



# ProviderSource

Summer 2010

A newsletter for CareSource providers

## Clinical Practice Registry helps identify preventive care needs

At CareSource, we know how important it is to have vital patient information at your fingertips. Now primary care providers have secure access to our Clinical Practice Registry through our online Provider Portal. With flexible data manipulation options, you can use these preventive health service reports to:

- ▶ View aggregate data on your CareSource patients to facilitate real-time population management
- ▶ Flag charts for needed services
- ▶ Contact patients who are due for preventive visits
- ▶ Identify patients in need of screenings or intervention



### Features include:

- ▶ Quick and easy data sorting and filtering
- ▶ Reminders of soon-to-be overdue tests
- ▶ Download information into PDF format or Excel spreadsheets
- ▶ Accessible Member Profiles for specific patients of interest

To access the registry, visit [www.caresource.com](http://www.caresource.com). Click on the Providers tab, then visit the Provider Portal. For more information call Provider Services at **1-800-488-0134**.

## New phone menu option for hospitals

To provide the quickest, most direct service to providers, CareSource now has a new phone menu option for hospitals. If you call CareSource on behalf of a hospital, please listen for the new option. We now have specially trained customer service representatives to handle your questions and inquiries. We want to make sure all provider calls are directed to the most appropriate CareSource team member to receive prompt service.

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## How to reach us

Provider Services: **1-800-488-0134** (TTY: 1-800-750-0750 or 711)  
CareSource 24, 24-Hour Nurse Advice Line: **1-866-206-0554**



## Interpreter services help reduce barriers to care

**Provider Toolkit** — We're making it easier for you to do business with us. Our online Provider Toolkit is a web-based resource that includes:

- ▶ Policy updates
- ▶ Manuals and forms
- ▶ Assessment tools
- ▶ Frequently asked questions (FAQs)
- ▶ External web links

Accessing the toolkit is easy:

- 1) Visit our website at [www.caresource.com](http://www.caresource.com)
- 2) Click on the Providers tab
- 3) Under "Quick Links" click on "Provider Log In"
- 4) Enter your User Name and Password
- 5) Click on the Log In button
- 6) Click on the Provider Toolkit menu option

We hope you will find the toolkit a valuable resource in helping serve your patients. If you have any questions or feedback, please email us at [providerportalfeedback@caresource.com](mailto:providerportalfeedback@caresource.com).

**Provider Updates** — Remember, you can get the most up-to-date information about CareSource policy or process changes on our website, [www.caresource.com](http://www.caresource.com), click on:

- ▶ Providers
- ▶ Provider Materials
- ▶ Updates/Announcements

We want to make it easy for you to get the information you need.

CareSource offers sign and language interpreters for members who are hearing impaired, visually 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 Provider Services at **1-800-488-0134** (TTY: 1-800-750-0750 or 711).

## Specialty Pharmacy initiatives coming soon



CareSource will be implementing a series of initiatives over the next several months to help improve processes for Specialty Pharmacy utilization — medications that are typically reimbursed as a medical benefit. These initiatives are designed to provide the highest level of member convenience, compliance and therapeutic monitoring. Initiatives include:

- ▶ Collaboration with the prescribing physician for possible home administration
- ▶ Collaboration with the prescribing physician to consider a lower-cost alternative
- ▶ Supporting the prescribing physician in obtaining the necessary prior authorizations for the designated drugs

We hope these efforts will improve member satisfaction, provider service, and health outcomes.

## 2010 Provider Manual now available



Our newly revised Provider Manual is available online at [www.caresource.com](http://www.caresource.com). Go to "Quick Links" on the left and select Provider Manual.

## Current provider addresses required for transportation benefit

Please help us keep our provider records up-to-date to maintain our transportation benefit for members. To notify CareSource of any address changes or additions, please call Provider Services at **1-800-488-0134**



or contact your provider relations representative.

Accurate and up-to-date addresses for all of your practice locations are required for CareSource members to get services from our

transportation vendor, Provide-A-Ride. If a member requests a ride to your location and the address is not in our system, the vendor will not be able to provide transportation, which could result in a missed appointment.

We appreciate your help in maintaining this vital service for CareSource members.

