

Care Source

Important Plan Information for 2024

# Complete your Health Needs Screening.

You can earn a \$30 Walmart® gift card

It's easy to do! Just call 1-833-230-2011 (TTY: 711) Monday - Friday between 7 a.m. to 6 p.m. Eastern Time.

$\bigcirc$	Member Welcome Letter1
	Review your CareSource ID Cards2
	Contact Us3
Ba	Getting Started4
	Your Resources6
<b>\$</b>	Keeping Up with Your Health Care8
	What is Prior Authorization?10
	Where to Get Care11
	Reward Programs
0	Healthy Indiana Plan (HIP) POWER Account14
	Medically Frail and Healthy Indiana Plan Benefits 16
H	Care Beyond Health
	Benefits At-a-Glance
	Notice of Privacy PracticesInsert
	Member Consent/HIPAA Authorization FormInsert



# Member Welcome Letter

Welcome to CareSource! We are glad to have you as a member! We are excited to serve you and other Healthy Indiana Plan (HIP) members. At CareSource, our mission is to make a lasting difference in our members' lives by improving their health and well-being. We know life is busy. We are here to make your health journey easier. We believe you deserve more than high quality health care. You deserve Health Care with Heart.

We are here to help you. Let us know if you have questions or concerns about your health care. Please call Member Services toll free at **1-844-607-2829** (TTY: 1-800-743-3333 or 711). We are open Monday through Friday from 8 a.m. to 8 p.m. Eastern Time.

Sincerely, CareSource Your ID card identifies you as a CareSource member. Everyone in your family who is a CareSource member will have their own card. They were included in the envelope with this booklet. Always show your card to health care providers before you get care. Please call Member Services at **1-844-607-2829** (TTY: 1-800-743-3333 or 711) if you have questions about your ID card. Staff can be reached Monday through Friday from 8 a.m. to 8 p.m. Eastern Time.





Member Name:<First> <Last> Member ID (MID):<MID#>

#### **Member Services:**

1-844-607-2829 (TTY 1-800-743-3333 or 711)

Member Services Hours:

8 a.m. – 8 p.m. Monday – Friday

Ri nnovations

RxBIN - 003858 RxPCN - MA RxGRP - RXINN01

Log on to **MyCareSource.com** to check for eligibility and Primary Medical Provider (PMP).





### >> MEMBER SERVICES

Please call us at **1-844-607-2829** (TTY: 1-800-743-3333 or 711) if you have any questions. We are here Monday through Friday from 8 a.m. to 8 p.m. Eastern Time. We are ready to help you:

- Get a new ID card
- Choose or change your Primary Medical Provider (PMP) or Primary Dental Provider (PDP)
- Help you find a health care provider
- Arrange transportation
- Get a printed copy of your member handbook or provider directory
- Answer any questions you may have

## >> CARESOURCE24 NURSE ADVICE LINE

If you aren't sure what to ask or where to go for care, call our CareSource24® Nurse Advice Line. Call us at **1-844-206-5947** (TTY: 1-844-743-3333 or 711). We are here for you 24 hours a day, 7 days a week, 365 days a year.



Here are a few ways to start learning more about your plan.

# Review your member handbook at CareSource.com/in/plans/medicaid/plan-documents/. It has information on:

- Our benefits (including limitations)
- Plan descriptions (and how to keep your benefits)
- Important phone numbers and webpages
- Pharmacy tools like Find My Prescriptions
- How to get care
- Full list of rewards and incentives
- Care (and disease) management information
- And much more!



Earn rewards\*† by filling out your Health Needs Screening (HNS). The HNS is a questionnaire. It asks about your health history and helps us identify health issues or concerns. Using a few questions about your health and lifestyle, we can help your health care providers coordinate your care. You can earn a \$30 Walmart® gift card when you take the HNS. It only takes a few minutes.

You can take the HNS in one of these ways:

 Online: Just log into your secure MyCareSource.com account and click on the Health tab.
 You can also scan this QR code:



- Phone: 1-833-230-2011 (TTY: 711) Monday through Friday from 7 a.m. to 6 p.m. Eastern Time
- At a health kiosk: In your local Walmart pharmacy
- By mail: Copies of the HNS will be sent to you in the mail soon. There will be one for each CareSource member in your household. Fill them out and send them back in the postage paid envelope provided.
- \* You must complete the HNS within your first 90 days with CareSource to get the reward.
- † Rewards are subject to change.

