



  
*CareSource*

# WORKING with *CareSource*

Provider Orientation

# Health Care with Heart



## MISSION FOCUSED

Comprehensive, **member-centric** health and life services

## EXPERIENCED

With over **30 years of service**, CareSource is a leading non-profit health insurance company

## DEDICATED

We serve over **1.8 million members** through our Medicaid, Marketplace, and Medicare Advantage plans.

# 30

**YEARS**  
MISSION-DRIVEN  
CARE



**1.8 MILLION**  
MEMBERS



**COVERAGE**  
OH, KY, IN, WV, GA

# A-Z

**CONSUMER**  
ADVOCACY



**\$14M**

FOUNDATION GRANTS  
AWARDED IN OHIO\*

# *Committed to Georgia*



## PURPOSEFULLY LOCAL

- Market headquarters in **Atlanta**

## COMPASSION FOR THE UNIQUE MARKET

- Years of studying Georgia's health market & building partnerships with providers, community advocates & regulators

## FOCUSED MISSION ALIGNMENT

- Mature Medicaid managed care program
- Experience with diverse urban & rural populations



# About CareSource



## OUR MISSION:

To make a **lasting difference** in our members' lives by **transforming** their health and well-being

## OUR PLEDGE:

- ✓ Make it easier for you to work with us
- ✓ Partner with providers to help members make healthy choices
- ✓ Direct communication
- ✓ Timely and low-hassle medical reviews
- ✓ Accurate and efficient claims payment

# *Our Network*



CareSource members choose or are assigned a primary care provider (PCP) upon enrollment.

When referring patients, with the exception of family planning services, ensure other physicians are in-network to ensure coverage.

Use our Find A Doc tool at **CareSource.com** to help you locate a participating CareSource provider by plan.

## **“DO YOU TAKE CARESOURCE?”**

Be sure to ask your patients to present their IDs to ensure coverage.

# ***Our Network***



## **NOTE:**

- We cover **ALL** medically-necessary emergency services
  - We also cover any screening examinations conducted to determine whether an emergency medical condition exists
- We encourage the use of in-network providers for all services

# Patient-Centered Medical Homes



To facilitate total care integration, CareSource encourages our PCPs to obtain NCQA Patient-Centered Medical Home Recognition.

## WHAT IS A PATIENT-CENTERED MEDICAL HOME (PCMH)?

PCMH is a model of care that puts patients and families at the forefront of care, building relationships between people and their clinical care teams. Participation in a PCMH care model is associated with **increased quality** and **decreased costs**<sup>1</sup>.

## WHY PARTICIPATE?

NCQA PCMH recognition offers a clear “roadmap” for primary care transformation.

- Replace episodic care with coordinated care
- Reduce ED visits and hospitalization
- Increase preventive services
- Increase patient satisfaction
- Increase staff satisfaction
- Improve VBR rates

# PCMH Recognition



CareSource promotes and supports NCQA PCMH recognition for our providers through the following actions:

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## IDENTIFICATION

We work with our providers to assess interest and capability for becoming a NCQA PCMH recognized practice.

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## PROMOTION

We provide consultative assistance to our providers to meet the recognition requirements for NCQA PCMH.

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## COLLABORATION

We coordinate with other CMOs to better support providers on their journeys to NCQA PCMH accreditation.

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## EDUCATION

We educate our providers about medical homes and other service delivery innovations that may improve member outcomes.

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## APPRECIATION

We provide opportunity for providers to participate in PCMH-focused incentive programs.

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## REPORTING

We report to DCH providers who achieve PCMH recognition.

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# ***Member Eligibility***



- Determined by the Georgia Department of Community Health (DCH)
- Newborn enrollment
  - The newborn child will automatically be enrolled into the mother's health plan starting on the baby's date of birth.

