



## **Provide integrated care for SMI patients**

Severe mental illness, also called serious mental illness (SMI), is often associated with increased morbidity and mortality. Studies show that 60 percent or more of deaths in people with SMI are caused by physical conditions, such as cardiovascular disease, diabetes, respiratory diseases and infectious diseases.\* Results like these underscore the importance of managing physical health care for patients with SMI and renewing focus on modifiable risk factors, such as smoking, obesity and substance use.

If you are you treating patients with SMI, please make sure they receive annual well-care checkups and appropriate screenings as needed. Remember, Humana – CareSource® has care managers who can assist your patients with SMI. Care managers also can help these individuals:

- Understand physical and mental health care benefits
- Coordinate care among health partners
- Assess social and support service needs
- Improve compliance with recommended treatment options

*\*Source: National Association of State Mental Health Program Directors*

## From the medical director

Consumer spending on specialty prescription drugs in the United States continues to rise. Studies of 2014 data show that despite accounting for only 1 percent of prescriptions written in the United States, specialty medications represent 31.8 percent of all drug spending. Costs are expected to climb even higher in the future.\*

Humana – CareSource contracts with CVS Caremark specialty pharmacy to deliver cost-effective specialty medications. CVS Caremark helps manage the growth, expense and complexity of specialty medications by delivering specialty medications directly to the member or the prescribing physician.

Working with CVS Caremark allows us to coordinate pharmacy benefits closely and facilitate the safety of our members. Advantages of our program include:

- 24-hour access to pharmacists and nurses to help reduce ER visits and hospitalizations
- Multiple checks and balances to support patient safety
- Disease- and drug-specific patient care management services for rare and chronic diseases, such as cancer, HIV/AIDS, rheumatoid arthritis and hepatitis C, to improve member health outcomes
- A reliable refill schedule to help improve medication adherence

We continue to look for ways to provide effective and efficient specialty pharmacy care for our members. Please feel free to contact me about this or other topics. You can reach me by email at [vaughn.payne@caresource.com](mailto:vaughn.payne@caresource.com) or by phone at 1-502-213-4730.

Respectfully,



Vaughn Payne, Pharm.D., M.D., MBA, FACC, FACP, CPE  
Medical Director  
Humana – CareSource



Dr. Vaughn Payne

## ICD-10 goes live

On Oct. 1, 2015, health partners were required to transition from the International Classification of Diseases, Ninth Revision (ICD-9) codes to ICD-10 codes when submitting claims. Humana – CareSource created a resource center to help you and your team. Please visit [www.caresource.com/providers/kentucky/medicaid/claims-information/icd-10](http://www.caresource.com/providers/kentucky/medicaid/claims-information/icd-10) for more information.

## Contact your health partner representative

Find the Humana – CareSource health partner representative assigned to your practice by visiting [www.caresource.com/documents/provider-relations-representative-county-assignment-map](http://www.caresource.com/documents/provider-relations-representative-county-assignment-map).

\*Source: <http://lab.express-scripts.com/insights/industry-updates>

### Find UM criteria online

Utilization management (UM) helps maintain the quality and appropriateness of health care services provided to Humana – CareSource members. Our medical management department performs all UM activities, including prior authorization and discharge planning, based on nationally recognized criteria. This helps facilitate appropriate medical care rendered in a suitable setting using the most fitting resources. We also track the coordination of medical care to support continuity.

Utilization review determinations are based only on appropriateness of care, service and existence of coverage. Humana – CareSource does not reward health partners or our own staff for denying coverage or services. There is no financial incentive for our staff members to encourage them to make decisions that result in underutilization. Our members' health is always our top priority.

A copy of Humana – CareSource's UM criteria is available through the following methods:

**Fax a request:**

1-888-246-7043

**Email a request:**

kymedicalmanagement@caresource.com

**Find UM resources online:**

[www.caresource.com/providers/kentucky/medicaid/medical-policies/](http://www.caresource.com/providers/kentucky/medicaid/medical-policies/)



### CONTACT US ABOUT UM ISSUES

You may call our toll-free number at **1-855-852-7005** to contact medical management staff with UM questions. Please remember the following when making a call:

- Staff are available from 8 a.m. to 6 p.m. Eastern time, Monday through Friday, for inbound calls. Staff can receive inbound communication regarding UM issues after normal business hours and accept collect calls regarding UM issues.
- Health partners may leave voice mail messages 24 hours a day, seven days a week. Staff identify themselves by name, title and organization name when initiating or returning calls regarding UM issues. Health partners also may send medical necessity determination requests 24 hours a day to the dedicated fax line, email address and Provider Portal listed in the “Find UM resources online” link at the left.
- Staff can send outbound communication regarding UM inquiries during normal business hours, unless otherwise agreed upon.

In the best interest of our members and to promote their positive health care outcomes, Humana – CareSource supports and encourages continuity of care and coordination of care between health partners, as well as between behavioral health partners.