### >> MY CARESOURCE MEMBER PORTAL

My CareSource® is your personal online account. You can view claims and plan details, access rewards, update your contact information and choose how you would like to hear from us. You can also link accounts for other CareSource family members to manage them in one place. Go to **MyCareSource.com** to get started.

### >> CARESOURCE MOBILE APP

View your account on-the-go using our mobile app. You can even show your digital member ID card to providers straight from your phone! Get the mobile app free through the App Store® or Google Play®.

# >> CARESOURCE SUBSTANCE USE HOTLINE

## **CareSource Addiction Support Line**

If you would like to make changes like limiting alcohol use or stopping drug use, we can help. Call the Addiction Support Line at **1-833-674-6437**. We can also refer you to a provider who treats substance use disorder conditions.

## >> BEHAVIORAL HEALTH CRISIS LINE

Call **9-8-8** to reach a crisis counselor with the 988 Suicide and Crisis Lifeline. You can call 24 hours a day, 7 days a week. You may also call the Behavioral Health (BH) Crisis line at 1-833-227-3464 or (TTY: 1-800-743-3333 or 711) and speak to a licensed professional with mental health training.

For information on these and other mental health and substance use resources, scan this QR code.





### >> TELADOC

Visit with medical and mental health providers virtually from wherever you are. These visits are at no cost to you and Teladoc® has providers available 24/7. Call 1-800-835-2362 or visit **Teladoc.com/CareSource** to start your visit.

# PROBLEMS READING OR UNDERSTANDING THIS INFORMATION?

Call Member Services at **1-844-607-2829** (TTY: 1-800-743-3333 or 711). We can explain this information in English or in another language. If you have problems seeing or hearing, we can provide special help like large print, braille or audio. We can also provide materials in certain other languages. This is all at no cost to you. See page 7 to learn how to ask for printed copies of the member handbook or provider directory.

# >> REQUEST A MEMBER HANDBOOK OR PROVIDER DIRECTORY

Drop the card in the mail for the member handbook or provider directory if you want a printed copy mailed to you. The cards are included in this envelope. You do not need to address or add postage.

You can also go online to **CareSource.com/in/plans/ medicaid/plan-documents/** and click on member
handbook. The Find a Doctor tool has the most up-to-date
list of providers. Visit **findadoctor.CareSource.com** to find
a provider near you.

You can also call Member Services at **1-844-607-2829** (TTY: 1-800-743-3333 or 711) Monday through Friday from 8 a.m. to 8 p.m. Eastern Time. We are happy to answer your questions or send you materials.

# Keeping Up with Your Health Care

Preventive care is key for the whole family. You should see your primary medical provider (PMP) on a routine basis, even if you are healthy. Health exams, tests and screenings from your PMP can help find and treat problems early before they get worse. Your Primary Dental Provider (PDP), also called your Dental Home, can provide routine exams and cleaning. Preventive care is always covered at no cost to you. Preventive care includes:

- Yearly well-adult exams
- Breast cancer screenings (mammograms) and cervical cancer screenings (Pap tests) for women
- Prostate cancer screenings for men
- Routine dental and vision exams\*
- And much more!

Your family can earn rewards by getting preventive care! Learn more about these rewards on page 12.

Most dental and vision may not be covered under HIP basic. Please call **1-844-607-2829** (TTY: 711) to learn more about your plan.

# >> CHOOSING OR CHANGING YOUR PRIMARY MEDICAL PROVIDER (PMP)/PRIMARY DENTAL PROVIDER (PDP)

You should have a PMP/PDP that you see for health care services. It helps you and your family get care from a PMP/PDP who knows you and sees you and your family on a regular basis. **Choose your PMP/PDP** as soon as possible.

**Change or choose a new PMP/PDP** by logging into your **MyCareSource.com** account and choose one from our network.

If you do not choose a PMP or PDP, we will choose one for you. We will choose a PMP or PDP for you based on where you live and if they are taking new patients.





### What if I can't find a health care provider?

Go to **findadoctor.CareSource.com** to look for a provider. You can also call us at **1-844-607-2829** (TTY: 1-800-743-3333 or 711). We are here to help you find a health care provider to meet your needs.

