

CareSource Member ID Cards

This ID card identifies you as a CareSource member. Each person in your family who is a CareSource member will have their own card. Always show your card to health care providers before you get care.



Please call Member Services at **1-800-488-0134** (TTY: 1-800-750-0750 or 711) if you have any questions.

Thank you.

Care Source

Health Care with Heart®

Member Name:

<MARY DOE>

CareSource Mem # MMIS #: <9876543210

Case #: <7654321000

Care Source **RxBIN** - 003858

RxPCN - MA RxGRP - RXINN01

Primary Care Provider/Clinic Name:

<G00D, IAM A.>

Provider/Clinic Phone: <XXX-XXX-XXX>

Member Services: 1-800-488-0134 (TTY: 1-800-750-0750 or 711)

Care Source

Health Care with Heart®

Member Name:

<MARY DOE>

CareSource Mem #

MMIS #: <987654321 Case #: <7654321000

Care SourceRi nnovations

RxBIN - 003858 RxPCN - MA RxGRP - RXINN01

Primary Care Provider/Clinic Name:

<GOOD. IAM A.>

Provider/Clinic Phone: <XXX-XXX-XXX>

Member Services: 1-800-488-0134 (TTY: 1-800-750-0750 or 711)

Care Source

Health Care with Heart®

CareSource

RxBIN - 003858

RxGRP - RXINN01

RxPCN - MA

Member Name:

<MARY DOE>

CareSource Mem #

MMIS #: <9876543210

Case #: <7654321000

Primary Care Provider/Clinic Name:

<G00D. IAM A.>

Provider/Clinic Phone: <XXX-XXX-XXX>

Member Services: 1-800-488-0134 (TTY: 1-800-750-0750 or 711)

Care Source

Health Care with Heart®

Member Name:

<MARY DOE>

CareSource Mem #

MMIS #: <9876543210

Case #: <7654321000

Rare Source

RxBIN - 003858 RxPCN - MA RxGRP - RXINN01

Primary Care Provider/Clinic Name:

<G00D. IAM A.>

Provider/Clinic Phone: <XXX-XXX-XXX>

Member Services: 1-800-488-0134 (TTY: 1-800-750-0750 or 711)

THIS CARD IS FOR IDENTIFICATION ONLY AND DOES NOT VERIFY ELIGIBILITY

Never let anyone else use your ID card. In case of emergency, call 911 or go to the nearest emergency room (ER). If you are not sure if you need to go to the ER, call your primary care provider or call our CareSource24® nurse advice line.

HEALTH CARE PROVIDED igibility for the date of service. Visit www.CareSource.co access this information. Authorization required for inc

PHARMACIST: 1-800-416-3629 MEDICAL CLAIMS: CareSource, P.O. Box 8730, Dayton, OH 45401-8730

MEMBER: Show your ID card to medical providers BEFORE you receive care.

PHARMACY CLAIMS: Express Scripts, ATTN: Commercial Claims

P.O. Box 14711 Lexinaton, KY 40512-4711

OH-MMFD-2269

CareSource24® Nurse Advice Line: 1-866-206-0554 (TTY: 711)

THIS CARD IS FOR IDENTIFICATION ONLY AND DOES NOT VERIFY ELIGIBILITY

MEMBER: Show your ID card to medical providers BEFORE you receive care. Never let anyone else use your ID card. In case of emergency, call 911 or go to the nearest

emergency room (ER). If you are not sure if you need to go to the ER, call your primary care gibility for the date of service.

OH-MMFD-2269

HEALTH CARE PROVIDER Visit www.CareSource.co access this information. Authorization required for inp

PHARMACIST: 1-800-416-3629

MEDICAL CLAIMS: CareSource, P.O. Box 8730, Dayton, OH 45401-8730

provider or call our CareSource24® nurse advice line.

PHARMACY CLAIMS: Express Scripts. ATTN: Commercial Claims

P.O. Box 14711 Lexington, KY 40512-4711

CareSource24® Nurse Advice Line: 1-866-206-0554 (TTY: 711)

THIS CARD IS FOR IDENTIFICATION ONLY AND DOES NOT VERIFY ELIGIBILITY

MEMBER: Show your ID card to medical providers BEFORE you receive care. Never let anyone else use your ID card. In case of emergency, call 911 or go to the nearest

emergency room (ER). If you are not sure if you need to go to the ER, call your primary care provider or call our CareSource24® nurse advice line. igibility for the date of service.

HEALTH CARE PROVIDER Visit www.CareSource.co access this information. Authorization required for int PHARMACIST: 1-800-416-3629

MEDICAL CLAIMS: CareSource, P.O. Box 8730, Dayton, OH 45401-8730 PHARMACY CLAIMS: Express Scripts, ATTN: Commercial Claims

P.O. Box 14711 Lexinaton, KY 40512-4711

OH-MMFD-2269

CareSource24® Nurse Advice Line: 1-866-206-0554 (TTY: 711)

access this information.

