

# **About CareSource's Marketplace Plans**

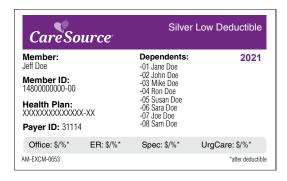
Your CareSource patients have access to affordable, high-quality health insurance with all the essential health benefits required by the Affordable Care Act, including maternity care, prescription drug coverage, Pediatric Dental & Vision, and more. Our Marketplace plans cover people with pre-existing conditions and don't carry lifetime coverage caps for most benefits. Plus, members can purchase a plan with adult coverage for dental, vision and fitness benefits.

# **Member Eligibility**

Please refer your CareSource patients to in-network providers only and collect any deductibles, coinsurance or copayments that apply. Please check eligibility every visit.

#### Member ID Card

**Please Note:** Plan names that include Dental, Vision, & Fitness indicate where a member has purchased those additional benefits for adults, as defined in the Evidence of Coverage (EOC), on the plan.



CareSource.com/marketplace This card does not guarantee coverage. To verify benefits, view claims, or find a provider, visit the website or call.				
MEMBERS: 1-800-479-	9502 (TTY: 1-800-750-0	0750 or 711)		
<b>24/7 Nurseline:</b> 1-866-206-4240				
BENEFITS MANAGER				
Pharmacy	Express Scripts	1-800-488-0134		
Vision (Ped Only)	EyeMed	1-833-337-3129		
Hearing	TruHearing	1-866-202-2561		
Fitness	Active&Fit	1-877-771-2746		
PHARMACY NUMBERS: RxBin: 004336   RxPCN: ADV   RxGrp: RX3156				
MEDICAL CLAIMS: P.O. Box 8730, Dayton, OH 45401-8730				
Coverage not provided through the Health Insurance Marketplace				

CareSource works with specific benefit managers to administer pharmacy, vision, hearing, dental and fitness benefits. These benefit managers are listed on the back of the member's ID card where contact information for each vendor can be found to refer members to services.





## **CareSource Contacts**

Provider Services:	Ohio: 1-800-488-0134 Indiana: 1-866-286-9949	Kentucky: 1-855-852-5558 West Virginia: 1-855-202-1091
Provider Portal:	https://providerportal.caresource.com	
Website:	Find Marketplace resources at CareSource.com	
Utilization Management:	Call Provider Services and select the menu option for prior authorizations	
Check Claim Status	Call Provider Services	
Benefit Managers	See the back of the ID Card for the services and best number to route members to for those services	

# **Claim Submissions and Payment**

CareSource prefers providers to submit claims electronically for the most efficient processing. Claims needing submitted with documentation should be submitted via the Provider Portal.

#### **Electronic Funds Transfer**

CareSource has partnered with ECHO Health, Inc. to deliver provider payments. ECHO offers three payment options:

- Electronic funds transfer (EFT) preferred
- Virtual Card Payment (QuicRemit) Standard bank and card issuer fees apply\*
- Paper checks

\*Payment processing fees are what you pay your bank and credit card processor for use of payment via credit card.

Enroll with ECHO for payment and choose EFT as your payment preference for CareSource. You can also complete the ECHO enrollment form located on **CareSource.com** > Provider > <u>Claims</u> and fax, email, or mail it back to ECHO. For questions, call ECHO Customer Support at 1-888-834-3511.

# Electronic Claim Submission Payer ID Numbers

Indiana: INCS1	Kentucky: KYCS1
Ohio: 31114	West Virginia: WVCS1

# Timely Filing

Indiana: 90 days	Kentucky: 90 days
Ohio: 365 days	West Virginia: 180 days

## Paper Claims Submission

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Indiana:	Kentucky:
CareSource	CareSource
Attn: Claims Department	Attn: Claims Department
P.O. Box 3607	P.O. Box 824
Dayton, OH 45401-3607	Dayton, OH 45401-0824
Ohio:	West Virginia:
CareSource	CareSource
Attn: Claims Department	Attn: Claims Department
P.O. Box 8730	P.O. Box 804
Dayton, OH 45401-8730	Dayton, OH 45401

# **Covered Services**

Please note: The below list is not a comprehensive list.

- Primary care and specialty services
- Outpatient services
- Hospitalization
- Emergency services
- Maternity and newborn care
- Behavioral health and substance abuse treatment
- Prescription drug coverage
- Preventive and wellness services
  - Routine hearing services are covered exclusively through TruHearing
- Rehabilitative and habilitative services and devices
- Laboratory services
- Chronic disease management
- Covered clinical trials
- Podiatry care
- · Adult and pediatric health, dental, and vision services
  - Non-accidental dental services, where available, are covered exclusively through DentaQuest
  - Routine vision services are covered exclusively through EyeMed
- Optional Dental, Vision, and Fitness coverage for adults
  - Non-accidental dental services, where available, are covered exclusively through DentaQuest
  - Routine vision services are covered exclusively through EyeMed
  - A fitness center membership and home fitness kits are made available exclusively through the Health's Active&Fit® program\*

\*The Active&Fit program is provided by American Specialty Health Fitness, Inc., a subsidiary of American Specialty Health Incorporated (ASH). Active&Fit is a trademark of ASH and used with permission herein.