**ALWAYS** verify a member's eligibility on the Provider Portal prior to rendering services

# *P4HB<sup>®</sup> Eligibility*



## PLANNING FOR HEALTHY BABIES<sup>®</sup> (P4HB<sup>®</sup>) ENROLLEE REQUIREMENTS

- Be able to become pregnant
- Meet family gross income requirements of  $\leq 220$  percent of FPL
- Be an uninsured female who is 18 through 44 years of age
- Not otherwise eligible for Medicaid or the Children's Health Insurance Program

Eligible P4HB<sup>®</sup> participants will be enrolled in one of three components:

1. **FAMILY PLANNING** – family planning and related services
2. **INTER-PREGNANCY CARE** – family planning and additional services, including nurse case management and a Resource Mother, for women who have delivered a very low birth weight (VLBW, weight < 1500 grams or 3.3 pounds) baby
3. **RESOURCE MOTHER OUTREACH** – assignment of a specially trained case manager and a Resource Manager to women on traditional Medicaid plans who have delivered a VLBW baby

# ***Individuals with Disabilities Education Act (IDEA) Part C***



## **PROGRAM OVERVIEW**

### **Babies Can't Wait (BCW)**

- Statewide early intervention system for infants and toddlers with special needs
- Serves children from birth to age three, as well as their families
- CareSource will be responsible for medically-necessary IDEA Part C services related to Individualized Family Service Plans (IFSPs) or Individualized Education Programs (IEP)

## **REIMBURSEMENT**

### **Billing IDEA Part C Services**

- Submit a claim and the following documents:
  - A written service plan/plan of care (WSP/POC)
  - A letter of medical necessity
  - An Individualized Family Service Plan (IFSP)

# *Member ID Card*



We issue one card per member upon enrollment.

## Members:



- **Must show** card at time of service
- **Receive** a replacement card upon PCP change
- **May call** to request a replacement card

# ID Card Samples



## GEORGIA FAMILIES®

## P4HB®



**Member ID:** <123455676>  
**Member:** <Mary Doe>  
**Primary Care Provider:**  
<John Doe  
12345 Main Street  
Atlanta, Georgia 30307  
1-404-555-1213>  
<PCP After Hours: 1-404-123-1234>  
**Member Services:** 1-855-202-0729 (TTY:1-800-255-0056 or 711)

**Medicaid ID:** <123456789101>  
**Effective Date:** <07/01/2017>  
**Dental Home:**  
<Jill Doe  
12345 Main Street  
Atlanta, Georgia 30307  
1-404-555-1213>



**Member ID:** <123455676>  
**Member:** <Mary Doe>  
**Primary Care Provider:**  
<John Doe  
12345 Main Street  
Atlanta, Georgia 30307  
1-404-555-1213>  
<PCP After Hours: 1-404-123-1234>  
**Member Services:** 1-855-202-0729 (TTY:1-800-255-0056 or 711)


**Effective Date:** <07/01/2017>



**RxBIN** - 003858  
**RxPCN** - MA  
**RxGRP** - RXINN01

**IN CASE OF AN EMERGENCY CALL 911 OR GO TO THE NEAREST EMERGENCY ROOM (ER) AND CALL YOUR PRIMARY CARE PROVIDER (PCP) AS SOON AS POSSIBLE.**  
**CARESOURCE24® NURSE ADVICE LINE:** 1-844-206-5944 (TTY: 711)  
**PHARMACIST:** 1-800-416-3630  
**PRIOR AUTHORIZATION:** 1-855-202-1058 (TTY:1-800-255-0056 or 711)  
**PROVIDERS:** 1-855-202-1058  
**GEORGIA CRISIS AND ACCESS LINE:** 1-800-715-4225

**Mail claims to:**  
CareSource, Attn: Claims Department  
P.O. Box 803, Dayton OH 45401  
[CareSource.com](http://CareSource.com)



**RxBIN** - 003858  
**RxPCN** - MA  
**RxGRP** - RXINN01

GA-MMED-2986

**IN CASE OF EMERGENCY, CALL 911 OR GO TO THE NEAREST EMERGENCY ROOM (ER). ONLY P4HB® EMERGENCIES ARE COVERED UNDER THIS P4HB® PLAN.**  
**PHARMACIST:** 1-800-416-3630  
**PROVIDERS:** 1-855-202-1058  
**GEORGIA CRISIS AND ACCESS LINE:** 1-800-715-4225

**CARESOURCE24® NURSE ADVICE LINE:** 1-844-206-5944 (TTY: 711)

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GA-MMED-2987

Always **verify** a member's eligibility before rendering services

Unlike commercial plans, CareSource members have unique identification numbers that **always** end in 00

- Each of the three P4HB components have a separate ID card design:
1. **Family planning** – pink
  2. **Interpregnancy care** – purple
  3. **Resource Mother Outreach** – yellow

