



 CareSource

# WORKING with *CareSource*

Provider Orientation

# Health Care with Heart



## MISSION FOCUSED

Comprehensive, **member-centric** health and life services

## EXPERIENCED

With over **<30> years of service**, CareSource is a leading non-profit health insurance company

## DEDICATED

We serve over **<1.8> million members** through our Medicaid, Marketplace, Medicare Advantage and Dual Special Needs (D-SNP) plans.



**30+**

**YEARS**  
MISSION-DRIVEN  
CARE

**A-Z**

**CONSUMER**  
ADVOCACY



**<1.8> MILLION**  
MEMBERS



**COVERAGE**  
OH, KY, IN, WV, GA



**<\$14M>**  
FOUNDATION GRANTS  
AWARDED IN OUR COVERAGE AREA

# Committed to Georgia



## PURPOSEFULLY LOCAL

- Market headquarters in **Atlanta** and satellite office in **Savannah**

## COMPASSION FOR THE UNIQUE MARKET

- Years of studying Georgia's health market & building partnerships with providers, community advocates & regulators

## FOCUSED MISSION ALIGNMENT

- Mature Medicaid managed care program
- Experience with diverse urban & rural populations



# About CareSource



## OUR MISSION:

To make a **lasting difference** in our members' lives by improving their health and well-being

## OUR PLEDGE:

- ✓ Make it easier for you to work with us
- ✓ Partner with providers to help members make healthy choices
- ✓ Direct communication
- ✓ Timely and low-hassle medical reviews
- ✓ Accurate and efficient claims payment

# Our Network



CareSource members choose or are assigned a primary care provider (PCP) upon enrollment.

When referring patients, with the exception of Planning for Healthy Babies (P4HB)\*, ensure other physicians are in-network to ensure coverage.

Use our Find A Doc tool at **CareSource.com** to help you locate a participating CareSource provider by plan.

**“DO YOU TAKE  
CARESOURCE?”**

Be sure to ask your patients to present their IDs to ensure coverage.

\*P4HB enrollees may access out-of-network providers.

# Our Network



## NOTE:

- We cover **ALL** medically-necessary emergency services
  - We also cover any screening examinations conducted to determine whether an emergency medical condition exists
- We encourage the use of in-network providers for all services

# Patient-Centered Medical Homes



To facilitate total care integration, CareSource encourages our PCPs to obtain NCQA Patient-Centered Medical Home Recognition.

## WHAT IS A PATIENT-CENTERED MEDICAL HOME (PCMH)?

PCMH is a model of care that puts patients and families at the forefront of care, building relationships between people and their clinical care teams. Participation in a PCMH care model is associated with **increased quality** and **decreased costs**<sup>1</sup>.

## WHY PARTICIPATE?

NCQA PCMH recognition offers a clear “roadmap” for primary care transformation.

- Replace episodic care with coordinated care
- Reduce ED visits and hospitalization
- Increase preventive services
- Increase patient satisfaction
- Increase staff satisfaction
- Improve VBR rates

# PCMH Recognition



CareSource promotes and supports NCQA PCMH recognition for our providers through the following actions:

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## IDENTIFICATION

We work with our providers to assess interest and capability for becoming a NCQA PCMH recognized practice.

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## PROMOTION

We provide consultative assistance to our providers to meet the recognition requirements for NCQA PCMH.

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## COLLABORATION

We coordinate with other CMOs to better support providers on their journeys to NCQA PCMH accreditation.

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## EDUCATION

We educate our providers about medical homes and other service delivery innovations that may improve member outcomes.

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## APPRECIATION

We provide opportunity for providers to participate in PCMH-focused incentive programs.

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## REPORTING

We report to DCH providers who achieve PCMH recognition.

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# *Member Eligibility*



- Determined by the Georgia Department of Community Health (DCH)
- Newborn enrollment
  - The newborn child will automatically be enrolled into the mother's health plan starting on the baby's date of birth.

