



CARESOURCE ADVANTAGE[®] (Medicare Advantage) Quick Reference Guide



About CareSource Advantage Plans

CareSource Medicare Advantage plans offer more coverage than original Medicare. CareSource Medicare Advantage members have access to all benefits of Medicare Part A and Part B, plus prescription drug coverage (Part D). Members have access to affordable, high-quality health insurance with no limits due to pre-existing conditions or annual benefit caps. Our plans provide:



- Hospital, doctor, prescription drug, vision, dental, and fitness benefits in a single plan
- More benefits than Original Medicare
- Fixed copays so members know what their out-of-pocket expenses will be
- \$0 Medical deductible
- \$0 co-pay on benefits like preventative care, glasses or contacts, and fitness access
- Annual out-of-pocket maximum
- Lifetime maximum benefit

A complete list of services can be found in the plan Evidence of Coverage located at CareSource.com > Plans > Medicare Advantage > [Evidence of Coverage](#).

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

CareSource		CareSource Advantage [®] Zero Premium (HMO)
Member Name: John Doe	Effective Date: 01/01/2020	OH
Member ID#: 12345678900		
Health Plan: 80840	RxBIN - 610014	
Payer ID: XXXXX	RxPCN - MEDDPRIME	
Primary Care Provider/Clinic Name: Good, I Am A.	RxGrp - RXINN02	
Provider/Clinic Phone: XXX-XXX-XXX		
Copays:	CMS: XXXXX-XXX	
Office: \$XX.XX ER: \$XX.XX		
Spec: \$XX.XX UrgCare: \$XX.XX		

CareSource.com/Medicare
This card does not guarantee coverage. To verify benefits, view claims, or find a provider, use the website or call:

MEMBERS: 1-844-607-2827 TTY: 1-800-750-0750

24/7 Nurse Advice Line: 1-866-206-0569	Providers: 1-844-679-7865
Vision Benefits: EyeMed 1-866-248-2011	Dental Network: DenteMax
Hearing Benefits: TruHearing 1-855-205-6219	Pharmacy: 1-800-416-1673
Medical Claims: CareSource P.O. Box 8730 Dayton, OH 45401-8730	Pharmacy Claims: Express Scripts ATTN: Medicare Part D P.O. Box 14718 Lexington, KY 40512-4718



CareSource Contacts

Provider Services:	1-844-679-7865
Provider Portal:	URL: https://providerportal.caresource.com/OH
Website:	Find CareSource Advantage resources at CareSource.com
Utilization Management:	Call Provider Services and select the menu option for prior authorizations
Claim Inquiries	Call Provider Services
Claim Status	Check status of claims at CareSource.com > Log-In > Provider Portal

Claim Submissions and Payment

CareSource encourages providers to submit claims electronically for the most efficient processing. Paper claims are encouraged for services that require clinical documentation or other forms to process.

Electronic Payment Processing

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 > [Claims](#) and fax, email, or mail it back to ECHO. For questions, call ECHO Customer Support at 1-888-834-3511.

Electronic Claims Submission

CareSource Payer ID number: 31114

Timely Filing: 365 calendar days from the date of service or discharge

Paper Claims Submission

CareSource
Attn: Claims Department
P.O. Box 8730
Dayton, OH 45401-8730

Covered Services

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

- Inpatient hospital care
- Outpatient surgery
- Doctor's office visits
- Preventive care
- Emergency care
- Urgent care
- Diagnostic tests, lab/radiology services and x-rays
- Hearing services
- Dental services
- Vision services
- Mental health care
- Skilled nursing facility
- Outpatient rehabilitation
- Ambulance
- Transportation Part B drugs

- Supervised Exercise Therapy
- Foot care
- Durable medical equipment
- Prosthetic devices
- Diabetes supplies and services
- Acupuncture
- Chiropractic care
- Home health care
- Hospice
- Outpatient substance abuse
- Over-the-counter items
- Renal dialysis

Please Note: Some of these covered services require prior authorization. Non-emergency services provided by out-of-network health partners will NOT be covered by CareSource, unless the service received prior authorization.

For a more comprehensive listing of Medicare Advantage covered services, please visit **CareSource.com** > Plans > Medicare Advantage > [Plan Documents](#) and access the *Summary of Benefits*.

Prior Authorizations

Services that Require Prior Authorization

Please note: This is not a comprehensive list. authorization may result in denied claims.

- All services provided out of network
- All medical inpatient care
- All elective surgeries
- All cosmetic procedures
- Bariatric/gastric obesity surgery
- Knee/hip replacements, knee orthoses
- All abortions
- Hospice care/supportive care
- All non-emergent ambulance
- Specific behavioral health services
- Durable medical equipment and other supplies over \$500.00 billed charges
- Specific home care services and therapies
- Outpatient therapies
- Transplants
- Pain management
- Radiology

For a more comprehensive listing of Medicare Advantage services requiring prior authorization, please visit **CareSource.com** > Providers > [Prior Authorization](#).

Prior Authorization Process

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

Online	CareSource.com > Provider > Provider Portal
Fax	844-417-6153 The prior authorization form can be found on CareSource.com. Please complete and fax the form.
Email	MMMA@caresource.com
Mail	CareSource P.O. Box 3209 Dayton, OH 45401-3209
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 CareSource member ID number
- Health partner name and National Provider Identifier (NPI) number
- 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 health partner, if applicable
- Clinical information to support the medical necessity for the service

Please review the Provider Manual for additional information on prior authorizations at: **CareSource.com** > Providers > Tools & Resources > [Provider Manual](#).

*CT/CTA, MRI/MRA, PET scans authorization:

Health partners may request prior authorization at **www.RadMD.com** or by calling NIA Magellan at **1-800-424-1741**.

Provider Resources

CareSource communicates with our provider network through a variety of channels, including phone, fax, [Provider Portal](#), newsletters, [CareSource.com](#) and network notifications. We encourage you to reach out to your assigned Provider Engagement 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: <https://providerportal.caresource.com/OH>

Our secure online [Provider Portal](#) allows you instant access at any time to valuable information. You can access the CareSource Provider Portal at **CareSource.com** > Login > [Provider Portal](#). 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 for the details on the topics featured in this guide. Refer to this manual at **CareSource.com** > Providers > [Provider Manual](#) for the details on the topics featured in this guide.

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 > [Updates & Announcements](#).

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
Email	ProviderMaintenance@caresource.com
Fax	937-396-3076
Mail	CareSource Attn: Provider Maintenance P.O. Box 8738 Dayton, OH 45401-8738