# Covered Services – Georgia Medicaid and PeachCare for Kids®



- ✓ Primary care & specialty services
- ✓ Outpatient services
- ✓ Hospitalizations
- ✓ Emergency services
- ✓ Maternity & newborn care
- ✓ Mental health & substance abuse treatment
- ✓ Prescription drug coverage
- ✓ Preventive & wellness services
- ✓ Rehabilitative & habilitative services and devices

- ✓ Laboratory services
- ✓ Podiatry care
- ✓ Diagnostic imaging
- ✓ Family planning services
- ✓ DME/orthotics/prosthetics
- ✓ Home health services
- ✓ Vision services for adults & children\*
- ✓ Dental services for adults & children \*\*

\*For adults over 21, includes exam and contacts/glasses annually

\*\* Children are covered for full dental benefits. Adults over 21 receive an enhanced dental benefit of two cleanings per year and annual x-rays.

# Covered Services – P4HB®



Women enrolled in P4HB® are eligible for:

- ✓ Family planning initial and annual exams
- ✓ Follow up family planning or related services
- ✓ Family planning lab tests
- ✓ Screening, treatment and follow up for sexually-transmitted infections (STIs), except HIV/AIDS and hepatitis
- ✓ Tubal ligation (sterilization)
- ✓ Pharmacy services
- ✓ Vaccinations

## NOTE:

Limitations apply. Please refer to the Provider Manual for more information or call CareSource.

# Why CareSource?



## CareSource Enhanced Benefits and Innovations

Be sure to let your CareSource member patients know about some of the additional benefits of their CareSource membership.

- ✓ Member rewards program incentivizes healthy behavior
- ✓ Telehealth access to ensure that care is available when the patient can't get into the office.
- ✓ Life Services program for adult members or parents of pediatric members.

### Provider Communications:

Keep an eye open for our provider notifications and quarterly newsletters on **CareSource.com**.



# Access Standards



## PRIMARY CARE PROVIDER (PCP)

Routine appointment	14 calendar days
Adult sick visit	24 hours
Pediatric sick visit	24 hours

## SPECIALIST

Routine appointment	30 calendar days
Urgent care appointment	24 hours
Emergency Visit	Immediately, without prior authorization

## APPOINTMENT WAIT TIMES

For CareSource members, appointment wait times must not exceed the following limits:

- For scheduled appointments: 60 minutes
- For walk-in appointments: 90 minutes

Halfway through the maximum wait time, a CareSource member must be given an update on waiting time with an option of waiting or rescheduling the appointment:

- For scheduled appointments: after 30 minutes
- For walk-in appointments: after 45 minutes

# Contact Information



## INQUIRY

## CONTACT

PROVIDER SERVICES	1-855-202-1058
UTILIZATION MANAGEMENT FAX	844-676-0370
WEBSITE	CareSource.com
PROVIDER PORTAL	<a href="https://providerportal.caresource.com/GA/">https://providerportal.caresource.com/GA/</a>
ELECTRONIC FUNDS TRANSFER (EFT)	ECHO Health - 1-888-834-3511 (Note: dental providers use separate process through dental portal)
ELECTRONIC CLAIM SUBMISSION	GACS1
CLAIM ADDRESS	CareSource Attn: Claims Department P.O. Box 803 Dayton OH 45401
TIMELY FILING	180 days from date of service or discharge

# Provider Portal



**SAVE TIME. SAVE MONEY.** Use our secure online Provider Portal.  
With this tool you can:

Access the Provider Portal 24 hours a day, seven days a week, at  
**CareSource.com.**



Check member eligibility and benefit limits



Submit claims and verify claim status



Find prior authorization requirements



Verify or update Coordination of Benefits information (COB)



Submit and check the status of a prior authorization request



And more!

# *Register for the* PORTAL



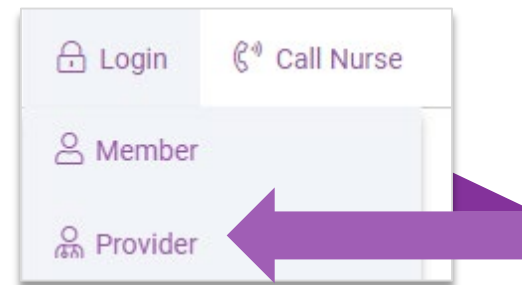
Go to **CareSource.com**. On the top right corner of the page, click Login → Provider.

