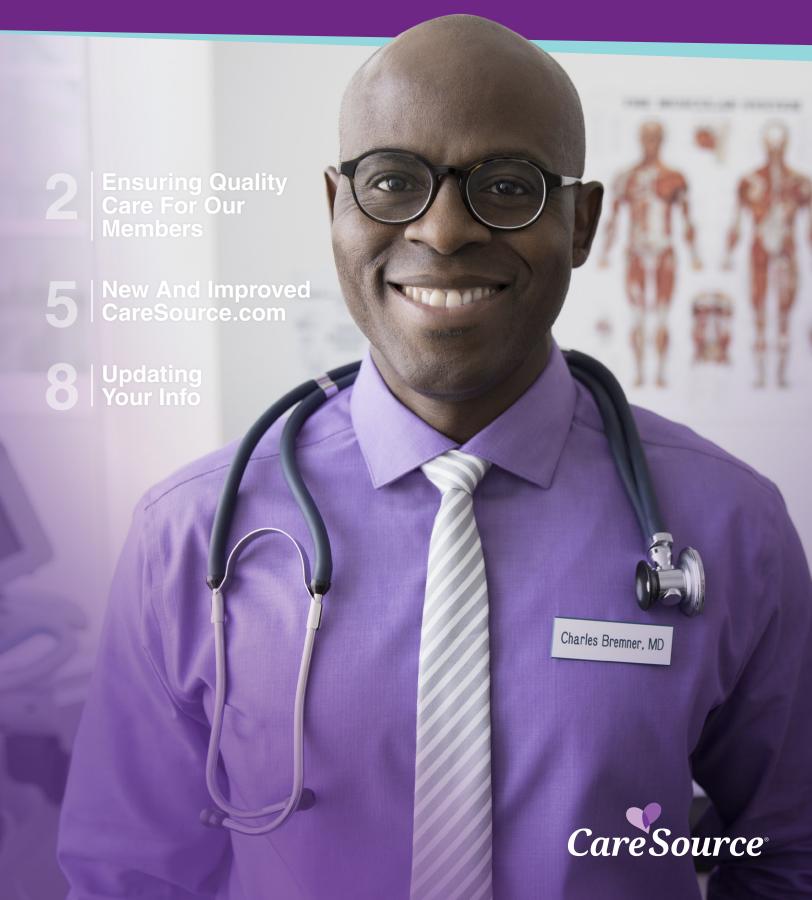


**WINTER 2018** 

# PROVIDER Source A Newsletter for CareSource® Health Partners



## FROM THE **MEDICAL DIRECTOR:** Importance of Postnatal Care

Coined the "fourth trimester of pregnancy", the weeks following delivery are critical to the health of both mom and baby. One half of pregnancy related deaths occur after the birth of the infant. This time period often involves many challenges for postpartum women, including:

- Sleep deprivation
- Bleeding concerns
- Pain
- Breast feeding difficulties
- Stress
- Decreased libido
- Physical changes

Unfortunately, up to 40 percent of women do not attend a postpartum visit and miss the opportunity to receive support and guidance during this demanding period.

The American College of Obstetricians and Gynecologists (ACOG) recommends that, rather than one touchpoint 4 to 6 weeks after delivery, postpartum care should be an ongoing process. An initial visit within 3 weeks after delivery is encouraged to fully assess the physical, social and physiological well-being of the new mother. Reproductive life planning discussions, including birth spacing and contraceptive options, should begin during prenatal care and continue into the postpartum period. Providers should make a postpartum plan tailored to each patient that fosters good health in the immediate postpartum period and beyond.

