

FALL 2015

MemberSource

A newsletter for CareSource IN Just4Me™ members



Retail Health Clinics

If you are not able to see your PCP, we want to make it easy for you and your family to get medical help when you need it most. CareSource members (18 months and older) can go to Healthcare Clinics at select Walgreens to see board-certified family nurse practitioners for basic care. At the clinic, you can:

- Get vaccines*
- Get health screenings, physicals* and wellness visits
- Get care for aches and pains, illnesses and minor injuries

At the Healthcare Clinics walk-ins are welcome and the clinic is open 7 days a week.

If you are a CareSource member and live in Ohio, you can call **855-WALGREENS** (855-925-4733) or visit walgreens.com/topic/pharmacy/healthcare-clinic.jsp for a complete list of services and to find a location near you.

*(Physicals and some immunizations are not covered by insurance at the clinics)

Patient care services at Healthcare Clinic at select Walgreens provided by Take Care Health Services, an independently owned professional corporation whose licensed healthcare professionals are not employed by or agents of Walgreen Co., or its subsidiaries, including Take Care Health Systems, LLC. Walgreen Co. and its subsidiary, Take Care Health System, LLC, provide management services to in-store clinics and provider practices.

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There's a New Way to Pay Your CareSource Just4Me Bill

There's a new way to pay your CareSource Just4Me bill. Now, you can pay through My CareSource™, your personal, online account. With My CareSource you can pay your premium, check your deductible, change your doctor, request an ID card and more – all with one convenient login.

To pay online, you need a My CareSource account. If you've already set up your My CareSource account, just log in and click on the arrow to the right of "Pay Bill." Or, click on the "Account" tab at the top of the screen and then click "Pay Now." Follow the instructions to enter your payment information. You can pay with a credit or debit card. You can also pay by transferring money from your bank account.

If you haven't set up a My CareSource account, go to **MyCareSource.com** and click "Sign Up" to get started.

- Enter your personal information. You will need your CareSource member ID number, which is printed on your ID card.
- Under the "Add a Plan" option, make sure you "add" your plan to your My CareSource account. This requires the last four digits of your Social Security number.
- Follow the online instructions to activate your account. Then, log in using your username and password.

Of course, you can still pay your Just4Me monthly premiums by phone or by mail. To pay by phone call **1-877-806-9284** (TTY for the hearing impaired: 1-800-743-3333 or 711). To pay by mail, send check or money order with your payment stub to the address printed on your bill.

Payment Tips

- Pay your premiums as early as possible each month. This lets us process and post your payment to your account. If we don't have your payment by the end of the month, you are considered past due and your benefits are at risk.
- Please allow three business days (72 hours) for processing of phone or online payments. Allow seven to 10 business days for processing of payments made by mail.
- If you fall behind in your payments, pay the full amount due to make sure you keep your coverage and benefits.

Fraud Prevention Tips – Things You Should Know

Fraud prevention is everyone's responsibility, and there are many things you can do to help. These tips will help you recognize things that you should report to CareSource. Reporting concerns helps to increase your quality of care.

Here are some things you should know:

- Protect your CareSource ID card as you would your credit card or social security card
- Ask questions – you have a right to know everything about your medical care
- Be wary of a provider who tells you that a service or item isn't usually covered, but they "know how to bill it" so it will be paid
- If someone approaches you and offers you money to give them your member ID number, report this immediately to CareSource
- If someone offers you money to receive home health services, report this immediately to CareSource
- Don't ask your doctor for a service you don't need

If you have any concerns about inappropriate behavior with a health care provider, please report it using one of the following **anonymous** options.

Call **1-877-806-9284** (TTY: 1-800-743-3333 or 711) and select the menu option for Fraud. Write us a letter or complete our confidential Fraud, Waste and Abuse Reporting Form (located at **CareSource.com**) and send it to:

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

If you are not concerned about remaining anonymous, you can also e-mail* us at **fraud@caresource.com** or fax to 1-800-418-0248.

If you choose to remain **anonymous** we will not be able to call you back for more information, so leave as many details as possible including names and phone numbers. Your report will be kept confidential to the extent permitted by law.

*Most email systems are not protected from third parties. This means people may access your email without you knowing or saying it's okay. Please do not use email to tell us information that you think is confidential. Like your Member ID number, social security number or health information. Instead, please use the form or phone number above. This can help protect your privacy.

Care Management Member Referral

As a member, there are many ways to be referred to a Care Manager.

- Your doctor can refer you by calling the Care Management line or through our online provider portal.
- Member Services can refer you to the Care Management line.
- Through our welcome calls, you have the ability to request to speak to a Care Manager.
- Our CareSource24® line can send information to the Care Management line if they feel you will benefit.
- There are several identifiers in our system that will highlight your needs to our Care Management team such as having diabetes or asthma.

If you feel you would benefit from being assigned a Care Manager please call **1-844-280-5463**.





We are here for you

Services that require prior authorization

We want to make sure you get the best care for your needs. CareSource keeps track of the services you get from Health Partners. We also discuss some services with your Health Partners before you get them. We do this to make sure the services are appropriate and necessary.