OH-MMFD-2269

THIS CARD IS FOR IDENTIFICATION ONLY AND DOES NOT VERIFY ELIGIBILITY **MEMBER:** Show your ID card to medical providers BEFORE you receive care.

Never let anyone else use your ID card. In case of emergency, call 911 or go to the nearest emergency room (ER). If you are not sure if you need to go to the ER, call your primary care provider or call our CareSource24® nurse advice line. gibility for the date of service. HEALTH CARE PROVIDER

Visit www.CareSource.co Authorization required for inp

PHARMACIST: 1-800-416-3629

MEDICAL CLAIMS: CareSource, P.O. Box 8730, Dayton, OH 45401-8730

PHARMACY CLAIMS: Express Scripts, ATTN: Commercial Claims P.O. Box 14711 Lexington, KY 40512-4711

CareSource24® Nurse Advice Line: 1-866-206-0554 (TTY: 711)



Member Name:

<MARY DOF>

CareSource Mem # MMIS #: <9876543210

Case #: <7654321000>

Primary Care Provider/Clinic Name:

<G00D. IAM A.>

Provider/Clinic Phone: <XXX-XXX-XXX>

Member Services: 1-800-488-0134 (TTY: 1-800-750-0750 or 711)

Care Source Member Name: Care Source nnovations <MARY DOF>

RxBIN - 003858

RxGRP - RXINN01

CareSource

RxBIN - 003858

RxGRP - RXINN01

RxPCN - MA

RxPCN - MA

CareSource Mem #:

MMIS #: <9876543210

Case #: <7654321000>

Primary Care Provider/Clinic Name:

<G00D. IAM A.>

Provider/Clinic Phone: <XXX-XXX-XXX>

Member Services: 1-800-488-0134 (TTY: 1-800-750-0750 or 711)

Health Care with Heart® Care Source

Member Name:

<MARY DOE>

CareSource Mem #:

MMIS #: <9876543210

Case #: <7654321000>

Primary Care Provider/Clinic Name:

<G00D, IAM A.>

Provider/Clinic Phone: <XXX-XXX-XXX>

Member Services: 1-800-488-0134 (TTY: 1-800-750-0750 or 711)

Care Source

Health Care with Heart®

Health Care with Heart®

Care Source Rinnovations

CareSource Rinnovations

RxBIN - 003858

RxPCN - MA

RxBIN - 003858

RxGRP - RXINN01

RxPCN - MA

Member Name:

<MARY DOE>

CareSource Mem #

MMIS #: <9876543210

Case #: <7654321000

RxGRP - RXINN01

Primary Care Provider/Clinic Name:

<G00D, IAM A.>

Provider/Clinic Phone: <XXX-XXX-XXX>

Member Services: 1-800-488-0134 (TTY: 1-800-750-0750 or 711)

THIS CARD IS FOR IDENTIFICATION ONLY AND DOES NOT VERIFY ELIGIBILITY

Never let anyone else use your ID card. In case of emergency, call 911 or go to the nearest emergency room (ER). If you are not sure if you need to go to the ER, call your primary care provider or call our CareSource24® nurse advice line.

HEALTH CARE PROVIDE igibility for the date of service. access this information. Visit www.CareSource.co Authorization required for ing PHARMACIST: 1-800-416-3629

MEDICAL CLAIMS: CareSource, P.O. Box 8730, Dayton, OH 45401-8730 PHARMACY CLAIMS: Express Scripts, ATTN: Commercial Claims

MEMBER: Show your ID card to medical providers BEFORE you receive care.

MEDICAL CLAIMS: CareSource, P.O. Box 8730, Dayton, OH 45401-8730

PHARMACY CLAIMS: Express Scripts, ATTN: Commercial Claims

MEMBER: Show your ID card to medical providers BEFORE you receive care.

P.O. Box 14711 Lexington, KY 40512-4711

OH-MMFD-2269

CareSource24® Nurse Advice Line: 1-866-206-0554 (TTY: 711)

Never let anyone else use your ID card. In case of emergency, call 911 or go to the nearest

emergency room (ER). If you are not sure if you need to go to the ER, call your primary care

THIS CARD IS FOR IDENTIFICATION ONLY AND DOES NOT VERIFY ELIGIBILITY

MEMBER: Show your ID card to medical providers BEFORE you receive care. Never let anyone else use your ID card. In case of emergency, call 911 or go to the nearest emergency room (ER). If you are not sure if you need to go to the ER, call your primary care

HEALTH CARE PROVIDE igibility for the date of service. Visit www.CareSource.co access this information. Authorization required for inc

PHARMACIST: 1-800-416-3629

MEDICAL CLAIMS: CareSource, P.O. Box 8730, Dayton, OH 45401-8730 PHARMACY CLAIMS: Express Scripts, ATTN: Commercial Claims

provider or call our CareSource24® nurse advice line.

