



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!

Dale Block, MD, MBA
Chief Medical Officer, Ohio

Seema Csukas, MD, PhD,
FAAP VP, Market Chief Medical
Officer, Georgia

Larry P. Griffin, MD FACOG
VP and Chief Medical
Officer, Kentucky and
West Virginia





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 a state and plan.

See below for some information on the training videos available to you:

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.

CareSource Life Services – **Helping Eliminate Socioeconomic Barriers** (Ohio Medicaid and Marketplace)

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 **1-844-543-7378** or email LifServices@CareSource.com.





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/providers/education/fraud-waste-abuse/>.



Medicare Benefit Changes

Please see the high-level summary of changes for the CareSource Medicare plan below.

CareSource Medicare Advantage and Zero

- Annual physical exam
- Over the Counter (OTC) drug allowance w/ debit card (Advantage only)
- Brain health online/smart phone app tool to help maintain/improve memory, information processing and other mental functions

CareSource MyCare Ohio Medicare Opt-Ins

- Annual physical exam
- Over the Counter (OTC) drug allowance w/ debit card
- Brain health online/smart phone app tool to help maintain/improve memory, information processing and other mental functions

CareSource Dual Advantage (D-SNP)

- Annual physical exam
- Brain health online/smart phone app tool to help maintain/improve memory, information processing and other mental functions
- Increased allowances for OTC w/debit card, dental and vision:
 - OTC quarterly allowance of \$325 to \$500 (depending on region)
 - Dental annual allowance of \$3000 to \$4000 (depending upon the region)
 - Vision annual allowance of \$300 to \$380 (depending upon region)

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. Marketplace is continuing statewide in WV and expanding to additional counties in GA, KY and OH
2. CareSource supports virtual care through any provider and will also have \$0 care available through our telehealth partner in Indiana
3. Member 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



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.

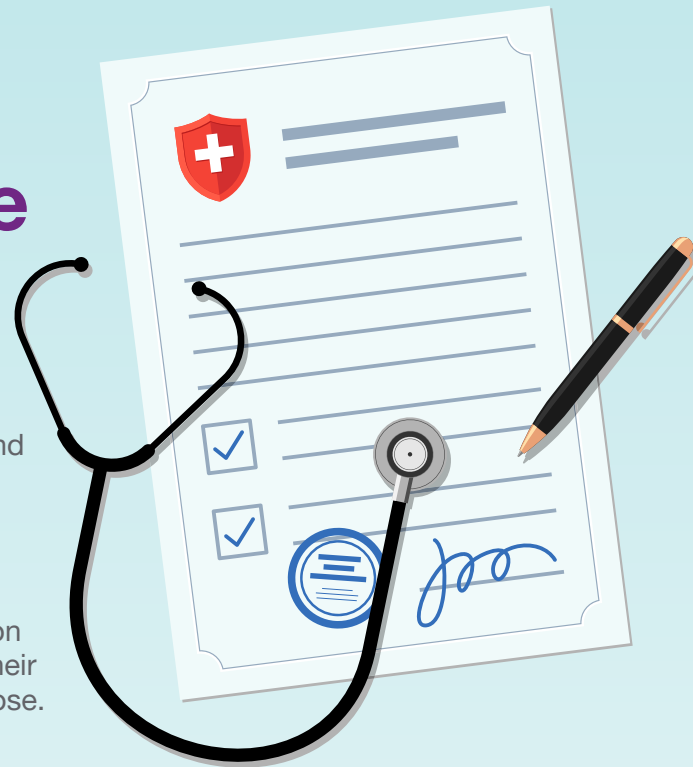
MyResources is available to CareSource members via **CareSource.com**, our mobile app and from within the member portal. Additionally, members and their caregivers may ask their care manager for specific community-based resources to support caregiver needs.



Improving Member Medication Adherence

It is estimated that three of four Americans do not take their medication as directed and that poor medication adherence costs the U.S. health care system nearly \$300 billion a year. Medication non-adherence continues to be a multifactorial health care challenge, leading to further health complications and increased cost of care.

There are many reasons why a patient may be non-adherent to their medication. Some patients may simply be forgetful, while others may not understand the importance of the medication they are taking or are fearful of the side effects. Another common reason for nonadherence is cost. Patients struggling to afford their medications may skip doses or take less than the prescribed dose.



Below are tips providers can focus on at each patient visit to establish better adherence practices with their patients.

