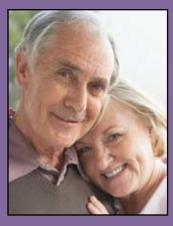
PROMBER SOUBCE

CMS simplifies Medicaid eligibility

The Centers for Medicare and Medicaid Services recently issued new rules to make it easier for states to approve applicants to the Medicaid program.

The rules expand the types of documentation allowed to prove citizenship to include school records, passports, and in some cases, written affidavits as well as driver's licenses and birth certificates. One new aspect of the rule exempts some applicants from having to prove citizenship, including:

- Children in foster care
- Individuals already enrolled in Medicare
- Individuals who receive Supplemental Security Income
- Individuals who receive Social Security Disability Insurance



The rule also extends Medicaid benefits for up to the first year of life to a newborn whose mother was receiving Medicaid at the time of the child's birth.

The new rule does not apply to applicants and recipients who are

legal immigrants. They must continue to provide documentation of their immigration status as required under the Deficit Reduction Act of 2005. a



ACCESS TO CARE

CareSource 24

When it's late and the doctor's office is closed and a health issue or question arises, many members head to emergency rooms where they can receive care without regard to time or money. But CareSource offers an alternative solution — one without a long wait in a waiting room, but quickly and in the comfort of their own home: CareSource's 24-hour nurse advice line.

Members and providers can call our 24-hour nurse advice line to talk to a nurse about health questions 24 hours a day, seven days a week.
Call 1-866-206-0554 (TTY: 1-800-750-0750). This service is free to all CareSource members.

Blood lead level tests

It's important that children have their blood lead level tested if they have not been previously tested. CareSource encourages patients to be tested at 12 months and 2 years old. Remember, filter paper testing is an accepted method to obtain blood lead levels and is covered by CareSource.

CARE TREATMENT PLANS

CareSource is utilizing a "care treatment plan" format to communicate with you about interventions provided by our case management staff to your CareSource patients who are on Aged, Blind or Disabled Medicaid.

These care treatment plans are mailed to your office. The information on the treatment plan is obtained from historic data as well as from self-reported information obtained from the member during a comprehensive interview process. Our goal is to update the information quarterly based upon subsequent conversations with your patient.

You will find a sample care treatment plan enclosed in this quarterly mailing packet.

In an effort to assist your patients in achieving desired health outcomes, our nurses attempt to:

- motivate your patients to keep physician appointments
- encourage patients to be compliant with medications
- assist patients with transportation or educational needs necessary for continuity of care

Some of these CareSource ABD members may be managed by LifeMasters, a national leader in case management. The LifeMasters and CareSource teams work collaboratively to promote optimal health.

The care treatment plans are mailed to the PCP of record for that member.

The member may have chosen you to be his/ her PCP or may have been assigned to your care. It is possible for you to receive this care plan prior to the member making an appointment with you.

We encourage you to review the treatment plan and provide feedback to us regarding your agreement to the plan. We realize that you may have valuable information to share regarding the member's needs.

As the patient's PCP of record, we request that you:

- select the appropriate response on the "Physician Action Requested" page of the care plan, indicating your agreement or disagreement with the plan of care;
- provide any comments or concerns that you may have your input will help us to focus on priorities that you may have for the member;
- fax the completed page back to CareSource at **1-888-527-0024**.

Thank you for doing your part to help us make a difference in the lives of our members.



Vaccines for Children program

The federal Vaccines for Children (VFC) program makes certain vaccines available at no cost to health care providers for administration to children 18 years old and younger who are enrolled in Medicaid. Because the vaccine itself is free to providers participating in the VFC program, CareSource can reimburse providers only for the cost of administering the vaccines. To bill CareSource for VFC administration, please use V20.2 as the primary diagnosis code and include the correct procedure code for the vaccine administered. The administration fee will be reimbursed. CareSource allows only one administration per VFC vaccine.

CareSource encourages providers to participate in the



VFC program. If a provider chooses not to participate, he or she must provide appropriate referrals for vaccination, follow up with the patient and document the immunization history.