## CareSource Advantage — Important Reminder

As of January 1, 2008, CareSource began offering a Medicare Advantage special needs health care plan, CareSource Advantage. CareSource Advantage is available to those eligible for Medicare Part A and Part B, as well as Medicaid. As a person dually eligible under Medicare and Medicaid, CareSource members should present their CareSource Advantage ID card and their Medicaid Fee-For-Service ID card each time they visit their provider.

### How to Bill for CareSource Advantage:

- ▶ Bill CareSource for the Medicare portion of your CareSource Advantage patients' services.
- ▶ CareSource is the primary payer for CareSource Advantage members.
- ▶ Medicaid Fee-For-Service is the secondary payer.
- ▶ After you receive payment from CareSource, if the service is eligible for any additional payment through Medicaid, you must bill Medicaid Fee-For-Service for the unpaid balance.

CareSource accepts both paper and electronic claims, which must be submitted within **180 days** of the date of service. Please send all Medicare paper claim forms to:

**CareSource**  
**Attention: Claims Department**  
**P.O. Box 8730**  
**Dayton, OH 45401-8730**

Please remember that our contract with providers requires that in no event, including but not limited to nonpayment by Plan, insolvency of Plan, or breach of the agreement, shall provider bill, charge, collect a deposit from, seek remuneration or reimbursement from, or have any recourse against a Medicare Advantage member for health care services provided pursuant to the Agreement.

However, providers are allowed to collect co-insurance or co-payment amounts as specifically provided in the evidence of coverage, or fees for uncovered health care services delivered on a Fee-For-Service basis. Please refer to your agreement with CareSource for specifics regarding this contract provision.

## Smoking cessation during pregnancy



### **Brief interventions can make a big difference**

Looking for the best way to integrate smoking cessation intervention into routine prenatal care? Using the five A's of smoking cessation is an efficient, evidence-based approach to asking about and treating tobacco use in clinical settings serving pregnant women.

1. **Ask** about smoking at every patient visit
2. **Advise** every smoker to stop
3. **Assess** the patient's readiness to quit
4. **Assist** patients with a cessation plan
5. **Arrange** a follow-up visit and discuss smoking at every subsequent visit

Studies show that routine advice from physicians to stop smoking helps patients quit. Brief counseling using the five A's can be even more effective.



The American Congress of Obstetricians and Gynecologists (ACOG) offers a free toolkit to help prenatal care providers with effective interventions including a Continuing Medical Education – (CME) accredited guide, an interactive web-based program, patient materials and other information resources. Visit [http://www.acog.org/departments/dept\\_notice.cfm?recno=13&bulletin=1863](http://www.acog.org/departments/dept_notice.cfm?recno=13&bulletin=1863).

### **We can help your patients**

Remember, CareSource members can receive personal counseling to help them quit smoking by calling the Ohio Tobacco Quit Line at **1-800-QUIT-NOW** or **1-800-784-8669** (TTY: 1-888 229-2182). Tobacco counselors are available seven days a week.

CareSource also covers limited quantities of nicotine patches, gum and lozenges without requiring a prior authorization.

## CareSource collaborates with ODJFS IMPROVE project aimed at reducing avoidable ED visits

CareSource is excited to participate in a statewide collaborative effort to reduce avoidable Emergency Department (ED) utilization called IMPROVE – Implement Medicaid Programs for the Reduction of Avoidable Visits to the Emergency Department.

This effort, facilitated by the Ohio Department of Job and Family Services, includes hospitals, physicians, community partners and other managed care plans across the state, aims to improve care by:

- ▶ Promoting the most appropriate care setting

- ▶ Promoting meaningful alternatives to ED utilization consistent with the concept of the Patient Centered Medical Home
- ▶ Supporting improved communication among health care providers, community partners and managed care plans

Toledo, Cleveland, Cincinnati, Columbus and Akron are the five communities that have been targeted for this 18-month effort. If you have questions, please contact your provider relations representative.

## Incorporating BMI measurement into practice

Routinely measuring body mass index (BMI) can identify patients whose BMI is beginning to rise and promote discussions that may influence healthier habits early on. BMI trending can also identify patients who are under weight and may be suffering from an eating disorder or other illness.

BMI should be calculated at least annually or as needed for weight management. If needed, schedule a follow-up appointment that is dedicated to discussing weight concerns.

