

SPRING 2014

MemberSource

A newsletter for CareSource Advantage® (HMO SNP) members



Mail order drugs: Getting started

You can have your medicines shipped right to your home at no cost to you. Just use our mail order prescription drug program. It's quick and easy. Here's how to get started.

Submit your prescription to CVS Caremark, our pharmacy benefit manager. You can:

- Ask your doctor to call in your prescription to **1-800-378-5697**.
- Ask your doctor to fax it to **1-800-378-0323**.
- Mail your prescription and a completed mail order form to:

CVS Caremark
P.O. Box 94467
Palatine, IL 60094-4467

You can get the mail order form:

- **By phone.** Call **1-800-378-5697**.
- **Online.** Go to our website at **CareSource.com**. Click on "Members," then "CareSource Advantage." Then click on "Forms" in the "Quick Links" section.

You must order at least a 30-day supply of drugs and no more than a 90-day supply from a mail order pharmacy in the CareSource Advantage network. Please allow up to 10 days from the time you place your order to receive delivery.

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AUTO-REFILL UPDATE

If you use our automatic refill service, you will notice a change this year. Starting in 2014, we will ask for an okay from you first before sending an automatic refill. This will help make sure you get only the drugs you need.

Find forms on our website

We want you to get the care you need. That's why we have helpful forms on our website for your use. You can find forms to:

- Help you keep track of the drugs you take
- Help you or your doctor ask us to make an exception to our drug coverage policy
- Help you or your doctor appeal a coverage or payment decision we made
- Appoint someone else to represent you during an appeal
- File a grievance
- Report suspected fraud, waste or abuse
- Use our mail order pharmacy benefit



You can find the forms on our website at **CareSource.com/members/ohio/caresource-advantage/member-information/forms/**.

Or you can follow these steps to access the forms:

1. Go to our website at **CareSource.com**.
2. Click on "Members."
3. Click on "CareSource Advantage."
4. Go to the "Quick Links" section.
5. Click on "Forms."



Call us with questions

Our Member Services Department is here to help you. You can call us at **1-800-708-8729** (TTY/ TDD for the hearing impaired: 1-800-750-0750 or 711). We will work to resolve issues or answer questions you may have about your benefits. Hours are Monday – Friday, 8 a.m. to 8 p.m.

Always show your ID card



While you are a member of our plan, please use your CareSource Advantage ID card to receive covered services. Be sure to show your card each time you go to the doctor, hospital, urgent care center or pharmacy. If you lose your CareSource Advantage ID card and need a replacement, please call us at **1-800-708-8729** (TTY/TDD for the hearing impaired: 1-800-750-0750 or 711). Hours are Monday – Friday, 8 a.m. to 8 p.m. You should also show your Medicaid ID card. By bringing both cards, you can ensure that your doctor's office has all the information they need to bill us and Medicaid correctly.

Simple steps to heart health

Heart disease is the leading cause of death in the United States. But you can do a lot to prevent it and keep your heart healthy.

Do you know Life's Simple 7® keys to prevention? These are endorsed by the American Heart Association.

- 1. Control cholesterol.** Schedule a cholesterol screening. This will help you and your doctor decide what to do next. High cholesterol can lead to heart disease or stroke. Screenings show if yours is too high or not.
- 2. Manage blood pressure.** Sometimes there are no signs or symptoms of high blood pressure. If it goes too high, it can damage your arteries, heart or other organs. Your doctor should check your blood pressure at each visit.
- 3. Reduce blood sugar.** This helps prevent diabetes and its complications. If you have diabetes, you should get your blood sugar checked regularly.
- 4. Don't smoke.** If you do, get help to quit.
- 5. Get moving.** Stay active. Talk to your doctor about the right plan for you.
- 6. Lose weight.** Maintain a healthy weight through diet and exercise.
- 7. Eat right.** Eat foods low in cholesterol and saturated fat and free of trans fat. Most fruits, vegetables, beans and fish are good choices.

Caring for you

We want you to stay as healthy as possible. That's why we have a variety of programs to help you. Whether you are being discharged after a hospital stay or you have a chronic disease, we offer support. You don't have to go through it alone. We can work with your health care providers to help coordinate your care.