### ***Cut wait times with the new prior authorization tool***

As a Humana – CareSource-contracted health partner, you have a new tool to get faster decisions on prior authorization requests. By using Cite® Auto Auth, you can enter clinical details and receive a decision within seconds. You can still send your prior authorization requests by phone or fax, if you prefer, but Cite Auto Auth offers evidence-based utilization decisions with the ease of self-service simplicity.

To learn more, visit our Provider Portal at <https://providerportal.caresource.com/KY> (registration required) or contact your health partner representative.

### ***Comparable office hours required for Medicaid-covered patients***

Kentucky Department of Medicaid Services (KDMS) rules require Humana – CareSource members and other Medicaid patients have access to office hours that are at least the equivalent of those offered to patients with other insurance.

### ***Understand member rights and responsibilities***

Humana – CareSource encourages members to know their rights and responsibilities to help them be active participants in their health care. Members are notified of their rights and responsibilities in the member handbook and on our website. Please see your Humana – CareSource Provider Manual at [www.caresource.com/providers/kentucky/medicaid/provider-materials/provider-manual](http://www.caresource.com/providers/kentucky/medicaid/provider-materials/provider-manual) for a complete list of member rights and responsibilities.



# Help reduce fraud with the False Claims Act

Using the False Claims Act, you can help reduce fraud against the federal government. The act allows citizens to bring whistleblower lawsuits on behalf of the government – known as “qui tam” suits – against groups or individuals defrauding the government through programs, agencies or contracts. Whistleblowers can receive 15 to 30 percent of the proceeds of an action or settlement.

An example would be if a health partner, such as a hospital or a physician, knowingly “upcodes” or overbills, resulting in overpayment of the claim using Medicaid or Medicare money. More details about the False Claims Act can be found on our website at [www.caresource.com/providers/kentucky/medicaid/plan-participation/false-claims-act](http://www.caresource.com/providers/kentucky/medicaid/plan-participation/false-claims-act).

For free educational materials on the False Claims Act and other federal fraud and abuse laws, please visit <http://oig.hhs.gov/compliance/physician-education/index.asp>.

You can report fraud, waste or abuse to the Humana – CareSource special investigations unit using one of the following methods:

### Anonymous reporting options

- Call **1-855-852-7005** and follow the appropriate menu option for reporting fraud.
- Write a letter or complete the form about fraud, waste and abuse reporting at [www.caresource.com/documents/ky-fraud-waste-and-abuse-reporting-form](http://www.caresource.com/documents/ky-fraud-waste-and-abuse-reporting-form).
  - Mail to:  
Humana – CareSource  
Attn: Special Investigations Unit  
P.O. Box 1940  
Dayton, OH 45401-1940

### Other reporting options

- Fax: 1-800-418-0248
- Email: [fraud@caresource.com](mailto:fraud@caresource.com)

If you choose to remain anonymous, we will not be able to call you back for more information; so, leave as many details as possible including names and phone numbers. Your report will be kept confidential to the extent permitted by law.



### **Help members renew Medicaid benefits each year**

Medicaid patients, including Humana – CareSource members, must renew their Medicaid benefits each year. Renewal is not automatic. The Kentucky Department for Community Based Services (DCBS) sends notices and instructions to Medicaid patients when it is time to renew. Please help your patients keep their Medicaid benefits current.

As a reminder, Humana – CareSource strives to ensure our Medicaid members receive high-quality care and services. We offer:

- No copayments
- Care management and care transition programs
- An ongoing focus on customer service, health education and activities to promote health and wellness, such as our Babies First incentive program and our 24-hour nurse advice line
- Community engagement and collaboration to help address members' comprehensive needs
- Access to behavioral health services that includes crisis intervention and a dedicated hotline



### **Members can receive advice 24 hours a day with nurse advice line**

Please encourage your patients with Humana – CareSource coverage to call our 24-hour nurse advice line with health and medical questions when their health partners are not available. Our experienced registered nurses can assess a member's condition and direct the member to an appropriate care setting with this free member benefit. The toll-free number, **1-866-206-9599**, can be found on the Humana – CareSource member ID card.

### **Members rate Humana – CareSource in survey**

In the most recent Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey, members rated Humana – CareSource very high among Kentucky Medicaid health plans.

Members gave high marks to their personal doctors, their ability to get the care they need and how well their doctors communicate with them. Most members who responded to the survey also indicated that they usually or always were treated with respect by their personal doctor and Humana – CareSource customer service.

The CAHPS survey is administered annually by the Kentucky Department for Medicaid Services (KDMS) which uses that information to help members have timely access to health care services.

*CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).*

### **Encourage patients to get flu and pneumonia vaccines**

Cold and flu season is here. Humana – CareSource covers flu and pneumonia vaccines for members at their physician's office or a network pharmacy that provides the vaccines. Quadrivalent flu vaccines are not covered.

Members who are younger than 19 years should obtain an annual flu vaccine in coordination with the Vaccines for Children (VFC) program. You can find VFC details by visiting <http://www.cdc.gov/vaccines/programs/vfc/index.html>.

