



July 2011

Dear CareSource Provider:

Improving our members' health and well-being are goals we share. One way CareSource is committing to this is by making it easier for you to work with us. Below are recent "wins" for CareSource providers and members.

ePrescribing – ePrescribing continues to grow nationwide and in the State of Michigan, which is now the 8th highest state for ePrescribing. CareSource applauds providers who ePrescribe and has a quarterly drawing to reward providers who ePrescribe 50% or more of their prescriptions. Inside the enclosed *ProviderSource* newsletter, you'll find resources for getting started.

New Prior Authorization – Earlier this summer, CareSource instituted prior authorization changes on select specialty medications. We have also updated our pain management medical policy. CareSource uses evidence-based guidelines to ensure health care services or medications meet the standards of excellent medical practice. Please continue to visit www.caresource.com and click on Updates/Announcements for the latest policy changes and CPT codes affected to ensure proper claims payment.

Updates to our Secure Provider Portal – We continue to make improvements to our Provider Portal, thanks to your feedback. The newest features include: payment history, the ability to search for multiple claims and submit appeals online.

Disease Management Program – This spring, CareSource launched an enhanced disease management program aimed at improving the health of our Medicaid members with diabetes or asthma across their care. This program will also provide members with prevention strategies, wellness information, and empower members to take an active role in managing their condition with their provider.

Enhanced Quality Standards – In addition to our URAC accreditation (Utilization Review Accreditation Committee) secured in 2006, CareSource is also highly focused on obtaining NCQA (National Committee for Quality Assurance) accreditation for 2012. Both URAC and NCQA provide a dynamic process of continuous improvement in the health care arena.

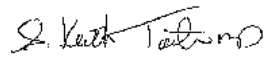
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800-390-7102

MI-P-456

These improvements are highlighted more in-depth in the latest edition of our *ProviderSource* newsletter enclosed. We know that good health care begins with you. Together we can make this happen. Thank you!

Respectfully,

A handwritten signature in black ink that reads "S. Keith Tarter". The signature is written in a cursive style with a large initial "S" and a stylized "Tarter".

S.Keith Tarter, M.D., M.P.H
Medical Director



ProviderSource

SUMMER 2011

A newsletter for CareSource providers

New prior authorizations in effect

Earlier this summer, CareSource instituted prior authorization (PA) on select specialty medications and some pain management procedures.

Effective June 15, 2011: CareSource requires prior authorization on select classes of specialty medications. This PA does not affect Emergency Room, inpatient and observation settings. Visit www.caresource.com for medications affected.

Effective July 1, 2011: CareSource requires prior authorization for some interventional pain management procedures including: soft tissue and trigger point injections, facet joint and/or facet joint nerve injections, epidural steroid injections and selective transforaminal epidural injections, and sacroiliac joint injections. Also included in this policy is associated anesthesia services.

Visit www.caresource.com for CPT codes impacted.



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How to reach us

Provider Services: 1-800-390-7102 (TTY 1-800-649-3777 or 711)
CareSource 24, 24-Hour Nurse Advice Line: 1-866-206-0488





Making it easier for you to work with us

CareSource's secure online Provider Portal is available for all CareSource health care plans. To register, visit www.caresource.com. Click on "Provider Login" for features such as:

- ▶ Member Eligibility
- ▶ Claims Inquiry
- ▶ Prior Authorizations (inpatient and outpatient)
- ▶ Coordination of Benefits
- ▶ Member Profile
- ▶ Clinical Practice Registry

Recent portal improvements:

You asked, we listened! Thanks to your feedback, we added the following capabilities to our Provider Portal:

- ▶ **Payment history** – Search for payments by check number or claim number
- ▶ **Multiple claim search** – Search for multiple claims at one time (versus a single claim)
- ▶ **Submit appeals** – Providers can now submit appeals through the Portal

Enhanced *Find a Doctor* tool online

CareSource has redesigned and enhanced our *Find a Doctor* online provider search tool. Now, it is easier than ever for CareSource members to find a health care provider who participates with CareSource.



