

Chapter 7: Asking us to pay a bill you have gotten for covered services or drugs

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If you have questions, please call CareSource MyCare Ohio at **1-855-475-3163**, Monday – Friday, 8 a.m. – 8 p.m. If you need to speak to your care manager, please call **1-866-206-7861**, 24 hours a day, 7 days a week. These calls are free. **For more information**, visit **CareSource.com/MyCare**.

A. When you can ask us to pay for your services or drugs

You should not get a bill for in-network services or drugs. Our network providers must bill the plan for your services and drugs already received. A *network provider* is a provider who works with the health plan.

If you get a bill for health care or drugs, call Member Services or send the bill to us. To send us a bill, see page 14, *How to contact CareSource MyCare Ohio Member Services*.

- If you have not paid the bill, we will pay the provider directly if the services or drugs are covered and you followed all the rules in the Member Handbook.
 - If you have paid the bill, the services or drugs are covered, and you followed all the rules in the Member Handbook, we will work with the provider to refund your payment. It is your right to be paid back if you paid for the services or drugs.
 - If the services or drugs are **not** covered, we will tell you.
- ➔ Contact Member Services or your care manager if you have any questions. If you get a bill and you do not know what to do about it, we can help. You can also call if you want to tell us information about a request for payment you already sent to us.

Here are some examples of times when you may need to ask our plan to assist you with a payment you made or a bill you got:

1. When you get emergency or urgently needed health care from an out-of-network provider

You should always tell the provider you are a member of CareSource MyCare Ohio and ask the provider to bill the plan.

- If you pay the full amount when you get the care, you can ask to have the full amount refunded. Send us the bill and proof of any payment you made.
- You may get a bill from the provider asking for payment that you think you do not owe. Send us the bill and proof of any payment you made.
 - If the provider should be paid, we will pay the provider directly.
 - If you have already paid for the service, we will work with the provider to refund your payment.

2. When a network provider sends you a bill

Network providers must always bill the plan for covered services.

- We do not allow providers to add separate charges, called “balance billing.” This is true even if we pay the provider less than the provider charged for a service. If we decide not to pay for some charges, you still do not have to pay them.



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- Whenever you get a bill from a network provider, send us the bill. We will contact the provider directly and take care of the problem.
- If you have already paid a bill from a network provider, send us the bill and proof of any payment you made. We will work with the provider to refund your payment amount for your covered services.

3. When you use an out-of-network pharmacy to get a prescription filled in an emergency situation

We will cover prescriptions filled at out-of-network pharmacies in emergency situations only. Please see Chapter 3, Section H, *How to get covered services when you have a medical emergency or urgent need for care*, for descriptions of emergency situations for which an out-of-network pharmacy might be used.

You can always contact Member Services at **1-855-475-3163** if you are being asked to pay for services, get a bill, or have any questions. You can use the form on page in Chapter 9 or ask Member Services to send you a form if you want to send us the information about the bill. You can also submit the information through our website at **www.CareSource.com/Members/Ohio/MyCare/Member-Information/File-a-Complaint**.

B. How to avoid payment problems

1. Always ask the provider if the service is covered by CareSource MyCare Ohio.

Except in an emergency or urgent situation, do not agree to pay for a service unless you have asked CareSource MyCare Ohio for a coverage decision (see Chapter 9), received a final decision that the service is not covered, and decided that you still want the service even though the plan does not cover it.

2. Get plan approval before seeing an out-of-network provider.

An exception to this rule is if you need out-of-network emergency or urgent care services. Another exception is if you get services at Federally Qualified Health Centers, Rural Health Clinics, qualified family planning providers listed in the Provider and Pharmacy Directory, certified nurse practitioners and certified nurse midwives.

If you receive care from an out-of-network provider, ask the provider to bill CareSource MyCare Ohio. If the out-of-network provider is approved by CareSource MyCare Ohio, you should not have to pay anything. If the out-of-network provider will not bill CareSource MyCare Ohio and you pay for the service, call Member Services as soon as possible to let us know.

- ➔ Please remember that in most situations you must get plan approval before you can see an out-of-network provider. Therefore, unless you need emergency or urgent care,



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are in your transition of care period, or the provider does not require prior approval as indicated above, we may not pay for services you receive from an out-of-network provider. If you have questions about your transition-of-care period, whether you need approval to see a certain provider, or need help in finding a network provider, call Member Services.

3. Follow the rules in the Member Handbook when receiving services.

See Chapter 3, Section B, *Rules for getting your health care, behavioral health, and long-term services and supports covered by the plan*, for the rules about getting your health care, behavioral health, and other services. See Chapter 5, *Introduction, Rules for the plan's outpatient drug coverage*, for the rules about getting your outpatient prescription drugs.

4. Use the Provider and Pharmacy Directory to find network providers.

If you do not have a Provider and Pharmacy Directory, you can call Member Services to request a copy or go online at **CareSource.com/MyCare** for the most up-to-date information.

5. Always carry your member ID card and show it to the provider or pharmacy when getting care.

If you forgot your member ID card, ask the provider to go online at **CareSource.com/MyCare** or call our Member Services Department. If your card is damaged, lost, or stolen, call Member Services right away and we will send you a new card.



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