P.O. Box 14711 Lexington, KY 40512-4711

OH-MMED-2269 CareSource24® Nurse Advice Line: 1-866-206-0554 (TTY: 711)

THIS CARD IS FOR IDENTIFICATION ONLY AND DOES NOT VERIFY ELIGIBILITY

THIS CARD IS FOR IDENTIFICATION ONLY AND DOES NOT VERIFY ELIGIBILITY

MEMBER: Show your ID card to medical providers BEFORE you receive care.

Never let anyone else use your ID card. In case of emergency, call 911 or go to the nearest emergency room (ER). If you are not sure if you need to go to the ER, call your primary care provider or call our CareSource24® nurse advice line.

HEALTH CARE PROVIDER igibility for the date of service. Visit www.CareSource.co access this information. Authorization required for ing

PHARMACIST: 1-800-416-3629

MEDICAL CLAIMS: CareSource, P.O. Box 8730, Dayton, OH 45401-8730

PHARMACY CLAIMS: Express Scripts, ATTN: Commercial Claims P.O. Box 14711 Lexington, KY 40512-4711

OH-MMFD-2269

CareSource24® Nurse Advice Line: 1-866-206-0554 (TTY: 711)

CareSource24® Nurse Advice Line: 1-866-206-0554 (TTY: 711)

OH-MMFD-2269

igibility for the date of service.

access this information.

provider or call our CareSource24® nurse advice line.

HEALTH CARE PROVIDER

Visit www.CareSource.co

Authorization required for inc

PHARMACIST: 1-800-416-3629

P.O. Box 14711 Lexington, KY 40512-4711

WHAT'S INCLUDED IN THIS NEW MEMBER BOOKLET

Quick Start Steps What steps to take first as a new CareSource member
Transportation Get a ride to a doctor, a pharmacy, and other places at no cost if you don't have transportation1
Options for Care You have options if you aren't sure where to go to get care1
Contact Us Member Services is here to help1
Incentives and Rewards CareSource rewards you and your family for taking a proactive role in being healthy1



Get the Support You Need
CareSource has a tool to link you to resources in your community16
Preventive Care
It's important to get preventive care to find and treat health issues early17
CareSource Life Services®
Get a personal Life Coach, help finding a job, or support to finish your degree20
Benefits At-A-Glance
View the covered care and services you have as a CareSource member21
Renew Your Health Care Coverage
Don't lose your CareSource benefits
Member Handbook and Provider Directory Request Cards
Tear out the request cards to get a printed copy of your Member Handbook or
Provider Directory here
Member Consent/HIPAA Authorization Form
Give consent to share your health information with your providers and/or someone else insert

Quick Start Steps

WHAT SHOULD YOU DO FIRST?



1. Get your CareSource member ID card.

Included with this letter is your member ID card. Take it with you everywhere. You need to show this card to get covered health care services and prescription drugs. Your ID card lists the name and phone number of your primary care provider (PCP). Your PCP is the doctor who will treat you for most of your health care needs. You can change the PCP on your ID card once a month, if you want.



2. Set up a My CareSource® account.

You get 24/7 access to **MyCareSource.com**. My CareSource is a secure online account where you can find out about your benefits, see plan records, and choose the way you would like for us to communicate with you. My CareSource accounts can be linked to manage health care for families. Sign up to:

- Choose or change you provider
- View claims and plan records
- View health alerts, and more
- View and print your ID card, or ask that a new one be mailed
- Take your Health Risk Assessment

Signing up is easy:

- 1. Go to **MyCareSource.com**.
- 3. Answer the questions.

- 2. Click Sign Up at the bottom of the page.
- 4. Click Register.

You're all set!



3. View your member handbook.

Visit CareSource.com/oh/plans/medicaid/plan-documents/ to view your member handbook. It includes a lot of important information about your health plan, like:

How to view the list of covered prescription drugs

Behavioral health and substance abuse services.

Your membership rights and responsibilities

Advance directives

- Covered services and how to get them
- Healthchek services for members 20 years old and younger
- How to tell us you're unhappy with a decision we made
- Who is eligible for Medicaid managed care plan membership
- Notice of privacy practices
- How to find providers in our network (you must receive services from network providers)
- Emergency services (you have the right to use any hospital or other medical setting for Emergency services)



4. View our online provider directory.

Visit **findadoctor.CareSource.com** to view our searchable online provider directory. It lists all the providers in our network. Providers in the CareSource network are those who accept CareSource insurance and see patients who are covered through CareSource.