Our services include:

- CareSource24™, our 24-hour nurse advice line
- Care management programs offered to all members to help with conditions such as asthma and diabetes
- Care transition programs for members moving from one level of care to another, such as hospital to home

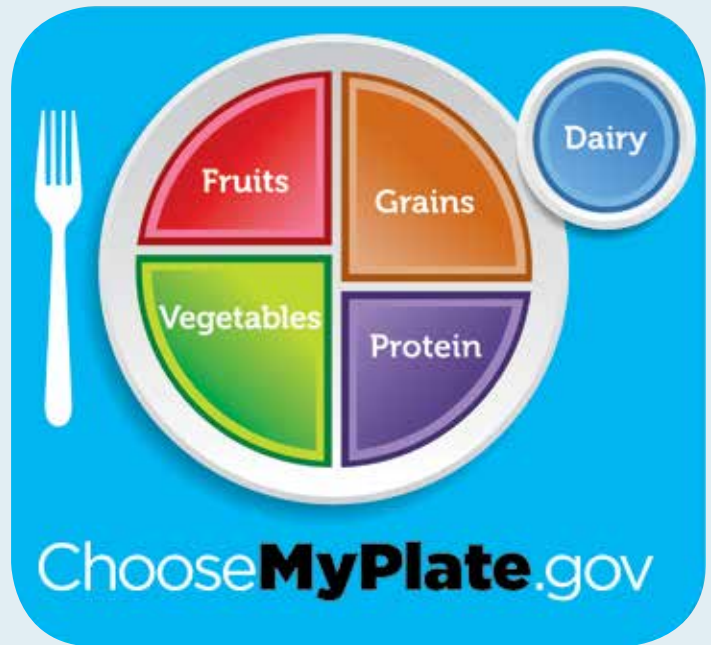
YOUR OWN CARE MANAGER

As a CareSource Advantage member, you have a personal care manager assigned to you. We are here to help you manage your health care needs. If you do not know who your manager is or would like to contact him or her, just call us at **1-800-708-8729** and we will get you connected.

Fill your plate with healthy food

It's easy to make nutritious meals for your family. You can do it even if you are on a tight budget. It just takes a little planning. Here are a few ideas to remember for serving healthy, delicious meals that are budget friendly:

- When staple ingredients go on sale, stock up. Staples include foods such as flour, rice, beans and canned goods.
- Buy food in its natural state (fresh), or frozen or canned. Skip the sauces and extra flavorings and add them yourself.
- Choose store brands whenever possible. They're often produced in the same facilities as the well-known brands, and are just as nutritious.
- Plan meals that include foods from each food group in proportions that experts recommend. Go to www.ChooseMyPlate.gov for more tips, menus and recipes.



If you get a bill

As a CareSource Advantage member, you are eligible for both Medicare and Medicaid services. We administer your Medicare benefits only. We know this can be confusing. Here is how billing for your covered services works.

1. Your provider sends a bill to CareSource for the care you receive.
2. We let the provider know how much CareSource will pay.
3. If there is a balance, the provider can send a bill to the Ohio Medicaid fee-for-service program for the remaining amount.

Your responsibility for a bill depends on your level of Medicaid coverage. If you receive a bill from a provider for any balance due that you are not responsible for, please call our Member Services Department. You can reach us at **1-800-708-8729** (TTY/TDD for the hearing impaired: 1-800-750-0750 or 711). Hours are Monday – Friday, 8 a.m. to 8 p.m.

You have rights

As a member of CareSource Advantage, you have certain rights. You also have responsibilities. We want to make sure you know what they are. It will help you get the care you need.

These are just a few of your rights and responsibilities. For a complete list, you can:

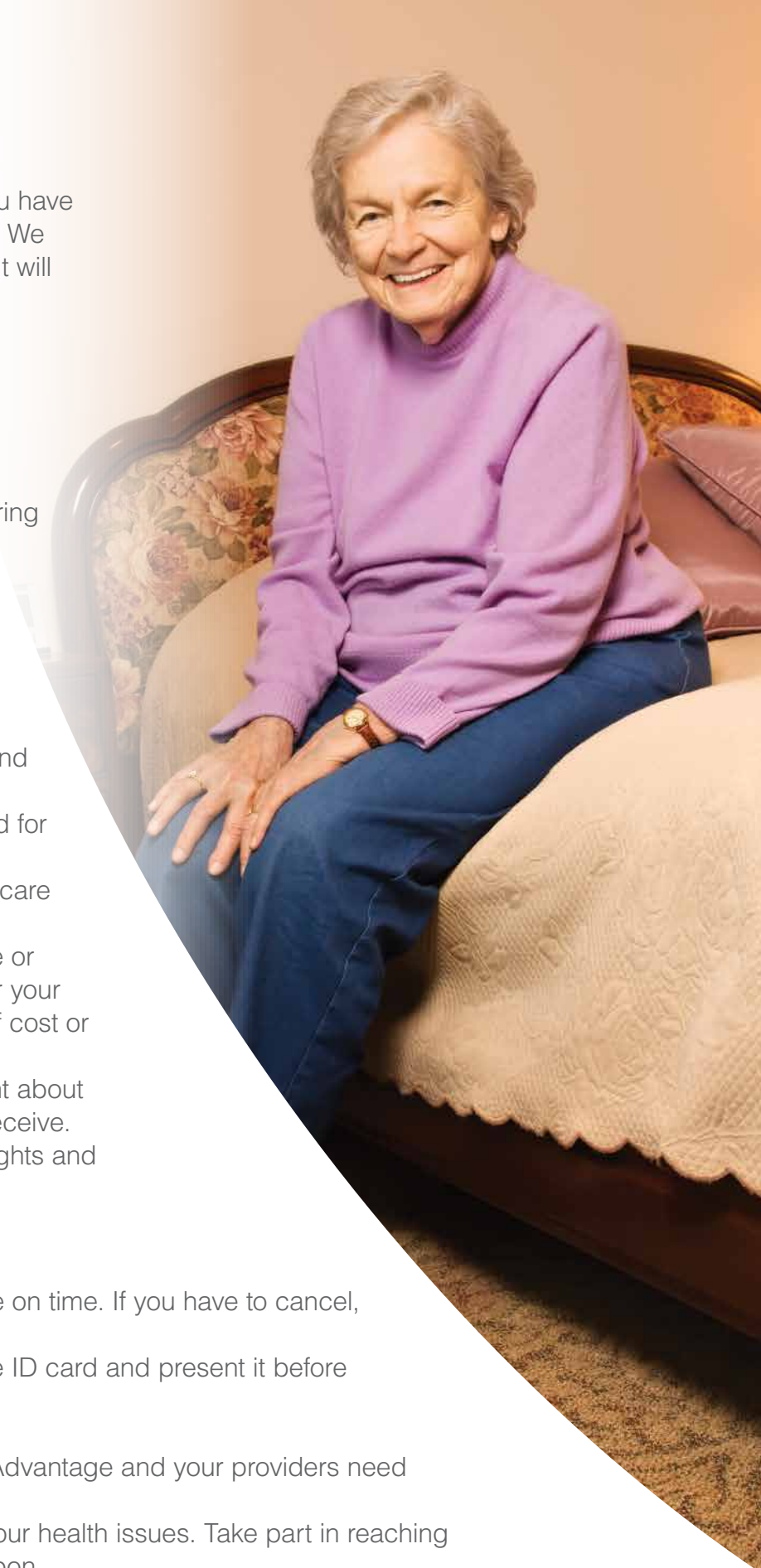
- Look in your Evidence of Coverage.
- Call Member Services. You can reach us at **1-800-708-8729** (TTY/TDD for the hearing impaired: 1-800-750-0750 or 711). Hours are Monday – Friday, 8 a.m. to 8 p.m.
- Visit our website at **CareSource.com**.

You have a right:

- To get information about CareSource Advantage, our services, our providers, and your rights and responsibilities.
- To be treated with respect and with regard for your dignity and privacy.
- To take part in choices about your health care with your providers.
- To discuss information on any appropriate or medically necessary treatment options for your condition. This can be done regardless of cost or benefit coverage.
- To be able to file an appeal or a complaint about CareSource Advantage or the care you receive.
- To tell us your ideas about our member rights and responsibilities policy.

You also have these responsibilities:

- Keep scheduled doctor appointments. Be on time. If you have to cancel, call 24 hours in advance.
- Always carry your CareSource Advantage ID card and present it before receiving services.
- Never let anyone else use your ID card.
- Provide the information that CareSource Advantage and your providers need in order to care for you.
- Understand as much as you can about your health issues. Take part in reaching goals that you and your provider agree upon.
- Follow the advice and instructions for care you have agreed upon with your providers.
- Use only participating or approved providers.



Your privacy is our priority

We respect your right to privacy. We protect any data used to identify you or document your health, your medical care or payment for health care services.

