



SPRING 2025

PROVIDER *Source*

A Newsletter for CareSource® Health Partners

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Chief Medical Officer's Note



As we embark on the new year, we want to take a moment to express our deepest gratitude for your unwavering dedication to patient care. We recognize that many patients, whether healthy or managing chronic conditions, have been hesitant to re-engage with the health care system, leading to delays in preventive care, routine screenings, and even necessary treatments. Your efforts in guiding them back to prioritizing their health are invaluable, and we are committed to supporting you in this mission.

CareSource continues to find innovative ways to support you, as we understand that patients are becoming more complex in this post-pandemic era. It is especially critical that patients with complex medical conditions receive the support, coordination, and guidance necessary to navigate their health care journey effectively. Our dedicated Care Management team is here to assist, offering patient education, service coordination, and help in addressing social determinants of health that may be barriers to care. We encourage you to connect with us or to direct your patients to our services so that, together, we can ensure they receive the care they need.

Additionally, this winter season, we want to emphasize the importance of preventive health measures, particularly vaccinations. Influenza and respiratory syncytial virus (RSV) continue to pose significant risks, and immunization remains a vital tool in reducing transmission, protecting vulnerable populations, and alleviating strain on health care resources. By working together to encourage vaccinations and preventive care, we can help safeguard public health while supporting your efforts to provide compassionate, high-quality medical services.

Thank you for your partnership, your dedication, and for delivering health care to those who need it the most in our communities. We are proud to stand beside you and partner with heart and purpose.

Sincerely,

Minh Nguyen, MD

Vice President, Market Chief Medical Officer - Georgia



How Do Your Patients Perceive You?

Every year, from February through May, CareSource is required to conduct patient experience surveys, such as the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey. In this anonymous survey, many of your CareSource patients will be asked questions about their experiences with providers and the health plan. It is the patients' chance to voice their opinion.

We know your team works hard to provide the best care for every patient on every visit! Our partnership makes a big impact on the patient's perception of their health care experience, and we are here to help.

Some things to consider:

- ✓ How would your patients rate the care you provide?
- ✓ Can patient appointments be scheduled "easily" and "as soon as needed"?
- ✓ When making a referral, do you inform your patients about how long it will take to get the appointment?
- ✓ Are you working with patients to proactively schedule routine care and screenings?
- ✓ Are your patients aware of your hours and where to go for urgent care?
- ✓ Will your patients think you are informed and participating in their health care plan?
- ✓ Will your patients think you spent time explaining things, including necessary vaccinations, test processes and results?
- ✓ How would your patients rate how well you listened carefully, showed respect, and spent the needed amount of time with them?

We appreciate all that you do and look forward to continuing as your partner in delivering a high standard of care!

CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

Network Notification Bulletin

UPDATES



CareSource regularly communicates operational updates on our website. Our goal is to keep you updated with a format that is quickly accessible and that keeps you informed about working with us. Here were some network notifications posted from the previous quarter that you may have missed:

- (Marketplace) [Updating Demographics](#)
- (Georgia and Ohio D-SNP) [CMS Notice of Medicare Non-Coverage \(NOMNC\) Model Document Updates for Medicare Advantage Enrollees](#)

Network notifications can be accessed at **CareSource.com** > Providers > [Updates & Announcements](#).

We 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 find our provider policies listed at **CareSource.com** > Providers > [Provider Policies](#).

Find Updates from CareSource Online

Ohio Plans Only

We strive to make partnering with us simple and easy. We're aware things may change in the way we do business with you and want to communicate these changes to you in an efficient manner.

To find all the latest CareSource news, visit our Updates & Announcements page on the Provider pages of **CareSource.com**. You will find all the updates regarding the preferred drug list (PDL), prior authorization requirements, and medical and reimbursement policies.

ODM Announces Rollout Dates of All EVV Claims Adjudication Changes









Ohio Medicaid & MyCare

With Phase One of the Electronic Visit Verification (EVV) claims processing changes fast approaching, the Ohio Department of Medicaid (ODM) is announcing dates of the following six phases of the claims adjudication process.

The first phase, which includes home health services claims billed to ODM, officially goes into effect on March 1. At the time of this change, claims that require EVV must have a matching EVV visit record. Claims that do not match will be denied.

Other providers will be phased in beginning on June 1, with full implementation expected by the end of the first quarter of 2026. Services and execution dates are listed in the chart below.