## >> NETWORK PROVIDERS

There are many ways to find a network provider. Go to **findadoctor.CareSource.com** to view the most up-to-date list of health care providers in our network. You can also use the *Find a Doctor* tool on our mobile app. Or you can call Member Services for help. Health care providers in our network are those who accept your CareSource insurance plan. In most cases, we do not usually cover costs from out-of-network providers.

If you had appointments scheduled before joining CareSource, tell us right away. We may be able to help you keep your out-of-network services until you get an in-network health care provider.

Make sure your prescriptions are on the CareSource drug list.

You can use the *Find My Prescriptions* search tool to see what drugs and medical supplies are covered. We will let you know if you need prior approval for your prescriptions. Just go to **CareSource.com/Indiana**, click *Tools and Resources*, and then click *Find My Prescriptions*.

# >> EARLY AND PERIODIC SCREENING, DIAGNOSTIC AND TREATMENT

Early and Periodic Screening, Diagnostic and Treatment (EPSDT), covers care for those under the age of 21 at no cost to you. EPSDT services can help keep you or your child healthy. They include:

- Medical exams
- Dental exams
- Vision and hearing tests
- Immunizations (shots)
- Health education
- Blood lead tests
- Lab tests and much more!

EPSDT also covers medically necessary care for issues found by an exam. This includes glasses and hearing aids. If you need help scheduling your visits or transportation to any EPSDT service, call Member Services at **1-844-607-2829** (TTY: 1-800-743-3333 or 711).

# What is Prior Authorization?

**Prior authorization** is permission you need for your health care provider to provide a service and be paid back. Some services will not be paid for by CareSource if your health care provider does not ask for a prior authorization first. **Your PMP/PDP or specialist should ask us for a prior authorization.** We will decide prior authorization requests based on medical necessity, medical appropriateness and your benefit limit.

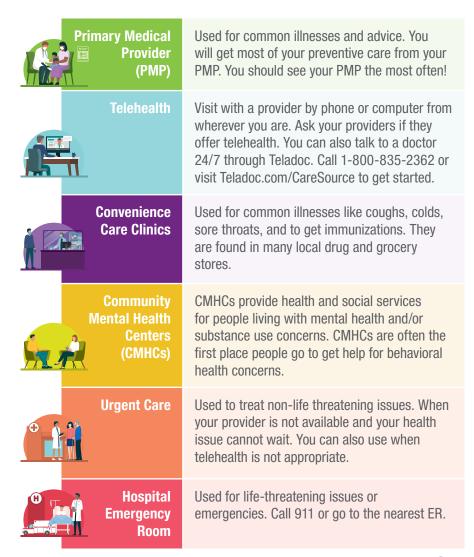
**Prior authorization requirements** for our covered services can be found online in the member handbook at **CareSource.com/in/plans/medicaid/plan-documents/**. You may also ask for a paper copy by calling Member Services at **1-844-607-2829** (TTY: 1-800-743-3333 or 711).

Do emergency services need a prior authorization? No. An emergency is a medical condition that may cause serious harm to a person's health.



# Where to Get Care

If you aren't sure where to go for care, call our CareSource24 Nurse Advice Line. Call **1-844-206-5947** (TTY: 1-844-743-333 or 711. We're here for you 24 hours a day, 7 days a week, 365 days a year.



# Reward Programs

CareSource rewards your family for taking an active role in being healthy. Your rewards can be used to buy a variety of items from different retailers. Learn how to get started below.

### >> BABIES FIRST

You and your baby can earn up to \$240\* in rewards through the Babies First® program. Simply see your provider while you are pregnant and after your baby is born. You must sign each child up for Babies First. Visit **secureforms.CareSource.com/en/BabiesFirst/**in or call Member Services to sign up.

### >> KIDS FIRST

Children ages 16 months through 17 years old can earn up to \$50\* in rewards through the Kids First program. Rewards are based on each child's age, health and wellness needs. You must sign each child up for Kids First. Visit **secureforms.CareSource.com/en/kidsfirst/in** or call Member Services to sign up.

## >> MYHFAITH

Adults can earn up to \$300\* in rewards through the MyHealth program! As a CareSource member you are automatically enrolled in the MyHealth reward program and may have already earned rewards! Go to **MyCareSource.com** and click the *MyHealth* link under the *Health* tab to get started.

\* Rewards are subject to change and limits. Rewards may vary by age, gender and health needs. You will not have access to rewards if you are no longer a CareSource member. Rewards you earned may no longer be available.