### **Promote appropriate use of antibiotics**

Humana – CareSource continues to inform our members, through newsletters and interactions with our care management team, that antibiotics are not needed for viral upper respiratory infections (URIs). Members are educated on URI symptoms, the appropriate use of antibiotics, hand-washing and flu vaccines. Members also are encouraged to call our 24-hour nurse advice line to ask questions and for guidance on appropriate levels of care.

#### **How you can help**

- Continue to help your patients understand the most appropriate use of antibiotics.
- Use proper billing codes for each patient's diagnosis.
- Remind your Humana – CareSource-covered patients of our toll-free nurse advice line.



### **Emphasize postpartum care for pregnant members**

Timing is crucial when it comes to postpartum care. Please remind your patients that a routine postpartum care visit should take place three to eight weeks after delivery. If your patient had gestational diabetes, the American College of Obstetricians and Gynecologists also recommends a blood glucose test be administered at the postpartum care visit.

Earlier postpartum visits may be clinically warranted in some situations. Please note that Humana – CareSource covers both cesarean section follow-up visits and postpartum care visits.

# Submit pharmacy prior authorizations online or by phone

Our online drug formulary can help you determine if a medication is covered. The online formulary contains information about prior authorizations, quantity limits, generic substitutions, step therapy protocols and therapeutic interchanges for most drug classes.

You can submit prior authorization requests by phone – call **1-855-852-7005** and follow the prompts – or fax to **1-866-930-0019**. Electronic prior authorizations also are available through CoverMyMeds, a free system that automates prior authorizations, saving you administrative hours on the phone and sending faxes. The real-time determinations help your patients get the medications they need, faster. Visit **www.covermymeds.com/main** to create a free account.

Typically, our drug formulary includes more than one drug for treating a particular condition. These different possibilities are called alternative drugs. Many alternative drugs are just as effective as other drugs and do not cause more side effects or other health problems.

Humana – CareSource has an exception process that allows the member or the member's representative to make a request for an exception. Reasons for exceptions may include intolerance or allergies to drugs, or inadequate or inappropriate response to drugs listed on the drug formulary. The member or member's representative must initiate the request by calling member services. Humana – CareSource then reaches out to the health partner to obtain the appropriate documentation.

We have convenient search tools available online for our formulary by visiting **<https://www.caresource.com/providers/kentucky/medicaid/>** and selecting the "Formulary Search Tool" under the "Quick Links" section on the left side of the webpage.

Our Provider Portal also features:

- Pharmacy forms, policies and procedures for requesting prior authorization or exceptions
- More information about our pharmacy benefit, specialty drugs and our pharmacy benefit manager

## Encourage dental fluoride treatments for patients younger than 21

Humana – CareSource encourages regular and appropriate dental-care visits for our members, including those members younger than 21.

Keep the following points in mind:

- Per KDMS rules, topical fluoride varnish treatments are limited to one application every 180 days for patients younger than 21.
- Use Current Procedure Terminology (CPT) code D1206, in conjunction with an office visit exam code.

Remember that topical fluoride varnish treatments for patients younger than 21 years of age may be provided and billed by pediatricians, primary care health partners and dental care health partners. A well-child visit is an opportune time to assess the need for this service and apply the treatment, if needed. As an alternative, please refer your patients to a dentist for routine dental services.





# Improve care in 2016 with HEDIS measures

The Healthcare Effectiveness Data and Information Set (HEDIS®) is the measurement tool used by the nation's health plans to evaluate their performance in terms of clinical quality and customer service. We also use these standards to encourage our members to work with you to receive recommended services.

HEDIS scores are compiled using claims and medical records data. Areas of focus for 2016 include:

- Comprehensive diabetes care
- High blood pressure control
- Medication management for members with asthma
- Prenatal and postpartum care
- Cervical cancer screenings
- Weight assessment for children and adolescents
- Nutrition and physical activity counseling for children and adolescents
- Adult body mass index (BMI) assessment
- Well care, immunizations and dental care for children and adolescents

A complete list of specific measures can be found in the HEDIS measures section of the Humana – CareSource Provider Manual online at [www.caresource.com/providers/kentucky/medicaid/provider-materials/provider-manual/](http://www.caresource.com/providers/kentucky/medicaid/provider-materials/provider-manual/).

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



## Find quarterly formulary updates online

Humana – CareSource no longer mails quarterly Medicaid formulary updates. The information is now posted on our website. You can find Humana – CareSource pharmacy information at: [www.caresource.com/providers/kentucky/medicaid/member-care/pharmacy](http://www.caresource.com/providers/kentucky/medicaid/member-care/pharmacy).

If you do not have access to the Internet, please call us at **1-855-852-7005** and follow the prompts to reach the pharmacy department, and we will mail you the updates.



P.O. Box 221529, Louisville, KY 40252-1529

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### HOW TO REACH US

Provider Services:  
**1-855-852-7005**  
(TTY: 1-800-648-6056 or 711)

24-Hour Nurse Advice Line:  
1-866-206-9599

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KY-P-447 | February 2016