



NETWORK *Notification*

Notice Date: August 29, 2025
To: Arkansas PASSE Providers
From: CareSource PASSE
Subject: Record Requests

Summary

Per our policies, provider contracts, and HIPAA privacy regulations, CareSource PASSE is authorized to request member protected health information (PHI) for making decisions around treatment, payment, or health plan operations.

The purposes for which member medical, clinical, and/or service records (“medical records”) may be used include, but are not limited to:

- Collection of data for:
 - Reporting requirements
 - HEDIS and other outcome measures
 - Quality improvement activities, such as performance improvement projects (PIP)
- Quality of care (QOC) reviews
- Care coordination
- Special reviews, audits, or investigations
- Utilization management
- Claims payment

CareSource PASSE is currently completing the annual external quality review as required by the Arkansas Department of Human Services (DHS). Part of the DHS requirements include a demonstration of our ability to collect and provide member records. Please be aware that your Health Partner may reach out requesting records to support this audit.

Impact

In general, providers are expected to respond to medical record requests within 14 days from initial receipt of the request. In the event that a state, federal, or regulatory agency makes a request, or if the health and safety of a member requires that medical records be submitted under a shorter time frame, providers are expected to comply with the shorter turnaround time.

Providers that utilize third-party health information management vendors are responsible for ensuring medical records are provided to us. We are not subject to any fees charged by health information management companies for medical records retrieval or submission.

Questions?

For contracting questions, please contact Arkansas_Network@CareSource.com.

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