- Review medications with patients at each visit.
 - Are they experiencing any side effects?
 - Are their medications being refilled prior to running out?
 - How are they taking their medications?
- Provide education on why medications are being prescribed to the patient.
- Discuss goals of medication and importance of adherence.
- Discuss and attempt to resolve any barriers regarding cost, side effects or pill burden.

To find out if a medication is covered and how much it will cost, use the searchable drug list that is updated monthly at the [Find My Prescriptions](#) link under Member Tools & Resources or call Member Services at **1-888-815-6446**.

Medication non-adherence is a complex health care issue and can be a difficult obstacle for patients to overcome on their own. Support from providers has the potential to not only improve medication adherence, but also improve patient well-being.

Access and Availability Standards (Kentucky & West Virginia Providers)

CareSource has a comprehensive quality program to help ensure our members receive the best possible health care services. It includes evaluation of the availability, accessibility and acceptability of services rendered to patients by participating providers. Participating providers are expected to have procedures in place to see patients within these timeframes and to offer office hours to their CareSource Marketplace patients that are at least the equivalent of those offered to any other patient.

Please keep in mind the following access standards for each level of care:

Primary Care Providers (PCPs)

Type of Visit	Should be seen...
Emergency needs	Immediately upon presentation
Urgent care*	Not to exceed 48 hours
Regular and routine care	Not to exceed 6 weeks

For Primary Care Providers (PCPs) only: – Provide 24-hour availability to your CareSource patients by telephone. Whether through an answering machine or a taped message used after hours, patients should be given the means to contact their PCP or a back-up provider to be triaged for care. It is not acceptable to use a phone message that does not provide access to you or your back-up provider and only recommends emergency room use for after hours.

Non-PCP Specialists

Type of Visit	Should be seen...
Emergency needs	Immediately upon presentation
Urgent care*	Not to exceed 48 hours
Regular and routine care	Not to exceed 12 weeks

Behavioral Health

Type of Visit	Should be seen...
Crisis or Emergency needs	Immediately upon presentation
Non-life threatening emergency	Not to exceed 6 hours
Urgent needs	Not to exceed 48 hours
Initial visit for routine care	Not to exceed 10 business days
Follow-up routine care	Not to exceed 30 calendar days

*Providers should see members as expeditiously as the member's condition warrants, based on severity of symptoms. It is expected that if a provider is unable to see the member within the designated time-frame, CareSource will facilitate an appointment with another participating provider or a non-participating provider, when necessary.





At CareSource, We Make it Easy for You to do Business with Us

Eligibility

Did you know that when you call CareSource you can get member eligibility without speaking to a representative? Choose the option for eligibility. Once you have identified the provider and authenticated the member you are calling about, the IVR will provide you their eligibility and if you need eligibility for a date in the past, you then have the option to request that date as well!

On the CareSource Provider Portal, you can check eligibility for an individual member or group of members within seconds. You will also be able to see the member's plan effective date, eligibility spans, coordination of benefits (COB) information and more!

Claims Status

To save you time, the IVR is able to provide medical claim status. When you call in for a medical claim, you will be asked to provide the Date of Service and total billed amount OR the claim number. The IVR will provide you with the status, the date the claim was paid, the amount that was paid, the allowed amount, the member responsibility and a reference number! Additionally, in a recent update, the IVR began providing the check number, the date the check was issued and the total amount of the check!

Did you know that you can understand the status of a claim 75% faster by using the Provider Portal? Quickly get status for an individual claim on the Provider Portal or view multiple claims at one time by searching by date range or by member information. Claim details you can view include amount paid, process or denial reason, adjustment reason, remittance reason, recovery amount and more.*



Coexisting Conditions: Managing Behavioral and Physical Health After Inpatient Stay

CareSource would like to remind inpatient behavioral health providers, including discharge planners, about the importance of follow-up care with a primary medical provider within 30-days of discharge for patients who have both mental health and chronic health conditions. Individuals diagnosed with a serious mental illness (SMI) are known to have poor physical health and a lower life expectancy.

The behavioral health and medical conditions of this population are often intertwined, with one diagnosis creating complications for another diagnosis. For example, individuals diagnosed with diabetes often experience depression; and individuals with COPD and heart disease sometimes have symptoms that mimic stress disorders and depression. Provider collaboration for the management of co-existing behavioral and physical health conditions is essential to improving overall health outcomes and quality of life for patients.

