


Medica Choice CareSM MSC+ Minnesota Senior Care Plus (MSC+) Fact Sheet

Overview

Medica offers Medica Choice CareSM MSC+ for Minnesota Health Care Programs (MHCP) enrollees in the Minnesota Senior Care Plus (MSC+) managed care program. This product is for members who are aged 65 years or older and enrolled in Medical Assistance. Each member is assigned a Care Coordinator who is a trained health care professional and conducts a person-centered assessment upon enrollment and again at least annually, arranges for services, and assists the member navigate the healthcare system.

Members may have to pay copays for some covered services and prescription drugs. Members must pay their copays directly to their provider. For details about applicable member cost sharing see the [2023 MHCP Overview of Benefits Grid](#).

ID Card Example for 2022-2023

 <p>Payer ID: 94265 ID: 999999901 Group: 59691 MHCP Name: JOHN Q 00009/00936/59691 Care Type: Medica Choice Care MSC+ SVC Type: Medical/Comprehensive Dental/Rx</p> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-top: 10px;"> Rx BIN: 003858 Rx PCN: MA Rx Group: 3MEDICA </div> <p style="font-size: small; margin-top: 10px;">In case of EMERGENCY go to the nearest Emergency Room or call 911. \$3.50 copay for urgent care services in the ER. No Medicare coverage. Full drug coverage through Medica.</p>	<p style="text-align: right;">Medica.com/MSC Card Issued: 07/23/21</p> <p>Member Services (TTY: 711): 1 (888) 347-3630 NurseLine™ by HealthAdvocate™: 1 (866) 715-0915 Mental Health Crisis: 1 (800) 848-8327 Pharmacies call ESI: 1 (800) 922-1557 Providers call: 1 (800) 458-5512</p> <p>Medical claims to: Medica, PO Box 30990, Salt Lake City, UT 84130-0990 Dental Claims: Delta Dental®, PO Box 9120, Farmington Hills, MI 48333-9120 RX Claims: Express Scripts, PO Box 14711, Lexington, KY 40512-4711</p> <p>Appeals and Grievances: Medica: 1 (888) 347-3630 or Fax: 1 (952) 992-3016 (TTY: 711) State of MN - DHS Appeals Unit, PO Box 64941, St Paul, MN 55164-0941 Managed Care Ombudsman – 1 (651) 431-2660 or 1 (800) 657-3729 (TTY: 711)</p>
--	---

Group Numbers

- 59XXX

Provider Networks

- Medica Choice® direct contracted medical provider network
- OptumHealthSM Care Solutions, Physical Health – chiropractic services provider network
- Express Scripts® (ESI) – Pharmacy Benefits Manager (PBM)
- Minnesota Select Dental™ (MSD) network, administered by Delta Dental® of Minnesota (DDMN)
- Medica Behavioral Health (MBH), administered by Optum Behavioral Health – mental health and substance use disorder treatment (SUD) provider network

Access to inpatient services and certain outpatient services is restricted to facilities that participate with these products. Covered services (unless emergency/urgent care) outside the network require prior notification, except if the member has primary insurance coverage through a commercial plan or Medicare. Medica does not require prior notification if the primary insurance deemed the service as covered.

Program Features

- Every member is assigned a Care Coordinator who is either a Medica employee or trained delegate and is the member's primary point of contact for all health and wellness coordination
- The member's Medica Care Coordinator also coordinates with the member's county agency for services that are not paid by Medica but may be paid by another source (e.g. waiver programs)
- Medica is contracted with multiple county agencies. These county staff perform delegated care coordination for Medica AccessAbility Solution members. For a current list, see [County, Care System, and Agency Contact Information](#) on Medica.com

Membership Criteria

- Eligible for Medical Assistance
- Be at least 65 years of age
- Reside in the current Medica Choice CareSM MSC+ service area

Elderly Waiver Services Referral Process

Medica requires authorization in order to pay for some services; Care Coordinators complete a referral request form to initiate a service authorization for any of the following covered services:

- Customized Living
- Foster Care
- Home Modifications
- Generic Supplies and Equipment
- Nursing Home Stays- Medicare A stays or skilled stays
- Personal Care Assistance (PCA)
- Adult Day Care
- Adult Day Care Bath
- Home Health Aide
- Homemaker
- Independent Living Skills (ILS)
- Home Care Nursing (formerly known as Private Duty Nursing)

Claim Submission

Claims should be submitted to:

Medica
PO Box 30990
Salt Lake City, UT 84130
Electronic payer ID: 94265

For those members who are dual-eligible (i.e. have Medicare eligibility that is not integrated with their Medical Assistance managed care), Medica will coordinate benefits with their primary Medicare coverage provider. Medica receives these coordination of benefits claims in accordance with the Centers for Medicare and Medicaid Services (CMS) Coordination of Benefits Agreement (COBA) claim crossover process.

[See details on claim submission and product guidelines](#)

Rev. 10/22

© 2022 Medica.