Cameual Wright, M.D., MBA Medical Director, Indiana

1 ACOG Committee Opinion No. 736. (2018). Optimizing Postpartum Care. Obstetrics & Gynecology, 131(5). doi:10.1097/aog.00000000000002633





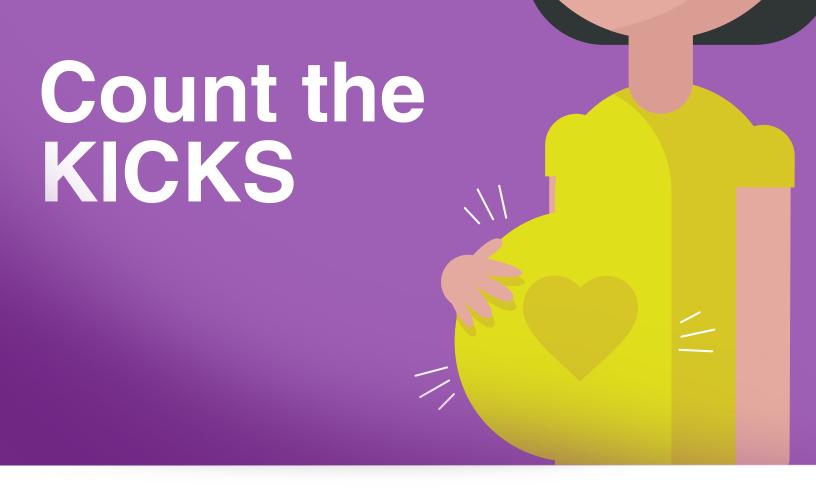
# Understanding Upcoding and Undercoding

CareSource pays for many physician services using Evaluation and Management (commonly referred to as "E&M") codes. New patient visits generally require more time than follow-up visits for established patients, and therefore E&M codes for new patients command higher reimbursement rates than E&M codes for established patients.

An example of upcoding is an instance when you provide a follow-up office visit or follow-up inpatient consultation but bill using a higher level E&M code. Another example of upcoding related to E&M codes is misuse of Modifier 25. Modifier 25 allows additional payment for a separate E&M service rendered on the same day as a procedure. Upcoding occurs if a provider uses Modifier 25 to claim payment for an E&M service when the patient care rendered was not significant, was not separately identifiable, and was not above and beyond the care usually associated with the procedure.

An example of undercoding is an instance when you bill using a lower E&M code for a more complex office visit. This causes an underfunding of the procedure performed and lost reimbursement.

More information can be found at: www.cms.gov under Outreach and Education.



Pregnant CareSource members will be getting information about a free app that will make it easier to track fetal movements. Our goal is to improve our member's chances of delivering a healthy baby and to decrease the chances of stillbirth.

Count the Kicks is a stillbirth prevention health campaign that encourages expectant mothers to track their baby's movements daily during the third trimester of pregnancy. When Mom becomes familiar with what is normal for her baby, any changes should raise red flags and prompt her to contact her health care provider. The main function of the app is to track how long it takes for Baby to get 10 movements. The app can also send a message to

remind Mom to do her kick counts. Mom can save the kick count sessions so that she can begin to see a pattern of her baby's movement. This data can also be shared with her provider so that any potential problems can be spotted early.

The app is free and is available for both Android and iOS. For more info, visit countthekicks.org.

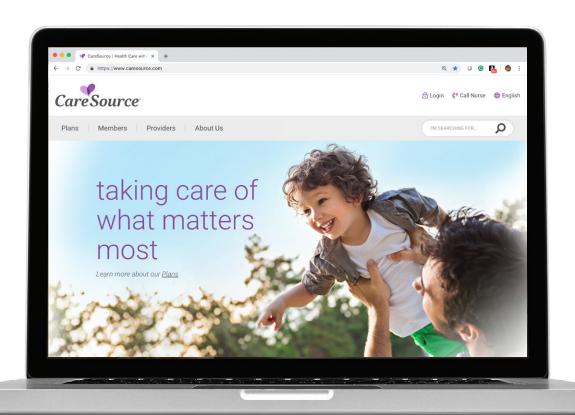


# New and Improved CareSource.com

As you may have seen, we have launched a new **CareSource.com**. In September 2018, the new CareSource.com was launched containing new and improved features. When creating this new website, we kept the members and providers at the top of mind to make a more user friendly site and allowing the ability to grow. We want to highlight some key features to enhance your usage of our website:

- The site is organized so that users can quickly find the section that matters to them.
- A large dropdown puts top tasks one click away.
- The site information is dynamic it filters content so the user can find what they need quickly.

