



Medica One Health Plan

Temporary Client Placement Workflow

Introduction

As providers are aware, Medica One Health Plan will be assuming a large portion of legacy UCare member care. As part of this transition, providers will receive in HHAeXchange:

- A new Medica One Health Plan linked contract
- New Medica One Health Plan client placements
- New Medica One Health Plan authorizations

Beginning October 1, 2026, services provided to Medica One Health Plan members should be documented under the new Medica One Health Plan linked contract, client placements, and authorizations.

Providers should not continue documenting EVV visits under the legacy UCare linked contract, client placements, or authorizations for dates of service on or after October 1, 2026.

What Providers Need to Know



Medica One Health Plan will not have all member authorizations loaded into HHAeXchange by October 1, 2026.

To ensure providers can continue servicing members without interruption:

- Medica One Health Plan client placements will be sent to provider portals first.
- Authorizations may be temporarily unavailable.
- Authorizations will be imported into HHAeXchange at a later date.
- Providers should continue documenting EVV visits for services rendered, even if the authorization has not yet been loaded.

This is a temporary workflow designed to support a smooth transition of members from UCare to Medica One Health Plan.

What Providers Need to Do

Step 1: Review Client Placements



- **If Your NPIs or UMPIs Exist in Multiple Offices**
 - You must actively monitor your [Pending Placement](#) queue. 🚀
 - When Medica One Health Plan client placements arrive:
 - Navigate to **Pending Placements** in the Provider Portal.
 - Review each placement.
 - Accept the placement into the appropriate office based on your organization's office structure.
 - Verify the client is visible within the correct office before documenting services.
- **If Each NPI or UMPI Exists in Only One Office**
 - No action is required
 - Medica One Health Plan client placements will automatically route to into the office that matches the NPI or UMPI included on the placement.

Step 2: Configure Your Workflow to Continue Capturing EVV Visits

Even if an authorization has not yet been imported by Medica One Health Plan, providers can continue capturing EVV visits by completing the applicable setup below:



- **If you use Schedules:**
 - HHAeXchange has automatically enabled, "**Allow Masterweek Rollover without Valid Authorization**" on the Medica One Health Plan linked contract
 - This will enable your Masterweeks to roll over and Caregivers will see their schedules as normal in the mobile app.
- **If You Use Unscheduled Visits:**
 - Navigate to the client's profile
 - Add applicable caregivers to [Caregivers with Mobile Patient Info Access](#) section. 🚀
 - Doing so will allow caregivers to search and find Medica One Health Plan clients in the mobile app for unscheduled visits.

Important:

Completing the above configuration allows providers to continue documenting and capturing EVV visits for Medica One Health Plan members even when an authorization has not yet been loaded into HHAeXchange.

Additional Guidance for HHAeXchange Enterprise Providers

Payroll and Invoicing During the Transition Period

If your agency utilizes HHAeXchange Payroll and/or Invoicing functionality, an authorization may be required for downstream processing.

If the Medica One Health Plan authorization has not yet been imported:

1. [Create a TEMP authorization](#) following your organization's standard TEMP  authorization creation process.
2. Continue processing visits, payroll, and invoicing activities as needed.
3. Monitor for the official Medica One Health Plan authorization import.
4. Once the Medica One Health Plan authorization has been received, delete the TEMP authorization.

Step 3: Authorization Import Process



If you did not create a TEMP authorization:

When Medica One Health Plan imports the client's authorization:

- HHAeXchange will automatically evaluate previously documented visits.
- If the visit service code matches the imported authorization service code, the visit will automatically associate to the authorization.
- The visit will display as authorized and appear green on the client's calendar.
- No provider action is required in most cases.

If you did create a TEMP authorization (**HHAeXchange Enterprise Providers Only**):

When Medica One Health Plan imports the client's authorization:

- Providers should delete the TEMP authorization after validating the official authorization has been loaded successfully
- Previously captured visits will automatically associate to the imported authorization, provided the visit service code matches the authorization service code.
- No manual reassociation is typically required.

Troubleshooting

Things don't always go to plan! If you're missing a client placement or an authorization never imports from Medica One Health Plan by November 1st, follow the below troubleshooting steps.



I didn't get all my Medica One Health Plan Client Placements:

If you did not get a client placement from Medica One Health Plan by November 1st, contact Medica One Health Plan directly for assistance.

- Be prepared to provide:
 - Client Name
 - Client Medicaid ID
 - Service Code
 - Dates of services impacted
 - Provider Name
 - Provider NPI or UMPI

My Client's Authorization Did Not Import:

If your client's authorization has not been loaded by November 1st, contact Medica One Health Plan directly for assistance.

- Be prepared to provide:
 - Client Name
 - Client Medicaid ID
 - Service Code
 - Dates of services impacted
 - Provider Name
 - Provider NPI or UMPI

The Service Code on My EVV Visit Doesn't Match the Imported Authorization:

1. Determine which service code is correct - is the visit service code correct or is the authorization service code is correct?
2. If the service code on the visit is correct, please contact Medica One Health Plan to update the authorization.
3. If the service code on the authorization is correct, update the service code on the visit to match the authorization

Medica One Health Plan Contact Information:



- For missing Medica One Health Plan Clients and Authorizations **(after Nov. 1st)**:
 - 800-458-5512

HHAEExchange System Questions:



- HHAEExchange Support Telephone Number:
 - 855-400-4429
- HHAEExchange Support Ticket:
 - [Support Portal Login](#) ✨
 - [How to Create a Support Ticket Article](#) ✨

Helpful Resources:



- [HHAEExchange Knowledge Base](#) ✨
- [Minnesota Info Hub > Medica One Health Plan section](#) ✨
- [Medica One Health Plan - UCare Transition Website](#) ✨