



WINTER 2021

PROVIDER *Source*

A Newsletter for CareSource® Health Partners

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 **CareSource®**



Partnering to Improve Health

As we close out another year where COVID-19 was a top priority, we can only hope that 2022 brings us closer to getting past the public health emergency. Through it all, we continue to focus on the basics of health care: annual wellness visits, vaccinations, managing chronic conditions and addressing behavioral health needs. Ultimately, health goes beyond health care. We look to you, our partners in health care, to work with us to address the needs of our members in a holistic way.

We encourage you to leverage our resources to meet the needs of your CareSource patients. CareSource provides a [member newsletter](#) to inform our members of the latest in their benefits or specific health topics of interest. We have resources available through our [provider portal](#) and our [member portal](#) to assist with health needs. Our care management team is available to work with you and our members to coordinate care and improve compliance with your treatment plans. Provider relations managers are available to address any questions you or your staff may have regarding processes to improve care for your patients.

As a way to say “thank you” for closing care gaps, CareSource provides member and provider incentives. Improving the health of our families and community is a collective effort. Let’s continue to leverage each other’s strength and resources to make it happen!

A handwritten signature in black ink, reading "Cameual Wright".

Cameual Wright, M.D., M.B.A.
Chief Medical Officer, Indiana





Network Notification Bulletin

CareSource regularly communicates operational updates on our website. Our goal is to keep you updated with a format that is quickly accessible and keeps you informed about working with us. Here are some network notifications posted from the previous quarter that you may have missed:

CareSource would also like to remind you of our electronic policy postings, conveniently packaging medical, pharmacy, reimbursement, and administrative policy updates into a monthly network notification for your review. You can also find our provider policies listed at **CareSource.com** > Providers > [Provider Policies](#).



Indiana Medicaid Network Notifications

- [Reminder for Provider Claim Adjustment Submission Process](#)
- [Provider Network Participation Requirements](#)
- [Q4 HEDIS Incentive Update](#)
- [Information on Obtaining Naloxone](#)

Indiana Marketplace Network Notifications

- [Reminder for Claim Adjustment Submission Process](#)
- [Prior Authorization Requirement for Non-Participating Laboratory Services](#)
- [Information on Obtaining Naloxone](#)
- [Marketplace Opioid Treatment Program Coverage](#)



Provider Education: Training and Events

CareSource has launched a series of education modules that address common questions and provide information about our member programs and benefits. Please check the Training and Events pages for additional information. Go to <https://www.caresource.com/providers/education/training-events/> and select Indiana and choose a plan.

Provider Portal Introduction: Watch this 5-minute video to learn more about our portal's functionality and how to work with us through the portal's many self-service features.

Contracting: Learn about CareSource's philosophy, our product offerings, and the process for becoming a new CareSource Health Partner.

Credentialing: In this module we review credentialing requirements, steps, and best practices for submitting the required documentation to CareSource.

Quality Surveys: Provider Satisfaction Surveys: This module provides an overview of the Provider Satisfaction Survey and the ways CareSource uses the information to improve performance and relationships with our providers.

Life Services (Indiana Medicaid Only): You will hear about the ways this program addresses the gap between health care and community support services, review the ways that social determinants impact health, and the process for connecting your patients with the Life Services program.

Access & Availability (Indiana Medicaid Only): This presentation reviews the NCQA Access and Availability standards and outlines the expectations for office hour availability.



CareSource Life Services – Helping Eliminate Socioeconomic Barriers (Indiana Medicaid Only)

At CareSource, we know social determinants of health (SDoH) are key drivers of health care access, utilization and outcomes. We understand that we can't treat them separately from members' physical health, so our goal is to work closely with providers creating holistic solutions.

CareSource was an early innovator in SDoH, implementing our CareSource Life Services® program in 2015 to address and eliminate the socioeconomic barriers that our members often experience, such as access to nutrition, affordable housing, transportation, education, and sustained employment.

With that in mind, we have developed a video specifically for you, the provider, to explain more about our Life Services program and how you can refer CareSource members who you think would benefit from a bit more support.

This program is available to our CareSource members at no cost.

You can view this training by visiting <https://www.caresource.com/providers/education/training-events/>. Select the appropriate state and plan. You will see a list of Training and Events – Choose Provider Education Series: Life Services.

To connect with CareSource Life Services, call **1-844-607-2832** or email LifServicesIndiana@CareSource.com.

Change in Marketplace Grace Period Rules

CareSource's updates to their Marketplace Grace Period rules will begin impacting you in 2022. Major changes include:

1. Claims will be pended during the benefit suspension periods of the grace period until the member either pays their back due premium or until the grace period expires
2. Claims pended during this time period will also have the clock paused as they are considered unclean claims
3. Grace period rules will now vary depending if the member is receiving Advanced Premium Tax Credits (APTC)
 - a. Those receiving APTC will continue to have the 90-day grace period with benefits suspended after 30 days past due
 - b. Those not receiving APTC will have a 31-day grace period and benefits will be suspended the first day of the grace period

See below for further details, as well as our network notice, or contact Provider Services with any questions or concerns.

