



ADMINISTRATIVE POLICY STATEMENT Ohio D-SNP

Policy Name & Number	Date Effective
Benefits Coordination-OH D-SNP-AD-0786	12/01/2022-11/30/2023
Policy Type	
ADMINISTRATIVE	

Administrative Policy Statement prepared by CareSource and its affiliates are derived from literature based on and supported by clinical guidelines, nationally recognized utilization and technology assessment guidelines, other medical management industry standards, and published MCO clinical policy guidelines. Medically necessary services include, but are not limited to, those health care services or supplies that are proper and necessary for the diagnosis or treatment of disease, illness, or injury and without which the patient can be expected to suffer prolonged, increased or new morbidity, impairment of function, dysfunction of a body organ or part, or significant pain and discomfort. These services meet the standards of good medical practice in the local area, are the lowest cost alternative, and are not provided mainly for the convenience of the member or provider. Medically necessary services also include those services defined in any Evidence of Coverage documents, Medical Policy Statements, Provider Manuals, Member Handbooks, and/or other policies and procedures.

Administrative Policy Statements prepared by CareSource and its affiliates do not ensure an authorization or payment of services. Please refer to the plan contract (often referred to as the Evidence of Coverage) for the service(s) referenced in the Administrative Policy Statement. If there is a conflict between the Administrative Policy Statement and the plan contract (i.e., Evidence of Coverage), then the plan contract (i.e., Evidence of Coverage) will be the controlling document used to make the determination.

According to the rules of Mental Health Parity Addiction Equity Act (MHPAEA), coverage for the diagnosis and treatment of a behavioral health disorder will not be subject to any limitations that are less favorable than the limitations that apply to medical conditions as covered under this policy.

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A. Subject

Benefits Coordination

B. Background

Ohio Medicare Dual Advantage, also known as Dual Eligible Special Needs Plan (D-SNP), is a program designed for members in Ohio who receive both Medicaid and Medicare benefits. CareSource administers the member's Medicare benefits. This policy is developed to direct providers to the appropriate CareSource policies to follow for the D-SNP program.

C. Definitions

- **Dual-Eligible SNP (D-SNP)** - A member has one health plan that administers their Medicare benefits and another health plan or FFS Medicaid that manages their Medicaid benefits. CareSource administers the member's Medicare benefits.

D. Policy

- I. D-SNP members will follow the CareSource Ohio Medicare Dual Special Needs policies.

E. Conditions of Coverage

Nonmedical community supports and services (NCSS) are available under federal authority in sections 1905, 1915(c), and/or 1915(i) and included in the PASSE program created under Arkansas Act 775. NCSS are provided with the intention to prevent or delay entry into an institutional setting or to assist or prepare an individual to leave an institutional setting. The service should assist the individual to live safely and successfully in his/her own home or in the community. NCSS must be rooted in specific member needs found identified through the Independent Assessment leading to placement in the PASSE and included within an individually created Person-Centered Service Plan (PCSP). NCSS should be reviewed and updated regularly through the care coordination and PCSP process. NCSS are not medical in nature but instead support pursuit of safe independent living and member goals clearly established in the member's PCSP.

F. Related Policies/Rules

N/A

G. Review/Revision History

DATES		ACTION
Date Issued	02/05/2020	
Date Revised	10/14/2020	Title changed from Coordination of Benefits; Updated plan name; Updated hierarchy to match caresource.com
	7/20/2022	Annual Review. References updated.
Date Effective	12/01/2022	

Date Archived	11/30/2023	This Policy is no longer active and has been archived. Please note that there could be other Policies that may have some of the same rules incorporated and CareSource reserves the right to follow CMS/State/NCCI guidelines without a formal documented Policy.
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H. References

1. Centers for Medicare and Medicaid Services. (December 1, 2021). Dual Eligible Special Needs Plans (D-SNPs). Retrieved July 1, 2022 from www.cms.gov
2. Medicare.gov. (n.d.) How Medicare Special Needs Plans (SNPs) work. Retrieved July 1, 2022 from www.medicare.gov