



WINTER 2023

MEMBER *Source*

A Newsletter for HAP CareSource™ Members

Welcome to HAP CareSource!

We are excited to serve you, our HAP CareSource member, as part of the Medicaid, Healthy Michigan Plan, Children Special Health Care Services (CSHCS), and MIChild programs. We know that there is more to health and well-being than just great health care. At HAP CareSource, we care about you.

Each quarter, the MemberSource newsletter will be available to you. These newsletters have lots of great health and wellness tips. Use it to learn more about your benefits and find out what's new with your HAP CareSource plan.



HAP CareSource™



Services Covered by HAP CareSource

What to Do if You Get a Bill

You get all medically necessary Medicaid-covered services at no cost* to you as a HAP CareSource member. “Medically necessary” means you need the services to prevent, diagnose, or treat a medical condition. You should not be billed for these services. Call Member Services if you get a bill. You can find services covered by HAP CareSource. You can find the handbook at [CareSource.com/plans/medicaid/plan-documents/](https://www.caresource.com/plans/medicaid/plan-documents/). You can also get a printed copy sent to you when you call Member Services.

* Healthy Michigan Plan members may have copayments.





Pharmacy Updates

HAP CareSource has a searchable drug list on **HAPCareSource.com**. Go to **Find My Prescriptions** under **Member Tools & Resources** to find out which drugs are covered. It is where the most current updates can be found. Call Member Services if you do not have access to the Internet. We can help you find out if a medication is covered and how much it will cost.



Children's Special Health Care Services Age Eligibility Update



On October 1, 2023, the eligibility age of the Children's Special Health Care Services (CSHCS) Program expanded up to 26. CSHCS is a program that serves children and adults with special health care needs to improve their health outcomes and enhance quality of life at no cost. CSHCS covers more than 2,700 diagnoses. To be eligible for CSHCS, you must meet certain criteria. If you would like to apply, ask your specialist to submit a medical record that is less than a year old to Michigan Department of Health and Human Services (MDHHS).



To see a full list of diagnoses, visit www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Folder1/Folder22/CSHCS-Diagnosis_Codes-11-2003.pdf.



6 Ways to Report Fraud, Waste and Abuse

HAP CareSource has a program to handle cases of fraud, waste, and abuse. Misuse of benefits can be done by providers, pharmacies, or members.

If you are concerned about a possible misuse of benefits:

1 Call Member Services

2 Write a letter to:

HAP CareSource
Attn: Program Integrity
P.O. Box 1940
Dayton, OH 45401-1940

3 Go online:

Use the Fraud, Waste and Abuse Reporting Form at
CareSource.com/mi/members/tools-resources/fraud-waste-abuse/medicaid/

4 Report directly to the Michigan Department of Health and Human Services.

Call: 1-855-MI-FRAUD (643-7283)

Go online: <https://mdhhs.michigan.gov/fraud/>

Write a letter to:

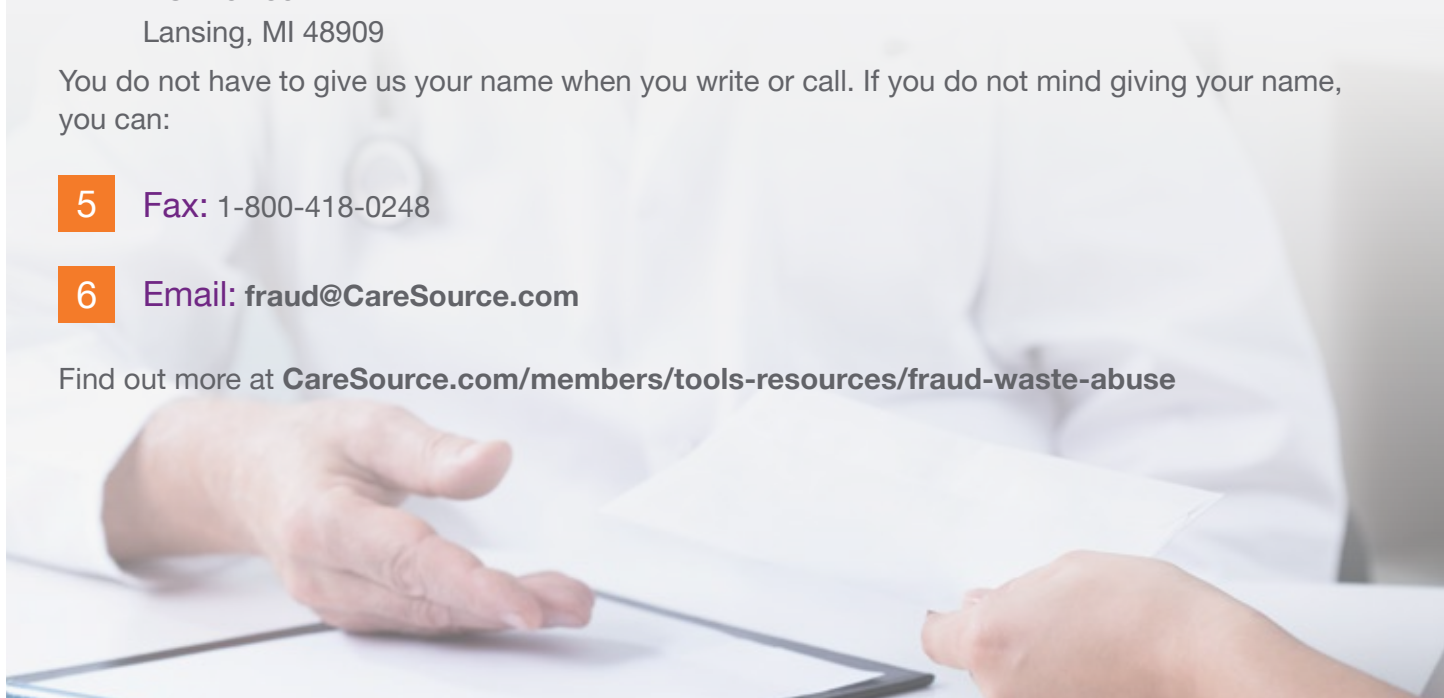
Office of Inspector General
P.O. Box 3047
Lansing, MI 48909

You do not have to give us your name when you write or call. If you do not mind giving your name, you can:

5 Fax: 1-800-418-0248

6 Email: fraud@CareSource.com

Find out more at [CareSource.com/members/tools-resources/fraud-waste-abuse](https://www.caresource.com/mi/members/tools-resources/fraud-waste-abuse)



Are you at **Risk** for **Chronic Kidney Disease?**



If you have diabetes and/or high blood pressure, you're at risk for chronic kidney disease (CKD). You may not notice any symptoms during the early stages. If it is left untreated, CKD can get worse and lead to permanent kidney failure.

HERE'S HOW YOU CAN TAKE ACTION:



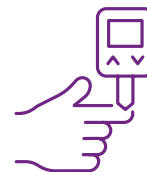
1

Get screened
for CKD today.



2

Keep your
blood pressure
below 130/80.



3

Keep your blood
sugar levels
under control.

Need help managing CKD?

Our Care Management program can help you learn more about CKD and find ways to better manage it. Call 1-844-217-1357 (TTY: 711) if you would like to be part of the Care Management program.



Does the Winter Make You Feel SAD?