	2021	2022	
	All Members	APTC	Non-APTC
Grace Period Length	90 Days	90 Days	31 Days
Benefit Impact	After 30 Days	After 30 Days	Day 1
Termination Provision	Retroactive to the end of 1st Grace Period Month	Retroactive to the end of 1st Grace Period Month	Retroactive to last paid date
Pharmacy Claims	Denied after 30 days	Denied after 30 days	Denied on 1st day
Medical Claims	Paid, recouped if terminated	Pended after 30 days	Pended on 1st day



2022 Marketplace Product Changes, Effective 1/1/2022

Please remind your patients to familiarize themselves with the improvements to the Marketplace product and take full advantage of the increased subsidies available. Contact us for additional details beyond the below high-level summary of changes:

1. Continuing statewide in Indiana
2. CareSource supports virtual care through any provider and will also have \$0 care available through our telehealth partner in Indiana
3. Members should take full advantage of CareSource's health and well-being services including 24-hour nurse line, wellness advocates, incentive programs, specialty care teams and other innovative support like our MyHealth and myStrength tools
4. Mail order and retail pharmacy available in 90-day supply
5. For Opioid Treatment Programs (OTP), we are now leveraging CMS's bundled codes
6. The Prior Authorization list has been updated with additions and removals
7. We have improved our Pediatric Dental & Vision and optional Adult Dental, Vision & Fitness benefits increasing the value and supporting the member's whole health
8. Cost shares have been adjusted, be sure to re-validate



No Surprises & Transparency in Coverage Act

CareSource is working to stay ahead of recent Marketplace regulatory requirements for the No Surprises Act and Transparency in Coverage Act. In general, these regulations are intended to provide increased transparency into the costs of coverage, as well as reduce situations where members receive an unanticipated bill. It is a dynamic regulatory environment with frequent guidance updates, but at a high level these may impact your practice:

1. Members will have access to CareSource tools to estimate their cost of services based on specific services, their plan design, and your contracted rates. Additionally, you may have increased responsibilities for estimates in advance of services.
2. Costs associated to non-network provider usage in emergency situations and where members are not aware the provider is non-network (e.g. incapacitated or non-network in a network facility) will be more tightly controlled to limit the member's exposure and allow the provider & CareSource to handle cost differences. Balance billing by a provider is prohibited, except where a member expressly consents.
3. Additional contract and claims data points will be made available to the public.

As CareSource identifies process changes due to these regulatory updates that may impact you, we will continue to partner for success through our normal channels. This communication is not meant to provide the totality of requirements and is not legal advice on your responsibility with these regulations.



A Few Facts on the False Claims Act

The False Claims Act (FCA) is a federal law that prohibits a person or entity from:

- Knowingly presenting a false or fraudulent claim for payment
- Knowingly using a false record or statement to get a claim paid
- Conspiring with others to get a false or fraudulent claim paid
- Knowingly using a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property



"Knowingly" means acting with actual knowledge or with reckless disregard or deliberate indifference to the truth or falsity of information.

An example would be if a health care provider, such as a hospital or a physician, knowingly "upcodes" or overbills, resulting in overpayment of the claim using Medicaid or Medicare dollars.

Using the FCA can help reduce fraud. The FCA allows everyday people to bring "whistleblower" lawsuits on behalf of the government--known as "qui tam" suits-- against groups or other individuals that are defrauding the government through programs, agencies or contracts. Whistleblowers can receive from 15-30% of the proceeds of the action or settlement.

You can find more information regarding the False Claims Act on CareSource's website at <https://www.caresource.com/in/providers/education/fraud-waste-abuse/medicaid/>.

Pharmacy

Pharmacy Updates for Medicaid and Marketplace



CareSource has a searchable drug list that is updated monthly on the website. To find out which drugs are covered under your plan, go to the Find My Prescriptions link under Member Tools & Resources. The most current updates can be found there also. If members do not have access to the internet, they can call Member Services for their respective market and plan. A CareSource Representative will help members find out if a medication is covered and how much it will cost.

Community-Based Resources for Caregivers

CareSource serves a wide variety of members with complex health and social needs, including individuals with intellectual, developmental, and physical disabilities, mental illness and children and families involved with the child welfare system. These members rely substantially on the support of caregivers to ensure their health care and non-health care needs are met. Ensuring caregivers have the support they need is essential to ensure positive health outcomes for our members.

CareSource offers MyResources, a free online tool that provides members and their caregivers access to a database of no-cost or reduced-cost, community-based programs and charitable social services. MyResources is searchable by zip-code and resource need, and includes resources to address food insecurity, education, employment, social isolation, energy insecurity, housing instability and transportation needs.

Additionally, MyResources offers many resources available to support caregivers who provide care and support to CareSource members. For example, caregivers can search for support for adoptive and foster parents, home visiting services, support groups, educational resources, child and adult daycare, respite care and exercise and fitness classes, to name a few.

MyResources is available to CareSource members via **CareSource.com**, our mobile app and from within the member portal. Additionally, members and their caregivers may ask their care manager for specific community-based resources to support caregiver needs.





Indiana Medicaid Behavioral Health Profile

On a nightly basis, CareSource sends information to the CareSource Provider Portal, including a behavioral health profile, to the assigned primary medical care provider (PMP) on file with us. This profile lists the physical and behavioral health treatment received by that member. Information about substance abuse treatment and HIV is only released if the member has signed a consent form.

If you are a Primary Medical Provider (PMP) and want to view one of your member's behavioral health profiles, please visit the provider portal, **CareSource.com** > Provider Overview > [Provider Portal Log-in](#). If you are unable to log in to the portal, please call the CareSource Provider Services Department at **1-866-286-9949** for assistance. Feel free to check the Provider Portal at any time for updates and changes to the behavioral health profile.

We hope that the behavioral health profile assists in the exchange of health information between the PMP and the behavioral health providers treating the member to aid in coordination of care.



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We Want to Hear from **you!**

We value provider feedback and want to ensure we provide adequate communication, education and resources for you to serve our members. Please complete the survey at the link below to rate your satisfaction with the ProviderSource newsletter as well as share topics you'd like to see in future newsletter publications!

Access the survey here: https://caresource.qualtrics.com/jfe/form/SV_eb5VIK9kgmMSrpc

Thank you for your partnership!

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