5. Get a printed copy of your member handbook or provider directory.

If you have not done so already, you can also ask to get either or both the Member Handbook and Provider Directory in paper form at no cost to you. Please follow the directions on the request postcard to tell us if you would like the Member Handbook, Provider Directory, or both mailed to you. Make sure you mail the request postcard for the item or items you would like to receive. There is no postage necessary. The materials you asked for will be mailed to you. You can also call Member Services at **1-800-488-0134** (TTY: 1-800-750-0750 or 711) to request this information.





6. Keep your current treatment plans and care.

Call us today if you have health care services that were scheduled before you joined our plan or approved by Medicaid Fee-for-Service. For a period of time, you may be able to keep getting these services or seeing providers not in our network. Tell us right away so we can help you get the care you need.



7. Learn more about your prescription drugs.

Call us or ask your provider if you have questions about your prescription drugs. Prior approval may be needed for prescription drug coverage. We will let you know if you need prior approval from us for any of your current prescriptions.



8. Learn about Estate Recovery.

If you are permanently institutionalized or age 55 or older when you receive Medicaid benefits, the Estate Recovery Program may recover payments for the cost of your care paid by Medicaid from your estate. The cost of your care may include the capitation payment that Medicaid pays to your managed care plan, even if the capitation payment is greater than the cost of the services you actually received. Estate Recovery only happens after the death of the Medicaid recipient.



9. Get the CareSource Mobile App.

This mobile app lets you manage your CareSource health plan on the go. The app is free. The CareSource mobile app is available through the App Store® for iPhone® or Google Play® for Android®*.



10. Complete your Health Risk Assessment (HRA).

CareSource wants you to stay healthy. Using a few questions about your health and lifestyle, CareSource can help your providers coordinate your care. You can take the HRA in one of these ways:

- Phone: Call 1-833-230-2011 (TTY: 711) between 7 a.m. to 6 p.m., Monday Friday.
- Online: Just log into your secure **MyCareSource.com** account and click on the Health tab.



WHO IS NOT REQUIRED TO SELECT MANAGED CARE PLAN (MCP) MEMBERSHIP?

Excluded from MCP Membership:

The following individuals are not permitted to join CareSource:

- Dually eligible under both the Medicaid and Medicare programs;
- Institutionalized (in a nursing home and are not eligible under the Adult Extension category, long-term care facility, ICF-IID, or some other kind of institution);
- Receiving Medicaid Waiver services and are not eligible under the Adult Extension

Optional MCP Membership:

- Members of a federally recognized Indian tribe, regardless of age.
- Individuals who receive home and community based waiver services through Ohio Department of Developmental Disabilities.

If you believe that you or your child meet any of the above criteria and should not be a member of a managed care plan, you must call the Medicaid Hotline at 1-800-324-8680 (TTY: 1-800-292-3572).

Transportation

NEED A RIDE?

If you must travel 30 miles or more from your home to receive ongoing health care services, we'll provide transportation at no cost to you. We also offer up to 30 one-way trips each year to any health care, Women, Infant Children (WIC), or Medicaid renewal appointments. Call Member Services at 1-800-488-0134 (TTY: 1-800-750-0750 or 711) to ask for a ride at least 48 hours (two business days) in advance.





Options For Care

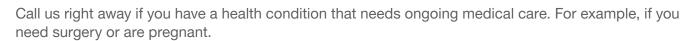
NEED HEALTH ADVICE?

We want to make sure you have easy access to care from the right provider when you need it.

Primary Care Provider (PCP)	Telehealth	Convenience Care Clinics	Urgent Care	Hospital Emergency Room
Used for common illnesses and advice. You will get most of your preventive care from your PCP. You should see your PCP the most often!	Visit with a provider by phone or computer from wherever you are. Ask your providers if they offer telehealth. If your provider is not available or does not offer telehealth, you can call RelyMD® at 1-855-879-4332 or visit RelyMD.com/patients.	Inside many local drug and grocery stores. Use for common illnesses such as coughs, sinusitis, colds, sore throats, and immunizations.	Used to treat non-life threat- ening issues. When your PCP is not available and your con- dition or injury cannot wait.	Only used for life-threatening issues or medical emergencies. Call 911 or go to the nearest ER.

If you aren't sure what to ask or where to go for care, call our CareSource24® Nurse Advice Line. Call **1-866-206-0554** (TTY: 1-800-750-0750 or 711) to talk to a CareSource24 registered nurse. We're here for you 24 hours a day, 7 days a week.