## Signing up for rewards programs is easy!

Log in to your **MyCareSource.com** account to sign up for the reward programs. You can also call Member Services or visit the links for each program to sign up.

Learn more about the benefits CareSource offers. Call Member Services at **1-844-607-2829** (TTY: 1-800-743-3333 or 711) or visit **CareSource.com**.

# ARE YOU READY TO QUIT USING TOBACCO?

CareSource is here to help! Using tobacco in any form can harm your health. It can even cause diseases that can lead to death. We help members stop using tobacco and offer rewards for participating in Quit Now Indiana. Call 1-800-784-8669 to learn more.



# PERSONAL WELLNESS AND RESPONSIBILITY (POWER) ACCOUNT

The POWER Account is a special savings account for your health care. Every HIP member starts with \$2,500 in their POWER Account. The account pays for the first \$2,500 of health care services that you get in a benefit year.

### >> MEMBER COST-SHARING

Most HIP members pay part of their coverage cost.

**HIP Basic members** will have copays for each service (such as going to see the doctor, except for preventive care, maternity services or family planning, or filling a prescription).

**HIP Plus members** will make a monthly payment. This payment is called a POWER Account Contribution (PAC). HIP Plus members will get an invoice for their PAC payment each month. The monthly amount is based on income and family size. Be sure to pay the invoice by the due date.

Pregnant women and American Indian/Alaska Native members do not pay any copays or PAC.

## >> NON-PAYMENT PENALTIES

Not paying may result in changing your coverage to HIP Basic or losing coverage. HIP Plus members will have no other costs if they pay their PAC on time. The only exception is an \$8 copay for a non-emergency visit to the ER.

All HIP members will get a POWER Account statement each month.



The statement is also on your My CareSource account. Sign up at **MyCareSource.com**. You can keep track of the funds used for health services you get. It will also show you the funds you have left. If you are a HIP Plus member, you will also have a record of PAC payments made.

### >> POWER ACCOUNT ROLLOVER

Managing your account well and getting preventive care can lower your future costs. If you spend less than \$2,500 per year, you may rollover your extra money. This will lower your monthly payment for the next year.

## >> MAKING PAYMENTS

There are many ways you can pay your PAC. You can:

- Send a check or cash in an envelope with your invoice.
- Sign onto your member account at MyCareSource.com to pay online.
- Call Member Services to pay by phone.
- Pay in person at a check-free pay location. This includes stores like CVS®, Dollar General®, Family Dollar®, Speedway® and Walmart®.
- Pay by payroll deduction. Learn more below.

# PAYROLL DEDUCTION POWER ACCOUNT CONTRIBUTIONS

Ask your employer if they offer payroll deduction for health insurance contributions. Visit **CareSource.com/documents/in-mmed-3107-member-employer-payroll-deduction-form-508/** to get the Employer Payroll Deduction Form or call Member Services.

We can work with your employer to set up the payroll deduction if they offer it. This form lets us work with your employer. It does not automatically enroll you in Employer Payroll Deduction.



# Medically Frail and Healthy Indiana Plan (HIP) Benefits

Members who are medically frail will get HIP State Plan benefits. Go to www.in.gov/fssa/hip/am-i-eligible/conditions-that-may-qualify-you-as-medically-frail/ to learn more or call Member Services. Someone may be medically frail if they have one or more of these conditions:

- Disabling mental disorder
- Chronic substance use disorder
- Serious and complex medical condition
- Physical, intellectual or developmental disability which greatly impair your ability to do one or more daily living activities (such as bathing, dressing or eating)
- Disability determination from the Social Security Administration

You must contact us to confirm your health condition. We need to determine if you qualify for enhanced benefits.

If you think you may qualify for medically frail benefits, you can call Member Services for an assessment. We have 30 days to do the assessment. We will:

- Talk with you about your health and non-health care needs
- Look at your claims
- Talk to your health care provider

You will continue with the same benefits if CareSource does not conclude that you are medically frail.



# **Completing the Health Needs Screening**

It is important to complete your Health Needs Screening if we conclude that you are medically frail.





# **Care Beyond Health**

## >> CARESOURCE LIFE SERVICES

Connect with a Life Coach who can help you find a job, finish your degree or link you to support for food, utilities or housing. Please call 1-844-607-2832 or email LifeServicesIndiana@CareSource.com to get started. You can also learn more at CareSource.com/in/members/tools-resources/life-services/Medicaid/.