**ALWAYS** verify a member's eligibility on the Provider Portal prior to rendering services

# P4HB<sup>®</sup> Eligibility



## PLANNING FOR HEALTHY BABIES<sup>®</sup> (P4HB<sup>®</sup>) ENROLLEE REQUIREMENTS

- Be able to become pregnant
- Meet family gross income requirements of  $\leq$  220 percent of FPL
- Be an uninsured female who is 18 through 44 years of age
- Not otherwise eligible for Medicaid or the Children's Health Insurance Program

Eligible P4HB<sup>®</sup> participants will be enrolled in one of three components:

**1. FAMILY PLANNING** – family planning and related services

**2. INTER-PREGNANCY CARE** – family planning and additional services, including nurse case management and a Resource Mother, for women who have delivered a very low birth weight (VLBW, weight < 1500 grams or 3.3 pounds) baby

**3. RESOURCE MOTHER OUTREACH** – assignment of a specially trained case manager and a Resource Manager to women on traditional Medicaid plans who have delivered a VLBW baby

# *Individuals with Disabilities Education Act (IDEA) Part C*



## PROGRAM OVERVIEW

### **Babies Can't Wait (BCW)**

- Statewide early intervention system for infants and toddlers with special needs
- Serves children from birth to age three, as well as their families
- CareSource will be responsible for medically-necessary IDEA Part C services related to Individualized Family Service Plans (IFSPs) or Individualized Education Programs (IEP)

## REIMBURSEMENT

### **Billing IDEA Part C Services**

- Submit a claim and the following documents:
  - A written service plan/plan of care (WSP/POC)
  - A letter of medical necessity
  - An Individualized Family Service Plan (IFSP)

# *Member ID Card*



We issue one card per member upon enrollment.

## Members:

- **Can Access** their ID card through the CareSource mobile app
- **Must show** card at time of service
- **Receive** a replacement card upon PCP change
- **May call** to request a replacement card

# ID Card Samples



## GEORGIA FAMILIES®

## P4HB®




**Member ID:** <123455676>  
**Member:** <Mary Doe>  
**Primary Care Provider:**  
 <John Doe  
 12345 Main Street  
 Atlanta, Georgia 30307  
 1-404-555-1213>  
 <PCP After Hours: 1-404-123-1234>

**Medicaid ID:** <123456789101>  
**Effective Date:** <07/01/2017>  
**Dental Home:**  
 <Jill Doe  
 12345 Main Street  
 Atlanta, Georgia 30307  
 1-404-555-1213>

**Member Services:** 1-855-202-0729 (TTY:1-800-255-0056 or 711)



Interpregnancy Care  
and Family Planning

Planning for  
Healthy Babies®

**Member ID:** <123455676>  
**Member:** <Mary Doe>  
**Primary Care Provider:**  
 <John Doe  
 12345 Main Street  
 Atlanta, Georgia 30307  
 1-404-555-1213>  
 <PCP After Hours: 1-404-123-1234>

**Effective Date:** <07/01/2017>




**RxBIN** - 003858  
**RxPCN** - MA  
**RxGRP** - RXINN01

**Member Services:** 1-855-202-0729 (TTY:1-800-255-0056 or 711)

**IN CASE OF AN EMERGENCY CALL 911 OR GO TO THE NEAREST EMERGENCY ROOM (ER) AND CALL YOUR PRIMARY CARE PROVIDER (PCP) AS SOON AS POSSIBLE.**

**CARESOURCE24® NURSE ADVICE LINE:** 1-844-206-5944 (TTY: 711)  
**PHARMACIST:** 1-800-416-3630  
**PRIOR AUTHORIZATION:** 1-855-202-1058 (TTY:1-800-255-0056 or 711)  
**PROVIDERS:** 1-855-202-1058  
**GEORGIA CRISIS AND ACCESS LINE:** 1-800-715-4225

**Mail claims to:**  
 CareSource, Attn: Claims Department  
 P.O. Box 803, Dayton OH 45401  
 CareSource.com



**RxBIN** - 003858  
**RxPCN** - MA  
**RxGRP** - RXINN01

GA-MMED-2986

**IN CASE OF EMERGENCY, CALL 911 OR GO TO THE NEAREST EMERGENCY ROOM (ER). ONLY P4HB® EMERGENCIES ARE COVERED UNDER THIS P4HB® PLAN.**

**PHARMACIST:** 1-800-416-3630  
**PROVIDERS:** 1-855-202-1058  
**GEORGIA CRISIS AND ACCESS LINE:** 1-800-715-4225

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GA-MMED-2987

Always **verify** a member's eligibility before rendering services

Unlike commercial plans, CareSource members have unique identification numbers that **always** end in 00

- Each of the three P4HB components have a separate ID card design:
1. **Family planning** – pink
  2. **Interpregnancy care** – purple
  3. **Resource Mother Outreach** – yellow