Contact Us



If you need help or have questions, call Member Services at 1-800-488-0134 (TTY: 1-800-750-0750 or 711) Monday through Friday, 7 a.m. – 7 p.m. We are also ready to help you:

- Get a printed copy of your Member Handbook, Provider
 Change the PCP on your ID card Directory or any other information on our website
- Get a new ID card
- Answer any other questions about your health plan

- Schedule transportation
- Make appointments with your providers

If you have a problem reading or understanding this information, please contact Member Services at 1-800-488-0134 (TTY: 1-800-750-0750 or 711) for help at no cost to you. We can explain this information in English or in your primary language. We may have this information printed in some other languages. If you are visually or hearing-impaired, special help can be provided.

As a CareSource member, you will continue to receive all medically necessary Medicaid covered services at no cost to you. Call Member Services right away if you did not receive your ID card(s) and two postage-paid request cards with this booklet.

Incentives and Rewards

MAKE LIFE MORE REWARDING!

CareSource rewards you and your family for taking an active role in being healthy. We have lifestyle programs to encourage you and your family to take part in yearly wellness visits and preventive care programs.

You and your family can earn rewards for participating the Babies First®, Kids First, and MyHealth programs. Rewards can be redeemed for gift cards from one of our many retail stores. Learn more about each of these programs on the next page.





Babies First®

You and your baby through 17 months old can earn up to \$415 in rewards through the Babies First program. Simply see your doctor regularly while you are pregnant and after your baby is born. Then make sure your child goes to all of their well-child visits with their doctor.



Kids First

Each child ages 18 months through 17 years old can earn up to \$195 in rewards through the Kids First program. Earn rewards for going to yearly well-child visit, getting vaccinations, and having routine dental exams. Rewards are based on each child's health and wellness needs.



My Health

Adults ages 18 years through 64 years old can earn up to \$395 in rewards through the MyHealth program! MyHealth has health assessments, small step guides, and online tools to set and track your goals.

Sign Up

Babies First and Kids Health
You can sign up by going to
CareSource.com/OhioMedicaid
and clicking Incentives and
Rewards. The sign up forms are
listed under each of the reward
programs. You can also sign up at
each of these links:

- Babies First:
 CareSource.com/BabiesFirstOH
- Kids First: CareSource.com/KidsFirstOH

MyHealth Rewards

Adults ages 18 through 64 years old are automatically enrolled in MyHealth. To start earning rewards, simply go to **MyCareSource.com** and click on the MyHealth link under the Health tab.

Get the Support You Need.



CareSource wants to help you succeed. MyResources is an online tool that connects you to low- to no-cost local programs and services.

In 2020, more than 110,000 searches were done using MyResources to find assistance.

Getting started is just a few clicks away!

You can search for assistance available for:

- Food
- Housing
- Health care

- Job skills
- Financial support
- And more!

As a CareSource member, you have access to resources at your fingertips.

Try it today!

Log in to your My CareSource® account at **MyCareSource.com** to learn more. You can also call Member Services. The phone number is on your CareSource ID card.

Stay Healthy With Preventive Care

Preventive care is key for the whole family. It is important to see your primary care provider (PCP) and other providers on a regular basis even if you are healthy. Routine health exams, tests, and screenings from your PCP can help find and treat problems early before they get worse.

Preventive care is always covered. Preventive care includes:

- Yearly well-adult exams
- Breast cancer screenings (mammogram) and cervical cancer screenings (pap test) for women
- Prostate cancer screenings for men
- Routine dental and medical checkups
- Healthchek exams for children under the age of 21
- And much more!

You and your family can even earn rewards to redeem for gifts cards by getting preventive care and completing other healthy activities! Learn more about these rewards on page 14.



HEALTHCHFK

Preventive care is especially important for children and pregnant moms. Healthchek is Ohio's Early and Periodic Screening, Diagnostic and Treatment (EPSDT) program. It covers medical exams, immunizations, health education, and lab tests for those under the age of 21. These services are available at no cost to you. Your child's PCP will work with you to make sure your child gets the care they need. EPSDT includes:

- √ Physical and medical exams
- ✓ Dental screening at 3 years and older ✓ Nutritional assessment
- √ Health education and counseling

- √ Vision and hearing tests

- ✓ Lab testing

EPSDT also covers any diagnosis and treatment that is medically necessary for problems or conditions found by an exam. This includes things like glasses, hearing aids, or dental care.

As part of Healthchek, CareSource members under the age of 21 can also get care management services.



PREGNANCY AND FAMILY PLANNING

Whether you are thinking about having a baby in the future or you are expecting a baby soon, CareSource wants you to have a healthy pregnancy.

Before You Are Pregnant It's never too early to prepare for a healthy pregnancy. If you are thinking of having a baby, you can do some things now to be as healthy as possible before getting pregnant. These actions can reduce potential problems during pregnancy:

- Make an appointment to see your doctor for a physical exam
- Talk with your doctor about what makes a healthy diet
- Take folic acid every day
- Don't drink alcohol or use illegal drugs
- Stop smoking now

During Pregnancy If you are pregnant, make an appointment with an obstetrician (OB). You can find an OB in your CareSource Provider Directory, at **findadoctor.CareSource.com**, or you can call Member Services. Schedule a visit as soon as you know you are pregnant.