Currently, the VFC program offers free vaccines against the following diseases:

- Diphtheria
- Haemophilus Influenzae type b (Hib)
- Hepatitis A
- Hepatitis B
- Influenza (flu)
- Measles
- Meningococcal
- Mumps
- Pertussis (whooping cough)
- Pneumoccocal disease
- Poliomyelitis
- Rotavirus
- Rubella (German measles)
- Tetanus (lockjaw)
- Varicella (chickenpox)

CareSource Encourages Students To Get Immunizations

It's back-to-school time and now is the perfect time to remind your patients of the importance of immunizations and regular pediatric visits. Since new vaccines have come out in the last few years, many patients may not have their children's shots up to date. CareSource is committed to helping our members stay healthy all year long, so, in addition to member education, we encourage all members to go to their physician for annual immunizations. CareSource covers immunizations for members, and we encourage them to get vaccinated for school.

CareSource requires that all providers report referrals from EPSDT exams on their CMS 1500 claim form (see insert in this packet titled "Instructions for reporting Healthchek / EPSDT on CMS 1500 claim form").



Referring Patients to Specialists

Did you know that CareSource's website can help you find specialists? Our Find A Doctor function is a quick and easy way to find many specialists. And these specialists are participating, meaning they meet our standards for high-quality care for the member.

Any treating doctor can refer
CareSource members to specialists.
Simply put a note about the referral in the
patient's chart. Please remember, non-

participating specialists must request prior authorization for services rendered to CareSource patients. You can request a Prior Authorization by calling our Medical Management department at 1-800-488-0134, and select the prompt to request a prior authorization.

If you have difficulty finding a specialist for your CareSource member, call our Provider Service Center at 1-800-488-0134 (TTY: 1-800-750-0750), and select the option to speak to someone in our Medical Management department.





Tips for Coping with the Obese Patients

Rates of obesity continue to rise among both the adult and child populations — and the increase is concerning. Obesity increases the risk for many conditions and diseases. CareSource wants to work in partnership with health care providers to encourage our members to make healthy food selections and incorporate exercise into their daily lives.

Please share these tips with your patients in an effort to encourage small changes to their lifestyle to reap larger health benefits.

- Choose lower fat options for milk, cheese, coffee cream and other dairy products when available.
- Try to get at least 30 minutes of physical activity most days of the week, even if you can't do it all at once. Walking briskly at a shopping mall or to a bus stop can help you build up to the 30 minutes.
- Even housework, at a moderate level, can burn up to 300 calories an hour.
- Full-calorie soda, juices and other fruit drinks can have just as many calories as eating dessert! Try drinking water, diet versions or low-fat milk instead.

Asthma Resources Available Online

Dealing with any chronic health issue, like asthma, can be daunting for providers as well as their patients. Fortunately in Ohio, dealing with asthma is a little easier thanks to the Ohio Asthma Coalition. The coalition is a statewide partnership of medical and public health professionals, business and government agency leaders, community activists and others dedicated to improving the quality of

life for people with asthma through information sharing, networking and advocacy. Their primary means of doing so is through their website www.ohioasthmacoalition.org. In addition to sharing useful information, the site also contains useful resources like school treatment plans for students with asthma and educational asthma kits in Spanish.





CareSource offers sign and language interpreters for members who are hearing impaired, visually impaired, do not speak English, or have limited English-speaking ability. These services are available at no cost to the member or health care provider.

As a provider for Medicaid consumers, you are required to identify the need for interpreter services for your CareSource patients and offer assistance to them appropriately.

To arrange services, please contact the CareSource Service Center at **1-800-488-0134** (TTY for the hearing impaired: 1-800-750-0750). We ask that you let us know of members in need of interpreter services as well as any members that may receive interpreter services through another resource.

CareSource requires hospitals, at their own expense, to offer sign and language interpreters for members who are hearing impaired, visually impaired, do not speak English, or have limited English-speaking ability. These services must be available at no cost to the member. You are also required to identify the need for interpreter services for your CareSource patients and offer assistance to them appropriately. If you do not have access to interpreter services, contact the CareSource Service Center at 1-800-488-0134 (TTY for the hearing impaired: 1-800-750-0750). We ask that you let us know of members in need of interpreter services as well as any members that may receive interpreter services through another resource.

