



SPRING 2026

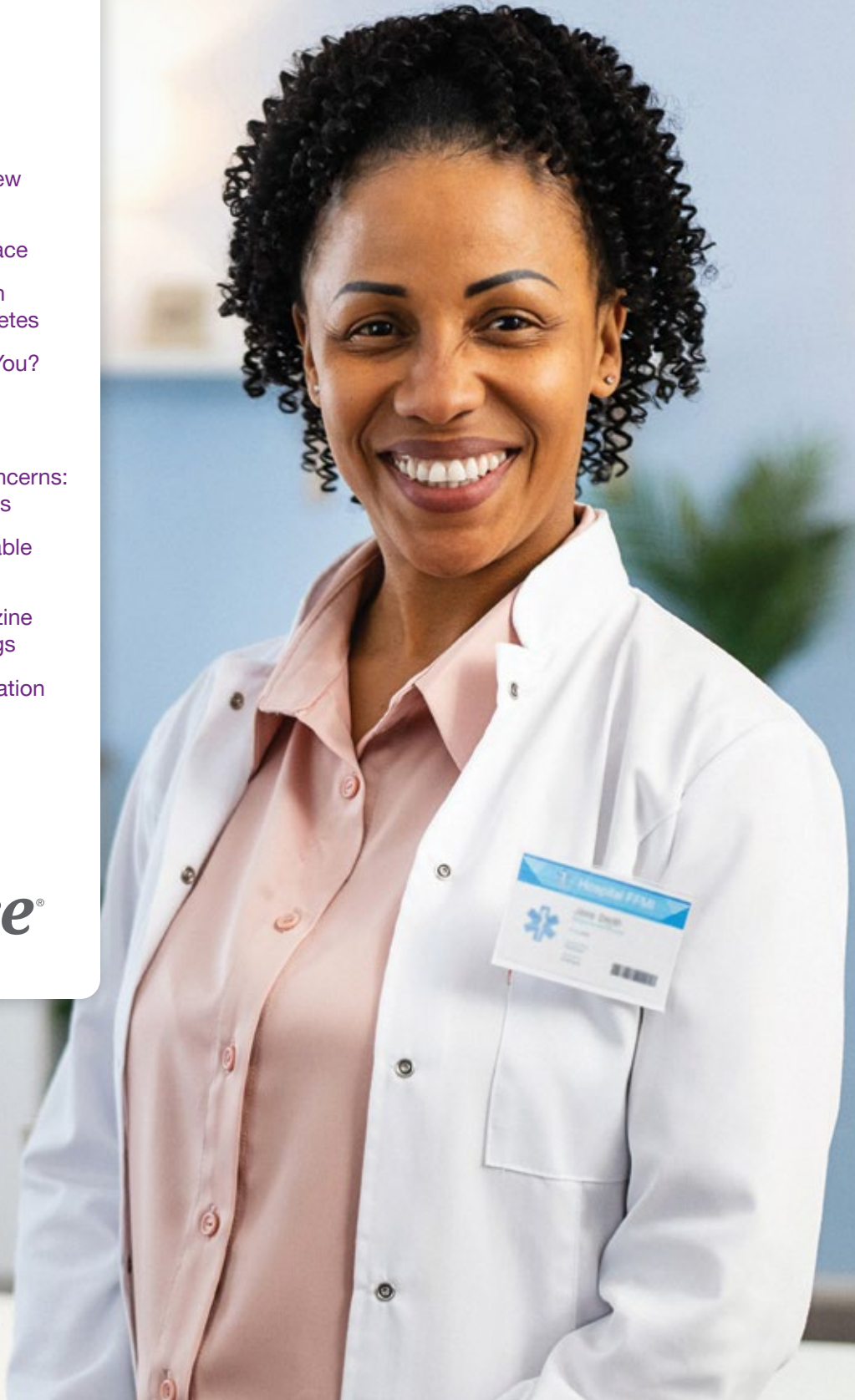
PROVIDER *Source*

A Newsletter for CareSource® Health Partners

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CareSource®





Chief Medical Officer's Note

CareSource's mission has always been built on the foundation of partnership—with the physicians, advanced practitioners and care teams who deliver care to our members every day. As we embark on another year of service, our partnership based on a common goal will be more important than ever: sustainably providing high-quality, coordinated care.