You will notice that you are now able to clearly view the website on all types of displays, including desktops, laptops, tablets or mobile devices. If you have not already, be sure to check out **CareSource.com** and view all the new features.



# Benefits to Connecting to a Health Information Exchange

CareSource connects to a variety of state and federal health information exchanges (HIEs) in order to improve the care of our members. HIEs are organizations that allow health care providers and payers to appropriately and securely access and share a member's medical information electronically.

Participation in HIEs provide value for providers and payers in four main areas: costs, efficiency, outcomes and quality. Sharing timely, accurate and actionable data enables continuity of care, preventive care and immediate action for members. We encourage all providers to connect to HIEs in order to take advantage of these benefits.

Please visit http://gahin.org/for more information.



#### **Blood Pressure Guideline Update**

The American Heart Association has updated their blood pressure guidelines.

A blood pressure of less than 140/90 is considered adequately controlled despite an individual's age or diagnosis.

As a result of this guideline update, the National Committee on Quality Assurance has revised the Healthcare Effectiveness Data and Information Set (HEDIS) Controlling High Blood Pressure measure to align with this change.

\*CareSource recommends nationally accepted standards and guidelines to help inform and guide the clinical care provided to CareSource members.



#### **Document BMI Screenings**

Routine body mass index (BMI) measurements are a quick and simple way to gauge your patients' risk for health problems and can promote discussions that may influence healthier habits.

BMI should be calculated and documented in a patient's medical record at least annually. When documenting BMI in the medical record, be sure to include the following:

#### Children 3 through 17 years of age

- · Date of visit
- Height and weight
- BMI percentile documented as a value or on an age-growth BMI chart

Please take the time to counsel the parent and child on the importance of healthy eating and physical activity.

#### Adults (18 years and older)

- · Date of visit
- Weight
- BMI value

Please make sure to document BMI percentile for anyone under 20.





#### **Ensuring Quality Care** for Our Members

CareSource is excited to ensure the quality of our network to provide the best and most effective care for your patients.

It is very important that CareSource takes a proactive approach to managing utilization at the member and provider levels. We have implemented numerous processes this year including provider utilization monitoring amongst our provider network. For example, we focus on providers who offer behavioral health outpatient and/or urine drug testing services and may show as outliers in CareSource data, relative to their peers. The process involves collaboration amongst numerous teams including behavioral health market leads, Special Investigations Unit, health partner representatives, delegated vendors (if applicable) and system configuration to help identify best practices and opportunities for provider education.

In addition, we recognize that some providers may be working with members with higher-level needs and we want to engage with these providers to help with care coordination and connecting members to other appropriate services. We look forward to expanding on this process and improving the overall quality of our network to drive better health outcomes for our members.