Should you need it, your Health Partner will assist you in getting prior authorization for services that need one. For example, some procedures and most inpatient hospital stays require this. There are many services which do not need a prior authorization such as lab work, X-rays, and some outpatient services.

Please see our Evidence of Coverage (EOC) found here: <https://www.caresource.com/members/indiana/just4me/plan-documents/> if you have questions about a specific service or requirement. You can also call Member Services.

People often have misconceptions about prior authorizations and utilization management programs. Utilization Management (UM) is when CareSource evaluates, according to established criteria or guidelines, the health care services members receive. We base our health decisions on making sure you have the appropriate care and services. CareSource does not award providers or our own staff for denying coverage or services.

We do not offer financial incentives to our staff that encourage them to make decisions that result in underutilization.

You can contact us any time about Utilization Management. We also provide members with interpreter services for language assistance to discuss UM issues.

- CareSource staff is available from 8 a.m. to 5 p.m. Eastern Standard Time (EST) during normal business hours for inbound calls regarding Utilization Management (UM) issues. **Just call Member Services at 1-877-806-9284 (TTY for the hearing impaired: 1-800-743-3333 or 711).**
- If you do not speak English, Member Services can also provide you with interpreter services.
- For assistance with UM issues outside of normal business hours, you may leave a voicemail message.
- You can also submit an email through our website. Visit **CareSource.com** and click on the Tell Us form from the Quick Links menu on the right side of the page.
- Voicemails or emails received after normal business hours are returned on the next business day and communications received after midnight on Monday-Friday are responded to on the same business day.

Enrollment

As your health insurance provider in 2015, we want to keep you covered in 2016. **Open enrollment will run from November 1 – January 31.** If you do not proactively change you will automatically be re-enrolled in the same plan. However, 2016 plan changes will apply.

You should have received a renewal letter in October which will provide an estimate for your premium in 2016 and highlight key changes to the plan. Please review the options available for 2016 to make sure you select the plan that best meets your anticipated health care needs.

Here are some differences between the plans:

• Bronze:

- Can get Advanced Premium Tax Credits (APTC) subsidies
- Lower monthly premiums, but higher cost shares when you use your health care benefits.
- Someone who anticipates few health care expenses throughout the year (i.e. someone healthy, who rarely goes to the doctor), may prefer a Bronze plan, to pay less in monthly premium since they don't expect to use their health insurance much anyway.

• Silver:

- Can get Advanced Premium Tax Credits (APTC) subsidies
- Only plan that allows you to get a reduced cost share if you qualify.
- Someone who anticipates few health care expenses throughout the year (i.e. someone healthy, who rarely goes to the doctor), may prefer a Silver plan, to pay less in monthly premium since they don't expect to use their health insurance much anyway.

• Gold:

- Can get Advanced Premium Tax Credits (APTC) subsidies
- Higher monthly premiums, but lower cost shares (i.e. copays, coinsurance, deductibles, etc.)
- Someone who anticipates lots of health care expenses throughout the year may benefit from a gold plan.

We encourage you to update your Marketplace application and CareSource Just4Me plan on **HealthCare.gov** by December 15. This will help determine whether you qualify for financial assistance. It also allows you to get your updated member kit and ID card at the end of December.

Remember to share the health with your family and friends, too. Tell them about CareSource Just4Me and the Health Insurance Marketplace. Many people who are uninsured will qualify for financial assistance to make their health insurance coverage affordable. Find out more at **CareSource.com/Just4Me**.

If you have questions about the 2016 benefits, you can call our licensed insurance agents to ask questions and review the options **1-877-806-9284** (TTY for the hearing impaired: 1-800-743-3333 or 711).

MemberSource is a publication of Just4Me™, a Qualified Health Plan offered through the Health Insurance Marketplace. The CareSource Just4Me™ policy has exclusions, limitations, reduction of benefits, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, visit **CareSource.com/Just4Me** or call **1-877-806-9284**.

CareSource Just4Me does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation, or health status in the administration of the plan, including enrollment and benefit determinations.





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

CareSource.com/Just4Me

HOW TO REACH US

Member Services Department:

1-877-806-9284

(TTY: 1-800-743-3333 OR 711)

CareSource24®, 24-Hour Nurse

Advice Line: **1-866-206-7880**

Join us:



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Pinterest.com/CareSource

NONPROFIT ORG.
U.S. POSTAGE
PAID
DAYTON, OH
PERMIT NO. 1436

Manage Your Medicines

Did you know you can review quarterly changes and updates to the drug formulary on **CareSource.com**? Find out if any of the medicines you take have been affected by quarterly updates by clicking on the Notice of Formulary Changes link found here:

<https://www.caresource.com/documents/in-j4m-mem-formulary-notice-of-change/>

You can also use the Preferred Drug List Link found here: **<https://www.caresource.com/documents/in-just4me-formulary-2015/>** to see information about prior authorizations, quantity limits and step therapy protocols.

If you do not have access to the internet, or if you have questions about your prescription drug coverage or problems with your pharmacy, call CareSource Member Services.