Viewers can find provider information such as:

- ▶ Address and phone number
- ▶ Whether the practice is accepting new patients
- ▶ Specialty type
- ▶ Languages spoken
- ▶ Maps and driving directions to provider offices

Find a Doctor is accessible 24/7 and the provider's information is updated daily on www.caresource.com.

'Dual eligible' enrollment to begin this year

The Michigan Department of Community Health (MDCH) will begin enrolling members eligible for both Medicare and Medicaid into the Michigan Health Plans starting October 1, 2011. Members that have a Medicaid Spend-Down, are in a long-term care facility, have MiChoice, or have other HMO coverage are not eligible for this program.

This program should not be confused with the MDCH Integrated Care Project, which is a program of much larger scope and still in the development phase. CareSource is currently planning for integration and we are committed to making this transition seamless for both providers and members.

Member transportation vendor reminder



CareSource now uses TMS for statewide transportation services. An added service with this transportation vendor is same-day rides for hospital discharges. We hope our transportation benefit will continue to help your CareSource patients keep their scheduled appointments and reduce this common access-to-care barrier.

Check member ID cards



Members are asked to present their CareSource ID card each time services are accessed. Additionally, CareSource Advantage members should also present their Medicaid ID Card at the time services are accessed. If you are not familiar with the patient, and cannot verify the person as a CareSource member, please ask to see photo identification. If you suspect fraud, please call **1-800-390-7102**.

Please also verify member eligibility before providing services. You can do so through the Provider Portal section of our website at www.caresource.com, or by calling our automated member eligibility verification system at **1-800-390-7102**.

E-prescribing is growing

According to a recent report published by Surescripts, an e-prescription network operator, e-prescribing in the U.S. has increased 218 percent since 2008. The report also notes that at the end of 2010, about 91 percent of community pharmacies were able to receive prescriptions electronically.

Have you started e-prescribing yet? If the answer is yes, CareSource has a quarterly drawing to win an iPad for providers who prescribe 50 percent or more of their new prescriptions electronically. If you're not e-prescribing, learn how by referring to "*A Clinician's Guide to E-Prescribing*" at www.ehealthinitiative.org/reports.html#eprescribing.

Interpreter services help reduce barriers to care

CareSource offers sign and language interpreters for members who are hearing impaired, do not speak English, or have limited English-speaking ability. These services are available at no cost to the member. Please note that CareSource requires hospitals, at their own expense, to offer sign and language interpreters for these members. Participating providers are required to identify the need for interpreter services for CareSource patients and offer assistance to them appropriately.

If you do not have access to interpreter services, please call us at **1-800-390-7102** (TTY: 1-800-649-3777 or 711).

MiPCT project highlights importance of medical homes

At CareSource, we know the importance of improving health outcomes. That's why we have been actively involved in the development of the Michigan Primary Care Transformation (MiPCT) demonstration, a three-year pilot project designed to improve the delivery of primary care and lower health care costs.

The project will build on existing programs in the state to create patient-centered medical homes for the delivery of primary care services and chronic disease management in primary care settings. Participating payers will offer financial incentive to designated providers to help transform their practices in the areas of:

- ▶ Care management
- ▶ Self-management support
- ▶ Care coordination
- ▶ Links to community services

As one of the largest demonstration projects funded by the Centers for Medicare and Medicaid Services (CMS), the pilot has the potential to impact nearly 2 million beneficiaries in Michigan, including 248,000 Medicaid managed care consumers.



Increasing access to specialty care



To help increase access to specialty health care services, Medicaid recipients may go to providers affiliated with public entities when the provider types are not available through the CareSource contracted network. The public entities include:

- ▶ The University of Michigan Health System
- ▶ Wayne State University
- ▶ Hurley Hospital
- ▶ Michigan State University
- ▶ Oakwood Health Care System in Wayne County

If you determine that a CareSource member is in need of a specialty care service that is not sufficiently available within our network, please fax a CareSource referral form to Medical Management at **1-888-577-5507**.

Encourage smoking cessation: Your recommendations matter

Research has repeatedly shown that one of the strongest influences on a person's decision to quit smoking is the recommendation made by a trusted health care provider.* We appreciate your efforts to remind your CareSource patients about the dangers of tobacco use.