# Covered Services – Georgia Medicaid and PeachCare for Kids<sup>®</sup>



- ✓ Primary care & specialty services
- ✓ Outpatient services
- ✓ Hospitalizations
- ✓ Emergency services
- ✓ Maternity & newborn care
- ✓ Behavioral health & substance abuse treatment
- ✓ Prescription drug coverage
- ✓ Preventive & wellness services
- ✓ Rehabilitative & habilitative services and devices

- ✓ Laboratory services
- ✓ Podiatry care
- ✓ Diagnostic imaging
- ✓ Family planning services
- ✓ DME/orthotics/prosthetics
- ✓ Home health services
- ✓ Vision services for adults & children\*
- ✓ Dental services for adults & children \*\*

\*For adults over 21, includes exam and contacts/glasses annually

\*\* Children are covered for full dental benefits. Adults 21 and over receive an enhanced dental benefit of two cleanings per year and annual x-rays.

# Covered Services – P4HB<sup>®</sup>



## Women enrolled in P4HB<sup>®</sup> are eligible for:

- ✓ Family planning initial and annual exams
- ✓ Follow up family planning or related services
- ✓ Family planning lab tests
- ✓ Screening, treatment and follow up for sexually-transmitted infections (STIs), except HIV/AIDS and hepatitis
- ✓ Tubal ligation (sterilization)
- ✓ Pharmacy services with a limited formulary
- ✓ Vaccinations (Hepatitis B, Tetanus-diphtheria, and Tetanus-diphtheria-pertussis; ages 19-20)

### NOTE:

Limitations apply. Please refer to the Provider Manual for more information or call CareSource.

# Why CareSource?



## CareSource Enhanced Benefits and Innovations

Be sure to let your CareSource member patients know about some of the additional benefits of their CareSource membership.

- ✓ Member rewards program incentivizes healthy behavior
- ✓ Telehealth access to ensure that care is available when the patient can't get into the office.
- ✓ Life Services program for adult members or parents of pediatric members.

### Provider Communications:

Keep an eye open for our provider notifications and quarterly newsletters on **CareSource.com**.



# Access Standards



## PRIMARY CARE PROVIDER (PCP)

Routine appointment	<14 calendar days>
Adult sick visit	<24 hours>
Pediatric sick visit	<24 hours>

## SPECIALIST

Routine appointment	<30 calendar days>
Urgent care appointment	<24 hours>
Emergency Visit	<Immediately, without prior authorization>

## APPOINTMENT WAIT TIMES

For CareSource members, appointment wait times must not exceed the following limits:

- For scheduled appointments: <60 minutes>
- For walk-in appointments: <90 minutes>

Halfway through the maximum wait time, a CareSource member must be given an update on waiting time with an option of waiting or rescheduling the appointment:

- For scheduled appointments: after <30 minutes>
- For walk-in appointments: <after 45 minutes>

# Contact Information



## INQUIRY

## CONTACT

PROVIDER SERVICES	<1-855-202-1058>
UTILIZATION MANAGEMENT FAX	<844-676-0370>
WEBSITE	CareSource.com
PROVIDER PORTAL	< <a href="https://providerportal.caresource.com/GA/">https://providerportal.caresource.com/GA/</a> >
ELECTRONIC FUNDS TRANSFER (EFT)	ECHO Health - <1-888-834-3511> (Note: dental providers use separate process through dental portal)
ELECTRONIC CLAIM SUBMISSION	<GACS1>
CLAIM ADDRESS	<CareSource Attn: Claims Department P.O. Box 803 Dayton OH 45401>
TIMELY FILING	180 days from date of service or discharge

# Provider Portal



**SAVE TIME. SAVE MONEY.** Use our secure online Provider Portal.  
With this tool you can:

Access the Provider Portal 24 hours a day, seven days a week, at  
**CareSource.com.**



Check member eligibility and benefit limits



Submit claims and verify claim status



Find prior authorization requirements



Verify or update Coordination of Benefits information (COB)



Submit and check the status of a prior authorization request



And more!

# Register for the PORTAL



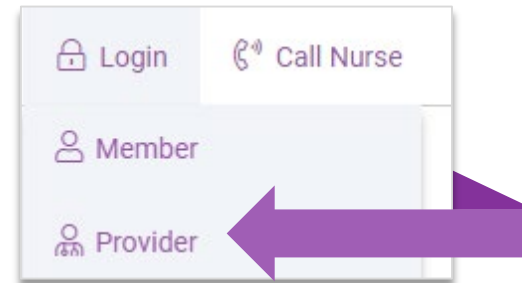
Go to **CareSource.com**. On the top right corner of the page, click Login → Provider.