After You Have Your Baby Call CareSource to tell us that you had your baby. It's important to have a postpartum checkup with your OB. They will make sure your body is healing and recovering after giving birth. Call your OB to schedule an appointment 4 to 6 weeks after your baby is born. If you had a C-section or had any problems during delivery, make your appointment within the first or second week after your baby is born.



Good health requires more than just quality health care. Having a good job, community support, and access to education or training opportunities impact your overall health and well-being. CareSource Life Services can help remove barriers that stand in the way of reaching your goals. We can help pave the way from where you are, to where you want to be.

You'll be paired with a personal Life Coach who can set you up for success. Life Coaches get to know you and provide one-on-one coaching for up to 24 months. Life Coaches can also link you to services and support for:

- Finding full-time employment
- Transportation
- Education or training programs

- Food assistance
- Housing
- Budgeting and finances

This is all provided at no cost to you.

To learn more, please fill out our online form at secureforms.caresource.com/en/LSRInfo/. You can also call us at 1-844-543-7378 or email LifeServices@CareSource.com.





Benefits At-A-Glance

The following benefits at-a-glance lists the covered care and services you have as a CareSource member. You can find more information about your benefits in your Member Handbook, online at CareSource.com/documents/oh-medicaid-member-handbook/ or by calling Member Services.

Health Care Visits

- Chiropractor*
- Community behavioral health centers
- Convenience care clinics inside of stores like CVS®, Kroger®, and Walmart®
- Emergency room
- Federally Qualified Health Center (FQHC) and Rural Health Clinic (RHC)
- Free-standing birth centers
- Hospital (inpatient* and outpatient)
- Primary care providers like doctors, OB/GYNs,
 Physician Assistants, and Nurse Practitioners
- Specialists (podiatrist, neurologist, oncologist, etc.) √
- Telehealth (virtual doctor visit over the phone or online)
- Urgent care

* or √, See note, page 25



Preventive and Early Detection Care/Screenings

- Annual well visit
- Autism Spectrum Disorder screening
- Blood pressure screening
- Breast cancer screening (mammogram)
- Cervical and vaginal cancer screening (pap test)
- Colorectal cancer screening
- Diabetes screening
- Disease tests and treatments (Hepatitis, HIV, STI/STD, etc.)
- Immunizations (shots)
- Lung cancer screening
- Nutritional assessment
- Obesity/BMI screening and dietary counseling
- Prostate cancer screening
- Sports physicals

Healthchek Services/EPSDT

Early and Periodic Screening, Diagnostic and Treatment (EPSDT) for those under the age 21:

- Comprehensive health and developmental exam
- Dental screening
- Developmental/behavioral assessment
- Health education
- Hearing tests
- Immunizations (shots)
- Lab tests
- Lead screenings
- Nutritional assessment
- Other services and treatments as needed*

Heart

- Abdominal aortic aneurysm screening
- Cardiac rehabilitation services*
- Heart disease risk reduction visit (therapy or heart disease)

Health Condition Management

- Chemotherapy and radiation*
- Diabetes screening
- Diabetes self-management training
- Diabetic services and supplies
- Dialysis
- Kidney disease services and supplies*
- Pulmonary rehabilitation services*

Diagnostics

- Blood work/lab testing*
- Scans* (CT, MRI, PET, etc.)
- X-rays

Pharmacy and Medications

- Brand and generic prescription drugs*
- Mail order drugs*
- Over-the-counter items*

* or √, See note, page 25

- Heart disease testing
- Electrocardiogram (ECG/EKG)

Behavioral Health Services

- All inpatient services* √
- Behavioral health care coordination services
- Behavioral health nursing services
- Children's respite* √
- Electroconvulsive Therapy (ECT)
- Family psychotherapy
- Group psychotherapy
- Individual psychotherapy
- Medical Services
- Medication Assisted Treatment (MAT) for addiction
- Mental health day treatment
- Mental Health Services including:
 - Therapeutic behavioral service
 - Psychosocial rehabilitation

- Community psychiatric supportive treatment
- Assertive Community Treatment (ACT) for adults*
- Intensive Home-Based Treatment (IHBT) for children/adolescents*
- Opioid Treatment Program (OTP) services
- Pharmacological management
- Psychiatric diagnostic evaluation
- Psychological testing
- Psychotherapy and counseling
- Substance Use Disorder (SUD) treatment services including:
 - Case management
 - Peer recovery support
 - Intensive Outpatient Program (IOP) services
 - Partial Hospitalization



- Residential treatment
- Substance Use Disorder (SUD) residential*
- Withdrawal management
- Transcranial Magnetic Stimulation (TMS)*