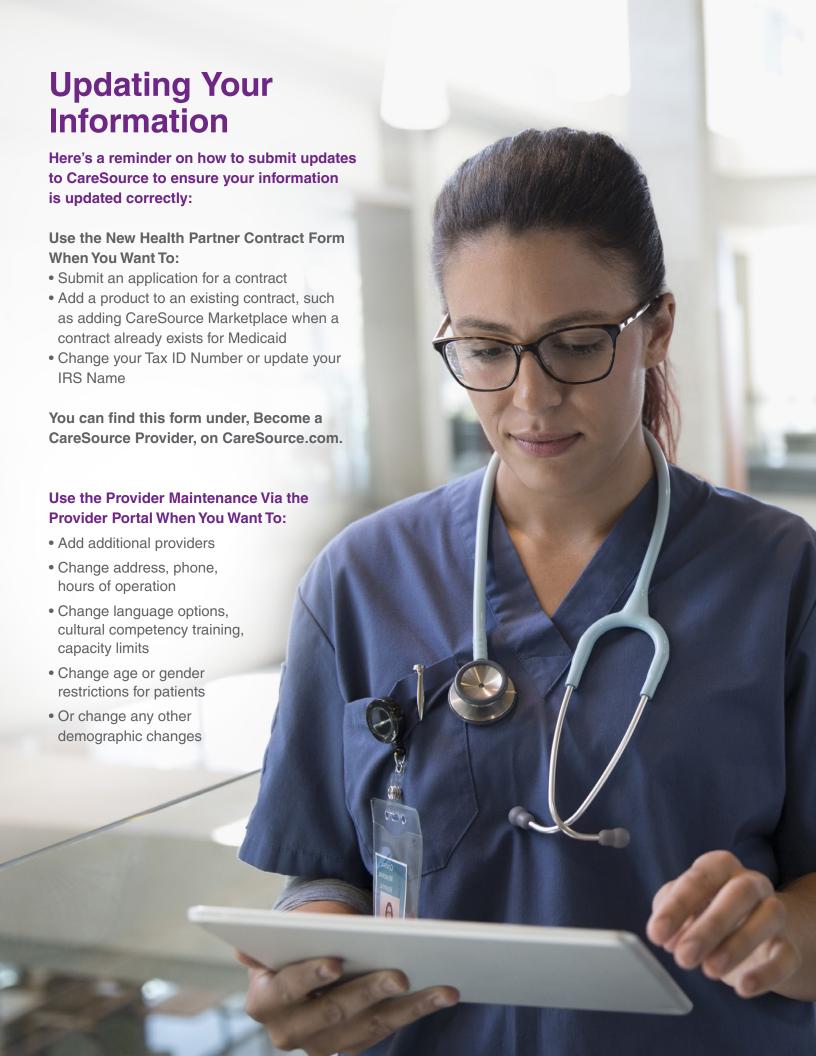


#### **Antibiotics Are Not Always Necessary**

The common cold is a frequent reason for children and adults visiting their primary care provider. Clinical practice guidelines do not recommend antibiotics for a majority of upper respiratory tract infections because of the viral etiology of these infections.

CareSource encourages providers to educate their patients on proper antibiotic use. Some helpful tips to share with patients include:

- Antibiotics do not treat acute respiratory infections or acute bronchitis caused by a virus.
- Antibiotics are not typically used to treat the seasonal flu unless certain complications.
- Antibiotics can be harmful if used unnecessarily as bacteria can become resistant.
- Antibiotic use does not come without side effects. Educate patients on the possible side effects of antibiotics, such as; headaches, intestinal issues, and rashes.



## **Update from Disease** Management

We are revising our diabetes curriculum for children and teens based on KidsHealth (Nemours Foundation) published articles. We mail identified members written curriculum, and also direct them to videos and online learning opportunities to take charge of their health.

- Doctor-reviewed advice on hundreds of physical, emotional and behavioral topics
- Separate sections for parents, kids and teens, each created with their questions in mind.
- Easy-to-follow articles, slideshows, videos and health tools designed to help families learn, grow and be their best.

In our Asthma, Diabetes and Hypertension newsletters and curriculum, we use NCQA evidence-based guidelines to encourage members to learn more about their disease and to make healthier choices. We encourage ongoing learning either by participating in online learning activities or in-person classes.

We strongly emphasize HEDIS measures: HbA1C, retinopathy and microalbumin screenings. We would appreciate any assistance from our providers to also encourage classes such as diabetes education and referrals to Podiatrists and RD's.