We provide you with a notice of our privacy practices. It explains how, when and why we use or share your information. It also explains your right to see your data and how to get access to it. You can find the notice on our website. Just go to **CareSource.com**. Go to the “Members” section of the website to get started. Click on “Member Information” and choose “Privacy Practices.”



Direct access reminder

As a CareSource Advantage member, you can go to many types of providers without contacting your primary care provider (PCP) first. Just call them to make an appointment.

Please remember:

- All female members are allowed to self-refer to a participating:
 - Certified nurse midwife
 - Obstetrician
 - Gynecologist
- If you are female, and your PCP is not a women’s health specialist, you may self-refer to one for covered preventive care services such as:
 - Prenatal care
 - Breast exams
 - Mammograms
 - Pap tests

- All members have the right to get a second opinion from a qualified provider in our network. If a qualified provider is not able to see you, we will assist with setting up a visit with a provider not in our network.
- If we are unable to provide a necessary and covered service in our network, we will cover the service out of network for as long as we are unable to provide the service in network. If you are approved to go out of network, this is your right as a member, and the service will be provided at no cost to you.

For more details, please see your Provider Directory. Or you can find it online at **CareSource.com**. Just click on “Members,” then “Find a Doctor.”

Where to seek care



Knowing where to go to get health care can be difficult. It depends on what you need care for. Here are some tips.

See your PCP for routine care

Your primary care provider (PCP) can handle most of your health care needs. See your PCP for preventive care. Regular checkups can help you stay well. This may include:

- Yearly checkups for adults
- Women's health screenings
- And more

You PCP's name and phone number are on your member ID card. Just call to make an appointment. You should also see your PCP for urgent care needs.

Prescription drugs

You can get prescriptions filled at any pharmacy that accepts CareSource Advantage. You can learn more about our preferred drug list on our website. You can also find out about any limits on certain drugs or prior approvals that may be needed.

Specialty care

Sometimes you have special problems. You may have a broken bone or heart disease. You may need to go to a provider who has special training. This provider is called a specialist.

To see some types of specialists, you need a referral from your PCP. This means that your PCP will recommend or request these services for you before you can get them.

Some services also require approval from CareSource Advantage before you can get the services, such as a scheduled surgery. This is called prior authorization. Your provider will take care of getting the approval for you. You can find out how to get a referral or prior authorization and which services need them in your Evidence of Coverage. Or you can find it on our website at **CareSource.com**. You can also call Member Services for help.

Our website includes more details about:

- How to get primary care services, including points of access
- How to get behavioral health and hospital services
- How to get care outside of our service area
- How to get care after normal business hours
- Any benefit restrictions on care you get outside of our service area or from a provider that does not participate with CareSource Advantage
- And much more

Emergency care

Emergency care is for a medical problem that you think is so serious that it must be treated right away by a doctor. We cover care for emergencies both in and out of our service area.

You do not have to contact CareSource for an okay before you get emergency services. If you have an emergency, call 911 or go to the nearest emergency room (ER) or other appropriate setting. Your PCP can see you for urgent care needs. If you don't know what to do, you can get help from our 24-hour nurse advice line. Just call **1-866-206-0569**.

MemberSource is a publication of CareSource Advantage® (HMO SNP), a coordinated care plan with a Medicare contract and a contract with the Ohio Medicaid program. The benefit information provided is a brief summary, not a complete description of benefits. For more information contact the plan. Limitations, co-payments, and restrictions may apply. Benefits, formulary, pharmacy network, premium and/or co-payments/co-insurance may change on January 1 of each year.

Important Plan Information



We listen to you

CareSource Advantage participates in the national Consumer Assessment of Healthcare Providers and Systems (CAHPS[®]) survey. The survey asks questions about your health. It also asks about:

- How quickly you get care
- The service you receive from CareSource Advantage
- Your primary care provider

Results are published by the Centers for Medicare & Medicaid Services (CMS) each year. You can find them in your *Medicare and You* handbook and on the Medicare Plan Finder website at **www.medicare.gov**.

Your feedback is important. Last year, many of you took the CAHPS survey. CMS requires all Medicare Advantage plans with more than 600 members to contract with a CMS-approved company to conduct the survey. Last year, it was conducted by an independent company, The Myers Group, from March – May, 2013. This is some of what you said:

- You can get care when you need it.
- You get care quickly.
- Doctors spend time with you and help you be healthy.
- Our Member Services staff treats you with respect.

Thank you. If you get a CAHPS survey in the mail this year, please follow the directions to complete and return it.