Select **Georgia**.

Click [register here](#) under **Register for the Provider Portal**.

Enter your information, including your CareSource Provider Number (located in your welcome letter).

Follow remaining steps to register.



## Register for the Provider Portal

The Provider Portal makes it easier for you to work with us 24/7. It has critical information and tools to save your practice time. This helpful online tool is available for all plans.

If you are not already registered for the Provider Portal, please [register here](#). You can refer to the [Portal Registration Training Module](#) for step-by-step instructions.

If you cannot remember your login, please utilize our [“Forgot Password”](#) feature to update your information and/or reset your password.

# Prior Authorization



CareSource offers a **limited** set of medical services requiring prior authorization (PA).

Prior authorization requirements may be found on **CareSource.com** or the searchable authorization lookup tool.

The Georgia Medicaid Management Information System (GAMMIS) is the preferred method for submission of prior authorization requests. It is the centralized portal for the submission of fee-for-service (FFS) authorization requests and authorization requests for certain services provided to Medicaid members enrolled in a Care Management Organization (CMO). Access the portal at <<https://www.mmis.georgia.gov>>.

## OTHER WAYS TO REQUEST PA:

**Email:** <gamedmgt@caresource.com>

**Fax:** <844-676-0370> (use prior authorization form found online)

**Mail:** <CareSource

Attn: Medical Management Dept.

PO Box 1598

Dayton OH 45401>

# Claims



- We offer options for **efficient claim processing**
  - All clean claims will be paid in <15> business days of receipt
  - Note: If claims are not paid cleanly within <15> days, interest will be applied in accordance with DCH guidelines and Georgia regulations
- We encourage **electronic claim submission**
  - **Effective <December 1, 2019>, our EFT partner is ECHO Health.**
  - You must enroll with ECHO to participate.
  - Find the enrollment form online at **CareSource.com** > Providers > Provider Portal > Claims.
- Timely filing
  - Within <180> calendar days from date of service or discharge

# EDI Clearinghouses



## CLEARINGHOUSE

<Availity>

## WEBSITE

<[www.availity.com](http://www.availity.com)>

## PHONE

<1-800-282-4548>

## MORE INFORMATION:

For more claim submission information, see the Provider Manual posted on [CareSource.com](http://CareSource.com).



# QUALITY *Improvement*

The CareSource Quality Improvement program exists to ensure CareSource can:

- ✓ Coordinate care
- ✓ Promote quality
- ✓ Ensure ongoing performance and efficiency
- ✓ Improve the quality and safety of clinical care and services provided to members



# Quality Improvement Strategy



CareSource's quality strategy aligns with the Institute for Healthcare Improvement's Triple Aim and the National Quality Strategy.

## TRIPLE AIM

1. Better health
2. Better care
3. Lower costs

The strategy focuses the direction for continuous quality improvement efforts, establishing a culture of improving quality of care and services and improving the quality of care for beneficiaries enrolled.

# Quality Metrics - HEDIS®



CareSource uses HEDIS® as one of the elements to measure quality of care delivered to members.

## EXAMPLES OF METRICS MONITORED INCLUDE:

- Well-child visits in first 15 months of life
- Adolescent well-care exams
- Childhood immunization schedule
- Weight assessment and counseling for nutrition and physical activity for children/adolescents
- Follow-up care for children prescribed attention-deficit/hyperactivity disorder (ADHD) medication
- Prenatal and postpartum care
- Comprehensive diabetes care
- Controlling high blood pressure

# Quality Metrics - CAHPS®



CareSource uses the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) to capture the member perspective on health care quality.

## FOCUS AREAS:

- Customer service
- Getting care quickly
- Getting needed care
- How well doctors communicate
- Ratings of all health care, health plans, personal doctors and specialists

We value your partnership in improving the health and well-being of CareSource members. We also appreciate your assistance when we request medical records to support HEDIS® medical record review and the review of care provided to CareSource members.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).  
CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

# *Pharmacy* OVERVIEW



## PARTNERSHIP WITH EXPRESS SCRIPTS

Caresource works collaboratively with Express Scripts, our pharmacy innovation partner, to manage our prescription drug costs and to develop and implement plan-specific formulary or formularies.