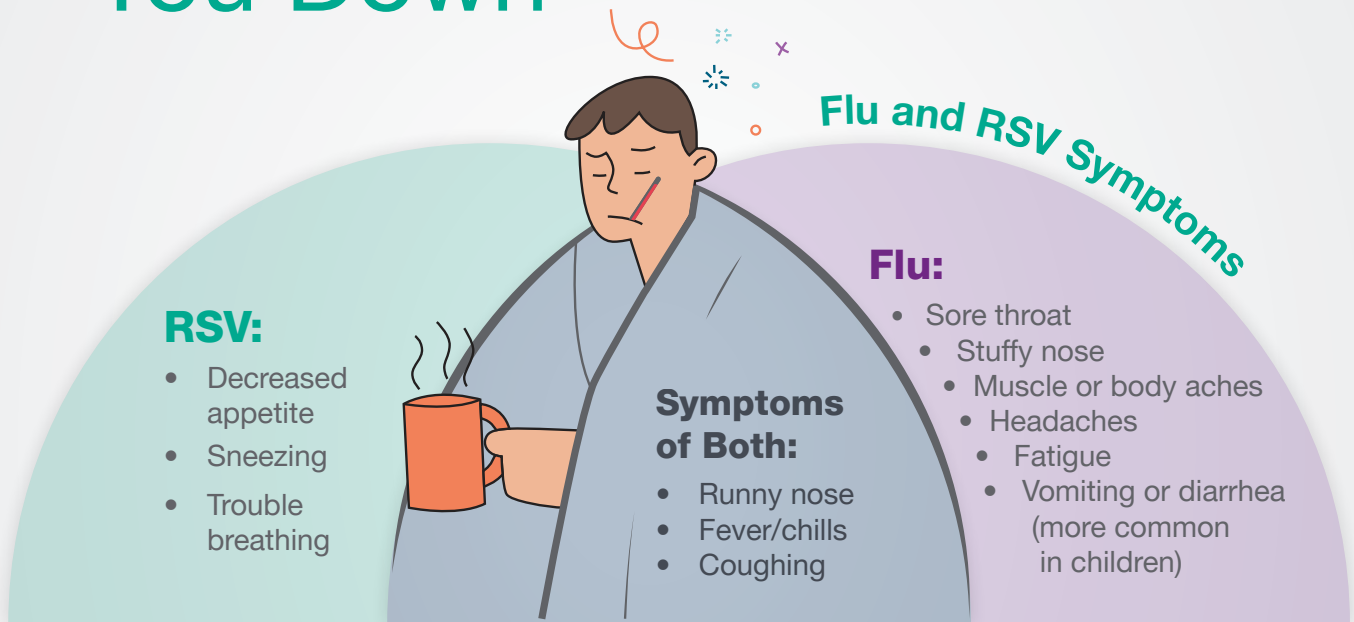
Seasonal Affective Disorder (SAD) is a type of depression that starts in the late fall and early winter. SAD goes away in the spring and summer when there is more sunshine. Symptoms of SAD can range from overeating and weight gain to oversleeping and avoiding people and activities you usually enjoy.

If you deal with SAD, treatments may help. Psychotherapy, antidepressant drugs, and taking vitamin D can help. There are also lamps and sun lights that may help with SAD. Talk to your primary care provider (PCP) or a mental health specialist if you are dealing with SAD.



Don't Let Illness Bring You Down

Many people seem to get sick this time of year. Two of the most common illnesses are influenza (flu) and Respiratory Syncytial Virus (RSV).



You may not have every symptom listed. Infants and young children are more likely to get severe symptoms.

TIPS TO PREVENT FLU AND RSV:

- **Stop the spread of germs.** Wash your hands often. Cover your coughs and sneezes.
- **Avoid touching your eyes, nose, and mouth.**
- **Disinfect your home.** Clean areas that are touched often, like doorknobs, faucets, and light switches.
- **Limit contact with others who are sick.**
- **Get your flu shot.** It is vital to get all your vaccinations on time to keep you healthy.

Sources: Centers for Disease Control and Prevention. <https://www.cdc.gov/rsv/about/symptoms.html> Centers for Disease Control and Prevention. <https://www.cdc.gov/flu/symptoms/index.html>



Using the My CareSource Member Portal



- My CareSource® is your personal secure and private portal account. It holds you and your family's HAP CareSource health information.
- There are a few easy steps to set up a My CareSource member portal account.
- 1 Go to **MyCareSource.com** and click **Sign Up**. Enter your name and email address, then set up a password.
 - 2 You can choose to complete the form in Spanish or English.
 - 3 To add your plan, fill in:
 - Your name
 - Member ID number as it appears on your HAP CareSource member ID card,
 - Your birth date, and
 - Specify if this is your plan, or if you are creating it as a parent or guardian for another member.
 - 4 Click **Register**. You will get a confirmation email.
 - 5 Click the link in the email to activate your My CareSource account.