While the total cost of care is often discussed in terms of dollars and cents, it is, in fact, the net result of many clinical decisions made throughout the care continuum. The setting of care, its coordination, and the proactivity of care all have an effect. When care is coordinated, patients receive better care, and unnecessary costs decrease accordingly.

Not only is the total cost of care not about rationing care or denying access to necessary care; it is also about *doing what is most important, in the right setting, at the right time.*

The total cost of care is about "doing what is most important, in the right setting, at the right time."

What are the unnecessary costs of care? All of us are aware of the unnecessary costs of care. These include unnecessary emergency department visits, avoidable hospitalizations, fragmented care within specialties, delays in follow-up care after hospitalization, and the lack of care coordination between physical health, behavioral health and social services.

Primary care has a key role as the 'coordinator and anchor' of care, while specialists, hospitals, post-acute providers, behavioral health professionals and community partners are equally important in ensuring continuity and alignment. Total cost of care can be improved by more thoughtful referrals, seamless transitions and earlier identification of members with rising or complex needs.

As a Chief Medical Officer at CareSource, my job is to partner with you—not to add to your workload, but to help inform your clinical decisions through collaboration, transparency and shared accountability. In the coming year, our clinical priorities will include improving transitions of care, facilitating care in the right setting, earlier identification of high-risk members and enhancing integration across physical health, behavioral health and community resources.

These initiatives are particularly important for the populations we serve together, such as older adults and members with complex medical and social needs. Models of care that focus on integration, such as long-term services and supports and PACE, have shown that integrated care can drive better outcomes while stabilizing the total cost of care. I will write more about these models in the future.

As we continue forward, I encourage you to ask yourself a simple question in your daily work: Is this care helping the patient achieve the best possible outcome in the most appropriate setting? When we all focus on that question, quality, experience and sustainability naturally follow.

Thank you for your continued partnership and dedication to CareSource members. I look forward to the work ahead.

With Gratitude,

Deepa Yerram, MD, MHA, FAAFP
Vice President, Market Chief Medical Officer - CareSource Wisconsin



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:

- *Cotiviti: [Level of Care Review](#)*
- *[Cultural Competency](#)*
- *Evolent:*
 - *[Advance Radiology Guidelines March 2026](#)*
 - *[Policy Updates - February 2026](#)*
- *[Launch of HealthPlanResources.com](#)*
- *Policy Updates:*
 - *[April 2026](#)*
 - *[March 2026](#)*
 - *[February 2026](#)*
 - *[January 2026](#)*
- *[Prepay Auditing Update](#)*
- *[Prior Authorization Requirement Update](#)*
- *[Turning Point: Policy Updates February 2026](#)*

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 at **CareSource.com** > Providers > [Provider Policies](#).

Exciting News: Launch of Our New Learning Management System!

We are excited to announce the launch of our new Learning Management System (LMS) with [HealthPlanResources.com](#)! This user-friendly platform offers a variety of educational resources, training modules, and interactive courses tailored to your needs, all developed by **CareSource**. New content is added based on Provider feedback.

All providers and staff can now register for **HealthPlanResources.com** to access comprehensive content that supports your learning journey. Whether you need orientation as a new Provider or want to deepen your knowledge of our health plan and industry best practices, HealthPlanResources.com has the tools you need.

Register today and visit our **Training and Events** page for more information and instructions.

Explore [HealthPlanResources.com](#) now!

Pharmacy Updates for Marketplace

CareSource has a searchable drug list that is updated monthly. To find out which drugs are covered under your patient's plan, go to **CareSource.com** > Members & Beneficiaries > Tools & Resources > [Find My Prescriptions](#). The most current updates can be found there also. If a member doesn't have access to the internet, they can call Member Services. The phone number is printed on their ID card. A CareSource Representative will help them find out if a medication is covered and how much it may cost.



HEDIS® Metric IET: Impactful for Members and Providers

Substance use disorders (SUDs) are a significant public health concern affecting individuals across the country. Timely access to treatment is crucial for recovery, and the Initiation and Engagement of Treatment (IET) metric plays a vital role in monitoring this process.

