



FALL 2022

# PROVIDER *Source*

A Newsletter for CareSource® Health Partners

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## Supporting Infant Nutrition During the Formula Shortage

As many of you are aware, the nation has been facing unprecedented issues related to the scarcity of infant formula. The Federal Drug Administration recalled several brands of formula made at one of the largest formula distribution facilities because of contamination concerns, which has caused significant supply chain issues. Families are understandably distraught and seeking alternative, potentially unsafe, ways to feed their children.

There is guidance that can be provided to the parents of infant patients in response to this shortage. The optimal source of nutrition for infants is breast milk, so encourage breastfeeding when possible, be prepared to answer questions related to nursing, and refer to breastfeeding support resources in your area. For those who are unable to breastfeed but want to supply breast milk to their children, milk banks that provide pasteurized, screened donor milk may be an option.

Inform parents that switching to another brand of formula is fine. Help them choose alternative formulations appropriate for their infant's specific needs. Only order formula from reliable sources. Discourage families from diluting formula or utilizing homemade recipes as they may not provide adequate nutrition. The potential problems associated with improper formula ingredients are very serious and can harm infants. Hopefully, the underlying issues of this shortage will be rectified in a timely manner, but for now, you can serve as a source of evidence-based guidance for parents during this trying time.

A handwritten signature in black ink that reads "Seema Csukas".

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

A handwritten signature in black ink that reads "Dale J. Block, MD, MBA".

Dale Block, MD, MBA  
Chief Medical Officer, Ohio

A handwritten signature in black ink that reads "Larry P. Griffin".

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



UPDATES



## Network Notification Bulletin

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

### All Ohio Plans:

- [CareSource Live Instructor-Led Provider Training and Education Series](#)
- [We Want to Hear from You!](#)
- [Upload Claim Submissions in Provider Portal](#)

### Kentucky and West Virginia Plans:

- [Billing Updates: Chiropractic Unbundling](#)
- [May 2022 Avalon Q3 & Q4 Quarterly Policy Updates](#)
- [Upload Claim Submissions in Provider Portal](#)

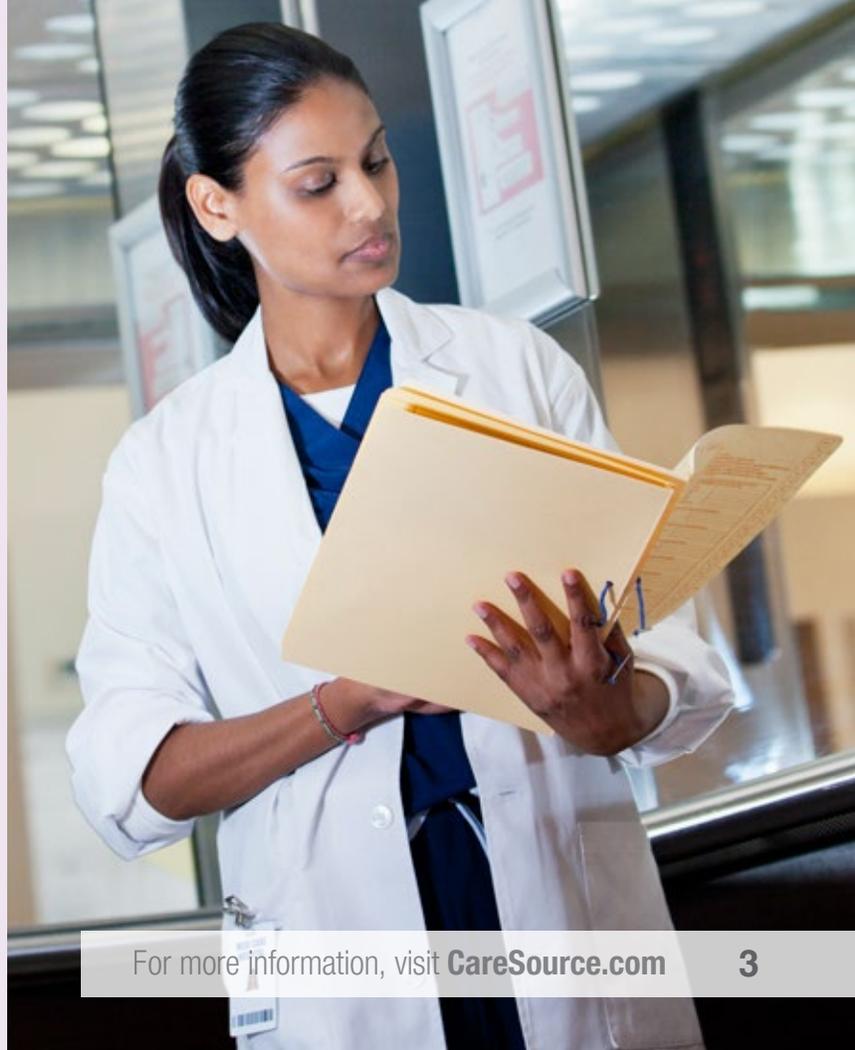
### Georgia Plans:

- [Policy Updates July 2022](#)
- [We Want to Hear from You!](#)
- [Introducing Teladoc, CareSource's New Telehealth Partner](#)

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](#).