Now you are ready to use your new My CareSource account!

You can use your My CareSource account to view plan documents, use tools to improve your health, get important health updates, and lots more! Take a few minutes to see what you can do!

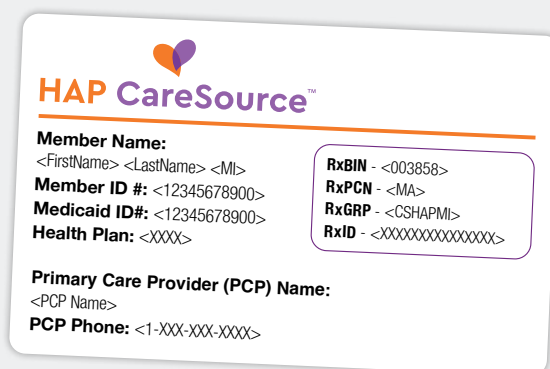
One popular use for My CareSource is to request a new ID card.

Getting a new HAP CareSource member ID card is easy. On the Home page, click **Request ID Card** from the **My Help** menu on the right. A new member ID card request page will come up.

- Pick the reason you need a new member ID card from the choices listed.
- Make sure the mailing address shown is correct. (If it is not correct, you can update it on the Preferences page.)
- Click **Submit**.

Your new HAP CareSource member ID card should arrive within 7-10 days.

It is just that easy!



Caring for Your Mental Health and Wellness



Good health means more than just taking care of your body. It means taking care of your mind, body, and spirit.

You may feel overwhelmed, sad, or nervous at times. Those feelings may go away on their own. Sometimes, these feelings are more serious and may make it hard to carry out daily tasks. You are not alone. You can feel better. HAP CareSource has options available to support both your mental and physical health.

Your Primary Care Provider (PCP) Can Help

You can talk about mental health with your PCP at your annual wellness visit. But, any time you visit can be a good time to talk about it. They can give you a screening to see if you may need medication or counseling. Talk to your PCP if you are feeling any of the below:

- Feeling down or sad for more than a week
- Crying frequently
- Thinking of death or suicide
- Thinking of hurting others
- Trouble sleeping
- Dramatic mood swings
- Feeling short of breath or scared
- Using or abusing drugs or alcohol

If You Need Counseling...

You don't need our approval or a referral for counseling. We want you to get the help you need.

Use our **Find A Doctor/Provider** tool to find counselors, psychiatrists, and psychologists that are in-network and accepting new patients. Your Care Manager can help you find one. You can also call Member Services if you need help finding a mental health or substance use disorder provider near you.



24-Hour Nurse Advice Line

Call the 24-Hour Nurse Advice Line at **1-833-687-7370 (833-NURSE-70)** (TTY: 711). We are here 24 hours a day, 7 days a week, 365 days a year. Call us any time if you need to talk. We can listen, refer you to crisis care, or help you find mental health care providers near you if you need one.

Suicide Prevention

GET HELP NOW! 9-8-8 is the number to reach a crisis counselor. You can call 24 hours a day, 7 days a week. Dial 9-8-8 if you or someone else is:

- Thinking of suicide or hurting themselves
- Having a mental health crisis
- Having a substance use crisis

Learn more about the 9-8-8 Suicide and Crisis Lifeline at www.988lifeline.org



New Rewards Programs For 2024!

As of January 1, 2024, your rewards program has a new face! Take charge of your health with our online wellness rewards programs. HAP CareSource rewards its members for taking a proactive role in their health and well-being. We have developed lifestyle rewards programs to encourage you to take part in healthy activities at every age.

HAP CareSource MyKids Rewards: Newborn through 21 years

Your child may be able to earn up to \$600 in rewards each year for doing health and wellness activities. Your child is automatically enrolled in the HAP CareSource MyKids Rewards program.