		EVV Claims Adjudication Phases				
PHASE 1 March 1, 2025	PHASE 2 June 1, 2025	PHASE 3 June 1, 2025	PHASE 4 August 1, 2025	PHASE 5 October 1, 2025	PHASE 6 January 1, 2026	PHASE 7 March 1, 2026
Billed to ODM FFS		Billed to Next Gen MCEs		Billed to DODD	Billed to ODM or ODA	Billed to MyCare
HOME HEALTH SERVICES	PRIVATE DUTY NURSING, NURSE ASSESSMENT AND CONSULT	HOME HEALTH SERVICES	PRIVATE DUTY NURSING NURSE ASSESSMENT AND CONSULT	IO, Level 1, SELF WAIVER PROGRAM SERVICES	OHIO HOME CARE, PASSPORT WAIVER SERVICES	HOME HEALTH PDN, NURSE ASSESSMENT AND CONSULT, WAIVER SERVICES
						
*Based on claim line date of service.						

Provider types and list of the specific services that fall into each phase below can be found [online](#).

ODM is working with Sandata, our EVV vendor, to make sure you are ready for this change.

Look for more communication about training sessions and resources from ODM as the phases progress.

Resource: [ODM Announces Rollout Dates of All EVV Claims Adjudication Changes](#)



Join Us at the Provider Experience Focus Group Meetings

We invite you to join our Provider Experience Focus Groups, where we will gather your feedback on ways to better support to you.

Below you will see the topics to be covered each quarter. If the topic is not relevant to you, please share this invite with the appropriate staff in your office who have knowledge or experience working with the topic. We include a Question & Answer section to allow time to address any additional topics you would like to cover.

The insights gained can help guide our operational, marketing and strategic decisions to help improve your overall satisfaction working with CareSource.

Space is limited and **registration is required**. For additional information, reach out to ProviderExperiencePanel@CareSource.com.

2025 Schedule with Registration Links

Q1 Provider Focus Group,

Credentialing:

February 21, 2025 at 11 a.m. Eastern Time (ET) and 2 p.m. ET

Q2 Provider Focus Group,

Claims:

May 13, 2025 at 11 a.m. ET and 2 p.m. ET

Q3 Provider Focus Group,

Web Improvements:

September 18, 2025 at 11 a.m. ET and 2 p.m. ET

Q4 Provider Focus Group,

Emergency Room Usage:

December 10, 2025 at 11 a.m. ET and 2 p.m. ET



Returning Overpayments to CareSource

Providers are required to report and return any overpayment within 60 days after identification. An overpayment is defined as any funds a provider receives from Marketplace, Medicare or Medicaid to which the person is not entitled. There is no minimum monetary threshold for returning an overpayment. The 60-day time period for reporting and returning begins when the overpayment is identified, or the provider is informed of the potential overpayment.

If you have received an overpayment from CareSource, please complete the Overpayment Recovery Form or Claim Refund Check Form on **CareSource.com** within 60 days.

For further assistance, please contact Provider Services at the appropriate number below:

- Marketplace: **1-833-230-2101**
- D-SNP: **1-833-230-2176**
- Ohio Medicaid and MyCare: **1-800-488-0134**

New Year, New Rewards!

Ohio Medicaid

This year, we have consolidated the Babies First and Kids First programs into one program called CareSource MyKids. This program will allow for a better member experience and one time registration from birth through 17 years of age. Once the member ages out, they will be automatically enrolled in the MyHealth program. Current members participating in the Babies First and Kids First programs will be automatically enrolled in CareSource MyKids to earn rewards. For new members, each child in the family will need to be enrolled into the CareSource MyKids.

Learn more about the [Rewards Programs](#) today! You will find the reward amounts, incentives, and the CareSource MyKids Registration form.

Ohio D-SNP & MyCare Rewards for Medicare

As a reminder, we reward your patients for completing healthy activities throughout the year. Our My CareSource Reward program rewards members for completing healthy activities such as annual physical exams, breast cancer screenings, colorectal cancer screenings, diabetic screenings, 100 Day Diabetes Medication fills and much more.

- Registration is not required. Members are automatically enrolled.

Learn more about the [D-SNP Rewards program](#) and the [MyCare Rewards program](#) today! In the link, you will find the reward amount, incentives, and much more.

Georgia D-SNP

We are excited to offer rewards to our D-SNP members in Georgia. Our My CareSource Reward program rewards members for completing healthy activities such as annual physical exams, breast cancer screenings, colorectal cancer screenings, diabetic screenings, 100 Day Diabetes Medication fills and much more.

- Registration is not required. Members are automatically enrolled.

Learn more about the [Rewards programs](#) today! In the link, you will find the reward amounts, incentives, and much more!

Marketplace

We reward your patients for completing healthy activities throughout the year. Our MyHealth Rewards program is designed for members 18+ and reward members for completing healthy activities such as chlamydia screenings, breast cancer screenings, colorectal cancer screenings, and diabetic screenings.

- Registration is not required. Members are automatically enrolled.

Learn more about the [Rewards programs](#) today! You can find the reward amount, incentives, and much more!