## Importance of Documentation

CareSource Proper documentation is essential to you and your patients. It ensures patients receive services that are reasonable and necessary, supports proper payment of claims, and supports favorable medical record review decisions. The Centers for Medicare & Medicaid Services (CMS) Medicare Learning Network has released a [Provider Minute](#) video on the importance of proper documentation. This five-minute video addresses typical documentation errors such as insufficient documentation, medical necessity, incorrect coding and no documentation. The video also shows how to handle record requests for favorable outcomes.





## Pregnancy and Postpartum Care

(Kentucky and West Virginia Marketplace)

At CareSource, supporting our pregnant and postpartum members with quality care is a priority. By encouraging appropriate perinatal and postpartum care, we can positively impact the health of both mother and baby before, during and after pregnancy.

Timely and adequate prenatal care can reduce the risk of poor birth outcomes and increase the likelihood of an uncomplicated pregnancy. Established quality criteria recommend at least one prenatal visit in the first trimester and at least one postpartum visit between 7 and 84 days after delivery.

If you identify a pregnant or postpartum CareSource member who could benefit from focused outreach for education, support and/or assistance with resources, please refer the member to CareSource Integrated Care Management by phone. Members can also be directed to contact Member Services to self-enroll in any of the available CareSource programs to work with our licensed clinical staff to resolve barriers to care and improve overall health and wellbeing.

Prenatal and Postpartum care are HEDIS® measures looking at the overall quality of care. HEDIS Coding guides have been developed by CareSource to provide information about documentation and coding. You can find these on our website at [CareSource.com](https://www.caresource.com) > Providers > [Quick Reference Materials](#).

Care Management Contact Information:

Kentucky: 1-855-202-0385

West Virginia: 1-866-286-9738

## CareSource Rewards You for Excellence

(West Virginia and Ohio Marketplace)

We recognize the outstanding work you are doing to improve your patients' health and quality outcomes every day. Our Quality Enhancer program rewards you for prioritizing high-value services in your practice. CareSource supports a Value-Based Reimbursement program to encourage and reward Primary Care Providers for using specific CPT II codes.

CPT Category II codes are tracking codes which assist in data collection and are used for overall performance measurement. The use of these codes will decrease the need for chart reviews and improve the reporting of closed care gaps to confirm all the important work you are doing for your patients and our CareSource members.

## Using CPT® Category II Codes for Diabetes Care Visits

Marketplace Plans

According to the Centers for Disease Control (CDC), more than 37.3 million people (11.3%) in the US have diabetes, and 1 in 4 don't even know they have it. Managing diabetes can be complicated but using the proper CPT® Category II codes to file claims can help streamline administrative processes and close gaps in care.

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CPT II Coding – Examples for Quick References listed right:



CPT II Coding— Examples for Quick References listed below:

HEDIS Measure	Description	Applicable Codes
<a href="#">Comprehensive Diabetes Care (CDC)</a>	Members ages 18-75 diagnosed with diabetes who have documentation in their medical record indicating the date and result of a Hemoglobin A1C test in the current year.  <i>Last A1C result in 2022 should be documented in the medical record.</i>	HbA1c CPT II: 3044F, 3046F, 3051F, 3052F.
<a href="#">Controlling High Blood Pressure (CBP)</a>	Members ages 18-75 with a diagnosis of hypertension (HTN) and BP adequately controlled at 139/89 mmHg or less during the current year.  <i>A diagnosis of Essential Hypertension and last blood pressure reading in 2022 should be documented in the medical record.</i>	Blood Pressure CPT II: 3074F, 3075F, 3077F, 3078F, 3079F, 3080F

Click the links to access the [Adult](#) and [Child/Adolescent](#) HEDIS® Coding Guides that provide additional info about proper coding and documentation requirements.

If you have any questions, please contact your CareSource Health Partner Team Representative or Provider Services.

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**What can you do to help improve your A1c rates?**

- **No Test:** For members without a testing code, please reach out to them to complete an A1c test either in your office or at the lab. This will help both you and the member “know the numbers” to plan for care
- **No Results:** For members without a result, but completed a test, look in your EHR or research with the lab or lab portal what the test result was. If the result was inconclusive, please have the patient retest so there is a valid Result CPT II code sent to the health plan.