### >> MYRESOURCES

Use MyResources or **CareSource.findhelp.com** to find local free or low-cost resources for food, housing, school, financial support and more. Use this tool through your **MyCareSource.com** account. You can also call Indiana 211 by dialing 2-1-1 or 866-211-9966. You can also text your zip code to 898-211.

## >> TRANSPORTATION

You can get free rides to and from your health care visits and to pick up prescriptions from a pharmacy. You can also get rides to any Women, Infant, Children (WIC) or renewal appointments at your local Division of Family Resources Office. We also offer free rides to food pantries or to pick up groceries for curbside pickup.

Prefer to use public transportation? Questions? We can help! Call Member Services at **1-844-607-2829** (TTY: 1-800-743-3333 or 711) to learn more.



### >> MYSTRENGTH

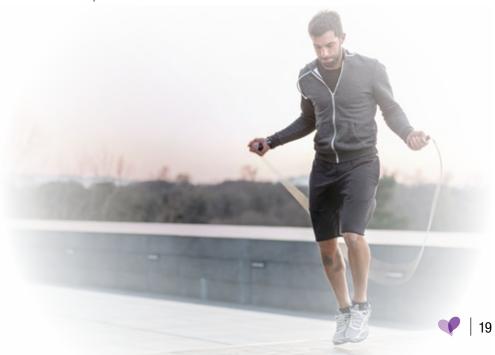
Take charge of your mental health. Try our online wellness tool called myStrength<sup>SM</sup>. This online mental health platform has:

- Self-help tools
- Wellness help
- Inspirational reading

Go to **bh.mystrength.com/CareSource** to sign up, create a profile, and learn more. You can also find myStrength on our member portal at **MyCareSource.com**. Or download the free app on your mobile device at **mystrength.com/mobile**.

### >> MYHEALTH WELLNESS PROGRAM

MyHealth is our online wellness program. MyHealth is available to all adult members at no extra cost. You can earn rewards for doing healthy activities. All adult members are signed up for MyHealth. You do not need to sign up. Go to **MyCareSource.com** and go to the *Health* tab to get to MyHealth. You can keep track of your rewards points here.



# **Benefits At-A-Glance**

At CareSource, we care about you. We know that there is more to health and well-being than just great health care. That's why CareSource offers benefits and services that go beyond basic care. This guide lists the benefits you have as a CareSource member. Use it to put your benefits to work for you!

Please refer to your member handbook online at **CareSource.com** or call Member Services to learn more about how to use your benefits. We're here to help.

### **Health Care Visits**

- Chiropractor\*
- Community Mental Health Center (CMHC)
- Convenience care clinics inside of stores like CVS®, Kroger® and Walmart®
- Emergency Room (ER)
- Federally Qualified Health Center (FQHC) and Rural Health Clinic (RHC)
- Free-Standing birth centers
- Hospital (Inpatient\* and outpatient)
- Primary Medical Providers (PMPs)
   like doctors, OB/GYNs, Physician
   Assistants and Nurse Practitioners
- Specialists (e.g., Podiatrist, Neurologist and Oncologist)
- Telehealth
- Urgent care

# Preventive and Early Detection Care/Screenings

- Annual well visit
- Autism Spectrum Disorder screening
- Blood pressure screening
- Bone mass measurements
- Cholesterol screening
- Colorectal cancer screening\*
- Diahetes tests
- Disease tests and treatments, e.g., hepatitis, Human Immunodeficiency Virus (HIV) and Sexually Transmitted Infection/Sexually Transmitted Disease (STI/STD)
- Immunizations (shots)
- Lung cancer screening
- Breast cancer screening (Mammogram)
- Nutritional assessment
- Obesity/Body Mass Index (BMI) screening and dietary counseling



- Cervical and vaginal cancer test (Pap test)
- Physical exams
- · Prostate cancer screening

# EPSDT Program (Early and Periodic Screening, Diagnostic and Treatment) (Under age 21)

- Comprehensive health and developmental exam
- Dental screening
- Developmental/behavioral test
- Health education
- Hearing tests
- Immunizations (shots)
- Lab tests
- Lead screenings (Blood test)
- Nutritional assessment
- Vision exams

