

FALL 2018

# PROVIDER *Source*

A Newsletter for Humana – CareSource® Health Partners

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of Your Patients



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## FROM THE MEDICAL DIRECTOR:

The Kentucky Department for Public Health reported an increase in the number of confirmed cases of hepatitis A. From November 2017 through July 7, 2018, Kentucky reported a total of 373 confirmed cases, 460 probable cases and 261 suspected cases. Sixty five counties in Kentucky have had at least one case. There were 628 hospitalizations as a result of hepatitis A and eight deaths where hepatitis A was considered a significant contributing factor.

The majority of the cases occurred in Jefferson and surrounding counties. The largest number of cases occurred in the 20 to 49 age group. Those identified at highest risk are patients with substance use disorders, homeless patients and those with chronic liver disease. A food source has not been identified and outbreak transmission is believed to be person-to-person contact.

The best way to impact the continued epidemic is to vaccinate against hepatitis A. You, as a provider, can help by encouraging all of your patients to get vaccinated with both the initial vaccine as well as the booster at six months.

Humana – CareSource provides coverage for the hepatitis A vaccination at your office and at pharmacies. If your practice does not provide the vaccine onsite, please write a prescription for your Humana – CareSource-covered patient to take with them to a participating pharmacy to receive the immunization. Your patient will need another prescription for the booster six months later.

If you need assistance or have questions about how you can help curb the hepatitis A epidemic in Kentucky, please contact your Humana – CareSource Provider Engagement Representative.

**Lisa Galloway M.D., MRO, FACOEM**  
Medical Director, Kentucky and West Virginia



## HELP REDUCE FRAUD WITH THE **FALSE CLAIMS ACT**



The False Claims Act (FCA) is a federal law that prohibits a person or entity from:

- Knowingly presenting a false or fraudulent claim for payment
- Knowingly using a false record or statement to get a claim paid
- Conspiring with others to get a false or fraudulent claim paid
- Knowingly using a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property

"Knowingly" means acting with actual knowledge or with reckless disregard or deliberate indifference to the truth or falsity of information.

An example would be if a healthcare provider, such as a hospital or a physician, knowingly "upcodes" or overbills, resulting in overpayment of the claim using Medicaid or Medicare dollars. Using the FCA you can help reduce fraud. The FCA allows everyday people to bring whistleblower lawsuits on behalf of the government – known as "qui tam" suits – against groups or other individuals that are defrauding the government through programs, agencies or contracts. Whistleblowers can receive between 15 to 30 percent of the proceeds of the action or settlement.

For free education materials created by HHS-OIG on the FCA and other federal fraud and abuse laws,

please visit [oig.hhs.gov/compliance/physician-education/index.asp](https://oig.hhs.gov/compliance/physician-education/index.asp).

You can report fraud, waste and abuse to Humana – CareSource Special Investigations Unit by:

- Calling 1-855-852-7005 and selecting the menu option for reporting fraud; or
- Writing a letter or completing our Confidential Fraud, Waste and Abuse Reporting Form and mailing it to:

**Humana - CareSource**  
**Attn: Special Investigations Unit**  
**P.O. Box 1940**  
**Dayton, OH 45401-1940**

**You do not have to give us your name when you write or call.** There are other ways you may contact us that are not anonymous. If you are not concerned about giving your name, you may also use one of the following means to contact us:

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

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



## Claim and Appeal Tips

We have answers to some common questions you have asked about Humana – CareSource’s operations and processes.

### Payment Disputes

- You can submit a payment dispute if you disagree with the amount of reimbursement received. This is different than disputing a denied claim or submitting an appeal.
- A claim payment dispute is defined as a claim that involves an underpayment not including line or claim denials. Please contact your Humana – CareSource Provider Engagement Specialist if claims are not paying the correct rate according to your contract.
- If you identify an overpayment, please submit via the Claims Recovery Request tool on the Humana – CareSource provider portal.

### Timely Filing

Timely filing is the time range from the date of service in which Humana – CareSource will accept a claim. Claims submitted after the timely filing period will be denied. The timely filing period is 180 days.

### Appeals

When you submit an appeal, you are asking Humana – CareSource to review a claim decision. Appeals may be submitted for claims that have been appropriately adjudicated with all required documentation. You may submit claim appeals by fax, mail, or on the Humana – CareSource Provider Portal.

## Medically Frail Evaluations

As a Humana – CareSource-contracted provider, you may need to conduct medically frail assessments on your patients. Members designated as medically frail are not required to complete the same activities as other Humana – CareSource members in order to maintain benefit coverage, including cost sharing, My Rewards or community engagement. Members must be screened to obtain their medically frail status. Humana – CareSource staff will reach

out to members identified as potentially medically frail and assist them with setting up an appointment with their primary care, specialty or behavioral health provider.

Providers may use the Medically Frail Provider Attestation and the Medically Frail Condition Guide located on **CareSource.com** to evaluate members for possible medically frail status.

## Controlling High Blood Pressure (Hypertension)

Hypertension is a major risk factor for cardiovascular disease and other health complications. Adherence to treatment, including taking medications, has a significant impact on patient outcomes. Humana – CareSource works closely with our members to ensure they comply with their treatment plans. Please help us encourage medication adherence for your Humana – CareSource-covered patients who have been diagnosed with hypertension.