### **Network Notifications** You May Have Missed

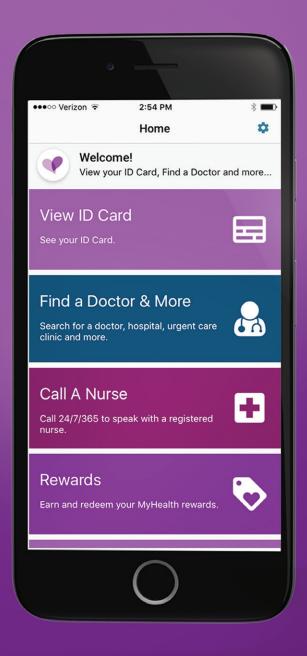
CareSource periodically posts network notifications. We strive to make partnering with us simple. We are aware things may change in the way we do business with you and want to communicate these changes to you in an efficient manner. Please visit the Updates and Announcements page for more information and more updates.

- Duplicate Claim Processing Update- Effective Oct. 15, 2018, we updated our duplicate claim processing logic, and providers will receive a duplicate claim submission denial notification on their Explanation of Payment with an adjustment reason code.
- HHW/HIP Network Closure Announcement-We want to make you aware that as of Sept. 1, 2018, the Medicaid provider network closed for most provider specialties. A full list can be found on our updates and announcements page.

<sup>\*</sup>HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

# DID YOU KNOW?

# CareSource offers Members a Mobile App?



## Download the CareSource mobile app for free –

Refer your patients to use the CareSource mobile app. This app allows CareSource members to view their health plan on the go.

- Access their secure My CareSource® account
- View or share their digital member ID card
- · View claims detail and status
- Make a payment (if applicable by plan)
- Find a doctor, hospital, clinic, urgent care or pharmacy
- Call CareSource 24® and speak with a nurse 24/7
- Call Member Services
- Take a Health Risk Assessment

#### And more!







## Substance Use **Disorder Treatment** and Member Rewards

An important part of recovery from substance use disorders is attending Intensive Outpatient Programs (IOP) for the treatment of addiction. In fact, CareSource is offering rewards to our members for attending in-network IOP programs. Members who attend an in-network IOP can earn up to \$100 per year for attending up to ten IOP sessions. Members have the option to earn an additional \$200 in rewards by following their MyHealth program found in their MyCareSource account.

To start earning, members must complete their Health Needs Screening (HNS).

Members can complete their HNS: online at **CareSource.com**, by filling out a paper copy sent in new member kits, at a health kiosk located in your local Walmart pharmacy or via telephone at 1-844-207-6137.

If you believe your patient could benefit from working with a behavioral health provider or requests a referral, a provider can be found through the Find-A-Doctor/Provider tool on CareSoure.com. When a member attends an approved IOP session, the IOP provider will submit the claim to CareSource. Once the claim is processed, rewards will be added to the member's account.

If a member needs immediate help for substance use disorder, please refer him/her to CareSource's Addiction Hotline at 1-833-674-6437 or visit CareSource.com/mental-health-addiction.

If you have questions, please call provider services at 1-844-607-2831.



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

VISIT US CareSource.com

CONTACT US 1-844-607-2831

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#### **Member Consent to Share Sensitive Health Information**

CareSource is excited to announce new tools to help you coordinate patient care and comply with regulations regarding sharing sensitive health information (SHI). SHI is a subset of protected health information (PHI) which may require consent from the individual in order to be shared with others.

Because our goal is to help you help your CareSource patients, we have implemented online tools to automate:

- Verifying consent to ensure that you do not share health information inappropriately
- Encouraging members to consent to sharing health information

Log in to the Provider Portal at https://providerportal. CareSource.com and search for the CareSource patient using the Member Eligibility option. Please encourage your CareSource patients who have not consented to complete a Member Consent/HIPAA Authorization Form so that all providers involved in their care can effectively coordinate their care. This form is located on **CareSource.com** on the member Forms page. If you are unaware of your patient's status you can view the member's consent status on the Provider Portal.

If you have questions about patient consent or want more information, please contact Provider Services at 1-855-202-1058 or view the Updates and Announcements page at CareSource.com.