Remember, CareSource members can receive counseling to help them quit smoking by calling the Michigan Tobacco Quit Line at **1-800-QUIT-NOW** or **1-800-784-8669** (TTY: 1-888-229-2182). CareSource also covers limited quantities of nicotine patches, gum and lozenges without requiring a prior authorization.

**Source: Michigan Cancer Consortium, www.michigancancer.org*

Sports physicals and well-care visits

School sports physicals are a great time to perform well-care checkups for CareSource members. Providers can bill for an adolescent well-care visit and receive a \$20 bonus payment from CareSource.

Adolescent Well-Care Visit Codes

CPT Code	ICD-9-CM Diagnosis Code
99383-99385, 99393-99395	V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9

Please remember:

- ▶ Be sure to include a copy of the completed school sports physical form and note or complete the anticipatory guidance form in the member's medical record.
- ▶ Exams should include medical and family history, a physical exam, immunizations as needed, review of medications, and safety and prevention guidance.
- ▶ Adolescent well-care checkups can be performed during an acute-care visit as well.
- ▶ You can find more information about sports physicals at www.aap.org/healthtopics/sports.cfm.

Enhanced disease management program implemented

CareSource members with chronic conditions, including asthma and diabetes, will be automatically enrolled into CareSource's enhanced disease management program.

Benefits to members

- ▶ Members enrolled in the program will receive free information to help them better manage their asthma or diabetes. Information sent to members will include care options for them to discuss with their provider.
- ▶ Members identified as high risk will have a nurse assigned to their case to help educate, coordinate and provide resources and tools to help the member reach their health care goals.



How to refer members

If you have a CareSource patient with asthma or diabetes who you believe would benefit from this program and is not already enrolled, please call **1-888-882-3614**.

Preventive guidelines offer treatment protocols

Preventive care is an important part of staying healthy. That's why CareSource offers preventive practice guidelines to both providers and members to guide member health screenings, immunizations and physical exams regardless of health status. CareSource adopts both preventive and clinical evidence-based guidelines from federal and medical professional organizations.

In 2011, CareSource will reinforce the use of clinical guidelines for the management of:

- ▶ Asthma
- ▶ Diabetes
- ▶ ADHD
- ▶ Depression

These guidelines assist providers and members to ensure proper diabetes screenings including Hemoglobin A1c, LDL-c, dilated retinal eye exam, blood pressure monitoring and treatment, and screening for nephropathy; medication management for asthma and ADHD; and appropriate follow-up care after inpatient admissions for members with depression.

Providers can access these and other important clinical and preventive guidelines via the links on the Provider Portal of our website at www.caresource.com.

ABCD program supports developmental screening

Standardized developmental screening was identified in 2007 as the Michigan Child Health Improvement Partnership's (MICHIP) first initiative. To that end, the Assuring Better Child Health and Development (ABCD) program was established.

The Michigan Chapter of the American Academy of Pediatrics supports the MICHIP and its recommendation to perform development surveillance at every well-child visit and formal developmental screenings at ages 9 months, 18 months and 30 months to help identify children who have or may be at risk of developmental delays. Examples of recommended screening tools for formal development screening include the ASQ, PEDS, PEDS-DM and IHCS forms.

If you have any questions or would like more information about ABCD, please call Cathie Webb, RN, CareSource Quality Improvement Manager, at **1-517-702-5216**.

Quality Improvement Update: 2010

Each year, CareSource conducts an evaluation of its quality improvement (QI) programs with an emphasis on assessing the quality and safety of clinical care, and service and progress toward influencing safe clinical practices.

We recently reviewed the goals established for 2010 and analyzed the results for measures of quality of care and service. This evaluation serves as the foundation for ongoing QI/CM activities of the CareSource Care Management Department.

Key Accomplishments in Clinical and Service Activities

We saw statistically significant improvement in clinical and service Quality Improvement Initiatives.