HEDIS measures, developed and maintained by the National Committee for Quality Assurance (NCQA), include IET, which assesses the quality of care for individuals diagnosed with SUDs. The IET measure focuses on two key phases: the *initiation phase* evaluates the percentage of patients who initiate treatment for SUD within 14 days of diagnosis, while the *engagement phase* assesses those who continue treatment within 34 days from their initiation appointment.

To support this HEDIS measure, consider the following actions:

- Ensure patients receive timely referrals to treatment within 14 days of diagnosis to promote early engagement.
- Follow up with patients to confirm ongoing participation in treatment within 34 days, reinforcing the importance of continued care for successful recovery outcomes.

By prioritizing these steps, health care providers can enhance patient care, improve treatment outcomes and contribute to the overall effectiveness of SUD treatment programs.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

Identifying Behavioral Health Concerns: A Key to Better Patient Outcomes



Patients often experience concerns that extend beyond their stated reason for visit. Behavioral health concerns, including depression and substance use, are among the most common and costly health issues in the United States, yet they frequently go undetected.¹ Many patients do not voluntarily share behavioral health concerns due to stigma, fear or lack of awareness about how these issues affect their physical health. Others expect their health care provider to initiate screening.

Integrating routine behavioral health screenings into standard practice normalizes conversations around mental health, supports early identification of concerns and enables brief interventions and timely referrals. Untreated mental health and substance use can worsen chronic conditions such as diabetes, cardiovascular disease and chronic pain, leading to increased emergency department visits, higher inpatient utilization and greater health care costs.²

The use of validated screening tools is essential to identifying behavioral health needs and delivering comprehensive, whole person care. The Substance Abuse and Mental Health Services Administration (SAMHSA) recommends universal behavioral health screenings for patients and offers evidenced based resources and tools to support providers. To learn more, visit www.samhsa.gov.

References:

National Institute of Mental Health (NIMH). *Integrated Care for Depression Yields Extended Benefits*. Accessed February 16, 2026. www.nimh.nih.gov/news/science-updates/2025/integrated-care-for-depression-yields-extended-benefits-malawi-study-shows

Taylor HL, Menachemi N, Gilbert A, Chaudhary J, Blackburn J. *Economic Burden Associated With Untreated Mental Illness in Indiana*. *JAMA Health Forum*. 2023;4(10):e233535. doi:10.1001/jamahealthforum.2023.3535

Health Needs Assessment Available Through CareSource MyLife

Members can complete the Health Needs Assessment for themselves—or for their children or dependents—through their CareSource MyLifeSM account. The assessment is available online at MyLife.CareSource.com/Assess where members enter their first and last name, date of birth and ID number to get started.

Encourage your members to complete their Health Needs Assessment. Timely completion helps us better understand member needs and connect them with appropriate resources, support and care. Members may also be eligible to earn rewards for completing the assessment. Visit MyLife.CareSource.com/Assess to support your members in completing it. Or scan the QR code.



Understanding the Risks of Xylazine and Medetomidine in Street Drugs



As medical providers, it is crucial to stay informed about emerging substances that are increasingly being mixed into street drugs. Two such substances are xylazine and medetomidine, both of which are strong sedatives originally intended for veterinary use. While xylazine, often referred to as "tranq," is used to calm animals, it is not approved for human use. Unfortunately, it has found its way into the illicit drug supply, frequently mixed with opioids like fentanyl, often without users' knowledge.

How Xylazine Affects the Body

Xylazine functions by slowing down both brain activity and bodily functions. The effects of xylazine can include extreme sleepiness, slow breathing, low blood pressure and a decreased heart rate. When combined with opioids, the risk of overdose significantly increases, and the effects can become more intense and unpredictable.

One of the most concerning dangers associated with xylazine use is its potential to cause severe skin damage. Xylazine constricts blood vessels, leading to reduced blood flow to the skin. This diminished circulation can hinder the healing process, resulting in painful sores or open wounds. Even minor cuts can escalate into large wounds or infections, posing serious health risks to users.