Select **Georgia**.

Click [register here](#) under **Register for the Provider Portal**.

Enter your information, including your CareSource Provider Number (located in your welcome letter).

Follow remaining steps to register.



## Register for the Provider Portal

The Provider Portal makes it easier for you to work with us 24/7. It has critical information and tools to save your practice time. This helpful online tool is available for all plans.

If you are not already registered for the Provider Portal, please [register here](#). You can refer to the [Portal Registration Training Module](#) for step-by-step instructions.

If you cannot remember your login, please utilize our "[Forgot Password](#)" feature to update your information and/or reset your password.

# Prior Authorization



CareSource offers a **limited** set of medical services requiring prior authorization (PA).

Prior authorization requirements may be found on **CareSource.com** or the searchable authorization lookup tool.

The Georgia Medicaid Management Information System (GAMMIS) serves as the centralized portal for the submission of fee-for-service (FFS) authorization requests and authorization requests for certain services provided to Medicaid members enrolled in a Care Management Organization (CMO). Access the portal at <https://www.mmis.georgia.gov>.

## OTHER WAYS TO REQUEST PA:

**Email:** [gamedmgt@caresource.com](mailto:gamedmgt@caresource.com)

**Fax:** 844-676-0370 (use prior authorization form found online)

**Mail:** CareSource

Attn: Medical Management Dept.

PO Box 1598

Dayton OH 45401

# Claims



- We offer options for **efficient claim processing**
  - All clean claims will be paid in 15 business days of receipt
  - Note: If claims are not paid cleanly within 15 days, interest will be applied in accordance with DCH guidelines and Georgia regulations
- We encourage **electronic claim submission**
  - **Effective December 1, 2019, our EFT partner is ECHO Health.**
  - You must enroll with ECHO to participate.
  - Find the enrollment form online at **CareSource.com** > Providers > Provider Portal > Claims.
- Timely filing
  - Within 180 calendar days from date of service or discharge

# ***EDI Clearinghouses***



## **CLEARINGHOUSE**

## **WEBSITE**

## **PHONE**

Availity

[www.availity.com](http://www.availity.com)

1-800-282-4548

Change Healthcare

[www.changehealthcare.com](http://www.changehealthcare.com)

1-866-371-9066

## **MORE INFORMATION:**

For more claim submission information, see the Provider Manual posted on **CareSource.com**.



# QUALITY *Improvement*

The CareSource Quality Improvement program exists to ensure CareSource can:

- ✓ Coordinate care
- ✓ Promote quality
- ✓ Ensure ongoing performance and efficiency
- ✓ Improve the quality and safety of clinical care and services provided to members



# *Quality Improvement Strategy*



CareSource's quality strategy aligns with the Institute for Healthcare Improvement's Triple Aim and the National Quality Strategy.

## **TRIPLE AIM**

1. Better health
2. Better care
3. Lower costs

The strategy focuses the direction for continuous quality improvement efforts, establishing a culture of improving quality of care and services and improving the quality of care for beneficiaries enrolled.

# Quality Metrics - HEDIS®



CareSource uses HEDIS® as one of the elements to measure quality of care delivered to members.

## EXAMPLES OF METRICS MONITORED INCLUDE:

- Well-child visits in first 15 months of life
- Adolescent well-care exams
- Childhood immunization schedule
- Weight assessment and counseling for nutrition and physical activity for children/adolescents
- Follow-up care for children prescribed attention-deficit/hyperactivity disorder (ADHD) medication
- Prenatal and postpartum care
- Comprehensive diabetes care
- Controlling high blood pressure

# Quality Metrics - CAHPS®



CareSource uses the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) to capture the member perspective on health care quality.

## FOCUS AREAS:

- Customer service
- Getting care quickly
- Getting needed care
- How well doctors communicate
- Ratings of all health care, health plans, personal doctors and specialists

We value your partnership in improving the health and well-being of CareSource members. We also appreciate your assistance when we request medical records to support HEDIS® medical record review and the review of care provided to CareSource members.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).  
CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

# *Pharmacy* OVERVIEW



## PARTNERSHIP WITH EXPRESS SCRIPTS

Caresource works collectively with Express Scripts, our pharmacy innovation partner, to manage our prescription drug costs and to develop and implement plan-specific formulary or formularies.