Clinical improvements were achieved or sustained in the NCQA 75th percentile in:

- ▶ **Adult BMI Assessment**
- ▶ **Appropriate Medications for Asthma (ages 5-11)**

Clinical improvements were achieved or sustained in the NCQA 50th percentile in:

- ▶ **Chlamydia Screening-Total**
- ▶ **Adolescent Well-Care Visits**
- ▶ **Medical Attention for Nephropathy**
- ▶ **Immunizations for Adolescents**
- ▶ **Appropriate Asthma Medications (ages 12-50)**
- ▶ **Appropriate Asthma Medications-Total**

Service improvements were achieved and sustained in:

- ▶ **The Adult Consumer Assessment of Health Plans and Systems (CAHPS) survey** – Results indicated many improvements and several opportunities for improvement. Areas of improvement include:
 - Customer service
 - Shared decision making
 - Rating of a health plan
- ▶ **Compliance with Michigan Department of Community Health (MDCH) Performance Monitoring Standards** – This includes rate of complaints, timely encounter data reporting, timely pharmacy encounter data reporting, timely provider file reporting, and timely claims processing.

We appreciate the involvement of our participating health care providers in helping us achieve these improvements.



ProviderSource

is a publication of CareSource, a non-profit, public-sector managed health care plan serving counties throughout Michigan.

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ACCREDITED
HEALTH PLAN (for Medicaid)
HEALTH CALL CENTER

Center offers EHR assistance

Does your primary care practice need assistance implementing electronic health record (EHR) technology? The Michigan Center for Effective IT Adoption (M-CEITA) can help. The center provides unbiased information and support, assisting providers through the entire process from selecting and adopting an EHR system to demonstrating meaningful use to improve quality of care and qualify for financial incentives.

For more information, contact M-CEITA by phone at **1-888-MICH-EHR** (1-888-642-4347) or email at mceita.info@altarum.org.

Timely notice of status changes

Advance written notice of any status change, such as a change of phone number or address, helps us keep our provider records current. Notification of changes is also critical for claims processing.

Type of change	Minimum notice required
New providers join the practice	Immediate
Phone number change	10 calendar days prior to change
Address change	60 calendar days prior to change
Providers leave the practice	60 calendar days prior to change
Change in capacity to accept members	60 calendar days prior to change

Where to send changes

Changes must be submitted in writing to one of the addresses below:

- **Email:** providermaintenance@caresource.com
- **Mail:** CareSource, Attn: Data Integrity, PO Box 8738, Dayton OH 45401-8738

If you use the Council for Affordable Quality Healthcare (CAQH) Universal Provider Datasource, please remember to update your CAQH application as well whenever you have a status change.

Text4baby provides free health information

Expectant and new moms can get health information delivered free to their mobile phones through an innovative program called text4baby. text4baby provides women with information during pregnancy and through baby's first year to help them care for their own health and give their babies the best possible start in life.

Women who sign up for the free service by texting **BABY** (or **BEBE** in Spanish) to 511411 receive free text messages each week, timed to their due date or baby's date of birth. Messages focus on a variety of topics critical to maternal and child health. Please join us in promoting this **free** service to your patients.

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Educational resources help physicians avoid fraud and abuse

The Office of the Inspector General (OIG) has created free educational materials to assist in teaching physicians about the federal laws designed to protect Medicaid and Medicare programs and program beneficiaries from fraud, waste and abuse. Materials include a booklet for physicians' self study, a PowerPoint presentation that can be used to teach the content of the booklet, and speaker's notes to accompany the presentation.

Materials can be found on the OIG website at:

- <http://oig.hhs.gov/compliance/physician-education/index.asp>.

A webcast of the May 2011 Health Care Fraud Prevention and Enforcement Action Team provider compliance training in Washington D.C. is also available. It can be found at:

- <http://oig.hhs.gov/compliance/provider-compliance-training/index.asp>

Report fraud, waste and abuse

Remember, you can report fraud, waste and abuse to CareSource by:

- Calling: **1-800-390-7102** and follow the prompts to report fraud
- E-mailing: fraud@caresource.com
- Faxing: 1-800-418-0248
- Writing a letter to:

CareSource
Attn: Special Investigations Unit
P.O. Box 1940
Dayton, OH 45401-1940

Complete the Fraud, Waste and Abuse Reporting Form on our website at www.caresource.com.