30/month for in-home or mobile

New PERS Members with MSHO and EW

- \$30/month in-home
- \$65/month mobile

- ❖ All current **existing** PERS members will have the \$30/month for in-home and mobile honored in 2025

EASY REFERRAL PROCESS



617-904-1745



NPI-1215358361



referrals@qmedichealth.com

City, State, Zip:

PERS Service Type*: None

Additional Services (optional):

- Lockbox
- Companion Pet - Dog
- Companion Pet - Cat
- Companion Pet - Bird
- Blood Pressure Cuff with diagnosis: Select

Language & Other Information

Please specify member's preferred language if not English.

Select

Hypertension

Chronic Head

Hypertension



QMedic MSHO Supplemental Benefit Referral Form

Email completed form to referrals@qmedichealth.com or fax to 617-904-1745

NPI: 121-535-8361

Phone: 1-877-241-2244

*Indicates required field

Care Manager Information

Organization*:

Your Name*:

Your Phone*:

Your Email*:

Member Information

Member Name*:

Member Phone*:

Member ID*:

Birth Date*:

Member Street Address*:

City, State, Zip*:

PERS Service Type*: None

Additional Services (optional):

- None
- QMedic In-Home PERS
- Mobile GPS Necklace PERS
- Mobile GPS Watch PERS
- Blood Pressure Cuff

Language & Other Information

Please specify member's preferred language if not English.

Caregiver Information

Only fill out this section if you would like us to contact the caregiver instead of member.

Caregiver Name:

Caregiver Phone:

Relationship to Member:

*Indicates required field

Revised 8.30.23





ALEXANDRA PALAMARI
Territory Manager, Minnesota



apalamari@qmedichealth.com



612-438-0220

Visit our website for more information and helpful videos!

www.QMedichealth.com

2026 PLANNING

Medicare Advantage plans must submit their annual bids to CMS (Centers for Medicare & Medicaid Services) on the first Monday of June each year; this includes details about their benefits for the upcoming year.

Please share your ideas, feedback or suggestions to
Jenna.rangel@bluecrossmn.com or your Partner Relations Consultant

THANK YOU

JENNA.RANGEL@BLUECROSSMN.COM

PARTNER.RELATIONS@BLUECROSSMN.COM

SECUREBLUE.REFERRALS@BLUECROSSMN.COM

TRAINING AND Q&A WILL BE POSTED ON THE BLUE PLUS CARE COORDINATOR TRAINING PAGE
[HTTPS://CARECOORDINATION.BLUECROSSMN.COM/TRAINING/](https://carecoordination.bluecrossmn.com/training/)