## SPECIALTY DRUGS

Our preferred specialty medication provider will provide specialty medications directly to the member or the prescribing physician and coordinate nursing care, if required..

## E-PRESCRIBING

CareSource formulary files are available through your EMR, EHR or E-prescribing vendor.

## RESOURCES

Authorization requirements for prescriptions may be found on your plan's Provider pages under the Pharmacy section.

The Formulary Search Tool and prior authorization lists are available on **CareSource.com**.

Medication Therapy Management (MTM) – allows pharmacists to work collaboratively with physicians to prevent or address medication-related problems, decrease member costs and improve prescription drug adherence.

# *Member Resource Page*



Help your CareSource patients understand their insurance coverage.

Encourage them to visit **CareSource.com**, where they can access:

- Searchable online formulary
- Find a Doctor/Provider tool
- Member handbook
- Forms
- And more

**CareSource.com/Members**

# *Care and Disease* MANAGEMENT



## WE EDUCATE MEMBERS THROUGH:

- MyHealth online self-management tool
- Disease-specific newsletters
- One-to-one care management
- Coordination with outreach teams who provide topic-specific information

## CARE MANAGEMENT

You may refer a patient for care management by calling **<1-855-202-1058>**.

## DISEASE MANAGEMENT

If you have a patient with asthma, COPD, diabetes, or hypertension who you believe would benefit from this program and are not currently enrolled, please call **<1-844-438-9498>**.

# Behavioral Health



## CARESOURCE BEHAVIORAL HEALTH STRATEGY

We address behavioral health and substance use disorders through:

- Working with providers to improve access and outcomes
- Sharing and using data across systems of care to ensure quality and compliance
- Care coordination programs that engage members in care and retention in treatment
- Promoting prevention and education initiatives and approaches that reduce potential harm
- myStrength, a safe and secure tool which offers personalized support to help strengthen our members' mind, body and spirit. myStrength is available at no cost to our members.

## OUR COMMITMENT TO YOU

- Joint planning for quality programs
- Receiving education from Community Services Boards (CSBs) and community behavioral health core providers on preferred practices
- Relationship development & ongoing collaboration



A regional and community-based care coordination model.  
Population health platform based on concepts of self-management and individualized health journeys:

Innovative use of data analytics to categorize & assign members;  
personalized messaging

Every member gets a care plan they can manage themselves, with the right  
level of support where needed

Leverages community resources & existing relationships to streamline  
delivery of care to the member



# Life Services



CareSource Life Services help our members get and keep jobs they need to improve their lives. This service is offered at no cost to our members.

## HOW DOES IT WORK?

CareSource Life Services members get their own CareSource Life Coach who helps them build a personal plan for success. We provide training and partner with employers and organizations in the community to connect our members to resources and opportunities.

## WE CAN HELP MEMBERS WITH:



EMPLOYMENT ASSISTANCE



INTERVIEW SKILLS



DEPENDABLE TRANSPORTATION



GED CLASS ACCESS



BUDGETING ASSISTANCE



JOB TRAINING



STRESS MANAGEMENT



GIRL SCOUT AND BOYS AND GIRLS CLUB PROGRAMS



YMCA FAMILY MEMBERSHIPS AND MORE!

## CONTACT US:

Email: <lifeservicesgeorgia@caresource.com>

Phone: <1-844-607-2828>

# Fraud, Waste & Abuse Program



## Help CareSource stop fraud.

Contact us to report any suspected fraudulent activities:



**CALL:**

<1-855-202-1058>



**EMAIL:**

<fraud@caresource.com>



**FAX:**

<800-418-0248>



**MAIL:**

<CareSource  
Attention: Program Integrity  
P.O. Box 1940  
Dayton, OH 45401-1940>

# How to Reach Us



Whatever your question, our proven team of experts is here to help you navigate to the solution you need.

PROVIDER SERVICES	<1-855-202-1058>
HOURS	<Monday – Friday, 7 a.m. – 7 p.m. EST>
MEMBER SERVICES	<1-855-202-0729>
HOURS	<Monday – Friday, 7 a.m. – 7 p.m. EST>



# PARTNERS with *Purpose*

Are you contracted with all our plans? **Join us** on the next journey to healthy outcomes in Georgia <for our Medicaid, Marketplace, Medicare Advantage and Medicare Dual Eligible members>.

Visit <**CareSource.com/Contracting**> to start the contracting process.



# Questions?

