

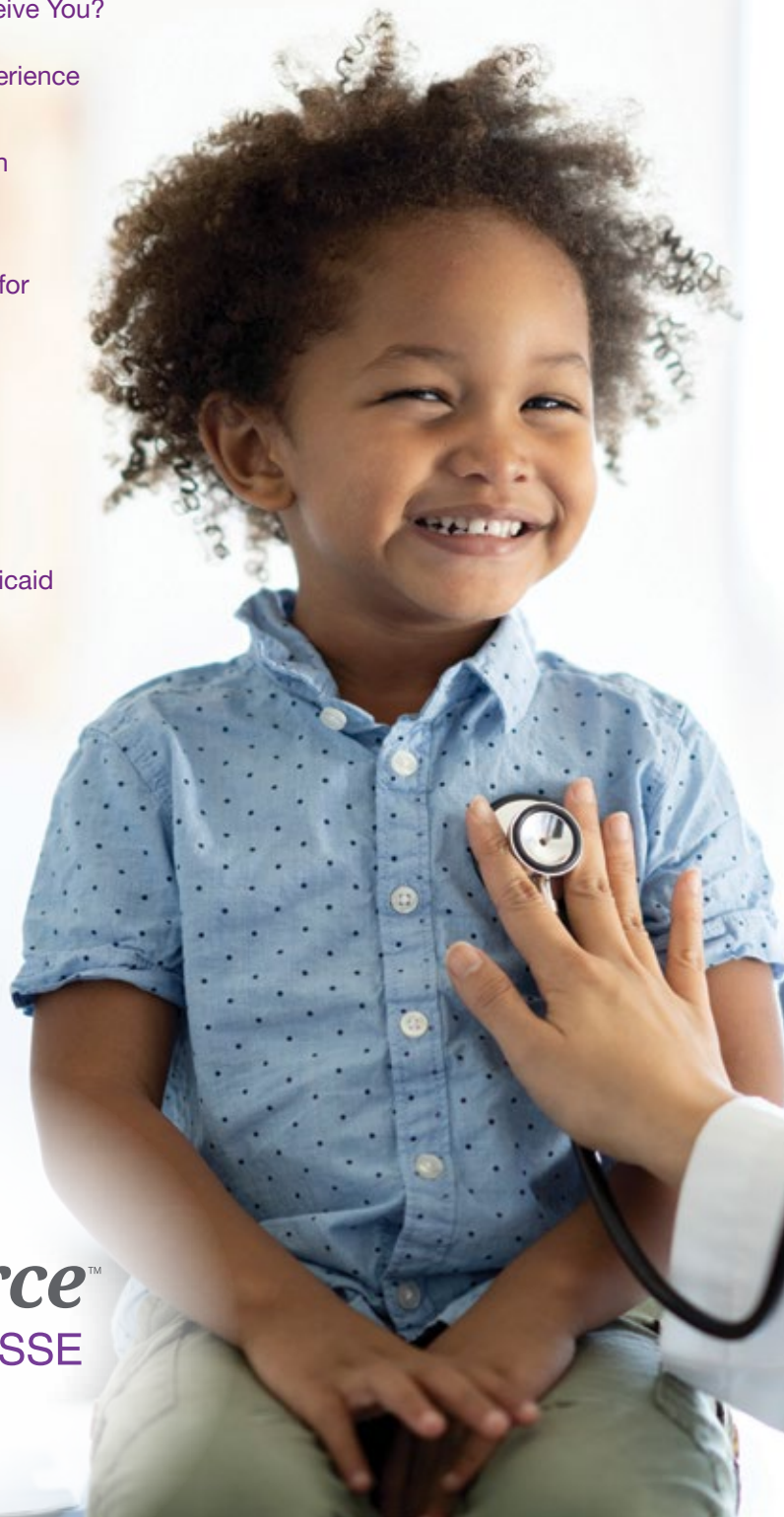


SPRING 2025

# PROVIDER *Source*

A Newsletter for CareSource® PASSE Health Partners

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## Chief Medical Officer's Note

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As we embark on the new year, we want to take a moment to express our deepest gratitude for your unwavering dedication to patient care. We recognize that many patients, whether healthy or managing chronic conditions, have been hesitant to re-engage with the health care system, leading to delays in preventive care, routine screenings, and even necessary treatments. Your efforts in guiding them back to prioritizing their health are invaluable, and we are committed to supporting you in this mission.

CareSource PASSE™ continues to find innovative ways to support you, as we understand that patients are becoming more complex in this post-pandemic era. It is especially critical that patients with complex medical conditions receive the support, coordination, and guidance necessary to navigate their health care journey effectively. Our dedicated Care Management team is here to assist, offering patient education, service coordination, and help in addressing social determinants of health that may be barriers to care. We encourage you to connect with us or to direct your patients to our services so that, together, we can ensure they receive the care they need.

Additionally, this winter season, we want to emphasize the importance of preventive health measures, particularly vaccinations. Influenza and respiratory syncytial virus (RSV) continue to pose significant risks, and immunization remains a vital tool in reducing transmission, protecting vulnerable populations, and alleviating strain on health care resources. By working together to encourage vaccinations and preventive care, we can help safeguard public health while supporting your efforts to provide compassionate, high-quality medical services.