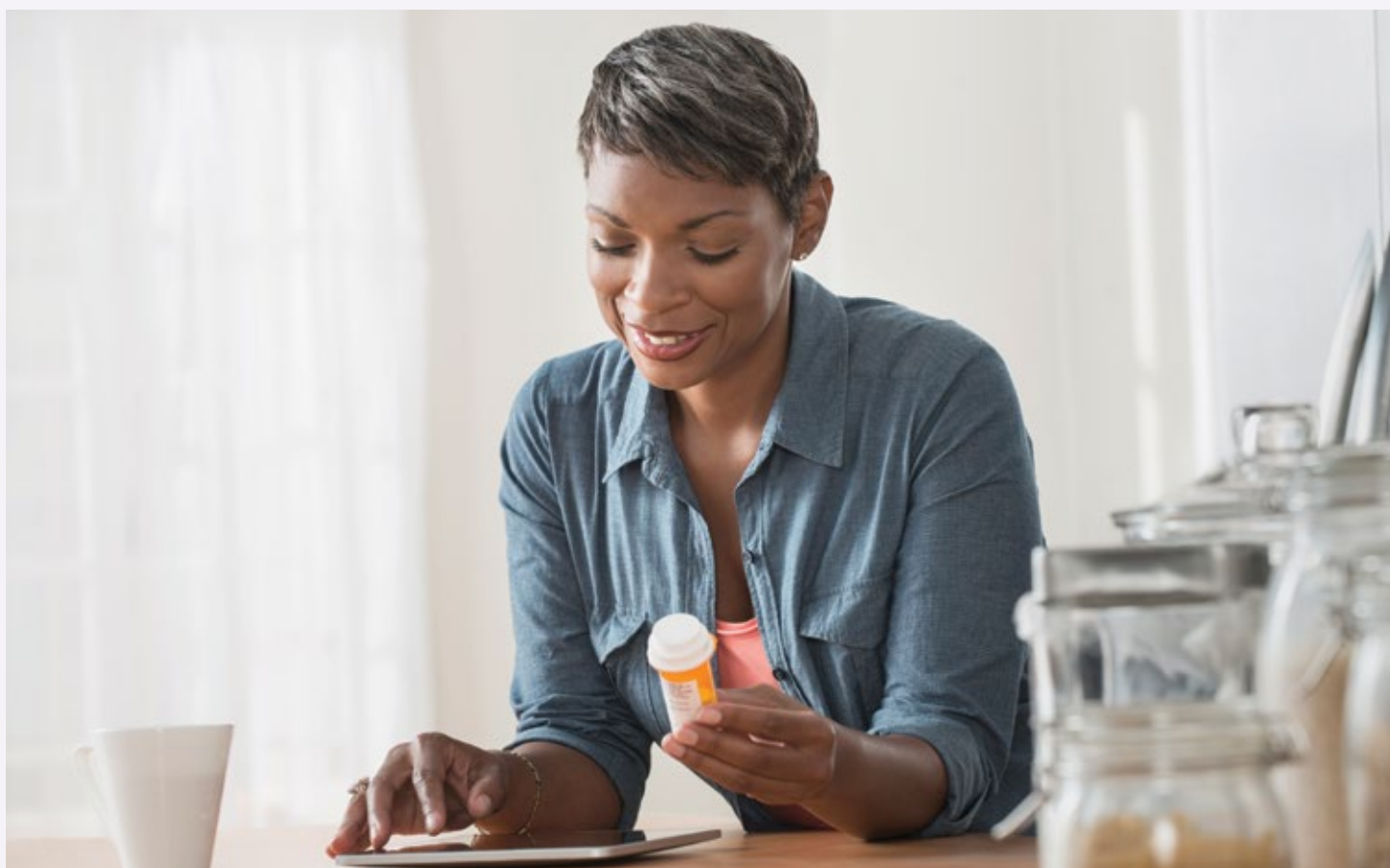
Pharmacy Updates for Medicaid and Marketplace

CareSource has a searchable drug list that is updated monthly on the website. To find out which drugs are covered under your member's 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.

Medication Adherence

Over 50% of adults don't take their medications as prescribed, which can lead to poor health outcomes and more hospital visits. Technology is changing health care by providing tools, such as electronic pill bottles and remote monitoring devices, that help patients follow their medication schedules. These tools can help improve adherence and identify patients who might be at risk for nonadherence.

While these tools can improve patient care, they can't replace the crucial role of pharmacists and health care providers in managing medications. Emphasize to your patients the importance of taking their medications as prescribed.





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Member Corner

The MemberSource newsletter is a great resource to stay up-to-date with health, wellness and plan information for your CareSource patients. To view editions of the MemberSource newsletter, visit **CareSource.com** > Members > Education > [Newsletters](#).

Thank you for your partnership!

*Qualified Health Plans offered in North Carolina by
CareSource North Carolina Co., d/b/a CareSource*

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