## SPECIALTY DRUGS

Accredo is our preferred specialty provider and can provide specialty medications directly to the member or the prescribing physician and coordinates nursing care if required.

## E-PRESCRIBING

CareSource formulary files are available through your EMR, EHR or E-prescribing vendor.

## RESOURCES

Authorization requirements for prescriptions may be found on your plan's Provider pages under the Pharmacy section.

The Formulary Search Tool and prior authorization lists are available on **CareSource.com**.

MTM (Medication Therapy Management) – allows pharmacists to work collaboratively with physicians to prevent or address medication-related problems, decrease member costs and improve prescription drug adherence.

# *Member Resource Page*



Help your CareSource patients understand their insurance coverage.

Encourage them to visit **CareSource.com**, where they can access:

- Searchable online formulary
- Find a Doctor/Provider tool
- Member handbook
- Forms
- And more

**CareSource.com/Members**

# *Care and Disease* MANAGEMENT



## WE EDUCATE MEMBERS THROUGH:

- MyHealth online self-management tool
- Disease-specific newsletters
- Evidence-based curriculum
- One-to-one care management (if they qualify)

## CARE MANAGEMENT

You may refer a patient for care management by calling **1-855-202-1058**.

## DISEASE MANAGEMENT

If you have a patient with asthma, diabetes, or hypertension who you believe would benefit from this program and are not currently enrolled, please call **1-844-438-9498**.

# *Behavioral Health*



## CARESOURCE BEHAVIORAL HEALTH STRATEGY

We address mental health and substance use disorders through:

- Working with providers to improve access and outcomes
- Sharing and using data across systems of care to ensure quality and compliance Care coordination programs that engage members in care and retention in treatment
- Promoting prevention and education initiatives and approaches that reduce potential harm

## OUR COMMITMENT TO YOU

- Joint planning for quality programs
- Receiving education from Community Services Boards (CSBs) and Community Mental Health Core providers on preferred practices
- Relationship development & ongoing collaboration



A regional and community-based care coordination model.  
Population health platform based on concepts of self-management and individualized health journeys:

Innovative use of data analytics to categorize & assign members;  
personalized messaging

Every member gets a care plan they can manage themselves, with the right level of support where needed

Leverages community resources & existing relationships to streamline delivery of care to the member



# Life Services



CareSource Life Services help our members get and keep jobs they need to improve their lives. This service is offered at no cost to our members.

## HOW DOES IT WORK?

CareSource Life Services members get their own CareSource Life Coach who helps them build a personal plan for success. We provide training and partner with employers and organizations in the community to connect our members to resources and opportunities.

## WE CAN HELP MEMBERS WITH:



EMPLOYMENT ASSISTANCE



INTERVIEW SKILLS



DEPENDABLE TRANSPORTATION



GED CLASS ACCESS



BUDGETING ASSISTANCE



JOB TRAINING



STRESS MANAGEMENT



GIRL SCOUT PROGRAMMING



BOYS AND GIRLS CLUB  
PROGRAMMING, AND MORE!

## CONTACT US:

Email: [lifeservicesgeorgia@caresource.com](mailto:lifeservicesgeorgia@caresource.com)

Phone: 1-844-607-2828

# ***Fraud, Waste & Abuse Program***



## **Help CareSource stop fraud.**

Contact us to report any suspected fraudulent activities:



**CALL:**

1-855-202-1058



**EMAIL:**

[fraud@caresource.com](mailto:fraud@caresource.com)



**FAX:**

800-418-0248



**MAIL:**

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

# *How to Reach Us*



Whatever your question, our proven team of experts is here to help you navigate to the solution you need.

PROVIDER SERVICES	1-855-202-1058
HOURS	Monday – Friday, 7 a.m. – 7 p.m. EST

MEMBER SERVICES	1-855-202-0729
HOURS	Monday – Friday, 7 a.m. – 7 p.m. EST



# PARTNERS with *Purpose*

Are you contracted with all our plans? **Join us** on the next journey to healthy outcomes in Georgia.

Visit **CareSource.com/Contracting** to start the contracting process.



# Questions?