Thank you for your partnership, your dedication, and for delivering health care to those who need it the most in our communities. We are proud to stand beside you and partner with heart and purpose.

Sincerely,

*Michael Wilson, MD*

Dr. Michael Wilson  
Medical Director, Behavioral Health



## How Do Your Patients Perceive You?

Every year, from February through May, CareSource PASSE is required to conduct patient experience surveys, such as the Consumer Assessment of Healthcare Providers and Systems (CAHPS®). In this anonymous survey, many of your CareSource PASSE patients will be asked questions about their experiences with providers and the health plan. It is the patients' chance to voice their opinion.

We know your team works hard to provide the best care for every patient on every visit! Our partnership makes a big impact on the patient's perception of their health care experience, and we are here to help.

### Some things to consider:

- ✓ How would your patients rate the care you provide?
- ✓ Can patient appointments be scheduled “easily” and “as soon as needed”?
- ✓ When making a referral, do you inform your patients about how long it will take to get the appointment?
- ✓ Are you working with patients to proactively schedule routine care and screenings?
- ✓ Are your patients aware of your hours and where to go for urgent care?
- ✓ Will your patients think you are informed and participating in their health care plan?
- ✓ Will your patients think you spent time explaining things, including necessary vaccinations, test processes and results?
- ✓ How would your patients rate how well you listened carefully, showed respect, and spent the needed amount of time with them?

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We appreciate all that you do and look forward to continuing as your partner in delivering a high standard of care!

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*CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).*

# Join Us at the Provider Experience Focus Group Meetings

We invite you to join our Provider Experience Focus Groups, where we will gather your feedback on ways to better support to you.

Below you will see the topics to be covered each quarter. If the topic is not relevant to you, please share this invite with the appropriate staff in your office who have knowledge or experience working with the topic. We include a Question & Answer section to allow time to address any additional topics you would like to cover.

The insights gained can help guide our operational, marketing and strategic decisions to help improve your overall satisfaction working with CareSource PASSE.

Space is limited and **registration is required**. For additional information, reach out to [ProviderExperiencePanel@CareSource.com](mailto:ProviderExperiencePanel@CareSource.com).

## 2025 Schedule with Registration Links

Q1 Provider Focus Group,  
**Credentialing:**

February 21, 2025 at 11 a.m. Eastern Time (ET)  
and 2 p.m. ET

Q2 Provider Focus Group,  
**Claims:**

May 13, 2025 at 11 a.m. ET  
and 2 p.m. ET

Q3 Provider Focus Group,  
**Web Improvements:**

September 18, 2025 at 11 a.m. ET  
and 2 p.m. ET

Q4 Provider Focus Group,  
**Emergency Room Usage:**

December 10, 2025 at 11 a.m. ET  
and 2 p.m. ET

# Network Notification Bulletin

UPDATES



CareSource PASSE regularly communicates operational updates on our website. Our goal is to keep you updated with a format that is quickly accessible and keeps you informed about working with us. Here are some network notifications posted from the previous quarter that you may have missed:

- [Authorization Time Periods for CES Waiver Services](#)
- [Modifier JG 340B Acquired Drug Update](#)
- [Electronic Visit Verification \(EVV\) Compliance Deadline](#)

Network notifications can be accessed at **CareSourcePASSE.com** > Providers > [Updates & Announcements](#).

We would like to remind you of our electronic policy postings, conveniently packaging medical, pharmacy, reimbursement and administrative policy updates into a monthly network notification for your review. You can find our provider policies listed at **CareSource.com** > Providers > [Provider Policies](#).



# Virtual Quality Trainings

CareSource PASSE will be offering several opportunities to virtually train providers on our quality initiatives this year, including our three Performance Improvement Projects (PIPs).

Six virtual trainings will take place in 2025, each from 11 a.m. to 12 p.m. Central Time (CT). To see the list of dates, please view the [Training Schedule](#).





# Authorization Time Periods for CES Waiver Services

CareSource PASSE is pleased to notify Community and Employment Support (CES) Waiver providers that authorization time periods have been extended to up to one-year. Previously, authorizations typically represented a six-month review period. This change aligns with general market trends for waiver services and underscores the importance. CareSource PASSE believes in our network's ability to provide quality care to members with a reduction in administrative burdens.

Effective immediately, requests for a year authorization can be submitted for any new request. Authorizations previously rendered will not be adjusted retrospectively. Authorization requests for a year will only be honored if the provider's plan covers the entire date span. Authorization requests that extend beyond the plan dates will be adjusted to reflect the number of units and time period accordingly.

CareSource PASSE prior authorization forms for CES Waiver and Supportive Living are updated to reflect the new plan period. Prior authorization forms can be accessed on **CareSourcePASSE.com** > Provider Resources > [Prior Authorization](#).

Contact [ServiceDeterminations@CareSourcePASSE.com](mailto:ServiceDeterminations@CareSourcePASSE.com) with any questions, or refer to the [Procedure Code Lookup Tool](#) to determine if a prior authorization is required.