Tips for helping your patients quit smoking

According to the Centers for Disease Control, nicotine dependence is the most common form of chemical dependence in the United States. Tobacco dependence is a chronic condition that often requires repeated intervention.

Using the 5 A's could help your patient quit smoking:

- **Ask** Ask about tobacco use and record the tobacco-use status at every visit.
- **Advise** Tell your patient that quitting smoking is the most important thing he or she can do to protect their health.
- **Assess** Ask your patient if he or she is willing to quit at this time. If the patient is not ready to quit, provide resources to help the patient identify barriers to quitting.
- Assist Advise the smoker to set a quit date, get support from family and friends, review past quit attempts, anticipate challenges, and identify reasons for quitting. Recommend the use of overthe-counter nicotine patches, gum or mints. For particularly demanding cases, recommend prescription assistance for quitting smoking.
- Arrange Tell your patient about CareSource's 24-hour nurse advice line at **1-866-206-0554** to talk directly with a registered nurse for tips to quit.



TRANSPORTATION

To assist with patient compliance, CareSource provides members with transportation to scheduled medical appointments at no cost to members. We cover up to 30 one-way trips per



member per 12-month period. Transportation benefits may be extended to follow a plan of care for our members in case management.

In addition to health care appointments, members can get a ride to:

- Their local Women, Infants and Children (WIC) office.
- Medicaid redetermination appointments at the County Department of Job and Family Services.

These rides count toward the 30 one-way trip limit. Please remind your CareSource patients of this important benefit. We want our members to have access to the services they need to stay healthy. Please do your part in helping them with this transportation benefit, such as making an office telephone available or assisting them in scheduling a pick-up time.

The Federal False Claims Act

The Act addresses those who knowingly:

- present false or fraudulent claims for payment
- use a false record or statement to get a claim paid
- conspire with others to get a false or fraudulent claim paid
- use a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property

Abortion Forms

CareSource requires both a prior authorization and a completed Abortion Certification Form (JFS 03197) to reimburse providers for abortions.

The certification form must:

- be completed by the physician performing the abortion, not the PCP
- contain the physician's signature in the physician's own handwriting
- contain the name and address of the patient



The purpose of the federal False Claims Act (the "Act") is to reduce fraud against the federal government. This Act allows anyone to bring a "whistleblower" lawsuit, known as a "qui tam" suit, on behalf of the government against those that are committing fraud against the government through programs like Medicaid and Medicare. In a recent amendment, incentives for private citizens to bring these suits and the consequences for those committing fraud have increased.

An example would be if a health care provider (hospital or physician) who knowingly "upcodes" or overbills, resulting in overpayment of claims using government dollars. Additional information on the False Claims Act can be found on our website:

www.caresource-ohio.com.

It is CareSource's policy to detect and prevent any activity that may violate the federal False Claims Act or any state Medicaid fraud laws. If you have knowledge or information that any such activity may have taken place, you need to contact our

Special Investigations Unit using the contact information below. Information may be reported anonymously. In addition, federal and state law and CareSource policy prohibit any retaliation or retribution against persons who report suspected violations of these laws to law enforcement officials or who file "whistleblower" lawsuits on behalf of the government. Anyone who believes that he or she has been subject to any such retribution or retaliation should also report this to the Special Investigations Unit.

Anonymously:

- Call **1-800-488-0134**, ext. **2300** (TTY: 1-800-750-0750).
- Write or fax us at **1-800-418-0248**. You can use your own stationary or our Fraud Reporting Form found on our website, **www.caresource-ohio.com**. Choose the Providers tab, and select "How To" and then select "Report Fraud". Send your written correspondence to: CareSource, Attn: Fraud and Abuse, One S. Main Street, Dayton, OH 45402.

When you call or write, you do not need to give your name. If you choose to be anonymous, please be sure to report as much information about the situation since we will not be able to contact you. Your report will be kept confidential to the extent permitted by law.

Other means of contact that is not anonymous:

 Send an e-mail message to fraud@csmg-online.com

Tips for Submitting Replacement Claims

Effective June 27, 2007, CareSource will accept replacement/adjusted claims (CLM 05-03="7") of bill type "117" or "137" via EDI.