For a more comprehensive listing of Marketplace covered services, please visit **CareSource.com** > Plans > Marketplace > <u>Plan Documents</u> for more information.

### **Prior Authorizations**

## Services Requiring Prior Authorization

**Please note:** This is not a comprehensive list. Log in to the Provider Portal at **CareSource.com** to view a more complete list of covered services and limitations. Failure to obtain prior authorization may result in denied claims.

- All services provided out-of-network, except emergency
- All inpatient care
- Ground ambulance transportation
- Cosmetic and reconstructive surgery/procedures
- Behavioral health outpatient services and other specific behavioral health services
- Durable medical equipment and other supplies over \$750.00 billed charges
- Home care services and therapies
- Nursing facility services
- Outpatient therapies
- Pain management
- Specialty pharmacy

For a more comprehensive listing of Marketplace services requiring prior authorization, please visit **CareSource.com** > Providers > <u>Prior Authorizations</u> and select your plan from the dropdown.

#### Prior Authorization Process

Prior authorizations can be obtained by contacting the Utilization Management Department:

Online	CareSource.com > Provider > Provider Portal
Fax	Ohio: 1-888-752-0112 Kentucky and Indiana: 1-877-716-9480 West Virginia: 1-844-676-0367
	The prior authorization form can be found on <b>CareSource.com</b> . Please complete and fax the form.
Mail	CareSource P.O. Box 1307 Dayton, OH 45401-1307
Phone	Call Provider Services and select the menu option for prior authorizations.

When requesting an authorization, please provide the following information:

- Member/patient name and 11-digit CareSource member ID number
- Provider name and NPI
- Anticipated date of service
- Diagnosis code and narrative
- Procedure, treatment or service requested

- Number of visits requested, if applicable
- Reason for referring to an out-of-plan provider, if applicable
- Clinical information to support the medical necessity for the service

Please review the Provider Manual for additional information at **CareSource.com** > Providers > Tools & Resources > Provider Manual.

#### **Provider Resources**

CareSource communicates with our provider network through a variety of channels, including phone, fax, <a href="Provider Portal">Provider Portal</a>, newsletters, <a href="CareSource.com">CareSource.com</a> and network notifications. We encourage you to reach out to your assigned Health Partner Representative with any questions.

#### Website

Accessing our website, **CareSource.com** is quick and easy. On the Provider section of the site you will find commonly used forms, newsletters, updates and network announcements, our Provider Manual, claims information, frequently asked questions, clinical and preventive guidelines and much more.

#### **Provider Portal**

**URL:** <a href="https://providerportal.caresource.com">https://providerportal.caresource.com</a>

Our secure online <u>Provider Portal</u> allows you instant access at any time to valuable information. You can access the CareSource Provider Portal at **CareSource.com** > Login > <u>Provider Portal</u>. Simply enter your username and password (if already a registered user), or submit your information to become a registered user. Assisting you is one of our top priorities in order to deliver better health outcomes for our members.

#### **Provider Portal Benefits**

- Easy access to a secure online (encrypted) tool with time-saving services and critical information
- Available 24 hours a day, seven days a week
- Accessible on any PC without any additional software

#### **Provider Manual**

CareSource's Provider Manual explains important requirements and guidelines for working with CareSource. Refer to this manual at **CareSource.com** > Providers > <u>Provider Manual</u> for the details on the topics featured in this guide.

#### **Policies**

CareSource's policies consist of: medical, pharmacy, reimbursement and administrative.

- Medical policies: provide guidelines for determining medical necessity and appropriate care for approved benefits
- Pharmacy: provider guidelines for speciality drugs
- Reimbursement: provider guidance for claim payments
- Administrative: offer guidance for determining medical necessity, investigational and experimental services

Refer to CareSource's policy page at CareSource.com > Providers > Provider Policies.

#### **Newsletters**

Our provider newsletter contains operational updates, clinical articles and new initiatives underway at CareSource. Access new and past editions of our newsletters at **CareSource.com** > Providers > Newsletters & Communications.

#### **Network Notifications**

Network notifications are published for CareSource providers to regularly communicate updates to policies and procedures. Network notifications are found on our website at **CareSource.com** > Providers > Tools & Resources > <u>Updates & Announcements</u>.

# Provider Demographic Changes and Updates

Advance written notice of status changes, such as a change in address, phone, or adding or deleting a physician to your practice helps us keep our records current. Your current information is critical for efficient claims processing.

**Online** 

CareSource.com > Login > Provider Portal