### Helpful resources

- ▶ **National Heart Lung and Blood Institute**  
[http://hp2010.nhlbihin.net/bmi\\_palm.htm](http://hp2010.nhlbihin.net/bmi_palm.htm)
- ▶ **Centers for Disease Control and Prevention**  
[www.cdc.gov/nccdphp/dnpa/bmi/index.htm](http://www.cdc.gov/nccdphp/dnpa/bmi/index.htm)
- ▶ **U.S. Department of Health and Human Services**  
[http://www.nhlbi.nih.gov/health/prof/heart/obesity/aim\\_kit/steps.pdf](http://www.nhlbi.nih.gov/health/prof/heart/obesity/aim_kit/steps.pdf)

BMI Result	Action Plan*
<b>Below 18.5</b> <b>Underweight</b>	<ul style="list-style-type: none"> <li>▶ Communicate BMI result</li> <li>▶ Schedule follow-up for further work-up as indicated</li> </ul>
<b>18.5 – 24.9</b> <b>Healthy</b>	<ul style="list-style-type: none"> <li>▶ Communicate the BMI result</li> <li>▶ Reinforce healthy behaviors</li> </ul>
<b>25.0 – 29.9</b> <b>Overweight</b>	<ul style="list-style-type: none"> <li>▶ Communicate the BMI result</li> <li>▶ Provide introductory counseling</li> <li>▶ Plan for follow-up</li> </ul>
<b>30.0 and above</b> <b>Obese</b>	<ul style="list-style-type: none"> <li>▶ Communicate the BMI result</li> <li>▶ Schedule any appropriate lab work</li> <li>▶ Plan follow-up for more intensive counseling or refer for further intervention</li> </ul>

\* Larorick, Suzanne, MD, MPH, *Integrating A Focus on Overweight and Obesity in Clinical Practice: Practical Suggestions*, NC Med J July/August 2006, volume 67, Number 4, Printed 02/02/2009.

## Innovative programs for care coordination

CareSource has initiated our Care Transitions program, a multi-faceted approach to improve member engagement, orchestrate discharge needs, and focus on care coordination. Two important parts of this program include:

### Bridge to Home

Bridge to Home focuses on discharging the patient. It is designed to transition members safely from a medical or behavioral health inpatient setting in an acute-care or skilled nursing facility to home. It includes personal patient support to reduce hospital readmissions and emergency room visits after discharge.

CareSource nurses visit or call members while they are still in the hospital to help coordinate their discharge needs. Our nurses ensure that members understand their CareSource benefits. They help them make follow-up appointments, obtain prescribed medications prior to discharge, and coordinate other medical services.

### Health Care Home

This patient-centered medical home pilot program includes designated Care Management staff assigned to a participating Health Care Home program provider office. The Care Manager is the primary point of contact for the provider office. They focus on member engagement, service integration, care coordination and education. This approach focuses on collaboration among the entire team of health professionals and services available to each member.

## Medical record reviews focus on preventive screenings



CareSource conducts a variety of medical record reviews to calculate our Health care Effective Data and Information Set (HEDIS) quality ratings. Thank you for helping us during the busy 2010 review season. We look forward to sharing our final rates with you soon.

Please remember that accurate and timely submission of claims and encounter data throughout the year can help alleviate the burden on providers during the HEDIS medical record review season. We will continue to work with providers to collect HEDIS-required information and assist with optimal billing practices. CareSource understands that record reviews require your staff's valuable time, and we appreciate your cooperation with our requests and your attention to detail in documenting patient care.

We continue to educate our members about the importance of the following checkups and health screenings. Thank you for ensuring your patients receive all appropriate screenings and that they are accurately documented. Screenings include:

### Diabetes

- ▶ LDL
- ▶ HbA1c
- ▶ Kidney function test
- ▶ Blood pressure screening
- ▶ Annual retinal eye exam

### Women's health screenings, as appropriate

- ▶ Mammogram
- ▶ Chlamydia screening
- ▶ Annual Pap test

### Well-child care

- ▶ Immunizations and lead screening
- ▶ Children and adolescents are reminded to schedule and keep visits with their doctors

### Asthma

- ▶ We remind members of the importance of filling maintenance and rescue medications prescribed by their doctor

### Pregnancy care — We encourage members to receive:

- ▶ Timely prenatal and postpartum care
- ▶ An initial prenatal visit during the first trimester
- ▶ A postpartum visit 21-42 days after delivery



## ProviderSource

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

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ACCREDITED  
HEALTH PLAN (for Medicaid)  
HEALTH CALL CENTER