CareSource provides transitions of care support to assist members with any barriers that might prevent them from keeping their 30-day appointment, including access issues, missed appointments and adherence to prescription regimens. Please call us at **844-438-9498** to refer a patient to Care Management or for any questions. Providers may also make a Care Management referral through the Provider Portal available 24/7. We appreciate your help in making sure CareSource patients receive the timely, appropriate care they need.



Over-the-Counter (OTC) Medications for Your Patients

(MA/D-SNP & MyCare Providers)

If your patient has a medical need for an OTC product, first consult their plan's drug formulary which is available online at **CareSource.com**. Products that are available through the drug formulary can be accessed by providing your patient with a prescription, and then the patient takes it to the pharmacy to be filled.

For medical needs that cannot be met by a product that is available through the drug formulary, members should consult their Convey OTC Product Catalog to determine if a product is available through their supplemental OTC benefit catalog.

Patients can order from the catalog online at www.CareSourceAdvantageOTC.com, by calling **800-908 -2273** (TTY: 711), or mailing an order form. The order will be shipped directly to their door in a timely manner.



Pharmacy Updates



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.

Help with Immunization

Vaccination rates have fallen during the Covid-19 pandemic.

Pharmacists are poised to help get your patients immunized. Pharmacists are accessible health care professionals who are authorized to administer vaccines. Some pharmacies are equipped to administer Covid-19 vaccines as well as the other vaccines your patients might need.

Encourage your patients to visit their local pharmacy to stay up-to-date on their immunizations. Pharmacists can help reduce the burden on providers by assisting in the administration of vaccines.

Note: Children under 18 covered under Medicaid plans must be vaccinated through the Vaccines for Children Program (VFC). Very few pharmacies participate in the VFC Program at this time. Your local health department can help you find locations for children covered under Medicaid plans to be immunized.



Senders Pediatrics

Senders Pediatrics of South Euclid, OH has been serving CareSource members for more than 10 years and is a leader in innovation, advocacy and education.

In response to COVID-19, Senders quickly completed building renovations to provide a dedicated and isolated entrance for COVID-19 patients who were symptomatic. They also installed Ultraviolet-C and iWave air treatment systems throughout the facility, providing their patients with clean air, sanitized 12x/minute. Senders understands the importance of educating their community through regular newsletters, providing summarized research articles and an easily digestible approach to thriving during this time.

In August 2020, Senders Pediatrics participated in Pfizer COVID-19 vaccine trials for parents of their patients and continue enrolling children as young as 6 months. With the rise in anxiety and depression amidst the pandemic, their fully integrated Behavioral Health Team ensures patients and their families have the necessary resources to be successful. Assessing a lack of child-friendly education surrounding COVID-19, Joan Morgenstern, Parent Coach, quickly responded by publishing several children's books- Way to Go Elbow, Embrace Your Own Space, The Task of the Mask and Sammy the Shot.



“Focusing on education, creating community, identifying opportunities (behavioral health) and building for the future (research) has helped us grow despite the pandemic.”- Dr. Shelly Senders

Eastchester Family Services



Eastchester Family Services, founded in 2003, is a community-based integrated care provider with offices in Atlanta, Cartersville, and Douglasville, GA. An established behavioral health service provider, Eastchester launched primary care services in March 2021. CEO and founder Milton Brown, LMSW, shared of the benefits of integrated behavioral health and primary care, when he said, “We believe in integrated health. Your body is comprised of physical and emotional aspects, one affects the other. If we can combine them in one agency we’ll get higher level outcomes.” Dr. Victoria Thedford, board certified in both pediatrics and internal medicine, dedicates one day a week to these services with a rotation among the locations.

Initially developed with the goal of supporting compliance with Early and Periodic Screening, Diagnostic and Treatment (EPSDT) requirements, Eastchester has expanded to include adult primary care, COVID-19 vaccination and women’s wellness. Mr. Brown shared that this integration is the culmination of years of thoughtful planning and staffing to address barriers to treatment and support exchange of information amongst providers when he said, “If we’re providing both services, clients don’t have to take off two days of school or work. We’ll have all of their health information under one roof.” With the success of this launch and a continued commitment to accessible care, Eastchester has hopes of eventually converting a 42-foot RV into a mobile clinic to provide primary and behavioral health care, lab services and vaccinations in the community.

CareSource recognizes the entire Eastchester Family Services team in their effort to improve the health and well-being of CareSource members through innovations in integrated care.



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

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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!