# **Health Condition Management**

- Chemotherapy and radiation
- Diabetes screening
- Diabetes self-management training
- Diabetic services and supplies
- Dialysis
- Kidney disease services and supplies\*
- Pulmonary rehabilitation services\*

# **Diagnostics**

- Blood work/lab testing\*
- Scans (e.g., CT, MRI and PET)\*
- X-Rays

### Heart

- Abdominal aortic aneurysm tests
- Cardiac rehabilitation services\*
- Heart disease risk reduction visit\* (therapy for heart disease)\*
- · Heart disease testing
- Electrocardiogram (ECG/EKG)

# Mental Health and Substance Use Disorder

- All inpatient services\*
- Individual psychotherapy\*
- Intensive Outpatient Program/ Treatment (IOP/IOT) services\*
- Electroconvulsive therapy (ECT)\*
- Family psychotherapy\*
- Group psychotherapy
- Medication Assisted Treatment (MAT)
- Opioid Treatment Program (OTP) services
- Partial Hospitalization Program (PHP) services\*
- Pharmacological management
- Psychiatric diagnostic evaluation\*
- Psychological testing
- Substance Use Disorder (SUD) residential\*
- Transcranial Magnetic Stimulation (TMS)\*



# Pharmacy and Medications (Prior authorization may be required.)

- Brand and generic drugs
- Mail order drugs
- Over-the-Counter (OTC) items (Prescription from your doctor is required)

# **Medical Supplies**

- Cochlear implants\*
- Diabetic supplies
- Durable Medical Equipment (DME) and related supplies\* (e.g., oxygen tank, wheelchair/walker, wound care and CPAP machine)
- Incontinence supplies
- Nutritional supplies
- Prosthetic devices and related supplies

# Family Planning and Maternity Services

- Birth control
- Breast pumps
- Family planning exams
- Nurse midwife services
- Parent education
- Prenatal and postnatal doctor and home visits
- Sexually Transmitted Disease/ Sexually Transmitted Infection (STD/STI) screenings and treatment

- Sterilization surgery (male and female)\*
- · Well-Baby check-ups

### **Home Health Care\***

- Durable Medical Equipment (DME

   see medical supplies)
- Home infusion therapy
- Home nursing services (e.g., skilled nursing, private duty, certified nurse aid and social worker)
- Physical, occupational and speech therapy\*

# Vision/Eye Care **★**

- Contacts\*
- Glasses
- Eve exams

### **Dental** ≯

- Exams and cleanings
- X-Rays
- Dentures/partials\*\*
- Fluoride treatments (Ages 0-20)
- Orthodontics (Covers medically necessary orthodontic care only, ages 0-20)
- Surgeries and procedures (e.g., extractions and restorations)



# **Transportation Services**

- Emergency (Ambulance, air flights\*)
- Non-Emergency (scheduled ride, bus, wheelchair access)\*
- Transportation to and from Neonatal Intensive Care Unit (NICU)

### **Other Care**

- Anesthesia
- Adaptive behavior treatment\*
- Allergy testing and treatment
- Counseling/interventions to quit smoking/using tobacco (smoking cessation)
- Hearing (audiology) (e.g., exams, hearing aids\* and cochlear implant therapy)
- Hospice (facility and home)
- Inhalation therapy
- Lung cancer screening≯
- Medical Nutrition therapy
- Nutritional counseling
- Occupational therapy
- Pain management\*
- Physical therapy
- Podiatry (foot) services
- Speech therapy
- Surgeries (e.g., general, bariatric, reconstructive and transplant)
- TMJ treatment (Jaw pain or problems with jaw movement)

# Additional Programs, Services and Rewards

- Babies First® (rewards program)
- BeMe Health (HHW ages 13 up to 18)
- Behavioral health crisis line
- Care Management
- CareSource24 Nurse Advice Line
- CareSource mobile app
- CareSource Life Services®, including CareSource
   JobConnect™
- Disease Management
- Health and wellness education programs
- Kids First (rewards program)
- Medication Therapy Management
- MyHealth (rewards program)
- MyHealth online tool
- myStrength<sup>SM</sup> online mental health tool
- Personal Wellness and Responsibility Account (POWER Account)\*
- Text4Baby (Pregnancy education texts)
- ★ Available only for certain HIP plans
- \* Prior authorization may be required.