Humana – CareSource recommends nationally accepted standards and guidelines to help inform and guide the clinical care provided to Humana – CareSource-covered patients. Research endorsed by the American Heart Association (AHA) and the Centers for Disease Control and Prevention (CDC) shows system-level adoption of treatment algorithms significantly impacted hypertensive populations. The National Committee for Quality Assurance (NCQA) HEDIS Controlling High Blood Pressure measure looks at members 18 to 85 years of age with a diagnosis of hypertension. Control is defined as:

- Members 18 to 59 years of age whose blood pressure (BP) was <140/90 mm Hg.

- Members 60 to 85 years of age with a diagnosis of diabetes whose BP was <140/90 mm Hg.
- Members 60 to 85 years of age without a diagnosis of diabetes whose BP was <150/90 mm Hg.

Please remember to document the following in the patient's medical record:

- Diagnosis of hypertension
- Blood pressure results during every visit
- Treatment plan – including medications

The most recent BP reading taken and recorded during the measurement year is used for HEDIS purposes. If multiple readings occur during a single visit, the lowest systolic and lowest diastolic will be used to determine BP control. Record all readings taken during a visit. If the initial BP reading is high, we strongly encourage providers to take a second reading.

## It's Back-to-School Time – Well-Child Care

**W**ell-child exams play a key role in preventive care for children and adolescents. Humana – CareSource recommends the American Academy of Pediatrics (AAP) guidelines to inform and guide pediatric care provided to Humana – CareSource-covered pediatric patients. Please visit [www.aap.org/en-us/Documents/periodicity\\_schedule.pdf](http://www.aap.org/en-us/Documents/periodicity_schedule.pdf) to view the guidelines.

School sport physicals are a great time to perform well-child checkups, as they may be one of the few opportunities to do so throughout the year. You also can perform annual well-child checkups during an acute-care visit.

Humana – CareSource supports the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) protocols for Humana – CareSource pediatric members enrolled in Medicaid. The EPSDT benefit is designed to assure that children receive early detection and care, so that health problems are averted or diagnosed and treated as early as possible. The goal of the EPSDT benefit is to assure that individual children get the healthcare they need, when they need it. The EPSDT benefit also covers medically necessary diagnostic services.

Don't forget to remind your patient about vaccinations during their visit. Back-to-school visits are a great time to think about vaccinations. Regular vaccinations can prevent serious diseases. Humana – CareSource follows the Centers for Disease Control and Prevention (CDC)-recommended immunization schedule at [www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html](http://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html). If you are a Vaccines for Children (VFC) provider, please submit claims for the immunization administration. Humana – CareSource pays for the administration of the vaccine.

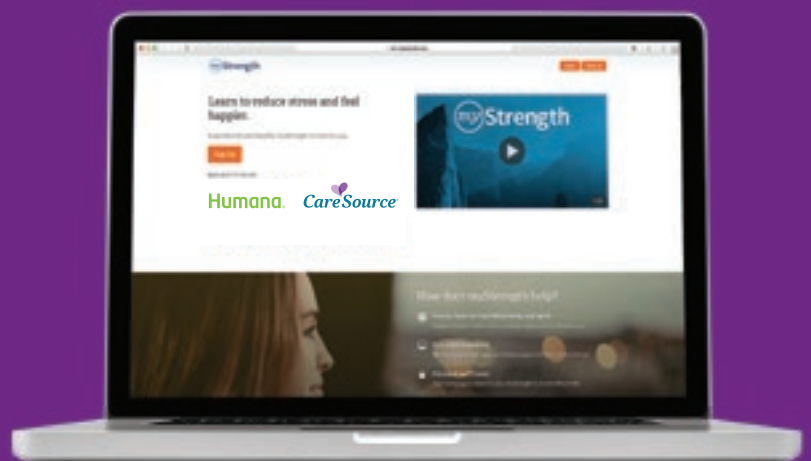


# Addressing Behavioral Health Needs of Your Patients

As more members understand the value of visiting a provider, it is especially important to obtain a psychosocial history of your patients that includes situations that may impact his or her health, such as incarceration, drug use or trauma. These past experiences may put the member at a higher risk for behavioral health conditions, inappropriate use of medications, HIV, hepatitis C or other chronic health conditions.

Humana – CareSource offers myStrength – a free, customizable web and mobile tool to foster the mental health and well-being of our members who are experiencing depression/anxiety, chronic pain, sleep challenges, stress and more. Members can visit [bh.mystrength.com/humana\\_caresource](http://bh.mystrength.com/humana_caresource).

We encourage you to share this evidence-based tool with your Humana – CareSource-covered patients who are 13 years or older to help self-manage their needs between appointments. To facilitate their appointments, patients can bring a record of their myStrength tracking logs such as emotional health, alcohol use, exercise, pain or sleep. Providers can also use myStrength as an adjunct to treatment by having patients review educational modules on a specific concern as part of the patient's self-management plan.





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## Humana - CareSource Provider Forums

Humana – CareSource recently concluded its second annual statewide provider forums. It was a pleasure to meet some of our Health Partners in person and receive feedback and questions from the provider community. Topics covered ranged from participation guidelines, clinical practice information and pharmacy.

If you were unable to attend or still have questions about working with Humana – CareSource, please reach out to your Health Partner Engagement Representative or email us at [kyproviderengagement@caresource.com](mailto:kyproviderengagement@caresource.com). Thank you to all who joined one of our nine forums and we look forward to seeing you again next year.

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