HAP CareSource™ MI Coordinated Health (HMO D-SNP) Quick Start Guide

HAP CareSource™ MI Coordinated Health (HMO D-SNP) is replacing HAP CareSource™ MI Health Link. HAP CareSource MI Coordinated Health is a managed care program designed for Michiganders who receive BOTH Medicare and Medicaid benefits and live in Macomb and Wayne Counties. This quick reference guide will help answer some basic questions about working with our plan.

Provider Network

Health care providers currently contracted with our HAP Medicare Advantage HMO and HAP CareSource Medicaid plans are now HAP CareSource MI Coordinated Health providers. Please refer to our Provider Manual for plan details.

Contact information

| Provider Services | 1-833-230-2159 Monday through Friday from 8 a.m. to 6 p.m., Eastern Time (ET) |
|-----------------------------------|---|
| Website | HAPCareSource.com |
| Member Benefits | 1-833-230-2159 |
| Provider Portal | ProviderPortal.CareSource.com/MI |
| Utilization Management (UM) | 1-833-230-2159 |
| Claims Inquiries | 1-833-230-2159 |
| Check Claims Status | ProviderPortal.CareSource.com/MI |
| Find A Doctor/ Provider | findadoctor.CareSource.com/ |
| Pharmacy | 1-833-230-2159 |

Providers should only refer HAP CareSource MI Coordinated Health patients to in-network providers. This includes laboratory services. Go to our Find A Doctor tool to locate an in-network provider. For questions, please contact our Provider Services team.

HAP CareSource Member ID Cards

Check member eligibility every time a patient receives care.



[FOR EMERGENCIES: Dial 911 or go to the nearest Emergency Room. If you are not sure if you need to go to the ER, call the 24-Hour Nurse Advice Line.]

Member Services: <1-833-230-2057 (TTY: 1-833-711-4711) or 711)> 24-Hour Nurse Advice: <1-833-687-7360> Pharmacy Help Desk: <1-800-922-1557> Care Coordination: <1-833-230-2057> Claim Inquiry: <1-833-230-2159> Behavioral Health: <1-800-241-4949> <- Dental: 1-833-778-7004 (TTY: 711)> < Vision: 1-844-206-6384 (TTY: 711)>

< Hearing: 1-833-564-6123 (TTY: 711)>

<CMS Contract #> <Plan Benefit Package #>

<HAP CareSource ATTN: Claims P.O. Box 1186 Dayton, OH 45401-1186> Send Pharmacy claims to: <Express Scripts ATTN: Medicare Part D P.O. Box 52023 Phoenix, AZ 85082>

Send claims to:

<HAPCareSource.com>



Provider Portal

We have made it easy – providers will only need to remember one username and password to access the Provider Portal.

- Log in at hap.org with your HAP username and password.
- Select the HAP CareSource link on the home page.
- Refer to the <u>HAP CareSource MI Coordinated Health Provider Manual</u> or the <u>Provider Resources</u> webpage for additional information.

Electronic Claim Submissions

HAP CareSource MI Coordinated Health encourages providers to submit claims electronically through our Provider Portal for efficient processing.

ECHO Health

Enroll with ECHO for EFT payment: Complete the enrollment form found at **HAPCareSource.com** > Providers > Tools & Resources > Forms and fax, email or mail it back to ECHO Health, Inc.

EDI HAP CareSource MI Coordinated Health Payer ID: MIMCRCS1

Timely Filing: 180 calendar days from the date of service or discharge.

Paper Claims: HAP CareSource

Attn: Claims Department

P.O. Box 1186 Dayton, OH 45401

Services That Require Prior Authorization

Prior authorization requirements by service type can be found by using our searchable Current Procedural Terminology (CPT) look-up tool **procedurelookup.HAPCareSource.com/**.

Information about our Prior Authorization Process can be found at **HAPCareSource.com** > Providers > Provider Resources > Prior Authorization.

Please review the HAP CareSource MI Coordinated Health Provider Manual for additional information. You can find it on **HAPCareSource.com** > Provider > Tools & Resources > <u>Provider Manual</u>.