**English:** Language assistance services, free of charge, are available to you. Call: **1-844-607-2829** (TTY: 1-800-743-3333 or 711).

SPANISH - Servicios gratuitos de asistencia lingüística, sin cargo, disponibles para usted. Llame al: 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

NEPALI - तपाईंका निम्ति निःशुल्क भाषा सहायता सेवाहरू उपलब्ध छन । फोन गर्नुहोस: 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

KOREAN - 언어 지원 서비스가 무료로 제공됩니다. 전화: 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

FRENCH - Services d'aide linguistique offerts sans frais. Composez le 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

**GERMAN** - Es stehen Ihnen kostenlose Sprachassistenzdienste zur Verfügung. Anrufen unter: 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

### SIMPLIFIED CHINESE -

可为您提供免费的语言协助服务。请致电: 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

TELUGU - భాషా సాయం సర్వీసులు, మీకు ఉచితంగా లభ్యమవుతాయి. కాల్ చేయండి: 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

BURMESE - ဘာသာစကားဆိုင်ရာအကူအညီဝန်ဆောင်မှု များအား သင့်အတွက် အခမဲ့ ရရှိနိုင်ပါသည်။ ဖုန်းခေါ်ရန်: 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

تتوفر لك خدمات المساعدة اللغوية مجانًا. - ARABIC - تتوفر لك خدمات الصل على الرقم: 2829-607-844-07. أو 711). (هاتف نصيّ: 3333-743-800-1 أو 711).

URDU - ایے بالکل مفت یا 1-844 فری آپ کے لیے بالکل مفت یا 1-844 فری آف چارج دستیاب ہیں۔ کال کریں: (TTY: 1-800-743-3333 or 711)

**PENNSYLVANIA DUTCH** - Mir kenne dich Hilf griege mit Deitsch, unni as es dich ennich eppes koschte zellt. Ruf 1-844-607-2829 (TTY: 1-800-743-3333 or 711) uff.

**RUSSIAN** - Вам доступны бесплатно услуги языкового сопровождения. Позвоните по номеру: 1-844-607-2829 (ТТҮ: 1-800-743-3333 or 711).

**TAGALOG** - May mga serbisyong tulong sa wika, na walang bayad, na magagamit mo. Tumawag sa: 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

VIETNAMESE - Dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi: 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

**GUJARATI** - ભાષા સફાય સેવાઓ તમારા માટે નિ:શુલ્ક ઉપલબ્ધ છે. 1-844-607-2829 (TTY: 1-800-743-3333 or 711) પર કૉલ કરો.

**PORTUGUESE** - Serviços linguísticos gratuitos disponíveis para você. Ligue para: 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

MARSHALLESE - Jerbal in jibañ ikijen kajin, ejelok onean, ej bellok ñan eok. Kurlok: 1-844-607-2829 (TTY: 1-800-743-3333 or 711).

#### NOTICE OF NON-DISCRIMINATION

CareSource complies with applicable state and federal civil rights laws. We do not discriminate, exclude people, or treat them differently because of age, gender, gender identity, color, race, disability, national origin, ethnicity, marital status, sexual preference, sexual orientation, religious affiliation, health status, or public assistance status.

CareSource offers free aids and services to people with disabilities or those whose primary language is not English. We can get sign language interpreters or interpreters in other languages so they can communicate effectively with us or their providers. Printed materials are also available in large print, braille, or audio at no charge. Please call MemberServices at the number on your CareSource ID card if you need any of these services.

If you believe we have not provided these services to you or discriminated in another way, you may file a grievance.

Mail: CareSource, Attn: Civil Rights Coordinator

P.O. Box 1947, Dayton, Ohio 45401

**Email:** CivilRightsCoordinator@CareSource.com

**Phone:** 1-844-539-1732 **Fax:** 1-844-417-6254

You may also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:

Mail: U.S. Dept of Health and Human Services

200 Independence Ave, SW Room 509F HHH Building Washington, D.C. 20201

**Phone:** 1-800-368-1019 (TTY: 1-800-537-7697) **Online:** ocrportal.hhs.gov/ocr/portal/lobby.jsf

Complaint forms are found at: www.hhs.gov/ocr/office/file/index.html.



CareSource.com

IN-MED-M-2307650; First Use: 11/22/2023 | OMPP Approved: 11/22/2023 © 2023 CareSource. All Rights Reserved.