## Performance Improvement Projects (PIPs)

In 2025, CareSource PASSE is focusing on the following three PIPs that will measure PASSE and provider performance:

1. Reducing rate of readmissions within six months of discharge from a psychiatric residential treatment facility (PRTF).
  - Focus: Reducing re-admission to a PRTF after PRTF discharge and ensuring discharged member's engagement in outpatient (OP) behavioral health (BH) services, including receipt of OP BH service within 14 days of discharge and ongoing participation in OP BH treatment.
  - Appointments for OP BH services within 14 days by Care Coordinator for planned discharges and by PRTF providers for unplanned discharges.
2. Improving Metabolic Monitoring for Children and Adolescents on Antipsychotic Medications (APM).
  - Focus: Ensuring members who are prescribed antipsychotic medications are receiving both Blood Glucose and Cholesterol Metabolic testing at baseline and appropriate intervals.
  - HEDIS measure APM will be used for this PIP and outlines requirements for meeting the measure.
  - Provider training scheduled for May 2025.
3. Improving Member Safety by Increasing Percentage of PRTF Providers submitting Incident Reports (IR).
  - Focus: Incident reporting by PRTF providers, as required by 2023 PRTF contract amendments.
  - Forms for IR submissions and video training provided on March 18, and April 15, available on **CareSourcePASSE.com**.
  - In 2024, some providers began submitting IRs electronically through DHS Incident Management Portal; in 2025, additional providers will be encouraged to begin using the Portal.



## Returning Overpayments to CareSource PASSE

Providers are required to report and return any overpayment within 60 days after identification. An overpayment is defined as any funds a provider receives from Medicare or Medicaid to which the person is not entitled. There is no minimum monetary threshold for returning an overpayment. The 60-day time period for reporting and returning begins when the overpayment is identified, or the provider is informed of the potential overpayment.

If you have received an overpayment from CareSource PASSE, please complete the [Overpayment Recovery Form](#) or [Claim Refund Check Form](#) within 60 days.

For further assistance, please contact Provider Services at **1-833-230-2100**.



## Pharmacy Updates for Medicaid

CareSource PASSE has a searchable drug list that is updated monthly on the website. To find out which drugs are covered, go to the [Find My Prescriptions](#) link under Member Tools & Resources. The most current updates can also be found there. If members do not have access to the internet, they can call Member Services at **1-833-230-2005** (TTY: 711) which is available from Monday through Friday, 8 a.m. to 5 p.m. CT. A CareSource PASSE representative will help members find out if a medication is covered and how much it will cost.

## Medication Adherence

Over 50% of adults don't take their medications as prescribed, which can lead to poor health outcomes and more hospital visits. Technology is changing health care by providing tools such as electronic pill bottles and remote monitoring devices that help patients follow their medication schedules. These tools can help improve adherence and identify patients who might be at risk for nonadherence.

While these tools can improve patient care, they can't replace the crucial role of pharmacists and health care providers in managing medications. Emphasize to your patients the importance of taking their medications as prescribed.

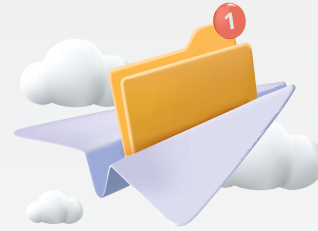


# Provider Communication Reminder

We remind you of your obligation, as a participating provider, to comply with the marketing requirements set forth in the Arkansas Department of Human Services' Provider-Led Arkansas Shared Savings Entity (PASSE) Provider Agreement. In particular, under that agreement, participating providers are not permitted to distribute information to a potential member about enrolling in a specific PASSE.

Moreover, as outlined in your Provider Agreement with CareSource PASSE, you may not use CareSource PASSE's name in any written materials intended for public distribution without first obtaining CareSource PASSE's prior, written approval. However, you are permitted to use CareSource PASSE's name to inform the public that you are a participating provider.

For contracting questions, please contact the Arkansas Network email [Arkansas\\_Network@CareSource.com](mailto:Arkansas_Network@CareSource.com).



## Claims Processing

To ensure prompt claims processing and payment, it is important for CareSource PASSE to have updated rosters for your practice or organization. We request that rosters are submitted monthly and that, in addition to physician updates, you include non-physician professionals that might be included on your claims, such as nurse practitioners, licensed therapists, licensed counselors, clinical nurse specialists, physician assistants, BCBAs, QBHPs, and those who provide waiver or personal care services, etc. Please also remember it is important to update CareSource PASSE when you receive a new Medicaid ID and/or practice location.





P.O. Box 8738  
Dayton, OH 45401-8738

#### VISIT US

[CareSourcePASSE.com](https://www.CareSourcePASSE.com)

#### JOIN US



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## Member Corner

The MemberSource newsletter is a great resource to stay up to date with health, wellness, and plan information for your CareSource PASSE patients. To view editions of the MemberSource newsletter, visit [CareSourcePASSE.com](https://www.CareSourcePASSE.com) > Members > Education > [Newsletters](#).

*Thanks for your partnership, and we look forward to another year working with you!*