Reward Activity	Frequency	Amount of Reward	Population
Well-baby visit 1	1x only	\$50	0 to 14 months
Well-baby visit 2	1x only	\$50	0 to 14 months
Well-baby visit 3	1x only	\$50	0 to 14 months
Well-baby visit 4	1x only	\$50	0 to 14 months
Well-baby visit 5	1x only	\$50	0 to 14 months
Well-baby visit 6	1x only	\$50	0 to 14 months
Well-child visit 1	1x only	\$50	15 months to 2 years old
Well-child visit 2	1x only	\$50	15 months to 2 years old
Well-child & Adolescent visit	1x/calendar year	\$100	3 years to 21 years old

MyHealth Rewards: 22 years and older

Adults can earn up to \$175 in rewards through MyHealth rewards! You earn rewards by completing wellness visits and screenings. You are automatically enrolled in the MyHealth Rewards program.

Reward Activity	Frequency	Amount of Reward	Population
Routine dental exam	1x/calendar year	\$25	All adults
Routine physical exam	1x/calendar year	\$50	All adults
First prenatal visit	1x/per pregnancy	\$50	All adults
Postpartum visit	1x/per pregnancy	\$50	All adults

Learn more about these rewards and how to sign up at [CareSource.com/mi/plans/medicaid/benefits-services/rewards/](https://www.caresource.com/mi/plans/medicaid/benefits-services/rewards/). You can also call Member Services to get started.



Stay with HAP CareSource

- *Renew your Coverage*

Each year, the state of Michigan has you renew your Medicaid coverage. This is called redetermination. Each person has a different redetermination date. When it is time for you to renew, you will get a renewal form in the mail from the state. Fill out the form and return it to the state as soon as you can. We do not want you to have a gap in your health coverage!

Always keep your contact information up to date. That way, you won't miss getting your renewal form in the mail.

Below are ways you can stay up to date. They are also the same resources you can use to renew your coverage.

- Visit your local Michigan Department of Health & Human Services (MDHHS) office. You can make an appointment or just walk in when they are open.
- Call 1-800-642-3195 (TTY: 1-866-501-5656).
- Log in to <https://newmibridges.michigan.gov/>.

We want you to stay a HAP CareSource member!





English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at **1-833-230-2053**. Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-833-230-2053. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-833-230-2053。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-833-230-2053。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasalang-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggagamot. Upang makakuha ng tagasalang-wika, tawagan lamang kami sa 1-833-230-2053. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-833-230-2053. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-833-230-2053 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-833-230-2053. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-833-230-2053 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와드릴 것입니다. 이 서비스는 무료로 운영됩니다.

TTY: 711

MI-MED-M-2240385

MDHHS Approved: 8/7/2023 2023 © HAP CareSource. All Rights Reserved

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-833-230-2053. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على 1-833-230-2053. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-833-230-2053 पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-833-230-2053. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-833-230-2053. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-833-230-2053. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-833-230-2053. Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-833-230-2053にお電話ください。日本語を話す人が支援いたします。これは無料のサービスです。

Notice of Non-Discrimination

HAP 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. HAP 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 Member Services at the number on your HAP 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: HAP CareSource
Attn: Civil Rights Coordinator
P.O. Box 1947
Dayton, Ohio 45401

Email: CivilRightsCoordinator@CareSource.com
Phone: 1-800-488-0134 (TTY: 711)
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

Online: ocrportal.hhs.gov/ocr/portal/lobby.jsf

Phone: 1-800-368-1019 (TTY: 1-800-537-7697)

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



P.O. Box 1025
Dayton, OH 45401
HAPCareSource.com

HOW TO REACH US

Member Services Dept:
1-833-230-2053 (TTY: 711)

24-Hour Nurse Advice Line:
1-833-687-7370 (833-NURSE-70)

Join Us

 [Facebook.com/HAPCareSource](https://www.facebook.com/HAPCareSource)

 [Twitter.com/HAPCareSource](https://twitter.com/HAPCareSource)

Important Plan Information

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***Tell Us
What You
Think!***

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We want to know your thoughts about your quarterly newsletter.

Tell us what you like, what you dislike, and ideas for improving your newsletters! Take the survey at the link below. It only takes a few minutes.

[CareSource.com/NewsletterSurvey](https://www.caresource.com/NewsletterSurvey)

We want to make your coverage the best you've ever had! We thank you for trusting us with your health coverage needs.