Medical Supplies

- Cochlear implants*
- Diabetic supplies*
- Diapers (limits apply per age)
- Durable Medical Equipment (DME) and related supplies (oxygen tank, wheelchair/ walkers, wound care, CPAP machine, etc.)* √
- Nutritional supplies*
- Prosthetic devices and related supplies* √



^{*} or √, See note, page 25



Family Planning and Maternity Services

- Birth control
- Breast feeding classes
- Breast pumps
- Family planning exams
- Infertility diagnostic services*
- Lamaze classes
- Nurse midwife services
- Parent education
- Prenatal and postnatal doctor and home visits
- STD/STI screenings and treatment
- Well-baby check-ups

Home Health Care

- Durable Medical Equipment (DME – See Medical Supplies)*
- Home infusion therapy*
- Home nursing services (skilled nursing, private duty, certified nurse aid, social

- worker, etc.)*
- Physical, occupational and speech therapy*

Vision/Eye Care

- Contacts*
- Eye exams
- Glasses
- Low vision exams and aid (under 21 years old)*
- Optometrist & ophthalmologist visits
- Vision surgery*

Dental

- Dental exams & cleanings
- Dental labs & tests*
- Dental x-rays
- Dentures/Implants*
- Fluoride treatments
- Orthodontics (under 21 years old and medically necessary)* √
- Surgeries and procedures (extractions, restorations, etc.)*

Transportation Services

- Emergency (ambulance, ambulette, air flights*, etc.)
- Non-emergency (scheduled ride, bus, wheelchair access, etc.)

Other Care

- ABA therapy (Applied Behavior Analysis)
- Acupuncture (headaches and lower back pain)
- Allergy testing & treatment
- Bone mass measurements
- Chiropractic services*
- Cognitive therapy
- Developmental therapy services
- Gender affirming surgery/ services*
- Hearing (audiology) such as exams, hearing aids*, and cochlear implant therapy*

^{*} or √, See note, page 25

- Hospice & palliative (comfort) care, including short-term respite care √
- Inhalation therapy
- Long-Term Acute Care* (LTAC)
- Medical nutrition therapy*
- Obesity/BMI screening & dietary counseling
- Occupational therapy* √
- Pain management* √
- Physical therapy* √
- Podiatry (foot) services
- Respite care (planned shortterm and time-limited breaks for families and other unpaid caregivers at home or in-facility)* √
- Smoking/Tobacco cessation* (counseling to quit smoking/ tobacco use)
- Speech therapy
- Surgeries* (general, bariatric, reconstructive, transplant, etc.)
- TMJ treatment (jaw disorder

- causing pain or problems with jaw movement)
- Weight loss*

Additional Programs, Services, and Rewards

- Amazon Alexa Skill
- Care management
- CareSource24® 24 Hour Nurse Advice Line
- CareSource mobile app
- CareSource Life Services[®]
- Disease management
- Fifth Third Express Banking[®]
- Health and wellness education programs
- Medication Therapy Management
- myStrengthSM online mental health tool
- Rewards programs (Babies First[®], Kids First, MyHealth)
- Text4Baby

* Indicates that prior authorization may be required. This means that CareSource must approve the service before you receive it. Your health care provider will request the approval from CareSource.

√ Indicates that a service may require a referral. This means that your PCP or other health care provider will recommend or request these services for you before you can get them. Your PCP will either call and arrange these services for you, give you a written approval to take with you to the referred services, or tell you what to do.



Renew Your Health Coverage

KEEP YOUR CARESOURCE BENEFITS

Did you know?

You can lose your health care coverage if you do not take action and renew every year. We don't want you or your family to lose your benefits. The Ohio Department of Medicaid (ODM) will send you a renewal reminder form in the mail. When you get it, or when you get a reminder from CareSource, take action. Always confirm or report a change in address to your local county Job & Family Services (JFS) office. You don't want to miss your renewal reminder.



WHAT DO I NEED TO DO?

Once you get the Medicaid renewal form, you must take action.

- 1. Online. Go to benefits.ohio.gov and click on "Manage Benefits."
 - a) Log in to your self-service portal account or click "sign up" if you do not have an account
 - b) Click on "Link My Case(s)"
 - c) Select "Renew My Benefits"
 - d) Complete the necessary steps to submit your renewal
- **2. By mail.** Fill out the Medicaid renewal form and mail it back right away to your local county JFS office. Find an address at jfs.ohio.gov/county.
- **3.** In person. Visit your local county JFS office. Find an address at jfs.ohio.gov/county.
- **4. By phone.** Call the Medicaid Hotline at 1-800-324-8680 (TTY: 1-800-292-3572).