To ensure this process works appropriately, we ask that you do not attach your original CareSource claim number on any replacement/adjusted claims. Our system will continue to reject replacement/adjusted claims submitted via EDI with a CareSource claim number.

Tips for Helping Patients with ADHD

In today's culture, it's common for people to feel disconnected and to have trouble focusing. So when advertisements from pharmaceutical companies selling drugs that treat Attention Deficit (Hyperactivity) Disorder provide lists of symptoms then ask people to talk to their doctors about potential problems, it can become very confusing, and frustrating, for patients and providers.

Understanding the basics about ADHD can help. For instance, all children:

- Have trouble sitting still or talking while others are talking
- Daydream or are easily distracted
- Act quickly without thinking first
 Many adults also have difficulty focusing
 and become distracted. Our "fast-foodfast-information" society has driven

patience levels to near extinction.

But ADHD is a real and serious issue.

Below is a checklist of steps to help patients you suspect might have ADHD:

- ☑ Refer to appropriate specialist, if necessary
- ☑ Create a treatment plan that includes medications and self care tips

✓ Suggest members
visit the CareSource
website and look
at our Community
Resources list
for additional
support
available to
them.

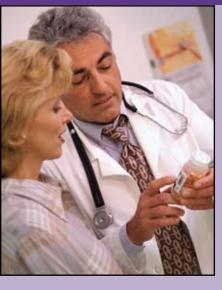
✓

Case Management

CareSource provides case management and outreach programs to our members. **Case management nurses** and outreach specialists are available to provide your patients with special health care needs and the one-on-one, personal interaction that they require. Case management can provide a broad spectrum of educational and follow-up services for your patients. This can be especially effective for encouraging non-compliant patients, reinforcing medical instructions, and assessing social needs.

Call 1-800-488-0134 ext. 7230 to request case management assistance.

Coordinating COB with Pharmacy Benefit Manager



CareSource
is now
sharing
Coordination
Of Benefits
(COB) data
with our
pharmacy
benefit
manager,
Express
Scripts, Inc.

This means that if a CareSource member has additional health insurance, Express Scripts will charge the other carriers first. CareSource, as a Medicaid managed-care health insurer, is the payer of last resort. We estimate that this will affect approximately 10 percent of our members.

CareSource continues collecting COB information for our members. We request that all providers ask CareSource members to show insurance cards for all health insurance they might have. If a CareSource member has additional insurance, please send the COB information to us. A copy of the member's insurance card is ideal documentation; however, we will also accept most documentation that contains the following information:

- Carrier's name and phone number
- Group number
- Policyholder name and number
- · Member's date of birth
- Member's Social Security number (especially if you have no policy number)

To find COB information about CareSource members. log on to the CareSource **Provider Portal** at https:// secure.csmgonline.com/oh/ ProviderPortal/ login.aspx. Or call our Provider Service Center at 1-800-488-0134 (TTY:

1-800-750-0750) if you have any questions about our COB program.

Tips for Talking with Teens about Tattoos and Piercings

A high percentage of people with tattoos and piercings get them during adolescence. CareSource wants to ensure teens make good decisions when considering body art of any kind. Therefore, we recommend you share with your teenage patients the following information:

Rules:

If you are younger than 18 years old, Ohio law requires that your parent go with you. They must sign a document that tells:

- what you are having done
- what part of the body
- how to care for the body art afterwards

Ohio also says that people who

Risks:

Tattoos and body piercing puncture your skin. The role of your skin is to keep germs out. Any hole in the skin means you could let in germs. You might get an infection. Most infections from body art are minor. Some infections can get into your blood and be serious, like hepatitis, tetanus or HIV. Typical signs of an infection include redness, swelling, pain and discharge. In addition, some jewelry is made of materials that can cause allergic reactions.

Spend a little time learning about body art. By getting your body art done correctly and caring for it properly, you will reduce the risks of harming your body.



PROVIDER

ProviderSource is a publication of CareSource, a nonprofit Medicaid managed health care plan serving counties throughout Ohio.

Toll-free phone:

1-800-488-0134

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