- **High results (>9):** Please refer the patient to an endocrinologist or adjust diet, exercise, or medications to stabilize the member. Please note that most health plans have a \$0 copay gym benefit for the member to take advantage of. CareSource is also able to assist once you connect them to one of our care managers for support.

Click the links to access the [Adult](#) and [Child/Adolescent](#) HEDIS® Coding Guides that provide additional info about proper coding and documentation requirements.

If you have any questions, please contact your CareSource Health Partner Team Representative or Provider Services.



# Initiation and Engagement of Substance Use Disorder Treatment (IET)

It's important for patients to initiate and remain engaged in treatment. According to NCQA, in 2016 over 20 million Americans over the age of 13 have been identified with a substance use disorder, which is 7.5 percent of the population.

The NCQA HEDIS® IET measure assesses adults and adolescents 13 years and older with a new episode of alcohol or other drug (AOD) dependence who initiated treatment through an inpatient SUD admission, outpatient visit, intensive outpatient encounter, partial hospitalization, telehealth visits or medication treatment within 14 days of the diagnosis. This measure also includes the percentage of patients who were engaged in ongoing AOD treatment within 34 days of the initiation visit.

## HOW YOU CAN HELP

- Educate your patients about the importance of initiating and remaining engaged in treatment
- Make outreach calls to remind your patients of appointments
- Allow walk-in assessments
- Centralize appointment scheduling and increase appointment availability outside of normal hours
- Improve the patient experience, such as satisfaction surveys
- Use correct codes when billing for the initiation and engagement of treatment
- Encourage Peer Support Services or other local community programs
- Assist with transportation and other resources

Refer your patients to care management through the Provider Portal at [CareSource.com](https://www.caresource.com) > Providers > [Provider Portal Log-in](#) or by calling Member Services at **1-855-202-0729**.

For more information, CareSource can help at [georgiahealthpartners@caresource.com](mailto:georgiahealthpartners@caresource.com)

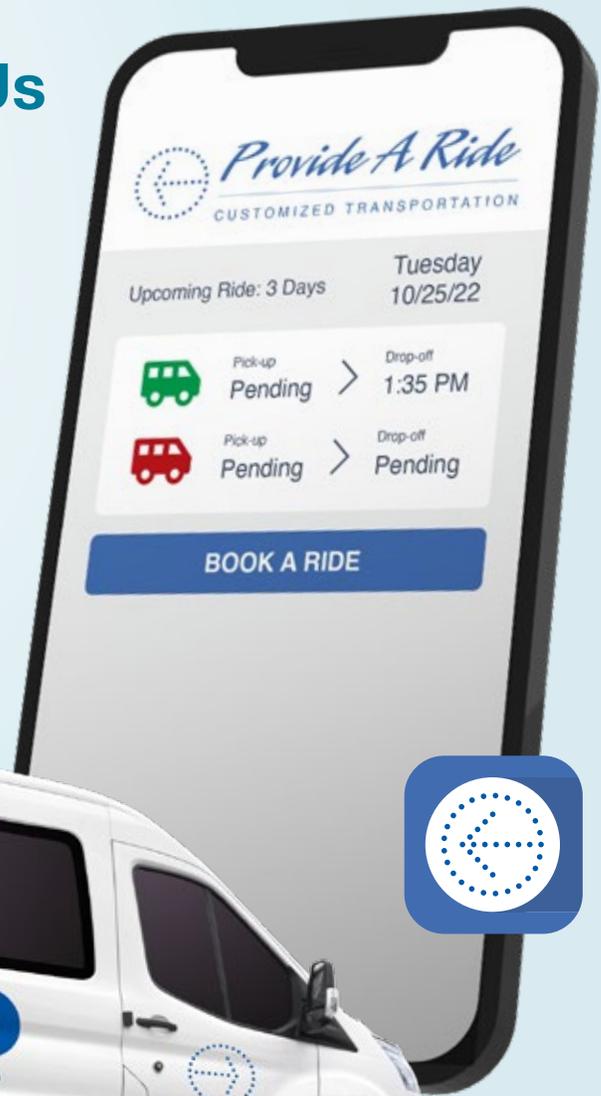
Reference: [Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment - NCQA](#)



## Schedule a Ride with Us at Your Fingertips

Did you know members can schedule their own transportation using the **Provide A Ride** mobile app? All they need is their CareSource member ID and a smartphone with a Wi-Fi or data connection. Let members know how easy and simple it can be.

They just need to visit the Apple App Store or Google Play Store and search **Provide A Ride** to download the app. They can also call Member Services and say “transportation” to schedule a ride.



## Pharmacy

### 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.





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## We are here for **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](#) to rate your satisfaction with the ProviderSource newsletter, as well as share topics you'd like to see in future newsletter publications!

*Thank you for your partnership!*