Need Transportation Assistance to a JFS office? CareSource is happy to help. To schedule a ride to your local JFS office, please call CareSource Member Services at **1-800-488-0134** (TTY: 1-800-750-0750 or 711) at least 48 hours (two business days) before you need a ride. We are open Monday through Friday from 7 a.m. to 7 p.m.

Have questions? Call your local county JFS office. Find the telephone number at jfs.ohio.gov/county. Always keep your address up to date with JFS. If you don't you could lose your benefits!



ENGLISH

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-800-488-0134 (TTY: 1-800-750-0750 or 711).

SPANISH

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-488-0134 (TTY: 1-800-750-0750 or 711).

CHINESE

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-800-488-0134 (TTY: 1-800-750-0750 or 711)。

GERMAN

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-488-0134 (TTY: 1-800-750-0750 or 711).

ARABIC

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 134-488-800-1 (رقم هاتف الصم والبكم: 711 أو 0750-750-1-800

PENNSYLVANIA DUTCH

Wann du Deitsch schwetzscht, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-800-488-0134 (TTY: 1-800-750-0750 or 711).

RUSSIAN

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-488-0134 (телетайп: 1-800-750-0750 or 711).

FRENCH

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-488-0134 (ATS:1-800-750-0750 or 711).

VIETNAMESE

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-488-0134 (TTY: 1-800-750-0750 or 711).

CUSHITE/OROMO

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1-800-488-0134 (TTY: 1-800-750-0750 or 711).



주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-488-0134 (TTY: 1-800-750-0750 or 711). 번으로 전화해 주십시오.

ITALIAN

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-488-0134 (TTY: 1-800-750-0750 or 711).

JAPANESE

注意事項:日本語を話される場合、無料の言語 支援をご利用いただけます。1-800-488-0134 (TTY:1-800-750-0750 or 711)まで、お電話にて ご連絡ください。

DUTCH

AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel 1-800-488-0134 (TTY: 1-800-750-0750 or 711).

UKRAINIAN

УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 1-800-488-0134 (телетайп: 1-800-750-0750 or 711).



ROMANIN

ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la 1-800-488-0134 (TTY: 1-800-750-0750 or 711).

NEPALI

ध्यान दिनुहोस्: तपार्इंले नेपाली बोल्नुहुन्छ भने तपार्इंको निम्ति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ । फोन गर्नुहोस् 1-800-488-0134 (1-800-750-0750 टटिवाइ:711) ।

SOMALI

DIGTOONI: Haddii aad ku hadasho Af Soomaali, adeegyada caawimada luqada, oo lacag la'aan ah, ayaa laguu heli karaa adiga. Wac 1-800-488-0134 (TTY: 1-800-750-0750 or 711).



Notice of Non-Discrimination

CareSource complies with applicable state and federal civil rights laws and does not discriminate on the basis of age, gender, gender identity, color, race, disability, national origin, marital status, sexual preference, religious affiliation, health status, or public assistance status. CareSource does not exclude people or treat them differently because of age, gender, gender identity, color, race, disability, national origin, marital status, sexual preference, religious affiliation, health status, or public assistance status.

CareSource provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified sign language interpreters, and (2) written information in other formats (large print, audio, accessible electronic formats, other formats). In addition, CareSource provides free language services to people whose primary language is not English, such as: (1) qualified interpreters, and (2) information written in other languages. If you need these services, please call 1-800-488-0134 (TTY: 1-800-750-0750 or 711).

If you believe that CareSource has failed to provide the above mentioned services to you or discriminated in another way on the basis of age, gender, gender identity, color, race, disability, national origin, marital status, sexual preference, religious affiliation, health status, or public assistance status, you may file a grievance, with:

CareSource

Attn: Civil Rights Coordinator

P.O. Box 1947, Dayton, Ohio 45401

1-800-488-0134 (TTY: 1-800-750-0750 or 711)

Fax: 1-844-417-6254

CivilRightsCoordinator@CareSource.com



You can file a grievance by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You may also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office of Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F HHH Building Washington, D.C. 20201 1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

OH-MMED-1230 REV. 04/10/20 © 2020 CareSource. All Rights Reserved





PLEASE DETACH AND DROP IN THE MAIL FOR A PRINTED **HANDBOOK**.



Thank you for your request.



BUSINESS REPLY MAIL PLANO TX PLANO TX

POSTAGE WILL BE PAID BY ADDRESSEE

CARE SOURCE PO BOX 940569 PLANO TX 75094-9818 NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



PLEASE DETACH AND DROP IN THE MAIL FOR A PRINTED **PROVIDER DIRECTORY**.



Thank you for your request.



BUSINESS REPLY MAIL PLANO TX PLANO TX

POSTAGE WILL BE PAID BY ADDRESSEE

CARE SOURCE PO BOX 940569 PLANO TX 75094-9818 NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



