

## CareSource<sup>®</sup> NETWORK Notification

Notice Date:	June 14, 2021
То:	Indiana Medicaid Providers
From:	CareSource
Subject:	Provider Portal Enhancements

## Summary

Your partnership is important to us, and we strive to ensure you are aware of the latest updates to our tools and resources. This network notification highlights recent Provider Portal updates.

## **Provider Portal Updates**

<ul> <li>CareSource ID</li> <li>Medicaid ID</li> <li>Member Info</li> <li>Claim Number</li> <li>Patient Number</li> <li>Check Number</li> <li>External Reference Number</li> </ul>
<ul> <li>Claim Number</li> <li>Patient Number</li> <li>Check Number</li> </ul>
<ul> <li>Patient Number</li> <li>Check Number</li> </ul>
• Check Number
<ul> <li>External Reference Number</li> <li>Search All Claims</li> </ul>
Once the criteria has been entered to search by, you will be able to click <b>Export Claims List: CSV</b> to export the claim results into Excel.
There is a new option to search claims by, called <u>Search All Claims</u> . This will allow you to search all of your claims by a date range, CareSource ID, and Status. You will type in a <b>Start</b> and <b>End Date</b> and can enter a
CareSource ID and Status as optional. This will display all claims with the typed search criteria.
After submitting a Recovery Request, you will now receive a reference number to check the status of the recovery. You will be able to contact Customer Care one day after the recovery request has been submitted, however, the request can take up to 30 days to process.

Behavioral Health Authorizations	<b>Urine Drug Testing – Qualitative &amp; Quantitative</b> – These two options will now show for IN Medicaid.
	<ul> <li>Alcohol or Drug Assessment – This option will now display for all plan types.</li> <li>Psychiatric Diagnostic Evaluation – This option will now display for all plan types.</li> </ul>
Prior Authorization Letters	When viewing a prior authorization status, you will now be able to see the letters associated with the authorization. Once the prior authorization is located, you can view letters under the <u>Details</u> column by clicking Letters.
Inpatient/Newborn/Observation Prior Authorizations	<ul> <li>An update has been made for the below authorization types to allow the provider to select a Care Type for the submission:         <ul> <li>Inpatient – The Care Type will be the default, you will not have to select a Care Type.</li> <li>Newborn Delivery &amp; Observation – This will display the Care Type field for you to choose from <u>Elective</u> or <u>Emergency</u>.</li> </ul> </li> </ul>
Applied Behavioral Analysis	This new authorization type will be available when you select <b>Outpatient</b> as the authorization Care Setting for IN Medicaid.
Detox & Institute of Mental Illness	These new authorization types will be available when you select <b>Inpatient</b> as the authorization Care Setting. These two types will show for all plans.
Dental Provider Login	The <u>Dental Provider Login</u> link has been updated to allow you to choose to login into Skygen or DentaQuest to support the new plans beginning 1/1/2021. Both links will be available and will direct you on which to select as not all plans will be transitioned to DentaQuest. The new link to DentaQuest is now available as of <b>10/1/2020</b> .
Provider Maintenance	<ul> <li>The Provider Maintenance page received a few enhancements including changes to the form. Review below for additional details on each update.</li> <li>Provider Maintenance Form – The Provider Maintenance form has been updated to no longer allow the form to be submitted without a remittance address. If you attempt to submit the form without a remittance address, you will receive an error (shown below) to add the remittance. Additionally, the new MA/DSNP plans have been added to the maintenance form and will begin showing on 10/1/2020 for to select.</li> </ul>
Provider Portal Alerts	The Provider Portal login and home page has an updated design for the portal alerts. These new alerts will show at the top of the page. You can click the <b>Learn More</b> button to see the full description of the alert, as shown below.
Member Profile	<ul> <li>The Indiana Portal has been updated to consolidate the Member Profile with the Behavioral Profile called the report Member Profile. What displays in this report will depend on if the member has given consent and if you are the member's PCP. Please see below on what will display in the report in the following scenarios: <ul> <li>If you are NOT the member's PCP and the member:</li> <li>Provided consent – The report will display the Member Profile and the Behavioral Health related information.</li> <li>Did not provide consent – No report will be displayed.</li> </ul> </li> <li>If you are the member's PCP and the member: <ul> <li>Provided consent – The report will be displayed.</li> </ul> </li> <li>If you are the member's PCP and the member: <ul> <li>Did not provide consent – The report will display the Member Profile and the Behavioral Health related information.</li> <li>Did not provide consent – The report will display the Member Profile and the Behavioral Health information.</li> <li>Did not provide consent – The report will display the Member Profile and the Behavioral Health information.</li> </ul> </li> </ul>

Dispute & Appeal Status	Previously, when a Dispute or Appeal was filed the status would show
	as "Not Available" when reviewing immediately after submitting. The
	status has been updated to now show as "Received – Pending". This
	will give you the most appropriate status the dispute and appeal is in.

You can access the CareSource Provider Portal at **CareSource.com** > Login > Provider Portal. Simply enter your username and password (if already a registered user) or submit your information to become a registered user.

IN-MED-P-342602; Issued Date: 06/14/2021

OMPP Approved: 05/27/2021