Medetomidine: A Stronger Sedative

Sometimes referred to as "rhino tranq," medetomidine is another powerful sedative used in animals. Like xylazine, it is not intended for human use and has been found mixed into street drugs, including fentanyl. Many users are unaware that medetomidine is present in these substances.

Medetomidine is even stronger than xylazine and can cause profound sedation, very slow breathing and a decreased heart rate. Individuals under its influence may be difficult to awaken or may not respond to verbal stimuli, which raises significant concerns regarding safety.

The Need for Awareness and Caution

Given that medetomidine is a newer addition to the street drug supply, medical professionals are still learning about its long-term effects when used inappropriately. There is potential for severe withdrawal symptoms and other serious health complications. The combination of potent sedatives like xylazine and medetomidine with other drugs increases the risk of overdose, making it more challenging to treat.

It is essential to note that naloxone (Narcan), a medication commonly used to reverse opioid overdoses, does not counteract xylazine or medetomidine overdoses because these substances are not opioids. However, naloxone should still be administered during an overdose situation, as there may be opioids present due to the mixing of drugs. After naloxone is used, individuals may still appear excessively sleepy or unresponsive, so calling 911 in an emergency is critical.

Conclusion

Xylazine and medetomidine significantly increase the dangers and unpredictability of drug use. As health care providers, understanding the risks associated with these substances is vital for protecting your health and potentially saving lives. By staying informed and vigilant, we can better support our patients and communities in navigating the complexities of substance use and its associated risks.

Importance of Proper Documentation



Proper documentation is essential to you and your patients. It ensures patients receive services that are reasonable and necessary, supports proper payment of claims and supports favorable medical record review decisions. CMS offers a *Documentation Matters Toolkit* on the importance of proper documentation. This toolkit provides guidance for medical and behavioral health professionals, instructional videos and electronic health records fact sheets.

The toolkit can be found at: [Documentation Matters Toolkit | CMS](#)



Our Website is Your Source for Information



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 the most recent information about CareSource and our services, visit **CareSource.com** > Provider > Updates & Announcements. There you will find all of the updates to the preferred drug list (PDL), prior authorization requirements, medical and reimbursement policies. Feel free to download information you need about our:

- **Quality Improvement Program** including goals, processes and outcomes as related to care and services.
- **Population Health Programs and services**, the targeted populations, as well as how members can opt in/out of these programs.
- **Case management and disease management programs**, including how:
 - To use the services
 - We work with practitioner's patients in the program
 - You can refer members to our programs, including discharge planners
- **Adopted clinical practice guidelines and preventive health guidelines**, including those for:
 - COPD
 - Perinatal Care
 - Asthma
 - Diabetes
 - ADHD (children)
 - Depression (adults)
 - CDC Recommended Immunization Schedule for Persons
 - Ages 0-18 Years
 - Over 18 Years of Age
 - Men: Stay Healthy at Any Age
 - Women: Stay Healthy at Any Age
- **Medical necessity criteria**, including how to obtain or view a copy
- **Utilization management (UM) program** including:
 - The toll-free number for UM issues
 - Availability of staff to answer questions about UM issues
 - Our policy prohibiting financial incentives for UM decision-makers
- **Process for obtaining language assistance**, including how:
 - Members can get assistance to discuss UM issues
 - To access assistance for members during health encounters including interpreters for sign language
- **TDD/TTY services** for members
- **Pharmaceutical management procedures** including:
 - Our drug list along with restrictions and preferences
 - How to use pharmaceutical management procedures
 - An explanation of limits and quotas
 - How practitioners can provide information to support an exception request
 - Processes for generic substitution, therapeutic interchange and step-therapy
- **Credentialing or re-credentialing application process** to review information submitted to support a practitioner's credentialing application, correct erroneous information and, upon request, to be informed of the status of an application.
- **Member rights and responsibilities**



If you have any questions about our website or you would like more information, please call Health Partner Services.



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VISIT US

CareSource.com

JOIN US

 [Facebook.com/CareSource](https://www.facebook.com/CareSource)

 [X.com/CareSource](https://www.x.com/CareSource)

 [Instagram.com/CareSource](https://www.instagram.com/CareSource)



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!*